CLOSING THE GAPS

Closing the gaps in services that respond to violence against women and children

RESEARCH REPORT

ACKNOWLEDGEMENTS

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ACRONYMS

CYCC	Child and youth care centre
DSD	Department of Social Development
DVA	Domestic Violence Act
GBV	Gender-based violence
GBVF	Gender-based violence and femicide
FGD	Focus group discussion
IPV	Intimate partner violence
HIV	Human Immunodeficiency viruses
HREC	Human Research Ethics Committee
NGOs	Non-Governmental Organisations
NPA	National Prosecuting Authority
NSP	National Strategic Plan
PTSD	Post-Traumatic Stress Disorder
SAPS	South African Police Service
SDG	Sustainable Development Goals
TCC	Thuthuzela Care Centre
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNCRC	United Nations Convention on the Rights of the Child
VAC	Violence Against Children
VAW	Violence Against Women
WIN	Women's Ikhwelo Network
ZCC	Zion Christian Church

ABOUT THE AUTHORS

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CONTENTS

1 INTRODUCTION

There is increasing evidence of the interconnections of intimate partner violence (IPV) and violence against children (VAC), such as that they share the same drivers and co-occur in the same households (Mathews et al., 2021). Both forms of violence lead to similar health outcomes and have implications for the intergenerational transmission of violence, with intergenerational effects that reinforce gendered social norms and drive violence across generations (Jamieson et al., 2018). Whilst women need services to support their own recovery, work through their trauma and regain their independence, many women come to shelters with their children (Watson & Lopes, 2017), who are likely to have been exposed to or experienced violence. What is required is an integrated set of services that increase women's and children's access to justice and address the needs of both women and children to prevent further victimisation.

Yet, little is known about what women and children want from services or how they experience them, especially in rural African communities. The rationale behind this study is to begin to understand how services are delivered in two communities in the Eastern Cape (Buffalo City and Gcuwa) and to start a dialogue about what needs to be in place to deliver culturally appropriate services for women and children who have experienced violence.

Violence in South Africa is deeply rooted

Annual crime statistics show that South Africa is marred by violence and that Black communities have the highest reports of crimes against women and children (South African Police Services (SAPS) 2018/2019; SAPS 2021/2022). These crimes include murder, attempted murder, sexual offences (rape, attempted rape, sexual assault), assault with intent to do grievous bodily harm (assault GBH), common assault and domestic violence as a special category (SAPS, 2021). Historical analyses record the legacy of colonial violence, slavery and migrancy laws, accompanied by the inhumane treatment of people

of Black communities under Apartheid[1], which led to social problems associated with overcrowding, poor living conditions and sub-standard service delivery. These factors are also linked to gender-based violence (GBV) (du Toit, 2014; Gqola, 2010) and drive the high levels of violence in these communities. Although Apartheid ended, Black communities, both urban (township) and rural (villages), have remained socially, economically, and spatially segregated from services (Maylam, 1995; Strauss, 2019). These spatial divisions continue to marginalise Black communities and hinder their access to justice due to language and cultural differences. In terms of physical access to services, the Apartheid pass laws reinforced divisions between the urban and rural with the creation of bantustans, also known as Black people's homelands (Biko, 2004). In this study, 'Black' is operationalised as defined by Biko (2004). which is that the state of being Black is not limited to Africans but includes Asians and 'coloureds', the latter being South Africans of mixed race, including African, European and/or Asian origin, or all the population groups who were discriminated against by the Apartheid ruling system and previously considered non-white.

Reflections from study participants suggest that in some areas the conditions of the homelands have not changed:

> *So, there is a need of clinic. They walk far, far away and then other people have been raped daily, not [just] at night. There is a need of roads. Because in the rural areas in the Eastern Cape there is no road. If you can, watch the news and then look at that place that used to be called Transkei in the olden days [in] most of the villages there are no roads. (Service provider).*

Townships[2] remain what Frans Fanon (1968) described as "damned areas" because, from inception, they were designed to thwart the development of Black communities and hinder their prosperity. And we continue to see heightened levels of violence, intergenerational violence and trauma, and the perpetual (re)formation of violent norms in these marginalised communities (Abrahams, 1997; du Toit, 2014; Gqola, 2010; Norwood, 2018).

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1   "Translated from the Afrikaans meaning 'apartness', Apartheid was introduced in South Africa in 1948. Apartheid made laws forced the different racial groups to live separately and develop separately, and grossly unequally too. It tried to stop all inter-marriage and social integration between racial groups. During Apartheid, to have a friendship with someone of a different race generally brought suspicion upon you, or worse. More than this, Apartheid was a social system which severely disadvantaged most of the population, simply because they did not share the skin colour of the rulers. Many were kept just above destitution because they were 'non-white'." South Africa history https://www.sahistory.org.za/article/history-apartheid-south-africa

2   In South Africa, townships were a creation of the Apartheid system and its predecessor regimes of white rule. The townships were racially discriminatory in that "black" African, "coloured" (mixed-race), and "Indian" people were ordered by the Land Act of 1913 and the Group Areas Act of 1950 to live separately. Even within black townships, ethnic groups were often segregated into separate areas for Zulus, Xhosas, Sothos, and others. These laws existed until the early 1990s, and since then there has been only gradual desegregation of formerly white, coloured, and Indian areas. (Darity, 2008).

Violence in the home affects women and children

Nationally, it is estimated that between 26% - 40% of women aged 18 years and older have experienced lifetime physical, sexual, or emotional abuse by an intimate partner (Machisa 2011). Additionally, 42% of children report some form of abuse by the time they turn 18 (Artz et al 2016). Evidence also shows that South Africa has one of the highest reported femicide and child murder rates globally (Mathews et al 2005; Mathews et al 2013).

In addition to the violence, they themselves experience, children also witness violence against women in the home with similar traumatic impacts (Mathews et al., 2021). It is important for services to acknowledge the effects of IPV on women and to ensure that support services offer safety, healing, and opportunities to rebuild their lives. However, most women access shelters with their children (Watson & Lopes, 2017) and these children are likely to have experienced or witnessed violence at home. A critical concern is that services recognise these intersections and respond to the need of *both* women and children.

Response programmes are siloed

Policies, programmes and research focusing on IPV and VAC have traditionally been siloed. Thus, bodies of evidence have been developed in parallel processes, not considering the interconnections between the two problems (Guedes et al., 2016). Different funding streams, strategies, terminologies, rights treaties, and lead agencies have maintained the divides. Globally, there has been increasing recognition that there is an urgent need to bridge this divide, based in part on evidence that research and services focused on one form of violence in isolation from the other may overlook important risks, vulnerabilities, and consequences of the multiple forms of violence within families and across the lifespan. There have also been calls for closer collaboration between the two fields to help countries achieve and measure progress towards ending both forms of violence, as a commitment to achieve the 2030 Sustainable Development Goals (SDGS) and targets. While we appreciate the intersecting forms of IPV and VAC in the daily lives of women and children (Mathews et al., 2013), gaps remain in our understanding of the provision of integrated services and joint programming of services provided to them.

Funding for support services comes from the provincial Department of Social Development (DSD) budgets whilst 'children and families' have their own programme, and shelters are funded from the 'Restorative Services' programme. The funding model does not provide for therapeutic services for children at shelters or cover expenses such as providing early childhood development programmes or covering the costs of transporting children to school (Watson & Lopes, 2017).

Need for integration of a child focus in mental health recovery

In a study conducted in the Western Cape and Eastern Cape, it was found that service providers do not identify the link between experiences of violence by the mother and the child as a co-victim (Nagia-Luddy & Mathews, 2011). Although most services reported the intergenerational effects of domestic violence – that is, that most adult victims of domestic violence have also been exposed to abuse during childhood - services failed to have a child focus. In addition, the study found that separate systems of treatment and care have been developed for child and adult victims, with inadequate attention being paid to the psycho-social needs of child victims of domestic violence (Nagia-Luddy & Mathews, 2011). Most, but not all, shelters offer basic psycho-social support in the form of play and art therapy, so children are often referred to outside specialists, such as Childline, for more in-depth psycho-social intervention (Watson & Lopes, 2017). Similarly, a study exploring children's mental health recovery after sexual abuse found that therapeutic services for children were not integrated into the package of care at Thuthuzela Care Centres and most children were referred to services off-site, with long waiting lists (Mathews et al., 2013). This resulted in few children accessing specialised services and relying mainly on the emotional support of parents or a trusted adult, which affected long-term recovery as most families lacked the ability to provide children with the necessary support (Mathews et al., 2013). Furthermore, secondary trauma experienced by caregivers exacerbated by their own experiences of trauma and limited their ability to provide the child with the necessary support. In one study, mental health recovery was limited with high levels of mental health distress remain among children a year after accessing services (Mathews et al., 2013; Mathews et al., 2017). An integrated services approach should be promoted with a focus on responding to both children and caregivers, trauma to facilitate healing.

The fragmented family system in South Africa

Nuclear family forms are far less common in Africa than in Europe and other part of the world, which is why the Bill of Rights recognises the extended family and honours the reality that in African contexts, children are raised by a network of caregivers (Currie & De Waal, 2013). Apartheid has, and continues to have, a terrible impact on the communal structure of African families which was broken due to forced and migrant labour (Lephakga, 2016). Poverty, through unemployment, makes it more difficult for African couples to marry due to the inability to raise ilobolo (bride price), which is a cultural requirement. A critical contextual and historical underpinning when understanding the broken family system in Black families is therefore needed.

The justice system in South Africa

South Africa has a pluralistic legal system comprising of common law based primarily on Roman-Dutch law, as well as inherited indigenous laws, referred to as African customary law. The justice system mixes Western values and principles of justice with a traditional system based on African values and principles (Rautenbach, 2012).

Traditional courts currently have no statutory basis for their structure, functions and powers (Democratic Governance and Rights Unit, 2020). To address this lacuna, the Traditional Courts Bill seeks to regulate the structure and functioning of traditional courts. It is based on the principles of restorative justice and reconciliation and claims to align with the values of the Constitution[3]. However, it has been the subject of much controversy due, on the one hand, to the discrimination against women, and on the other, it was deemed to perpetuate colonial distortions of customary law and entrench Apartheid spatial geography. As a result, the Bill has been revised several times. Parliament finalised the Bill in September 2022, but it has not yet been enacted. The revised Bill identifies patriarchy as systemic unfair discrimination that is contrary to constitutional values,[4] institutionalises measures to promote the participation of women as members of the court,[5] and specifies that women and men as parties should be afforded full and equal participation in proceedings.[6] Both parties must voluntarily participate in traditional court processes. However, the Bill does not contain a formal "opt-out" clause, and the process for getting matters transferred to a Magistrate's Court is vague. The traditional courts have jurisdiction over issues arising out of customary law, including marriage and assault, but they have no jurisdiction in cases of murder, rape, or assault where grievous bodily harm is inflicted.[7]

In practice, the distinctions between customary law and common law are blurred. As a result, traditional courts hear civil matters and some criminal cases involving assault. In an evaluation of training with 3776 traditional leaders, half indicated that their courts dealt only with non-violent domestic disputes, while the other half still dealt with cases involving physical injuries and even rape (Centre for Community Justice and Development, 2014). And whilst they have no jurisdiction to adjudicate murder cases, they have heard cases where men have threatened to kill their wives or partners (Democratic Governance and Rights Unit, 2020).

The statutory legal framework criminalises a diverse array of forms violence directed

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3   Constitution of the Republic of South Africa Act 108 of 1996

4   Traditional Courts Bill (B1D-2017) (3)(2)(b)

5   Traditional Courts Bill (B1D-2017) (5)

6   Traditional Courts Bill (B1D-2017) (7)(3)(i)

7   Traditional Courts Bill (B1D-2017) Schedule 2

at women and children. Principally, the Domestic Violence[8] Act (DVA) contains an expansive definition of violence domestic[9] and provides mechanisms for victims of domestic violence to obtain a protection order, for the arrest of the perpetrator, and for police protection to prevent further domestic violence. Women and children can have perpetrators removed from their homes and ask for their weapons to be confiscated. Victims and their families have a right to be informed throughout criminal proceedings and to give input into bail, sentencing and parole hearings. There are specialised courts and procedures to protect vulnerable groups, however, all proceedings are conducted in English through an interpreter. And whilst there are measures in place to ensure that victims receive medical treatment and containment counselling, there is a gaping hole in the legal framework due to the lack of provisioning legislation for support and therapeutic services. The Victim Support Services Bill is due to close this gap but has not yet been sent to Cabinet for approval due to concerns about financing for such services (Parliament of the Republic of South Africa, 2022).

The Criminal Law (Sentencing) Amendment Act, and the Criminal Law (Sexual Offences and related Matters) Amendment Act criminalise sexual abuse and rape and set out who is responsible for arresting, prosecuting, convicting and sentencing perpetrators of violence against women and children. Together with the Criminal Procedure Act, these acts provide some protective measures for vulnerable victims and witnesses. The Prevention and Combatting of Trafficking in Persons Act criminalises all acts that support the trafficking of women and children. A range of other crimes are established by dedicated laws, such as the Protection from Harassment Act, the Cyber Crimes Act, and the Films and Publications Act.

The legislative framework recognises the harm caused by exposing children to domestic violence but does not adequately address co-victimisation or the need for integrated services (Jamieson et al 2022). The Children's Act and supporting policies provide for a comprehensive range of child protection services. Whilst the Act clarifies that the best interest of the child includes protecting "the child from any physical or psychological harm that may be caused by . . . exposing the child to maltreatment, abuse, degradation, ill-treatment, violence or harmful behaviour towards another person",[10] and the definition

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8   Domestic Violence Act, 116 of 1998, section 1

9   '**Domestic violence**' means— (a) physical abuse; (b) sexual abuse; (c) emotional, verbal or psychological abuse; (d) economic abuse; (e) intimidation; (f) harassment; (fA) sexual harassment; (fB) related person abuse; (g) [stalking] spiritual abuse; (h) damage to property; (hA) elder abuse; (hB) coercive behaviour; (hC) controlling behaviour; (hD) to expose a child to domestic violence; (i) entry into the complainant's— (i) permanent or temporary residence without their consent, where the parties do not share the same residence; or (ii) workplace or place of study, without their consent, where the parties do not share the same workplace or place of study; or (j) any other behaviour of an intimidating, threatening, abusive, degrading, offensive or humiliating nature towards a complainant, where such conduct harms, or inspires the reasonable belief that harm may be caused to the complainant.

10   Children's Act, 38 of 2005, section 7 (l)(ii)

of children in need of care and protection includes exposing children to "circumstances which may seriously harm that child's physical, mental or social well-being"[11], IPV is not explicitly named in that chapter. Furthermore, the Act states that the children's court may not deal with matters under the Domestic Violence Act even when children are involved,[12] suggesting that children and their carers should be dealt with together but outside of the child protection system.

Recent changes to the DVA acknowledge that intentionally exposing a child to domestic violence is a crime[13] and oblige certain professionals to report incidents involving children to social services or the police,[14] detracting from women's rights to privacy and autonomy over their own situation. National guidelines[15] state that shelters must provide for basic needs (e.g., accommodation, food, and clothing) of both women and children as well as support, counselling, and skills development. They envisage that services should be "holistic, inter-sectoral and delivered by an appropriate multidisciplinary team wherever possible" and "reflect an understanding of the African Context in which they are based".

The National Strategic Plan on Gender Based Violence and Femicide (NSP on GBVF) is "a multi-sectoral, coherent strategic policy and programming framework [drafted] to ensure a coordinated national response to the crisis of gender-based violence and femicide by the government of South Africa and the country as a whole."[16] The aim of the NSP is to implement a framework and provide for interventions that are 'anchored by five key interventions': 'urgently respond[ing] to victims and survivors of GBV; broadening access to justice for survivors; changing social norms and behaviour through high-level awareness raising and prevention campaigns; strengthening existing architecture and promoting accountability; and the creation of more economic opportunities for women who are vulnerable to abuse because of poverty.'[17]

One of the principles of the NSP on GBVF is "mutual accountability for changes recognising that meeting these outcomes requires government, civil society, communities, social movements and all stakeholders to work together to drive the agenda forward". Thus, the NSP sets out the roles and responsibilities for stakeholders to hasten the realisation of its outcomes. For example, the National Council on Gender-based Violence and

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11   Children's Act, 38 of 2005, section 150 (1) (f) and (g)

12   Children's Act, 38 of 2005, section 1

13   Domestic Violence Amendment Act, 14 of 2021, section 2

14   Domestic Violence Amendment Act, 14 of 2021, section 2

15   DSD's policy on 'Minimum Standards on Shelters for Abused Women' and the National Strategy for Sheltering Services for Victims of Crime and Violence in South Africa.

16   National Strategic Plan on Gender-Based Violence and Femicide, at 16.

17   NSP op cit nXX at 3.

Femicide is the custodian of the plan and plays the role of strategic oversight of the realisation of the national outcomes outlined in the plan.

The NSP further conceptualises and gives in-depth definitions of femicide and GBV and how these relate to culture and social norms. It targets all women across the life cycle, including migrant women who experience general violence, xenophobic violence, violence from partners and non-partners as well as gay men. The drivers of GBV and femicide such as alcohol, gender norms, and education are also discussed in this document. Ultimately it sets out the legislative and policy framework to respond to GBV in South Africa. The NSP claims to target both women and children but a detailed analysis reveals that children are a subsidiary focus (Centre for Child Law, 2022b), and again this is a missed opportunity to provide an integrated framework at the highest level (Jamieson & Mathews, Forthcoming).

Human Rights

The Constitution[18] provides in section 12 that everyone has the right to freedom and security of the person, which includes the right to be free from all forms of violence from either public or private sources. Section 28 (1)(d) affords additional protection for children by providing that every child has the right to be protected from maltreatment, neglect, abuse, or degradation. The active phrasing ('to be protected from') in this section makes it clear that the state bears a duty to take proactive steps to prevent violence from happening to children and to act swiftly to prevent further harm when a child has experienced violence. Section 9 of the Constitution prohibits discrimination against anyone on grounds including, race, colour, ethnic or social origin and birth. Furthermore, South Africa is party to international laws and agreements that commit the country to respect and protect the rights of everyone within the country, regardless of where they originally come from. This means that government and non-government services that respond to violence should cater for women and children who speak other languages and who have diverse cultures.

People and languages spoken in South Africa

According to the Constitution the Republic has eleven official languages, namely Sepedi, Sesotho, Setswana, siSwati, Tshivenda, Xitsonga, Afrikaans, English, isiNdebele, isiXhosa and isiZulu. Sign language is soon to become the twelfth official language to accommodate deaf South Africans (Amendment Bill B18-2021). South Africa has a multilingual population with many people fluent in at least two languages. English is spoken by approximately 10% of the population as a second or third language, most of

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18   Constitution of the Republic of South Africa Act 108 of 1996

whom are not White. IsiXhosa is spoken as a first language by more than three quarters of the population in the Eastern Cape. Sign language is spoken by 0.5% of the population (Statistics South Africa, 2016).

CONCEPTUAL FRAMEWORK: DECOLONIAL AFRICAN FEMINISM

Resisting the colonial gaze

The findings report the knowledge and experiences of two colonised communities in South Africa as these women see it. Colonial scholarship or discourses in the form of texts, practices and discourse have been found to represent colonial subjects, such as the participants of this study, as backward (Asher, 2017). It has also written the world in simplistic binaries such as West or the North in relation to the rest of the world, modernity versus tradition, and civilised versus barbaric, thus erasing traces of colonial presence and intervention (Asher, 2017). As such, the analysis of this study resisted reading the data "under Western eyes", or what Fanon calls the colonial gaze, using Western feminist writings on what is described as "Third World Women" to discursively decolonise the material and historical heterogeneities of women's lives in the "Third World" (Asher, 2017; Fanon, 1968).

Mohanty (2003) posits that portrayals of Third World women as monolithic, impoverished victims of patriarchy and/or capitalist development minimise the fact that women become women not just in relation to men but also with regard to class, religious, racial, colonial, national, and other historical and political locations. This is not a point about the plurality among women or the heterogeneity of women's identities, as is commonly misunderstood. Rather, as Mohanty argues, there is no a priori Third World woman, but rather "such women are discursively produced by recent Western feminism in a Postcolonial and decolonial scholarship, and the feminisms associated with them are marked by diverse genealogies and histories and emerge from multiple location in a manner reminiscent of colonial practices." (p. 523).

The colonial gaze into gender issues in Africa has further reproduced a single and misinformed narrative about the health of Black families (Fanon, 2004). As Makama et al (2019) posit, discourse about Black families cannot exist without discussing Black men. They assert that dominant representations about Black men emanate from mainstream (Western) Feminism and Western patriarchy which tends to focus on what is wrong with Black men. This, they hold, has reproduced "a narrow, decontextualised and dehumanising narrative of Black men as absent fathers and patriarchs", playing into the

danger of a single narrative about Black men (Makama et al., 2019). A Western-centric view of African family structures is therefore not helpful in understanding African family structures, which require a contextual understanding of African customs and practices in the home. A decolonial African Feminist lens that moves from the premise that recognises that "patriarchy is not just a male problem" and acknowledges "that men also need support from women to address social ills that affect men, whether it is to influence the way they relate (and love) themselves or how they engage with other men, women and children" (Jansen & Titi, 2018, p. 1), is more suitable.

Decolonial African-centred Feminism enabled the study findings to go beyond an anti-colonial critique of knowledge production to an authentic decolonial African-centred understanding of professional services that respond to violence against women and children in local communities, without thinking comparatively but to thinking relationally and pluriversarily in recognition of the complexities in identities and context (Hills, 1986; Nsamenang & Lamb, 1995; Mignolo, 2018; Mkhize, 2018). The findings were therefore interpreted through a decolonial African feminist framework. Feminist literature unpacks the gendered histories (for example, gender inequality) and social drivers of violence (for example, harmful gender norms and patriarchy) in shaping lived realities of people and communities (Crenshaw, 1991; Ramphele, 2002).

Western epistemologies underpin professional services and the universal political economy of knowledge production rendered African or indigenous knowledges to being traditional, unscientific and value laden (Afolabi, 2020). In contrast, Western knowledge has been held in higher regard over traditional means of knowledge acquisition which relates to the devaluing of indigenous ways of being (Afolabi, 2020). This makes decolonisation a necessary framework for research that studies how services are delivered to indigenous communities and what such communities need and want from services.

Decolonial feminist theory

The epistemological origins of decolonial feminist theory can be attributed to the Chicana feminist movement, motivated by the historical, social and cultural marginalisation of women of Mexican descent in the United States (e.g., Anzaldúa, 1999; Saldivar-Hull, 1991; Sandoval, 2000), the work of gender theorists in postcolonial countries (e.g., Connell, 2014; Oyěwùmí, 1997), black feminism and women of colour feminist politics and activists (e.g., Hill Collins, 2008; hooks, 1981; Roshanravan, 014), and, most notably, intersectionality (e.g., Crenshaw, 1989, 1991; Holvino, 2010; Liu, 2018; Moraga and Anzaldúa, 1983).

Figure 1: Adapted from Our Watch. 2017. *Putting the prevention of violence against women into practice: How to Change the story.* Melbourne: Our Watch.

Intersectionality

Violence against women and children (VAWC) can be exacerbated when gender inequality intersects with other forms of discrimination and disadvantage. Intersectionality is located within feminist theory that understands the drivers of violence as an outcome of multiple oppressions, namely race, class, and gender (Hills, 1986). These factors address power and hierarchies from this domination matrix, including age, from the perspectives of women and children who receive services as well as service providers in the context of their subjectivities (Gordon, 2007). Violence affects women and girls across the world but the different layers that make up people's identities, such as socio-economic status, ethnicity, ability, age, and gender identity, influence the types and proximity of violence they may face. Socio-cultural actors such as language, culture, religion, and spirituality

influence communities' help-seeking behaviours and are informed by how communities exist and experience the world. Intersectionality (Figure 1) therefore provides a critical lens to analyse how power and privilege are structured for people within different interlocking and intersecting socio-demographic positions.

Decolonial Feminism through an Afrocentric/African-centred lens

Colonial narratives are often negative and disregard the fact that both men and women are victims of patriarchy (Idriss, 2022). As part of society, women also contribute to perpetuating problematic gender norms intentionally and unintentionally (Jansen & Titi, 2018). An African-situated feminism recognises, for example, that culturally, men are often forced into situations that make it difficult for them to meet their fatherhood responsibilities due to traditional customs such as *lobola*[19] and *intlawulo*[20], due to economic challenges brought about through capitalism (Makama et al., 2019). The State of Fatherhood report attests to those economic challenges, which affect all men and are the main contributing factor to absent fathers across all races. These expectations are the result of hegemonic masculinity that, when taken to the extreme, results in men resorting to violence to defend their socially enforced masculinity and accompanying norms at their own expense (Idriss, 2022). Feminist decolonial scholars have therefore argued for African-centred constructions of Africans to reverse the colonial constructions that render African people "bizarre" or "barbaric" (Boonzaier, 2017; Mama, 1995; Tamale, 2011).

The study applied Afrocentricity or African-centredness, which is a paradigm for studying African phenomena with respect to history (time), geography (space), culture and language in understanding the experiences of women and children (Reed et al., 2005). The African-centred approach within the decolonial framework does not homogenise African women and children but validates the commonalities as it acknowledges the differences (Ratele et al., 2019). African women and children may have a common experience of being African women and children, respectively, but differences may exist arising from developmental, social, cultural, environmental, and economic factors (Shields et al., 2005). Framing this study on the perspectives, language and culture of research participants ensured that the local communities represented themselves and that their agency and self-determination is respected and honoured.

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19   *I-lobola* is a customary process of negotiation to build and strengthen the relationship between the families of a couple who wishes to marry where the soon-to-be husband asks for permission to wed the soon-to-be bride from her family. The custom entails the soon-to-be groom giving gifts (previously cattle) to the woman's family based on what is agreed to between the two families. The colonial administration however codified lobola to mean bride-price which implies a purchasing of the woman to make her a wife which ultimately led to the commercialisation of the practice (Mkhize & Msomi, 2016).

20   *Intlawulo is a custom that mediates the involvement of an unmarried father's involvement in the life of a child.* An amount paid in money or in kind by a man to an unmarried woman's elders after he impregnates her in order to be recognised as the legitimate father of a child especially by the child's mother's family. Colonial interpretations of this custom have loosely translated the custom to mean "paying damages" (see B v M (A196/2019) [2019] ZAWCHC 164 (20 November 2019) para 2; Samukimba & Moore, 2020).

The representation of women and children's accounts in this report therefore differ from usual discourse about Global South women, particularly Black women in Africa, which presents them as other (Manning, 2021). Othering implies that African women need help rethinking what they hold of value. Putting to question African women's cultures and traditions works against ethical research practice as it disrespects communities' and participants' ontologies, thereby alienating them from their sense of self (Mavhandu-Mudzus, 2022). Decolonial and African-centred research recognises that people are embedded in their contexts, which necessitated the research team to seek local partner buy-in from the onset of the study to advise on the research process and the stakeholders to included. The research findings were later reviewed by the local communities (which included research participants) to ensure that the research team correctly interpreted the data.

2   METHODOLOGY

AIMS OF THE STUDY

To provide preliminary insights into the gaps in services for women who have experienced violence and their children using a decolonial afro-centric approach.

Objectives of the study

- To conduct an exploratory study to:
    - understand what women, who have been affected by intimate partner violence, and their children want from services in two communities in the Eastern Cape;
    - deepen our understanding of how services are delivered to address the needs of these women and children;

- To identify and describe the gap(s) in services;
- To identify priorities for further research; and
- To share the findings to build the capacity of communities.

RESEARCH DESIGN

The study was located within the transformative paradigm and is aligned with decolonial approaches as they value local communities, their knowledge and processes, and thereby humanise their way of being in the world as opposed to only being concerned about their human rights(Tuck & Yang, 2012). According to Mertens, this paradigm responds to the ontological question about the nature of reality and truth by "placing various viewpoints within a political, cultural, and economic value system to understand the basis for the differences" (1999, p.5) to understand how certain perspectives on reality become privileged over others through an application of critical theory, feminism, participatory and emancipatory research, advocacy and politics among other approaches (Mertens, 2017).

To achieve transformation, the ontological must match epistemological and methodological assumptions. This required a contextual analysis of reality (and truth) which for this study is achieved by centring the African context and disrupting the geographical, political, and onto-epistemological extension of western domination, through four interrelated domains: economy, authority, gender or sexuality and knowledge (Quijano, 2007). This methodological approach, therefore, complements the decolonial African-centred feminist conceptualisation as the study by design addresses the colonial matrix of power and knowledge, particularly in terms of whose knowledge counts.

Researchers locating themselves in the transformative paradigm are aligned with decoloniality due to a shared concern for the correct representation of participants' views (Mertens, 2017). This is like Afrocentricity, which is concerned with representing Africans in the ways that they see themselves and want for them what they want for themselves (Asante, 2003). The transformative paradigm, therefore, provides a framework for addressing inequality and injustice in society using culturally competent, qualitative methods (Mertens, 2007).

Culturally competent and decolonial knowledge is produced by positioning indigenous communities as experts of their lives who can make meaning of their own experiences. This requires research participants to be at the centre of the theorisation process, both in terms of how data is collected and how it is interpreted. We deemed it important to gather community perspectives at each stage of the research process to ensure that our work served the needs of communities under scrutiny. For this reason, we partnered with Masimanyane Women's Rights International which works with women who have experienced men's violence. Through this partnership, we consulted local community partners and service providers about the study design and obtained community buy-in. This design ensured that voices from all levels were heard, namely, community stakeholders, service providers, women and children.

The Women's Ikhwelo Network was the key stakeholder through which we obtained advice about the research design as well as the interpretation of study findings. The findings were also confirmed with research participants through a community engagement workshop. The research team consulted with these key stakeholders on local, cultural and community norms that had the potential to impact the research, including community entry, recruitment, accessing participants, informed consent, how to minimise risk to participants as well as potential benefits of the research for the communities and how these could be maximised. This approach shifts power from researchers to the community and gives them a voice.

Community partners and study sites

Masimanyane has 14 offices in the Eastern Cape, concentrated in Buffalo City, where they have 10 service offices. Since opening in 1996, more than 135,000 women and girls who have survived rape, domestic violence and other forms of sexual assault have benefitted from the social support services provided by Masimanyane Women's Rights International. In addition, their community-based programmes reach more than 50,000 people each year, half of whom are children and youth. They have a dedicated presence in the region's two biggest magistrate's courts (Buffalo City and Mnquma), as well as in four police stations and a clinic. They offer services at two Buffalo City Thuthuzela Care Centres (TCCs), located at Cecilia Makiwane Hospital and Grey Hospital in King William's Town. Further afield, they also provide services at Thuthuzela Centres in Gcuwa, Libode and Mthatha. They recently established a shelter for women in distress that accommodates children too.

The Masimanyane shelter is in a residential area in Buffalo City which caters for a total of 15 women and children at a time. The residents stay, on average, for 3 – 8 months, and can access a range of programmes. Women usually enter the shelter through coordination between Masimanyane counsellors at police stations and the shelter. While Masimanyane does have programmes for children, they do not have the expertise to work with children living with trauma. They specialise in GBV counselling for women and after assessment refer children who need counselling to Masithethe, a partner local non-governmental organisation (NGO) that specialises in trauma work with children.

Masimanyane established the Women's Ikhwelo Network (WIN) to link organisations in the Eastern Cape that work on various aspects of violence against women and HIV/AIDS. The network is composed of different NGOs in Buffalo City and its surrounding urban and rural areas. Network members collaborate to provide school talks, women and girls empowerment activities in churches, victim support at community level, sex-worker rehabilitation, support to trafficked children and elderly people who have been abused, abuse of the elderly (sexual and financial), incest and interventions when removals are needed. Representatives from the network are embedded in the community and advised on the research design at the first community engagement workshop with service providers from the two study settings.

Research setting and sample population

Participants were drawn from two sites in which Masimanyane offers services. The first is a shelter for women in Buffalo City, the second a TCC in Gcuwa. The Buffalo City shelter serves an urban-rural community whilst the service in Gcuwa caters for a rural community. Purposive sampling was used as the recruitment strategy for both service

providers and service recipients. Purposive sampling is the most suitable recruitment strategy in qualitative research as it affords the study a rich sample with the most relevant cases of interest.

Table 1: Overview of sample

Participants	Number
Women	10
Children aged 9 to 14 years (6 girls and 5 boys)	11
Key informants (service providers and community leaders)	9
TOTAL	30

Recruitment of participants

Prospective participants were discussed at the local partner meeting during the pre-study site visit in October 2021 in Buffalo City and Gcuwa, convened by Masimanyane and hosted by a co-principal investigator who would not be interviewing service providers to honour participant confidentiality. The pre-study visit was for the research team to receive orientation of how Masimanyane operates and to understand its programmes and location. One of the objectives of the meeting was to meet local partner organisations and to obtain buy-in for the study. From this meeting, the research team drew up a purposive sample of service providers working in the areas of violence against women and children in the communities served by Masimanyane. A recruitment email was sent to prospective key informants along with an information sheet by the research team. To identify eligible women and children, Masimanyane staff at the shelter and the TCC reviewed their intake registers and selected women who met the inclusion criteria. The women were called by recruiters who followed a script and took them through the eligibility criteria. The recruiters gave them a flyer detailing the inclusion criteria and invited them to an information session that was held by the research team. Women who agreed to participate in the study with their children were then enrolled.

The objective of partnering with a local community organisation with offices in TCCs and a shelter was to mitigate recruitment challenges as the two sites provided access to women who had experienced violence by men. However, recruiting participants was the greatest challenge in the study despite this strategy, and we struggled to find eligible potential participants.

We found that women accessing care from our rural site mostly had grandchildren in their care, as opposed to their own children. We permitted their inclusion as younger women with young children had often relocated and lived away from the villages. Another

challenge pertained to potential participants having changed contact details.

From the urban shelter, we also experienced challenges recruiting women due to relocation. This made recruitment a challenge in addition to participants losing and changing telephone numbers. However, these challenges are understandable given the need for women who experienced violence and abuse to start over. From the shelter participants we found other challenges related to partner distrust of the intention of inviting women back to the shelter for a discussion about violence. This was managed through the shelter staff engaging with participants to minimise conflict in the home, given the trust already established between participants, their families and Masimanyane. Women and their children were also transported by the shelter from their homes to the research site and back. This arrangement resolved the issue of transport and proximity to the research site. The Gcuwa TCC services villages in the surrounds but the distance and quality of the roads hindered potential participants' access to the study. This implies that women and children needing TCC services are also likely not able to access services due to proximity, cost of transport and the quality of the roads.

Inclusion and exclusion criteria

The study included adult women receiving support from Masimanyane for trauma due to violence for a period of six months or more, but no longer identified as suffering the effects of trauma. A screening tool was used at the information session and women who did not meet these criteria were excluded. Women had to be willing to participate with one of their children and to speak isiXhosa, English or Afrikaans.

The women were asked for consent for the study to recruit their children aged 9 – 14 years old into the study. Children who spoke isiXhosa, English or Afrikaans were invited to participate. The researcher used the Abbreviated UCLA PTSD reaction index (Cohen et al., 2010) was used to screen for post-traumatic stress disorder (PTSD) and other signs of trauma in children identified as suffering the effects of trauma. Children mostly presented with mild PTSD symptoms and were, therefore, eligible to participate in the study.

Data collection

Indigenous language use

While the study affirmed and prioritised isiXhosa, given the importance of indigenous language matters, participants were given the choice to speak other languages. Services providers and children often elected to use English and used a variation of isiXhosa mixed with English. Given that South Africa is a multilingual society, the research team expected these variations in language and prepared multi-lingual translations of data collection materials for fieldworkers. This was important, given the transformation

agenda in South Africa that seeks to respect all languages as well as the knowledge that language influences professional training of services, which makes English the language spoken in relation to service provision and children who attend multi-racial schools (Khoza-Shangase & Mophosho, 2018).

Research tools

Semi-structured interviews were conducted to obtain professionals' self-reflections on their service-provision and to obtain first-hand accounts of their experiences. These interviews were conducted using Zoom or Microsoft Teams. Focus group discussions (FGDs) with women who had used support services were conducted at each site.

Participatory child-centric, art-based life story research methods were used with children (Titi, 2021). The method gives children freedom of expression in ways that work for them, embraces children's agency, and gives them control to direct their stories (Simmons, 2019). To support children's narrative process, arts-based techniques were used within the story-telling methodology to ensure that the process was both developmentally and culturally appropriate. The researcher used play and word-games as an integral part of data collection in addition to a large variety of art genres, such as performance, writing letters, reading together, painting, photography, singing, poppie-huissie role-play, as technical, communication or aesthetic elements(Franz, 2010).

The study took place during the COVID-19 pandemic. The data collection protocol complied with the guidelines issued by the Human Research Ethics Committee of the Faculty of Health Sciences at UCT and was reviewed when changes to guidelines were issued. This reduced the number of participants that we could include in the focus group discussions and the time that we could spend with the children. Interviews were conducted telephonically and were not impacted.

Ethical considerations

The research embarked on through this study was relevant for the community and participants. The research team maximised community/public interest and social justice through community engagements before and after fieldwork. The trauma screening tools ensured that only participants who were stable participated in the research. The use of TCC and shelter registers for recruitment ensured that participants were also competent to discuss the research questions. Through the information session and consenting process, we were able to obtain a commitment from participants to participate in the study. The research team showed respect for and protection of the rights of participants, the research sites and the institutions involved in the study by protecting their dignity, privacy, and confidentiality.

In respect of institutions, ethical clearance for service providers was sought before individual informed consent was provided. Participants were informed about the research agenda and not coerced. It was important to ensure this given the sensitive nature of the study, particularly for women and children. The small sample is indicative of the low intake rate as prospective participants declined due to discomfort. Their choice was respected.

It was important to guard against harming participants through the implementation of Western principles in (peri) rural contexts. As such, the study respected cultural differences. The study upheld the institutional research protocol but was also respectful of African ethics. For example, institutional ethics understand confidentiality to be an agreement between the researcher and the participant whereas for indigenous communities, the individual is seen as a significant other in the community who represents everybody as spurred on by the African core values of interdependence and communalism (Makulilo, 2016). This meant respecting the community focus participants entered the study with and was demonstrated through their electing to use clan names for pseudonyms as opposed to letters of the alphabet. This indicated a sense of belonging. This made participants feel safe as it connected them to their families and ancestry – most of the time individuals participating in a study represent their families, communities, and clans (Makulilo, 2016; Quigley, 2006).

The research team treated participants and their records with confidentiality but could not ensure that the focus group participants would maintain confidentiality. The women were past clients of both the TCC, and the shelter and their sessions were scheduled at a time of their choice. Privacy was maintained by ensuring that there were no walk-ins in the rooms where the focus groups and the children's sessions were held. Service providers were interviewed virtually, and recordings were stored on password-protected institutional software. To protect the identities of the participants, the data has been denominalized and, as far as possible, the ages and genders of the children are not disclosed. Likewise, the profession and location of the service providers has been removed.

Decolonial thought is founded on principles of epistemic humility which respect the ways of being of local or indigenous communities. The community engagement workshop about the initial findings assisted in ensuring that the study findings and the interpretation thereof are credible. Justice is an important principle of the transformative paradigm and was also an ethical obligation of researchers in terms of ensuring that the study was true to its research agenda, and was fair and objective through processes of honesty, transparency and accountability among the research team, its partners as well as to other scholars.

General considerations

Ethics clearance was obtained from the relevant Government Departments and stakeholder organisations. The protocol received ethical approval from the Human Research and Ethics Committee at the Faculty of Health Sciences at the University of Cape Town Ref: HREC 44/2022.

Rationale for the inclusion of children in the study

Articles 3 and 12 of the United Nations Convention on the Rights of the Child (UNCRC) protect the best interests of children and the right to participate in decisions that affect them. Children's participation in research is a human rights obligation and a way of fulfilling other rights – a notion that can be lost in some research initiatives. Ethical guidelines usually require that researchers act in the best interests of their subject and allow participants to protect themselves through a process of consent. In South Africa, children do not have the legal capacity to consent to research, so consent was obtained from their mothers. An information session was held at the Masimanyane offices to explain the study to potential adult participants where they were briefed about the project and the participation of their children. The mothers provided written informed consent. Then children were invited to a one-on-one session with the researcher who explained the purpose of the research and what was expected of the children. Children were asked if they were willing to participate voluntarily and those who agreed were asked to sign a child-friendly assent form.

Support for participants and researchers experiencing distress

All team members doing fieldwork were trained in counselling and the training covered protocols for handling distress, identifying trauma and how to refer participants appropriately. The Masimanyane social workers and Masithethe staff were available to support women and children experiencing distress. Interviews with service providers were conducted telephonically the interviewer had contact details for counsellors and a list of organisations outside the community providing similar services that individuals could contact. The research team had debriefing sessions at the end of each block of fieldwork and were connected to a psychologist for one-on-one sessions as most reported feeling overwhelmed by the stories they had heard.

Limitations

Women and children recruited through services made the sample homogenous to a degree in terms of help-seeking behaviours and exposure to services. Qualitative research by design is not generalisable but is intended to provide a rich contextualised understanding of the research phenomenon as experienced by the population under

study. While the study was conducted in the Eastern Cape, the sample was small, thus the findings may be limited to contexts like the research sites, that is women, children, and service providers of TCCs and the Masimanyane Shelter. The centrality of the partner NGO in the coordination of the services provided in the area poses a further limitation to the findings as some of the findings may be specific to this given context and service provider. However, the intention of the study was not to evaluate Masimanyane, and interviews and focus group themes were crafted to shed light on the needs and wishes of women and children who have accessed services.

Analysis

The interviews, focus group discussions and sessions with the children were recorded (with permission) and transcribed. A priori codes were developed based on the research questions, and then thematic discourse narrative analysis was used to extract themes from individual stories. Data was analysed in isiXhosa by three first language speakers, where each transcript was coded by two people, codes were compared, and new inductive codes added to the coding framework at team meetings. The draft findings were shared with the community at two community dialogues before the final report was written.

The decolonial framework that guided the analysis of the findings is therefore inherently intersectional. Secondly, the findings, although written as a general representation of accounts in both settings, are not homogenising women's lives and experiences in the rural and urban communities, namely Buffalo City and Gcuwa (Asher, 2017). Women's lives are affected by geography, economic conditions and the changing culture that is a consequence of the location and economic circumstance. This necessitates a situated decolonial perspective in and for women in Africa which makes an Afrocentric lens a requirement as part of the decolonial framework.

Decolonial feminist theory, therefore, embraces gendered colonial difference and engages with ideas, theories and practices from the lived experiences of Global South women, which includes women in Africa. Decolonial and postcolonial feminist scholars such as Lugones (2010) hold that colonial racial and economic power relations remain profoundly gendered. She maintains that there is no singular view of gender or how it intersects with the various forms of power such as race, place class and sex. This makes it important to be critical of Western feminist writing of Xhosa women's cultural practices such as intlonipho, and to be vigilant of how Western eyes silence African women's voices and agency through othering (Manning, 2021). This study's findings, therefore, interrupt mainstream narratives of African women as part of the Global South women to contribute to new knowledge and knowledge from the perspective of gendered colonial difference (Manning, 2021).

The findings are divided according to five themes, namely (1) access to services, (2) language and culture, (3) social and cultural protocols for dealing with violence, (4) justice, the law, community response and ubuntu, and (5) considerations of what children need from services.

3 ACCESS TO SERVICES

MARGINALISATION OF BLACK COMMUNITIES

Services are not located in rural communities

Due to the legacy of colonial spatial planning, many GBV services remain out of reach of many Black communities (Weakley, 2014; Wood, 2019). Consequently, many women have long distances to travel to and from services with implications in terms of time and cost (Titi, 2021) . Even though it is a constitutional right to access GBV services, it is often considered a privilege by these communities:

> ...rural areas, they are still behind, you understand – the police stations and the clinics you know, […] you will find out that, let's say 10 villages have been served by one police station or 15 villages have been served by one police station. And then that one police station, it only has two vans or one. (Service Provider).

The distance between the villages and their local police station is a significant hinderance to service delivery, and the SAPS do not have the resources to meet the needs of the local population:

> Sometimes they will face sexual assault and then the police will say, the van, its went to that village to attend the whatever, you understand? So, there is a need of a clinic. (Service Provider).

Cost and availability of public transport

While access to services is a problem in townships, women from rural areas face even greater challenges accessing them because they live far from services, have poor access to roads, and frequently depend on buses, which have set schedules:

> You know whereby there is a bus that only operates at certain times. If you miss that bus, it will be difficult for you to come from either the village or location into

the town area, then it will become a problem. The transport, it's a problem and then as I say, you will find out that the taxi's the reason why they can't reach that village, they are complaining about the roads. The roads are not right there, so they cannot get in there, so there is a problem of transport. (Women FGD).

The shelter services ensures that it is accessible to victims of violence by collecting women who need emergency help either by collecting them or meeting them at a central location:

If we can help, we visit the person where they are, but not exactly in their house. If there is a stop [landmark] they can run to, we will go and pick them up or if they can get a ride, we will meet them in town. (Service Provider).

The distance and lack of transport makes it difficult for women to adhere to medical treatment and to the intervention programmes.

Lack of awareness of services

While NGOs and government departments conduct public education and communication awareness campaigns, participants reported that women remain in abusive relationships due to not knowing where to seek help:

Some people are not aware of the services available to them. Do not know about the shelter. Do not know who these services are open to (who they service). (Service provider).

More efforts are required to raise awareness of the services and how to reach them, especially in the most remote rural areas:

Women from the village don't have the same opportunities as those from urban areas. It made me to go to these areas to see really what is happening in rural areas and they need support, they need people to come (Service Provider).

Co-ordination and availability of services

Previous research found a lack of collaboration between different services and government departments such as the National Prosecuting Authority (NPA), the Department of Social Development (DSD), the Department of Health, and the South African Police Service (SAPS, hereafter to be referred to as the police) (Jamieson et al., 2017; Vetten, 2019). But some respondents noted that services are working together, at least in respect of the initial response:

Thuthuzela is accessible here to help mothers and children because if you are a mother or a child who had been raped and taken by the police to a Thuthuzela Care Centre for assessment and to determine the damage. It does not end there, at the TCC you will also be supported with counselling. (Service Provider).

Most NGO operations are underfunded and rely on subsidies from DS D. Although limited resources restrict the opening hours of NGOs, the staff were always contactable:

Say for example an incident happened on the weekend, the counsellors don't work on the weekend, only those from TCC work but we get referrals even on weekends because someone somewhere has heard of Masimanyane, maybe in that community then they call [us], we then do a phone assessment. (Service Provider).

The role of NGOs in supporting government services

Irrespective of whether women approach the NGO or the government services first, they still receive the same package of care. In both sites Masimanyane played a critical role in coordinating services. Masimanyane at the two TCCs is responsible for liaising with clients and ensuring that they adhere to treatment and psychosocial support interventions. When victims approach Masimanyane independently from the government department, the multisectoral approach is still followed.

Because you know the work of domestic violence or the work of assisting the woman and a child is challenging. She will come to Masimanyane, and Masimanyane will give the counselling, will give the shelter if they need our services, we will provide to this person but there is a piece for social development, there is a piece of SAPS, there is a piece of justice. (Service Provider).

The multisectoral approach is designed in such a way that services cross-refer cases:

If she goes to the Department of Social Development who then finds that the matter that she came for needs the police, she is then provided with a referral letter that sends her to the police stating that there is a woman in need of help in the following ways …. Then the police, if they think that the case requires Masimanyane to step into the family's situation for them to receive counselling targeting the mother and her children, if, for instance, the children are involved in the case.

Women and children had access to a diverse array of services such as psychosocial support, trauma counselling, paralegal support, public education, and a shelter through Masimanyane and their partner NGOs.

First point of contact crisis response

The police were identified by most participants as the first point of service provision when women and children experience violence:

> *They go to the police station, it is their first contact. I would say if it is an emergency, then [depending on] how severe it [the case] is, they will be taken to a medical [facility] like a hospital or clinic. Then from there or without having gone to a medical doctor (physician) they go to the doctor, or they come to us. Then they are referred to the shelter. (Service Provider).*

> *What helped us was calling the police, the police took us to the social workers (Child participant).*

Even in the villages where there is a greater reliance on customary law and the expectation is that their first point of reporting should be the traditional authorities, some women go directly to the police:

> *…because we are people of the village, they always begin the process with the headman. The headman is the one who passes it on to the chief, then when it comes to the chief then the police are then called, you understand? But for my part, I did not call the traditional counsel and the chief, I realized that the only thing that should be done is to call the police. (Women FGD).*

But women try other services until they find the support they need:

> *You start at the police station and if you do not get care and are not attended to there, and you do not know how Masimanyane [shelter] is connected, you go inquire about where you can find social workers are, so that you can get attended to (Service Provider).*

Some women go directly to TCC service providers, who also considered themselves as a first responder:

> *I can say yes because we are the first responders [etc] to that. So that is why I know that [we] are very accessible. We are working there for 24 hours, you know, so it's accessible. (Service Provider).*

Access to psychosocial support (during and after shelter stay)

Psychosocial support is offered in the form of individual counselling at the TCC. Containment counselling is offered by DSD social workers or NGOs first responders. Additionally, an NGO linkage officer does the follow-up with clients ensuring that they

return for treatment and HIV testing and connecting them to therapeutic services for longer-term support.

Clients accessing TCC and shelter services receive individual counselling through those facilities. Masimanyane also coordinates and arranges psychosocial services at no cost for their clients. However, after clients have exited the shelter, accessing counselling services in the form of psychologists or professional counsellors becomes a challenge due to financial constraints:

> *Then in terms of external counselling, this is helpful to them because it's continuous. […] Here at the shelter, we do individual counselling and group counselling [and] we refer them for psychological assessment. If a client has exited the shelter we have an external facility, it's not ours, it is an organization we work with, Masithethe counselling services, so we refer clients to them after they exited because we only provide counselling to in-house clients. Then when they've exited, and I see that she needs counselling even though she wants to return home, then I refer to Masithethe. (Service provider).*

Referring women and children to outside counselling services was mentioned by service providers as a critical part of ensuring that women heal and are equipped to manage their trauma. Psychosocial support further ensures that women can deal with their circumstances back at home. However, this presents a problem for women because, while they are staying in the shelter, everything is taken care of and they are taken to all the services, and they are not fully responsible for managing households and caring for the children. Coping with everything upon exit can be overwhelming.

SAPS inefficiencies – SAPS tells victims to reconcile with perpetrators

There was agreement that SAPS *"can do better" (Child Participant)*, particularly regarding delays in their response to reported crime:

> *The first thing that comes to mind is calling the police services but not so much because they take their time. But as long as they arrive, when there is an incident, everyone calls the police because they know the police are there to help and they will find the perpetrator. (Child Participant).*

Victim secondary revictimisation by SAPS

While it should be noted that all the services responding to violence were critiqued, SAPS had the most complaints relating to the secondary victimisation of women by asking violated women to return to their abusive and violent homes to reconcile with

their perpetrators when it is not safe to do so. A further concern was how SAPS was acting outside of their jurisdiction:

It's a challenge, the issue with the police. Uhm, sometimes clients will go seek help and not get assisted and told to go fix things with their husband. Things do change whereas a person is being chased out or it is clear that they were beaten and yet are told to go resolve the matter. That time they could just take the client to one of the counsellors or counselling offices and then let it be the counsellor who advises them the way forward. Sometimes we experience a challenge of a client needing to fetch her belongings. (Service Provider).

One of the participants shared how SAPS judged the severity of cases based on the complainants' external appearance, using that as a measure of credibility:

The police station sometimes doesn't take things seriously, especially if it involves a rich person. They hold a strong perception of a rich person. They look at the exterior appearance; people can be fake, so the police think what the person is pretending to be is who they actually are, but that's not the case. They (rich people) should know that rules count for everybody. (Child Participant).

Services providers were also concerned about the poor implementation of laws and policies which leads to SAPS officers causing revictimisation of women, particularly by male officers when it is female officers who are supposed to action certain duties pertaining to rape cases:

Another challenge: It's secondary victimization … If the person has been raped, she must be assisted by the female colleagues, and must not spend a long time at a police station because that person [is] uncomfortable. So, this person must be taken straight away to the TCC immediately that that does not happen, and that person must be interviewed in their personal private room … by the female police that it happened and had not happened, you know. The people, they're always coming in reporting the secondary victimization. (Service Provider).

Service providers shared that the Department of Justice staff also revictimized women:

Even here at the justice department, they will come and report that yhoo! this clerk, he was talking so badly to me and all that stuff. So, when I do my advocacy as usual, I go there with the client, maybe to the court manager to write a complaint letter. (Service provider).

Protection orders do not prevent violence

According to the SAPS (2014), "a protection order aims at preventing the reoccurrence of domestic violence or sexual harassment by stating what conduct the alleged offender must refrain from doing. If he/she complies with the protection order, the complainant will be safe. If the respondent contravenes any stipulation of the protection order, he/she may be arrested. Once a protection order is granted, it is enforceable throughout the country". The national femicide study showed that women are at increased risk for being killed when leaving, or threatening to leave a partner (Abrahams et al., 2013). Study participants shared that protection orders are not helpful in preventing further violence, and were a main cause for concern for the protection of women and children from gender-based violence. Participants reported challenges with the effectiveness of protection orders. Children shared accounts of their fathers having been evicted from their homes. Women reported that protection orders do not work and they are abused by men despite having a protection order.

I lost my female cousin who went to get a protection order against her boyfriend last year. She had gone to apply for a protection order 6 times and the boyfriend who she took the protection order out against came to stab her and her current boyfriend, and they both died on the scene, and the matter already involved police. The police are just irrelevant right now! (Women FGD).

Just to add to what [she] has said about the protection order, I have 20 injuries on my body, despite the protection order. (Women FGD)

Not understanding how protection orders work

The community dialogues highlighted that communities do not understand the protection order application process or the function of protection orders:

Some of them they know their rights, but they don't want to practice it [the protection order] in a proper way. Some of them just go and open a case or apply for a protection order and then don't follow it up, hence some say they get beaten up by a man with the protection order on hand. The protection order has steps that must be followed to completion. It is then when you will know that you have reached the final order. This is when the complainant goes to report to the police that the person is repeating the same offence and the police are supposed to warn the person the protection order is issued against to stop. But the police don't do that. (Service Provider).

Additionally, NGO counsellors stationed at the police stations and the courts reported that women use protection orders to ensure their safety – but it is seen as punitive measure

by their partners which aggravates the situation. Women are placed at additional risk as they serve the protection orders to perpetrators themselves and without the police to officially evict them from the house. The non-evictions were also cited to be due to police officials not explaining the eviction protocols, as a court order, to victims, so that they know what to expect:

> *We, Masimanyane, go to the police station to ask why the offender is not getting arrested when the complainant has a protection order issued because the man is now not just violating the woman's rights but is also in violation of the law because that final order is coming from the Department of Justice, so he is violating the Department of Justice. (Service Provider).*

Women are not educated enough about protection order. Officials felt protection orders are used as warning weapons and are not followed through hence participants feel they are not helpful. Interestingly, there were, however, accounts by children of experiencing better services from the police compared to social workers in terms of immediate action. The community dialogues (June 2022) at both sites highlighted the problems with the SAPS's ineffectiveness due to understaffing, for instance, how they do not properly explain how protection orders work to communities. And being under-resourced influences how they respond to crime callouts in communities. Shortage of staff across all departments results in very high workloads, delays in processes, and is also linked to people losing faith in the justice system.

SAPS sometimes ignore the instructions on the protection orders and refuse to remove perpetrators. In the community engagement dialogue (June 2022), the withdrawals of court orders and some factors such as intimidation and threatening of the complaint by family members, bribes and corruption were mentioned as contributing factors. Communities require public education about the protection order application process, its requirements, and its uses.

Gender sensitisation training is required

In the previous section, we discussed the efficiency of the SAPS and their re-victimisation of victims who report to the police station. Children identified the police and social workers as the service providers they approach first when reporting violence. Adults identified a need for police to receive gender-sensitisation training to help them handle cases concerning domestic violence and intimate partner violence. Reflecting on the complaints about how police handle and respond to cases regarding GBV and the way they relate to women suffering from trauma when reporting to the police station, it was resolved that:

The police often say they are trained to arrest people [or] open criminal cases, not things like civil cases, domestic violence, divorce cases, maintenance. (Service Provider).

Interestingly, children identified social workers as the response service needing improvement. They emphasised the importance of paying timely and urgent attention to victims to help them navigate their trauma. One of the children stated:

Moms and children who need help should approach the police as they are most capable because social workers don't care much. For example, if I would say I am raped, the police will go look for that person immediately whereas the social work will still be saying, "please come back tomorrow" yet the occurrence happened now, and you are reporting it. You did not go beat or attack the perpetrator. The victim was right to go report instead of going to fight the perpetrator. The social workers must help people and when a person comes to talk about something they should follow it up [now] because they don't know whether that person will ever come back there. (Child Participant).

These delays are concerning considering the role social workers play in trauma containment.

All participants agreed that there is a need for training and skill development/capacity strengthening for service providers. The community engagement dialogue (June 2022) identified SAPS as the stakeholder in most need of training, while children identified teachers and social workers as requiring training. To ensure maximum reach, the service providers recommended cascading training for all departments.

People living with disabilities

Participants raised concerns regarding the accessibility of services for people living with disabilities. There is a shortage of specialised assistance for survivors with hearing and visual impairments and this may cause re-traumatization (Van der Heijden et al., 2020). In this study, participants noted a lack of structural aids for people living with physical disabilities and interpreter hearing impediments accessing services, particularly those of the Department of Justice:

There is also a gap in the area of servicing people with disabilities you know… Most of the lifts are not working, are not being serviced, they are not if you've got the crutches you're struggling, if she's got a wheelchair she's struggling. When coming to deaf people, there is an interpreter but [they] are few and most of the interpreters are on standby, there are no interpreters that are always at a

post. So, you will find there is no interpreter in a particular time a person needs to be assisted. (Service provider).

Sign language is due to be recognised as an official language in South Africa. Therefore, government departments should include accredited sign language interpreters in their services. Communication, being heard and having the ability to express one's experiences, are important for justice:

On sign language […] should have the interpreter, not on standby but the full time, you know, for the deaf people. (Service Provider).

4 WHAT DO CHILDREN NEED FROM SERVICES?

IPV is a shared experience that is traumatic for both women and children

A study unpacking the intersections of violence against women, specifically IPV, and violence against children in the Western Cape found a co-occurrence of violence against women and children and the intergenerational effect of violence again children and women (Mathews et al., 2022). This means that when women suffer from domestic violence, their children are likely to experience violence themselves; and even if they are not directly exposed, they experience secondary trauma and require support to process that trauma (Mathews et al., 2022). Children reported that when they witness violence against their mothers and female caregivers, they internalise the trauma:

> *If you have a mother and father at home, they're not supposed to be fighting, especially when it comes to fist-fighting. Because the father has more strength to be fighting the mother and the child can't do anything about it. The child will just cry and take all of that experience and develop anger because they'll put all that stuff into their heart. (Child participant).*

Witnessing violence results in children having an array of negative outcomes. Children spoke of how it preoccupied them, and interrupted their studies, causing them distress and anxiety.

Children and familial relations are negatively impacted by domestic violence

Children witness, hear, and sometimes intervene in domestic violence in the home. Children reported that this affects them and harms their relationships with their fathers:

> *Children do get affected because they'll keep thinking about that occurrence probably when their father is fighting, they cry maybe when they see their father, they say, "oh no, this is not a father" so this remains in their mind… Some children*

verbalise with their own mouths that "you hit my mom" so it does not end with them [parents], children continue thinking about it. (Child participant).

Women stated that their children often mediated physical fights between themselves and their partners. Sometimes this leads to men injuring children. Children's exposure to violence in the home also has a traumatic impact on children and "messes them up":

A 12-year-old would prevent me from getting beaten, he would stop the fight, he'd be watching; so, what was that teaching him? I could see that my child had anger from the way he was speaking to me. I sometimes detected rough speech from him and perceived that, "hey!"- the child is messed up. (Women FGD).

The child does get messed up; B is correct when saying a child gets messed up by the father's violence in the home. (Women FGD).

There was agreement from children and women that children's relationships with both their parents suffer because of domestic violence. Children reported that when their mothers experienced violence, they experienced that violence as though it was violence against themselves and therefore accompany their mothers to seek help from the police:

Together (mother and child) they go report that they are being abused. (Child participant).

Another woman raised an important consideration about the need for children to receive trauma support for violence experienced by their mothers or caregivers, stating:

If something is terrible on you as the parent, how much more on the child? If it's bad for the child, how much more on the parent? Because the pain that affects your child, how much more is it on the parent? What's hurtful that affects your child has a tremendous effect on you, especially women playing parenting roles. (Women FGD).

Women acknowledged that in their traumatised state they take out their frustration on their children:

Children must come [to therapeutic services] so that they can receive help because of what the mother has experienced. When something bad has happened to you, you become angry and end up taking out the anger on the child. (Women FGD).

The only service that is not available is the service for children (Women FGD).

This indicates a gap in services responding to intimate partner or domestic violence against women who have children in their care. Even basic psycho-social support in the form of play- and art-therapy requires a specific skills set that not all social workers possess, hence it is not offered by all shelters (Watson & Lopes, 2017). Many service providers refer children to outside specialists, such as Childline, for more in-depth psycho-social intervention, but these services are not available everywhere and children typically have to wait months to be seen (Jamieson et al., 2017). Not providing therapeutic services for children leaves them with unprocessed trauma and anger. But therapeutic services for children are not integrated into the package of care at TCCs. TCC staff reported that they are not equipped to deal with children experiencing trauma and require training in this regard (stakeholder meeting 2021). Children who have experienced violence are referred to off-site services for mental health recovery (Mathews et al, 2013), however, there are often long waiting periods and many children never access these services (Jamieson et al., 2017). Even when children exposed to violence in the home accompany their caregivers to services, their needs are not always provided for.

The services for children and women are siloed in law and practice

The Children's Act gives effect to children's rights to protection from abuse, maltreatment and neglect and the right to social services. The Act and the supporting policies, namely the National Child Care and Protection Policy, provide for a continuum of care from primary prevention and early intervention programmes to child protection services, alternative care options such as foster care and rehabilitation and family reunification programmes. The Act also provides for intersectoral collaboration and, in theory, supports multi-disciplinary teamwork. However, the criminal justice system and services for women are regulated by a largely separate and distinct policy framework, as are mental health services for children. As discussed above, the levels of intergenerational trauma and the high degrees of exposure to violence require a holistic response.

In addition to the conceptual weaknesses, service provision has always been hampered by a lack of human and financial resources (Jamieson et al., 2014). The problem was exacerbated during COVID as funds were repurposed and many child protection services were refocussed on humanitarian assistance (Budlender, 2020). Despite the high-level commitment to the NSP, it has not been backed with sufficient resources to improve services (Budlender, 2020). There are insufficient social service practitioners to provide the most basic level of implementation of the Children's Act (Jamieson et al., 2014). The majority of professionals within the criminal justice system lack specialist training (Centre for Child Law, 2022a) and although most of the clients seen at Thuthuzela Care Centres are children, they are not child friendly and offer containment counselling services only (Louwrens et al., 2016).

Therapeutic services in the shelter are strictly for women

Shelters are designed for women who have suffered GBV. As such, their programmes are tailored for the needs of women. However, shelter social workers are equipped to screen and refer children experiencing trauma to Masithethe, an NGO focused on children. Keeping the services separate allows women the space to focus on their own recovery:

> *Because the purpose of being here is for your (referring to herself) comfort, they are fixing you, but you have that anxiety, that which causes you that even if you are at home, it resurfaces at a time you don't want to talk but the child wants to say, "Mom, mom…" but you are still left with the annoyance from the abuse. (Women FGD).*

This excerpt shows that there is a lack of understanding about the effect of the violence on the child. In the context of shelters, referring children to be seen by a different counsellor to the caregiver at a different organisation can add to children's anxiety. This separation can also reinforce the idea that women's recovery should be prioritised and not their children's.

Adolescent boys are not accommodated in shelters

Shelters provide good rehabilitation for women and participants described the shelter as a nurturing space with children identifying it as a home even after they and their mothers have exited. A shelter stay is typically three months. However, women who still require support can motivate to stay for longer. There are, however, restrictions for children. Boys over the age of 12 are not permitted in the shelter. The reason for this is that as boys begin to hit puberty, they become both vulnerable to predation by women and a threat to the physical and psychological well-being of women and younger children in the shelters. Both women and children are negatively impacted by these age restrictions. Women feel guilty and worry about their boys who cannot be admitted into the shelter. Efforts are made to place boys between 12 and 14 with relatives or in alternative care:

> *Here with us, we take children, they all welcome. But for boys, we take in up to the age of twelve. Then we look for alternative accommodation for the child which is, we could take the child to the CMR (Christlikke Maatskaaplike Raad) or look for a relative that could take care of the child while their mother is here in the shelter. (Service provider).*

> *But for a 12-year-old boy, he is taken to a place where he can be safe such as a sister to the mom. (Women FGD).*

With regards to children, there are limited child protection services in East London (Buffalo City) . . . I don't know if we have a child and youth care centre here in East London. If we have one I haven't heard of it. (Service Provider).

The scarcity of child and youth care centres, facilities that provide alternative care to children who need care and protection, was one of the main areas of concern raised at the community engagements meeting with the Women's Network highlighting various factors impeding the licensing of homes for children experiencing abuse. While children could not comment on the scarcity of such facilities, they are aware of its functions which suggests that they are aware of the need for CYCCs:

Siyakhana (NGO) keeps children who have been abused, children, without parents, or children who are abandoned by their parents. So, it's a place where children such as those live. (Child participant).

To address the shortage of CYCCs in rural areas, technical assistance must be made available for applicants whose first language is not English when they complete DSD applications. These forms must also be available in African languages as applicants have varying exposures to technical support.

Negative consequences of excluding adolescent boys

Not all boys can be placed with kin or in a child and youth care centre, resulting in a range of negative consequences for the whole family. In the first instance, it causes anxiety to the women:

Isn't there something that Masimanyane can do to help, a child in that age is still young and like the girls, the boys also kept while we and the girls are together here? (Women FGD).

For the boys, it can range from feelings of exclusion to dropping out of school and stealing:

They must help the children as [she] has mentioned that it'll be appreciated if they could find a place for the children so that when one of them is in trouble they could go there because the one who could not live where they live (referring to shelter), that child will feel like nobody cares for them and that only the other children matter except him/her because it is good here in Masimanyane – the children tell stories of their time there. Look how my child was when we were arriving and was saying, "Mom, the place has changed, now there is a swimming pool." It is nice for him because he feels like this is his home. Yet we had to leave

the other child and the others would tell him/her stories saying, "Wow, us we have our beds there, we have our rooms". Now it's not nice for the one who wasn't included, and he even dropped out of school. (Women FGD).

Children witnessed the negative impact on the wellbeing and development of their siblings:

And children are also left behind by parents and they then steal people's things so that they can get money. They need money. (Child participant).

In one severe case the boy was left with the abuser, and was neglected to the extent that he started taking drugs and became a street child:

The age restriction is 14 years… I had to leave my 15-year-old with that criminal man because they said he is 15 years old, yet he was due to turn 15 in September. Look now, my child now is smoking drugs. I am told that ever since his father left he sees no purpose in life. Right now, he is roaming the streets as we speak. (Women FGD).

All children, irrespective of their gender and age, need support and safety. Boys should receive the same support as girls in situations where there is violence in the home. Early interventions for boys will disrupt the cycle of violence in later years.

Children's voices are not heard in the court

The Children's Act explicitly states that children have a right to participate in matters that concern them, including judicial procedures. In practice, children are not given an opportunity to be heard even during proceedings where decisions about their family are being made. Non-inclusion of children is rooted in hierarchical notions of being where children are not seen as fully developed people. Judicial officers rely on the cautionary rule to exclude children and without giving any consideration to the capacity of the individual. In the children's life-stories, it was apparent that the criminal justice system focuses on women and disregards children which causes anxiety and fear in the children. Recounting their experience with the court, one respondent expressed how they were not included in the decision-making about their father and were not heard:

Child Participant: I arrived there [at the court] and sat down. We were called with my mother and were told that my father was evicted from the house.

Researcher: Did you also say something in court?

Child Participant: No, I didn't speak (in the court)…Only my mother spoke...and my father.

Teacher training to believe children when they report violence and abuse

Children identified the school as an important setting for seeking help. One of the child participants shared that, *"children get beaten at home come to school and when they arrive the teachers see that when the child is busy writing schoolwork and sees that they are not writing well and if it's a child who usually writes everything well they wonder why they didn't write well on that given day"*. While it was reported that teachers intervene by tactfully engaging with parents concerning children's mental health by *"pretending like that they didn't notice anything while they (teacher and child) are talking and then write to the person (parent) who hit the child for them to read it"*, there is concern that schools silence children by not believing children when they report violence and abuse (Titi, 2021).

What was also significant is that children know that teachers do not believe them and realise that teachers need help to adjust their attitudes, but that this must go hand-in-hand with assisting children who are (a) from violent homes and (b) those how are victimised by children who bully others:

> *You can convince the teachers and you can just have sessions for the children – those who are being abused and those who abuse others [referring to child on child abuse as bullying] (Child participant).*

The child continues to explain how children model violence in the home in their social settings and how boys are more susceptible to exhibiting violent norms:

> *You can explain to the children at school and start with the ones who is a bully and tell them that bullying is not right because if s/he is growing up that way they may do it to their children, to your wife thinking that it is the right thing to do but it is not. Because if done to another child, they may not be able to handle being bullied and take their life, you see? So, it is best if they don't bully others and instead speak to someone. Maybe asks someone for help. (Child participant).*

Interviewer: What do you think we can do for that child?

> **Child Participant:** *We could start by speaking to the teacher so that when the child approaches them, they will understand that children do get beaten and how it works instead of thinking that the child is just being silly.*

5 INTEGRATED SERVICES

INTEGRATED PSYCHOSOCIAL SUPPORT SERVICES FOR PARENTS AND CHILDREN

Integrated service provision means taking account of the needs of women and their children, irrespective of who the index patient is, and then developing a care plan that ensures healing and recovery for both. Whilst this principle is widely accepted, there are divergent views on how the needs of women and children should be accommodated.

Shelter and accommodation

Women want their children to join them when seeking shelter. The exclusion of children because of age and gender, in relation to boys, is a barrier to some women who want to access shelter services:

> *I think joint services for women and their children would be right. It's not nice when we are admitting a parent in the shelter but discover that their child is a boy and is 15. We can only admit boy children to the age of 12, so if he is 15 or 14 or 13, we can't admit them, but we can admit the mother – now imagine how the child feels and how that mother feels. Then at times you find that the mother can't stay here although she needs the services, but she cannot because she is thinking about her child whom she will be leaving behind. If it's combined, then we can accommodate the child. (Service Provider).*

Psychosocial support

In the community dialogues (June 2022) children were consulted separately to confirm the study findings. They said that they want joint sessions with their mothers with a space where they could speak to their mothers and tell them how they feel. Some women agreed:

> *I think that it should be combined because for a child to be adequately supported I must also be supported. So, if the service must be separate, it should be that we*

are both called in and a conversation should be had about the direction of the process. Although the focus will be on the child's mental health support, I should also be called in so that I too receive the mental health support. (Women FGD).

It is supposed to be together because for the child to be assisted I should also be assisted. (Women FGD)

But many women want the time and space to heal before they can engage with their children's trauma and support them to recover:

Because the focus is on fulfilling you, you are the one being fixed. (Women FGD).

No, they [women and children] must be separated – it must be addressed separately. (Service Provider).

I mean, we should not be combined when we are getting treated for our situations as mother and child. The child could be given their own counselling, and I could also receive mine. (Women FGD).

One participant cautioned against the developmental appropriateness of combined mother, child and father therapy, stating:

Support for the child and the mother should be separate because there are things that are beyond the children, and when those issues are posed as questions to you or when you speak about them you will see that they are not suitable for the child. (Women FGD).

However, women acknowledged that children know more than parents are aware of:

For example, I was shocked recently when my child agreed to maybe speak about their dad's issue and say, "You both thought I was asleep sometimes". The child is 12 years, they are mature, "you sometimes thought I was asleep, I'd hear dad saying this to you". S/he doesn't say what it is s/he heard while telling me and I'd be perplexed. (Women FGD).

It was apparent that while women were apprehensive about joint therapy, they thought it was necessary to have a space for reconciliation:

So, if it is going to be separated, we are supposed to be called in together here and we get addressed together so that should there be any misunderstandings between us these can be resolved, and someone can help make us understand each other so that we can get required mental health support. (Women FGD).

Developmentally appropriate child trauma support

Most service providers acknowledged the intergenerational effects of domestic violence, with most adult victims of domestic violence also having been exposed to violence in the home during their childhoods. Services were however still reported to not have a child focus.

> *When the client is new, we provide counselling, then for kids, although the child did not directly experience physical abuse by the perpetrator, indirectly, the child is still affected, and they get traumatised by that. For the child, I will then have a play therapy session to assess how badly they have been affected and then refer them to Masithethe who takes children from the age of 7 years. (Service Provider).*

Some women reported that their children received no form of support to help process the trauma of exposure to violence and emphasised the need for developmentally appropriate therapeutic services:

> *I am not sure about the restrictions according to age, but surely it should be that a 6- and 19-year-old are not catered for together. (Women FGD).*

The study found that separate systems of treatment and care have been developed for child and adult victims, with inadequate attention being paid to the psycho-social needs of child victims of domestic violence in the centres that provide care and support to women. These services, women said, must be developmentally appropriate to fit with the maturity of children.

Thuthuzela Care Centres do not offer support to children of victimised women

Furthermore, while shelter services reportedly refer children to organisations working with children, women from the TCC site reported that TCCs do not offer any form of trauma support to children whose mothers or caregivers experienced violence. This, they said, is the same for mothers whose child has been a victim of violence:

> *When something happens to the mother, that child is not brought here [referring to the TCC] and when something happens to the mother, that woman is not brought here for mental health support as something has occurred to her child. We don't have such a service, you see? (Women FGD).*

Children are left behind in services that care for and provide support in response to IPV. All children irrespective of age, gender and location are entitled to support with their recovery.

Ongoing support for mothers after leaving the shelter

To help children, we must support women in their healing journeys to cope. Shelter stays are approximately three months, and, in that time, women receive support from the shelter in caring for their children while they rehabilitate. Women said that they need support in caring for their children while they are trying to support themselves after exiting the shelter:

> *But you have that anxiety even if you're at home (having exited the shelter). You go back to that moment and find yourself not wanting to speak, and the child wants to say, "Mama, mama", whereas you are still having that agitation, you see? So, the child doesn't get that [care]. (Women FGD).*

Despite opposing views about the model for combining mother and child therapy, there was consensus from all study participants that children must be integrated into rehabilitative and therapeutic services that support their mother or women caregivers who experienced violence. Participants agreed, as guided by developmental appropriateness measures, that children and their parents should receive combined therapy or counselling. Such a space will give children an opportunity to voice out their experiences to their mothers and fathers respectively with the support of a skilled therapist, counsellor, or social worker. Providing a safe space for a family conversation about the trauma is not disregarding women's trauma, nor is it undermining their difficult pathway to healing and recovering but would support the reconciliation of the family (if this is what they choose) and the children's relationships with both their parents.

Facilitated sessions to reconcile fathers and children

Some children expressed having given up on their fathers and others wanted their fathers in their lives despite the "hurt" they caused their mothers. They said that bad husbands are sometimes good fathers. Children acknowledged that what they have been exposed to because of the violence their mothers experienced causes them harm:

> *When women are receiving services, children are asked some questions [by the doctor] and get a little help. The child is getting help for having seen things that his father is doing to his mother. (Child Participant)*

In chapter 7, we see the importance of dialogue among African families in problem-solving and in ensuring justice. In line with this, women supported a reconciliation process between children and their fathers:

> *I think that after they have counselled the mother and the child, they can bring the family together including the child. I don't know whether it won't make the child*

regress, maybe if the child can be given a platform where he/she can share her/his parents wrong-doings, and then the father can admit that he was wrong and show remorse. Then maybe from that family session a child can trust the father again [and] reconcile with the father. I wish the father can ask for forgiveness as this father used to beat the mother in the presence of the child and this may cause the child to have anger and hate against the father. (Women FGD).

Women and children expressed a need for a space to speak together to find harmony and reconcile their differences; this is in line with African ethics and values. Furthermore, the potential effect of the father's absence on the child's life should be considered. Reconciliation with the father is important for the development of the child and should be sought irrespective of whether parents reunite. The deciding factor should, however, be what is in the best interests of the child. This raises questions about whether this would be in the best interest of the woman and, if so, how this can be navigated so that the child's relationship with their father is harnessed.

6 LANGUAGE AND CULTURE

People and languages in South Africa

IsiXhosa is spoken as a first language by more than three quarters of the population in the Eastern Cape. The study interviewed service providers in the Eastern Cape who offer services primarily in isiXhosa:

> *[Psycho-social services are offered in] isiXhosa and English. I do not know how to speak Afrikaans so when a client is Afrikaans or Indian, I speak English and if they are a Xhosa-speaking person we speak isiXhosa. (Service Provider).*

Therefore, although isiXhosa is the language mostly spoken in the Eastern Cape, non-Xhosa speaking clients and non-South African nationals are accommodated through the medium of English:

> *Most of the clients that are coming to us its uh Xhosa and for others we're using English because there is foreigners, women that are coming to us [as well as], coloured women and white women, but it's a limited number [of white and coloured women]. (Service provider).*

Home language services are essential to ensure accessibility

Service providers reported mainly servicing clients from low socio-economic groups, describing them to be mostly isiXhosa speaking with few English speakers:

> *Mostly, people who come to us are those from disadvantaged areas and speak isiXhosa. They also come even if they speak English, but they are not many. But now as there is this thing of having people from neighbouring countries, we also get people from neighbouring countries with languages we don't know at all. But now, sometimes that person comes with an interpreter that interprets in English and the client will be speaking in their own language. (Service Provider).*

The above excerpt shows that in the absence of a service provider who speaks the

same language as the victim, victims experience a limitation in services and are at risk of having their experiences diluted due to the interpretation process from one person to the next. This carries the risk of additional trauma for the victims as they must tell their story multiple times to different people. Language and communication barriers therefore affect both clients and service providers, which emphasises the need to communicate with clients in their home language to ensure that information is efficiently and effectively relayed and received. Challenges with language and communication were further reported to extend beyond South African language and cultural differences to non-South African language groups and cultural representations given the growing transnational families in the country. Later in the discussion about language as culture we shall address the importance of security, comfort and relationship building with service providers as spurred on by language.

Culturally specific articulation of familial relationships

Ngugi wa Thiongó states, "Language, any language, has a dual character: it is both a means of communication and a carrier of culture" (1986, p. 13). Language is also central to African people's self-definitions and has a key role in conveying the meaning of experiences (Cakata & Segalo, 2017; Titi, 2021). The below excerpt shows how understanding a language can help understand family construction and relationships. A direct translation of the text in the excerpt from isiXhosa to English in reading of the word *uSisi* may be mistaken as telling the listener about how children are positioned within the family. This is because the term "older sister" is used to describe a sister in English. But, an understanding of the isiXhosa culture tells us that *uSisi* can also describe a mother where the child was raised by her grandparents:

> *In my case, my stepfather waited for my mother to go to church. I decided not to go to school that day so that I would be home when my older sister (uSisi) [actually biological mother] returned from church (Woman FGD).*

The English language transmits English or Western culture, and non-critical translation of isiXhosa into English may lead to misinterpretation and misinformation. In the first instance, the participant refers to her biological mother as "mother" to clarify her family situation. She later switches and refers to the same character in her story, which is her biological mother, as *uSisi*. We know this because the participant provided the context when she recalled what her stepfather did in relation to her biological mother, and this relationship was clarified by her identifying her stepfather at the beginning of her story. Her use of the word *uSisi* in reference to her biological mother speaks to the relationship they have. This is normal in African culture. The example shows how important it is to understand the nuances of speech and language and the complexity of how African's

experience their relationships, which has implications for reporting violence and testifying in court where English convention defines a relationship strictly in biological terms.

Language as culture

From *isihlonipho* we also see that language as culture carries three aspects, namely, collective memory, moral values and identity. Language as culture is a "collective memory bank of a people's experience in history" (wa Thiong'o, 1986, p. 15). Cultures also embody moral, ethical and aesthetic values; these are aspects through which people from a community view themselves and the world. These cultural lenses are passed on through generations through language. This is how groups of people form identities and define their sense of membership among other humans (wa Thiong'o, 1986). Similarly, isiXhosa speaking people have isiXhosa culture which is what is known as *isintu* culture. Isintu has unique communication nuances as foregrounded by(Cakata & Segalo, 2017). Language therefore carries specific forms of expression and is a cultural expression as it is a "collective product constituted by the values, beliefs and perceptions, symbols, and other humanly created artefacts which are transmitted across generations through language and other mediums" (Misra & Gergen, 1993, p. 226).

Isihlonipo sabafazi: Women's language of respect

The Nguni people practice what is called *isihlonipho sabafazi*, which is a cultural language of respect for women. *Isihlonipho* is a sociolinguistic phenomenon ingrained in the customs and traditions of the Nguni women that prescribes linguistic and non-linguistic applications for respect and avoidance that women must adhere to (Bongela, 2001). Participants expressed that the court, which is regarded as the pathway for justice, disregards the South African cultural context by prescribing the English language which contains Western culture. For example, women shared the difficulties witnesses face when having to articulate abuse, as they are culturally prohibited from saying certain names and using certain words (Community engagement, June 2022). This is because, linguistically, *isihlonipho sabafazi* involves avoidance, and the replacement of, certain phonemes occurring in the names of a woman's male relatives, as well as female relatives who have a kind of honorary male status, like the mother-in-law. Finlayson (2002) provides a hypothetical example from English to put this phenomenon into context:

> *One could consider the following situation: Robert and Grace Green have three children – William, Joan and Margaret. William marries Mary and takes her home to his family. Here she is taught a new vocabulary by Joan, her sister-in-law, and where necessary is advised by Grace, her mother-in-law. This is because from now on she may never use the syllables occurring in the names of her husband's family, i.e., simplistically rob, ert, green, will, may and grace. Thus, for the*

sentence 'Grace will not eat green yoghurt', Mary would have to say something like: 'The older daughter of Smith refuses to eat grass-coloured yomix'.

Service providers reflected on the difficulties with court preparations where the victim must testify against an alleged perpetrator in the criminal court of law (Community engagement, June 2022). Reported challenges were recorded in helping victims learn the Western language of expression which often goes against *isihlonipho*, both in the linguistic and non-linguistic form. Participants said that the 72 hours they were given to prepare victims for their court appearance was not effective. The linguistic part of *isihlonipho* further extends to restricting women's sexual rights in both action and freedom of speech. Women are taught to avoid words relating to sexual relations and sexual intercourse, including the naming of body parts. When referring to words like the penis, breasts, and vagina, they must use euphemisms, for example, *unduku ende kaTata* (father's long stick) is a penis. Men do not have to follow the same restrictive conventions. A man can use the word *isende*, testicles, whereas if a woman were to do this, she would be considered vulgar (Thetela, 2002). This complicates court proceedings, given that women's statements are considered inaccurate or nonsensical when translated into English. However, witnessing and testifying in the isiXhosa language, according to *isintu* cultural protocols, would enable women to express themselves comfortably and be heard.

In intercultural interactions, particularly in spaces like the court, where English is used and Western etiquette is the norm, behaviour and misinterpreted communicative nuances may therefore relay an unintended message and carry negative consequences for witnesses. The non-linguistic applications of *isihlonipho* extend to style of dress, posture, and other customs, such as those relating to wives (umakoti) and newly wedded brides in the process of initiation into married life (ukuhota) (Bongela 2001). For example, a newly wedded bride is not to make eye-contact with other men, which may not be helpful for her case in a court of law, in addition to non-verbal gestures such as frowning, smiling, and making eye contact, which are part of intercultural differences in acceptable communication. Ntuli (2012) provides an explanation:

Much as the following nonverbal behaviours may be acceptable in some cultures, in traditional African communities, they are frowned upon: beckoning to someone, pointing at someone with one finger, looking someone straight in the eye, passing things, especially food, with the left hand and so on are unacceptable.

While these customs work against gender equality from a Feminist lens, applied through an African-centred lens, they confirm the existence of African women and are useful in understanding women from non-Western cultures.

Language as communication: language matters in therapeutic services

Language as communication has three elements: (1) production of life through cooperation, (2) speech, and (3) written words. People speaking a common language have the advantage of ease of expression between them, whether by nuance or through verbal communication. Speech, or verbal communication, is about the process of producing communication and may differ from written language as written language is not necessarily produced in the way it is spoken (wa Thiong'o, 1986).

From the description of *isihlonipho*, we can see that the way in which people speak and carry themselves is informed by culture. Effective psychological and social interventions therefore begin with the recognition that culture is highly relevant to people's behaviour (Jiang & Pretorius, 2010). In the interviews, service providers put significant value on the quality of their communication with clients and highlighted the importance of good interviewing and empathic skills for rapport building with victims of violence. Given that communication is an interactive process and stories are co-created, compatibility in linguistic verbal communication is helpful to the process:

> *Uhm, they'll still be emotional about what has happened, they'd maybe be crying as they are expressing what has happened or not even what has happened recently. Some are starting from the beginning, which is years and years back, so listening skills, empathic understanding towards the client and being able to place myself in her shoes and understand the trauma then being able to build with her, as my client. That's how we build rapport. We will talk. On the first or second session, we try to work on goals she'll focus on or things she will do while here [at the shelter] and will achieve while in this space for three months. So, it's important that I am able to establish trust in the first session so that my client is comfortable. (Service Provider).*

Role of language and the articulation of abuse

The study found that verbal communication in isiXhosa is important for effective service delivery and that translation weakens testimonies. The ability to communicate in the spoken language of clients gives service providers insight into the speech and communication nuances that would otherwise have been misinterpreted or misunderstood. This is also true for fieldworkers and researchers working in communities. For example, women and children used the word "bully" to describe violence and the experience of their victimisation. In telling his story of how he and his mother came to live at the shelter, one child said:

> *They were keeping us there so that our father can't bully us (Child participant).*

When s/he bullies other children at school, they usually see their father do it when he bullies his mother (Service Provider).

Participants, however, acknowledged the role of bi-lingual translators but highlighted more disadvantages than advantages, citing sense-making and misrepresentation as some of the consequences of receiving services in a language that is not their first language:

…the person who speaks your own language will understand you better than the one who doesn't. Let me put it like this, if I tell you that at my school I get hit and this and that is happening, and they are making fun of me, it'll be better if I tell it directly to a person than if it is retold to another person who will not say it the way I mean it, (Child participant).

The issue of language and culture in poor service provision and implementation was particularly reported to be a problem in the SAPS, given that the service is predominantly made up of English second language speakers. This inadvertently creates miscommunication with women and children who access services as officials' incorrect use of language arguably leads to further gaps in service delivery through misinformation (Community engagement, June 2022). In addition, it was claimed that when experiences are translated into English, the accounts lose significance, and the intensity of the occurrences described are not captured:

Because it is maybe a white person [in reference to a service provider], a white person only speaks white people's language, so there must be a translator for isiZulu, seSotho or Afrikaans – all the languages. Because you may find that you don't understand English so now if you yourself are going to change and speak English, you may not make sense and people won't understand you [participant laughs] and some people get dramatic thinking you're insulting them, (Child participant).

Gobodo-Madikizela (2015), narrates the story of a woman who "'dared' to wail her pain and suffering into the large hall during the Truth and Reconciliation Court process , giving voice to her pain, bearing witness for all to hear, even those outside the hall". What is significant about this retelling is the place in which the woman in the story "dared" to cry out loud, in a place of order and where such behaviour could be construed as uncontrollable, disruptive, and dramatic as the participant shared in the excerpt above. This speaks to the inherent Western culture of the court and confirms assertions that the criminal law spaces post-Apartheid merely replaced Black bodies and continued with White-informed proceedings that were merely made to accommodate other languages and cultures but ere not designed for them (Cakata & Segalo, 2017). Notably, the South

African population is a trans-lingual country with English and Afrikaans at the centre due to the educational system being English (previously Afrikaans), and in part because of the ingrained inferiority associated with indigenous languages (Cakata & Segalo, 2017). In service delivery, language plays an important role that should not be undermined as it diminishes dialect complexities.

Language as a barrier to accessing services

SAPS taking statements

Participants reported that police officers take their statements of abuse in isiXhosa, which are produced in isiXhosa speech language and the police officers translate those statements to English when writing the statement, but the written statements produced are often distorted. The distortion reportedly arises firstly from the fact that there are words which cannot be translated. Secondly, in comparison with isiXhosa, participants in the community engagement (June 2022) reported English to be too polite and inexpressive and so devoid of the intensity of the original, sanitising the whole account. At the community engagement (June 2022), participants further expressed their frustration over court applications being rejected when written in isiXhosa because their testimonies were deemed to be incomprehensible. Constitutionally[3], South Africans have a right to speak and be spoken to in the language they fully understand, particularly during court proceedings. However, a directive from the Chief Justice made English the only language of record in the country's courts, so rather than using isiXhosa - the most widely spoken language in the Eastern Cape - proceedings are conducted in English and the courts provide an interpreter.

Language in court proceedings

Service providers expressed deep concern about the way in which African people's cultures cannot find expression in the court of law. This should be expected given that the South African legal system is based predominantly on a mixture of civil law (Roman-Dutch) and English Common Law principles (Pienaar, 2012). The courts draw on case law and statutes that are in English, which therefore propel court proceedings to follow Western cultural etiquettes as seen, for example, in the dress code of the court. Participants agreed that the court should accommodate isiXhosa and other indigenous languages. The constitutionality of the court processes only being conducted in Afrikaans and English was questioned and challenged:

> *Here at a court, as I'm saying that I'm based at a court, all of the forms here are in English. The most vulnerable people that come to ask for the service here at a court are the illiterate people and the elderly people, you know, so…(Service providers).*

Cakata and Segalo (2017), in their investigation of obstacles to post-apartheid language policy implementation based on insights from policy experts, found that the use of English as the only legal language continues to inferiorize indigenous language despite what is in the Constitution, which signals a big gap in the implementation of laws. This treatment of the English language with superiority at the expense of citizens whose first language is an indigenous language has its roots in the colonial era where English and Afrikaans were imposed upon indigenous people as the languages of professional life. In the words of Cakata and Segalo (2017, p. 327), "languages make experiences matter" and not implementing the language policies is criminal.

While children who participated in the study are multi-lingual and candidly engaged in the English medium, they were generally of the opinion that all services, including those of the court, and when people report and provide testimonies about violence, should be conducted in the home language because:

> *"It is easier for one to express themself in isiXhosa when feeling hurt" (Child participant).*

Participants shared how they want to be able to express themselves authentically in their own language, so they can be free to say what they mean in the manner that they mean it without it being diluted by translation into English (Community engagement, June 2022). The community dialogues held at both research communities highlighted that the translation of testimonies from isiXhosa to English weakened both the testimony and the application. For example, during the community engagement workshops, participants reflected on how the isiXhosa equivalent for the word "perpetrator" is *"umenzi wobubi"* (a doer of bad things) whereas a word like "*ubundlavini*" (being animal-like) correctly depicts what participants mean by perpetrator. This suggests that when giving testimonies in English, the accounts are experienced as sanitised, in addition to the possibility of limited English vocabulary to articulate the intended account.

Speaking a common primary language simplifies communication and ensures the literal meaning of accounts and the intensity of the experience. Verbal speech and a good written command of the language as illustrated in the examples above ensures the meaning of statements is retained and misinterpretation of accounts is minimised so that the outcome of services provided to clients are not negatively affected.
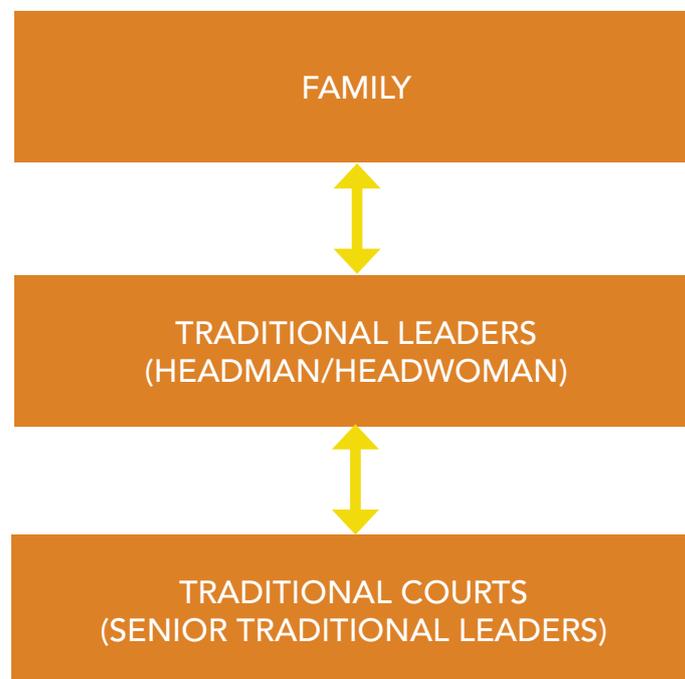
An additional challenge with taking statements by the police is the fact that police insist on writing for complainants. Participants felt being forced to use English when giving statements sanitises experiences of violence, and they wanted their statements to be taken and recorded in their indigenous languages. The first problem is that when

statements are mandated to be in English, some people are not able to read and verify the validity of the statement written on their behalf. Secondly, in rural areas, the problem with using English is that both the police officer and victim are not first language English speakers. Consequently, the translation of the complainant may be at best literal or at worst incorrect. Forms and orders are also in English, creating misunderstandings, misinterpretation and misinformation by police and women. All these factors leave women unprotected by the law because of not having understood procedures.

7 SOCIAL AND CULTURAL PROTOCOLS FOR DEALING WITH VIOLENCE

African law begins in families

Figure 2: Procedure followed in customary law

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┌─────────────────────────────────────────┐
│                 FAMILY                   │
└─────────────────────────────────────────┘
                    ↕
┌─────────────────────────────────────────┐
│          TRADITIONAL LEADERS             │
│         (HEADMAN/HEADWOMAN)              │
└─────────────────────────────────────────┘
                    ↕
┌─────────────────────────────────────────┐
│          TRADITIONAL COURTS              │
│      (SENIOR TRADITIONAL LEADERS)        │
└─────────────────────────────────────────┘
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(source: Department of Justice and Constitutional Development. (2008) Policy Framework on the Traditional Justice System under the Constitution. Pretoria: GOSA, p.32)

The traditional justice system commences at the family level. In Black families, the family is the first point of addressing violence in the home, through a family meeting in which both parties get a hearing. What is significant about this is that if there is no meeting, the victim will not be heard. Where family members live in the cities, if necessary, the meeting is arranged for when everyone goes to the village. In her lecture on African Law, Zethu Cakata (2017) explains this process by saying, in the Nguni language, such meetings are called *inkundla* (court) *yekhaya* (of the household), and everybody has *isikhundla* (a seat). In such meetings, nobody is excluded, including children, and everybody's contribution

is welcomed. The excerpt below was extracted from a story in which a woman describes her experience of her father's attempt of sexual assault on her when she was a young girl. The importance of family in resolving domestic disputes is clear:

> *My mother cried just for a moment, and the whole family was called for a meeting to talk about this, and he still denied it. My sibling said, "I wasn't sleeping when you called her to the bedroom, I heard you. (Women FGD - emphasis added).*

In contrast to other studies where children are seen and not heard in family meetings (Jamieson et al., 2022), here, we see that the whole family, including the children, are part of the family meeting and the contribution by a younger sibling challenging the incorrect statement her father was making signifies that all members of the family can contribute to meetings. The meetings are held through a process of speaking and conversing which in isiXhosa is *ukuthetha*, where *ukuthetha* (speaking or conversing) leads to *umthetho* (the law). This is to say, no decision affecting the family is taken without the family deliberating over a matter.

However, victims are often not believed when they disclose to family members or the families protect the perpetrators (Jamieson et al., 2017; Mathews et al., 2016; Titi, 2021). This silences victims:

> *You know what happened after that, my mother said, "How can you!!! You are badmouthing my husband, you even have a boyfriend" and that's how it ended. … That was my mother who said I am badmouthing her husband, it was never discussed. I ended up leaving my mother with her husband, her children and I went to stay at her family house [kokwabo]. That is why I am saying parents have issues because [they] hide these things and protect their husbands (Women FGD - emphasis added).*

The above case exposes some of the tensions that can arise when families address alleged sexual violence against a child. We see how the family was split, with the siblings supporting the victim, their sister, but the mother protected her husband. Given that this example is a retrospective account by a woman who experienced IPV at the hands of her partner, we see that violence for her began during her childhood.

In the following example we see how family members take sides and protect the perpetrators of violence in the home by silencing the victim, that is, not allowing a process of *ukuthetha* (making the law), a process of speaking about a matter with the whole family including the victim:

I was trying to talk to my older sister-in-law who is a social worker, so I tried to talk to her and told her, "Hey! Your brother did this, this, this, this." She said, "Okay, I'll go home in December... We will go home in December when we get home, and I will talk to the both of you." I said, "Okay." I thought since she is a social sorker and an older sister she will speak out and be heard. [She said she] asked him about everything I told her, and he said he didn't know any of that. So, I just looked at her and realized I was telling her because she is his older sister, and she is a social worker. I did not expect that she would call her brother aside and address him without me, he will obviously deny everything. I noticed that the blood is thicker than water. (Women FGD).

In the example above, we see that the victim followed the correct channels for family intervention but is silenced by another woman, being denied a platform to speak. If there is no family meeting there is no legitimate audience to hear her complaint. This is also an example of how women sometimes protect patriarchy and are complicit in the victimisation and abuse of other women.

The injustice of violence against women can be argued, therefore, to begin in the family and to be perpetuated by other women. Given that in the examples above we see how a mother and a sister-in-law, whose profession is in the area of social development, have the role of nurturing the child and as a gate-keeper in family decision-making, but both are actively reinforcing the oppression of women and children by protecting violent men (Knowles, 2019). The complacency of women in the oppression of other women – and children – should, however, be interpreted through lenses of patriarchy where we consider how issues of power and male domination interplay in the subordination of women. This is to say, while African families have their own ways of resolving family conflict, they are still governed by broader systems of power and politics that supersede "racial", ethnic and cultural differences.

According to bell hooks (2004), "Patriarchy is a political-social system that insists that males are inherently dominating, superior to everything and everyone deemed weak, especially females, and endowed with the right to dominate and rule over the weak and to maintain that dominance through various forms of psychological terrorism and violence". Patriarchy not only signifies the men's authority over the family system but is also the driver of gender inequality through economic power where financial dependence, through women's unemployment, is perpetuated by the impact of capitalist development on women's oppression. For women to be liberated therefore we require social transformation, where women will no longer be economically dependent on men in addition to advancing social systems where women can exercise agency free from the control of male domination (Kocabiçak, 2013).

The role of the traditional leaders and traditional courts

According to customary law, when matters are not successfully resolved in families, such cases should be brought to the community leader *(uSibonda/Kwa Bhodi)*. The community leader is part of the traditional council and serves under a chief. If he or she is unable to resolve the dispute, then it can be referred to the traditional court. And despite the literature highlighting he potential benefits of this pathway, for example their accessibility, geographically and socially; their affordability (the low transport costs, the minimal court fees and the absence of expensive legal practitioners); simple and informal procedures; their use of local languages; and their speedy resolution of the matter and application of restorative justice i.e., no custodial sentence (SALC., May 1999), it appears that women are choosing other pathways in their search for justice.

From participant accounts, it was evident that rural communities recognise that the traditional leaders should be a first point of reporting violence in the village. However, in practice, some approach the SAPS directly, whilst some women involve both:

> *[Reporting starts] at the police station and police officers, also Kwa Bhodi (community leader) because we are people of the village. They always start the process Kwa Sibonda (the sub-headman). (Women FGD).*

This suggests that women want to respect their customs, but they also want justice, so some still pay homage to the leaders by following traditional protocol whilst others go straight to the police:

> *Usibonda (the sub-headman) or uBhodi (community leader) is the one who passes it on to the chief, then when it gets to the chief, then the police are called, you understand? But in my case, I did not call the community leader and chief, I realized that what was required of me was to just call the police. (Women FGD).*

There was a general sense of women's dissatisfaction with the local leaders' leadership. Women further observed the chiefs' perceived powerlessness over the police, given that the chief will still refer the case to the police.

Women's apparent indecision on whether to approach the police or traditional leaders as a first response can be answered through the decolonial feminist framework. Colonisation, urbanity and capitalism have contributed to many Global South women living in an in-between world (Lugones, 2007, 2008). Inculturation – for example through the education system, religion and urbanisation – in the modern world is a consequence of coloniality and creates ambiguities and contradictions between indigenous worldviews and contemporary social and cultural life. A decolonial feminist framework therefore aids in

understanding these in-between worlds and identifies the complexities of the women's lived experiences and how to provide services to women in indigenous African contexts (Manning, 2017a, 2017b, 2018).

A need for gender transformation in the traditional council

Service providers, on the other hand, expressed great dissatisfaction with the cultural etiquette and protocol that must be adhered to in the traditional court from a gender perspective. For example, strict protocols and dress codes apply; women must cover their heads and wear long skirts. Such rules are inconsistent with gender equality. They also support patriarchal norms where men often asserted their gendered power over women:

> *So, if you are going to do the event or you are you having any meeting in those villages, and then you will find that the community will say you cannot enter [in] to the headmen's yard if you a woman you are wearing the pants or you don't have a doek so, sort of those things, so we're still struggling in Transkei. (Service provider).*

Traditional courts should promote and protect the representation and participation of women, to give effect to the constitutional right to equality. But the Traditional Courts Bill has been stuck in Parliament for over a decade so there are no written rules, and without clear prescripts, this is a dangerous terrain where women can be marginalised, and their experiences minimised. From the excerpts, it appears that women are not represented at all in traditional leadership. Gender transformation is important in all spaces so that different groups can feel seen and be heard:

> *The chiefs are also male, there are no female chiefs. Except if there can be a female chief it would then be better. A chief who is a man will not discuss matters from a woman's perspective. What would maybe work for them is if, for example, a woman is being abused, the man might tell them what they should have done and how they mistreat a man. (Service provider).*

Even though traditional courts have a place in culture and tradition, the chiefs that participate in them carry with them the prevailing social norms whereby violence, particularly in the home, is still tolerated within boundaries and in which, under certain conditions, "punishment" by the husband is allowed. For women to use these courts to get justice, we first need to tackle gender equality and the social norms that promote an inequitable society, or women will be continued to be silenced and patriarchy promoted in untransformed institutions.

Although participants expressed a loss of faith in the power of traditional leaders[21] and dissatisfaction with the patriarchal protocol of the traditional court, at the community engagement workshops (June 2022) a call was made for the traditional council to be included as part of the GBV sector to improve the coordination of responsive services. Participants expressed faith that including the traditional leaders in the GBV sector is possible given the transforming ages of traditional leaders whom they believe will be more understanding of the challenges women face due to problematic gender norms. There are some views that the traditional leaders have a role to play in the management of sexual offences, and that Department of Co-operative Governance and Traditional Affairs and the National House Traditional Leaders should support and train individual leaders. Women do not just turn to the statutory authorities. The local communities expressed more faith in the church than they do in traditional leadership:

> *About traditional leaders, what usually helps to a degree is if somebody finds themselves in a violent situation, and they are a believer (someone who goes to church), and they speak to their reverend, the reverend facilitates that they talk to someone. But this doesn't always really help the situation, but in the villages, the chiefs no longer have power. (Service provider).*

These findings need to be explored further as the intersections research from the Western Cape showed that women themselves are conflicted and hold views that are gender inequitable (Mathews et al, 2022).

Religion and religious institutions

Africans are raised with exposure to religion, spiritual convictions, and a belief in God or a higher power (Phasha, 2010; Sanchez & Carter, 2005). Spirituality has been associated with families' ability to negotiate successful adaptation after a crisis (Greeff & Loubser, 2008). Religion and spirituality have also been found to help children make sense of traumatic experiences (Titi, 2021). In contrast, it is also noted that religion, across affiliations, faith groups and racial communities, is a key institution in perpetuating harmful patriarchal attitudes and norms that encourage silence, and the acceptance of female subjugation (Gordon, 2008; Kobo, 2018; Messina-Dysert, 2015; Sigsworth, 2009). Participants expressed differing opinions about religious institutions (churches) in general, with some claiming that they play an important role in intervening in cases of GBV, providing counselling, home visits, and providing women with a safe space to discuss their experiences. Others saw them as placing the sanctity of marriage over and above the welfare and safety of women.

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21   Traditional leaders ascribed this loss of faith to coloniality and the Apartheid regime degrading their status
      https://static.pmg.org.za/000606Contralesa.htm

Awareness raising, support and counselling

Previous studies found spirituality to complement the biopsychosocial model of practice in social work (Belcher & Sarmiento Mellinger, 2016). As such, NGOs report that they partner with religious institutions as part of their outreach and awareness campaigns about GBV:

> *We do work with churches; we do not exclude them. We visit churches and ask for space to talk about women and child abuse. (Service provider).*

Interestingly, participants did not speak about their experiences with approaching African spirituality for reporting or addressing violence and reflected more on the role of Western religion. Participants reflected on the positive support that they received from the religious institutions in the form of accessing services, providing psycho-social support and in organising awareness campaigns:

> *In church, you get mentors, and you speak about all your problems to the mentor, so the mentors play a role like a social worker where they comfort you so that your situation does not hinder your mental health. (Women FGD).*

> *Once you feel ready they encourage you to go to the police to report – they accompany you to the police station. (Women FGD).*

> *The church I am attending plays a vital role. I am ZCC (Zionist Christian Church), at ZCC the children have a Sunday School, and the Sunday School has a teacher and social workers. Even during the holidays, the mothers host a gathering in the middle of the month. (Women FGD).*

Despite the stance taken by the Church, some women reported being disappointed with the outcome, as there is no compulsion for men to engage. For example, one man simply resolved to no longer be part of the congregation that stood up against his violence:

> *Leaders of the Word try to help, for instance, my church would come to my house to intervene and stop the Gender-Based Violence, they tried to mend your marriage, but the disadvantage for me was that this man stopped going to church. (Women FGD).*

Religious institutions are founded on Christian reconciliation, for example, the church's focus on re-establishing harmony in society and families (Breed, 2015). Our data shows that some victims receive assistance and support to address violence in the home and efforts are made to hold violent men accountable for their actions.

Preservation of the family at the expense of women's wellbeing

While there were good reports about how religious institutions respond to violence against women, religious institutions were also perceived as not adequately addressing IPV but instead focusing on reconciling marriages. This was a major concern for service providers who described religious leaders as silencing victims:

> *They sometimes do not report if they told their church leaders, church leaders will say to their congregants that such should not get out [of the church] it should remain inside and reconcile them [the couple] thinking that the matter is resolved only to find that the issue is continuing as it was. (Service provider).*

Others believed that the church is one of the institutions that silences victims because of its investment in marriage. Women are silenced when reporting violence as a means of restoring marital relations. Participants shared experiences where the church focussed more on preserving marriages than on assisting victims to deal with the violence or leave abusive homes:

> *It is so painful when you're attending a wedding at church and the pastor or whoever is announcing the newly married couple is also reviving all married couples present at the wedding, encouraging them to in married life. Such moments trigger memories about your partner whom you have left at home and who will continue violating you. (Women FGD).*

The concept of reconciliation is seen to be linked to *Ubuntu* and forgiveness because *ubuntu* means peace and unity. The concept of reconciliation naively applied could be interpreted as extending empathy and focusing on avoiding the promotion of revenge. For example, opening a case and laying charges against an abusive spouse may be seen as seeking revenge and be discouraged thus compelling women to remain in abusive households. Ubuntu being an ethic in Africa highlights the need for understanding by fellow humans and is "based on the understanding that one's subjectivity is inextricably intertwined with that of others in one's community. From the perspective of ubuntu, all people are valued as part of the human community and worthy of being so recognized" (Gobodo-Madikizela, 2015, p. 1098). Understanding these principles an intricate to the sense of being of Africans positions service providers to conceptualise responsive services.

8 JUSTICE, THE LAW, COMMUNITY RESPONSE AND UBUNTU

Vigilantism is rooted in South Africa's colonial and Apartheid history

A reflection of South Africa's violent history on Black communities, whether urban (townships) or rural (villages), provides a contextual understanding of the generational reoccurrence of torture, corporal punishment, and cheap killing of black lives. Super's (2022) analysis of non-state infrastructures of vigilante violence in marginalized spaces in South Africa locates the historical imprints of the extrajudicial punishments inflicted on black bodies during colonialism and Apartheid where authorities lawfully met out unappealable, immediate justice on black people. South African law has since criminalised community mob justice (Chanock, 2001). However, necklacing, flogging, burning, and stoning suspected criminals to death is still a common phenomenon (Loqani, 2015; Cupido, 2021; Mathews, 2022; Super, 2022). Vigilantism by Black communities is therefore deeply entrenched in Apartheid South Africa and has continued under democracy (Loqani, 2015; Ngidi, 2022; Super, 2022). Women reported an awareness of the repercussions of mob justice, avoiding it in some instances:

> *People are afraid to start hitting or burn the rapist because it is normally said that people are taking matters into their hands. When the community action against the violence, it will come out few people even though the whole community planned it together and they tend to neglect that the perpetrator raped, and the community was supposed to kill him but with this thing "you are taking the law into your hands" the police will come and want to know who started it?" (Women FGD).*

Failures in the criminal justice system and vigilantism

Inequality, marginalisation, inaccessibility, and unresponsive state institutions, as well as complicity by the state and its institutions, act as contributing factors to the continued presence of vigilantism from Apartheid to democracy (Cupido, 2021). "Formerly 'whites only' areas, residents have access to insurance, guards, gated communities, fortified

fences, and well-resourced neighbourhood watches. In former black townships and informal settlements, this is not the case", as people still live in overcrowded, under-resourced communities with limited access to police services (Super, 2022:1). The absence of state support as well as community leaders propels residents to play the roles of responsive services, for example, those of emergency medical services and the police:

> *The neighbours rush you to the police station and remain behind and deal with the one who committed the violence [while you are taken to the police]. (Women FGD).*

Community action and inaction

Police inaction and failure to combat criminal activities continue to be reported as a common occurrence in South Africa (Mathews, 2022; Loqani, 2015; Cupido, 2021; Super, 2022). The ineffectiveness of visible policing, easy bail conditions and the frustration and anger of community members, who do not see the criminals being arrested, cause communities to lose faith in the justice system (Loqani, 2015). Women shared that this inaction by the police and consequent criminalisation of communities when they fight crime themselves is discouraging. Despite the negative consequences when helping neighbours, participants agreed that they have community support and can count on their neighbours in the main, but there are understandable barriers that hinder the community from helping victims:

> *When you feel pain, your mother will tell them and then they'll help you or they'll hear it in the road when school children are talking about it. (Child Participant).*

> *Yes, maybe when an incident occurs, and the community rise against it, but I don't see anything the community can do because when they do that, it is normally said that we take the law into our own hands, then we will have no choice but be silent, and not do anything against these perpetrators. We will have to report and thereafter they will be arrested and then released. (Women FGD).*

Stricter sentencing and an improved criminal justice system as a whole are required to reduce vigilantism (Loqani 2015). Participants engage in mob justice despite fear of the law when they act against criminals themselves. Women expressed feelings of powerlessness and dehumanisation in comparison to men and noted how the law does not protect them. This is causing residents to not get involved when women cry out for help:

> *People are not coming out now because they are afraid of being identified, they are afraid of being arrested, our government favours the criminals because if we act against the violence, we will be arrested but they will take him and say, 'You*

have already beaten him here's blood'. We don't have a life as women, it's actually criminals that have a life, and the government favours them. (Women FGD).

Zero tolerance for violence against children in the community

Participants reported community justice is served to parents and men who violate or abuse children:

In the case of parents who abuse their children, he or she gets evicted from the community, because he/she is like an animal.

And then, when such a time comes when he abuses a child in the house, he is not just evicted, he is beaten, that is what I see about the residents; they don't care about the law at this stage. (Women FGD).

Impact of exposure to community violence on children

Previous research found vigilante activities to harm communities, specifically children (Loqani, 2022), and that communities are more likely to intervene when the victim was a child rather than an adult woman (Mathews et al 2022). We found that children are exposed to gruesome acts of community violence and that children understand that this violence is due to perpetrators victimising women and children. In one instance, the community murdered a man accused of the rape-homicide of a child:

They killed the abuser. They beat the person and kill him… The man who had taken the child was beaten ... he was beaten and burned with paraffin, then they checked if he is dead and left him in that place and then we left burned with paraffin there and we left. (Child Participant).

Exposure to vigilantism irrespective of the reason or frequency has a negative and lasting impact on children's mental health, where children question their ability to endure witnessing such violence and even found those scenes surreal:

I remember when I saw people fighting and wondered how I could watch something like that. So, when I got home after that incident I thought about what had happened earlier and I wanted to go back there but something told me "No leave that alone". Maybe his anger could transfer to me, I don't know how big the person is. (Child Participant).

He killed a child; he must be killed too. (Child Participant).

These quotes show that violence is becoming normalised for children and this is how the cycle of violence is perpetuated (Mathews et al., 2022).

Hindrances to community justice & 'ubuntu fatigue'

Justice was described as the process of receiving a fair judgment on a case whereas the law has to do with rights and policies (Community engagement, 2022). This conversation erupted in a discussion between women and service providers to address participant dissatisfaction with legal processes and outcomes. They claimed that laws and policies have eroded ubuntu. This was due to a perception that the law punishes residents for reporting violence and attempting to intervene when witnessing violence in their communities. Subsequently, people do not report or act against violence when they see or become aware of it:

> *During the session, a person will disclose that they will be beaten up, but the community members of other places will not rise. They will say that's a thing between two people as if it's a normal thing and say, 'no', that's how they leave them alone because should you interfere and try to go between them and they make up, that'll cause a different matter. They get intervention and then they fix their relationship. (Service Provider).*

Participants reported the removal of anonymous tip-offs to both the police and social workers as the reason they do not intervene when fellow residents cry out for help (Community engagement, June 2022). This was reportedly due to the law forcing witnesses to reveal their identities and then being targeted by perpetrators. This has reportedly forced communities to adopt an individualistic approach (minding one's own business to avoid being called in by the court for questioning):

> *So, if you saw any incident or you were involved, say you were with your neighbour at the time of the incident, and the police will take you as the first witness. So that is another thing that I saw why people just reverse back in such situations because they don't want to be involved. We hear that a person [if they are the neighbour] will say "yhu! Ha ah I don't want to go to court, Yhhuu! To go stand in the court of law and be giving accounts", you know (Service Provider).*

The service provider continues to reflect on their personal response, and says:

> *I even run away if I see that a person passed away, and just died there. I don't want to be the first person to see it. So those are the things that are in the mind of the communities, you know, and are resulting in them not helping each other. (Service provider).*

In addition to fearing criminals, participants are also weary of the criminal justice system that pretends to be on their side while it exposes them to violence when they report

violence. Many cases remain unsolved due to bribery (Vilakazi, 2015). Reporting criminal activity also poses a risk to victims because they see the perpetrators whom they reported to the police back in the community the next day (Titi, 2021). Some communities have therefore started requesting commitment fees for them to help.

> *And then if you need help [from the residents], you contribute R5 ... after you contributed the fee, whatever happened at your house or to you, the perpetrator will be searched until he is found. Then [they'll] beat him] and after beating him will call the police. On the day the person was beaten, R5 was paid. After you have contributed the R5 they look for the perpetrator. They [the police] will turn back and not help the perpetrator. They do not arrest the residents but arrest the perpetrator. (Child Participant).*

Villages, townships and informal settlements do not have access to professional community protection services such as guards, gated communities, fortified fences, and well-resourced neighbourhood watches in affluent communities (Super, 2022). Local communities then employ creative strategies with the limited resources and community assets they do have to create policing visibility, for example by asking for an R5 commitment fee for community action in times of need. This works in the same way as insurance services for emergency transportation or security guards for houses under a registered member. The weak system coupled with laws that force witnesses to identify themselves when whistleblowing causes them to distance themselves from "interfering" in domestic violence cases, as this may put them in danger when suspects return to the community. At the community engagement dialogues (June 2022), the inability of the community to freely respond to violence and to assist neighbours was described as 'ubuntu fatigue', as witnesses have then to create time to perpetually appear in court.

9 EMERGING GAPS

Our study confirmed previous findings that access to services in peri-urban and rural areas is influenced by distance, finance, family attitudes and community norms, with additional barriers for people with disabilities. All services, including those provided by the state, are reportedly underfunded, NGO subsidies are insufficient, and there is an apparent shortage of shelters, children protection services and community-based psycho-social support. In addition to these constraints, both women and children indicated a lack of awareness of their rights, the law, and the services in their communities. We found language and cultural barriers to lead to miscommunication and misinterpretation of laws and policies to victims as well as laws and policies being misunderstood by victims. The findings of this exploratory study revealed gaps in the way that services are delivered:

9.1 Language and culture are important for understanding women and children's sense-making of violence, help-seeking behaviour, and reporting of IPV, but they are also an important gateway to accessing services. Services should be delivered in a culturally sensitive manner that respects and affirms the traditions and values of the women and children who access them. Whilst we found that psycho-social services are delivered in culturally sensitive ways, the criminal justice system relies on the use of English. Police officers insist on holding the pen for complainants when writing statements and actively translate what women say in isiXhosa into English while the statement is being written. This does not allow victims and complainants to fact-check their statements. This process further creates a loss of important details, intensity, and nuance in the statement before filing. Some words do not translate adequately to English, for example, in isiXhosa, the word *perpetrator* translates to *umenzi wobubi* and does communicate the intensity of IPV. Also, *isihlonipho*, being a cultural phenomenon that translates to verbal communication cannot be translated into English. As a result, the translated statements can be viewed as nonsensical, and many cases are thrown out before they even reach the court. Those that are heard, are heard in English even when everyone in the room speaks isiXhosa. If granted, the protection orders that women seek are also written in English. The dismissal of indigenous languages as incomprehensible stems from the acceptance

that the English language is the official policy language, and that indigenous languages can be accommodated based on practicality and choice (Cakata & Segalo, 2017). The directive from the Chief Justice specifying English as the language of record could be easily changed, and the promotion of indigenous languages in spaces where languages of oppression held prominence, such as courts of law, would not only serve a practical purpose but would redress some of the invisible barriers that make African women feel inferior and excluded from such spaces. Services need to be responsive to the South African cultural context and conceptualised on the morals of values of Africans such as Ubuntu.

9.2 Children need shelter and safety – The physical needs of women with infants and young children are catered for in shelters, but these shelters are not designed to accommodate adolescent boys. Some boys are sent to stay with family members, or referred to child protection services, but little is known of the impact of this on boys who already have been exposed to violence in the home. What is worse, cuts to alternative care mean there are few formal placement options, and many older boys are left at home with perpetrators. This can have severe detrimental consequences, causing boys to drop out of school, abuse substances, turn to crime or, in one case, end up on the streets. It is likely that this exclusion will have a long-lasting impact on their physical and social development and, without access to therapeutic support to process their own trauma, continue the cycle of violence [Mathews et al., 2022]. Separating families like this can also cause women and children to experience anxiety.

9.3 Children who witness violence against their caregivers need therapy – Previous studies that explored children's mental health recovery post-sexual abuse found that therapeutic services for children were not integrated into the package of care at TCCs. Most children were referred to services off-site with long waiting lists (Mathews et al, 2013). Our findings indicate a similar pattern. Few children access specialised services and rely mainly on the emotional support of parents or a trusted adult. This has the potential to affect children's long-term recovery as most families cannot provide children with the necessary support. Furthermore, secondary trauma experienced by caregivers, exacerbated by their own experiences of trauma, limits their ability to provide the child with the necessary emotional support. Shelter staff screen children and refer them for psychological support through their networks, but children who are left behind or whose mothers do not access these services are not even screened.

9.4 Rehabilitative and therapeutic services only offered to individuals – Findings suggest that both children and female caregivers experience vicarious trauma when the other half of the pair is abused. Women not only have to find and negotiate pathways for

healing themselves but also must support the healing of their children while simultaneously attending to the physical and emotional needs of their children. While respondents indicated that some programmes targeting men were available in the community, there was little integration of men and older boys into prevention and response services.

9.5 Failures in the criminal justice system leading to community violence – The SAPS are commonly the first point of entry for professional services, but communities and individuals are losing faith in the criminal justice system due to slow response times, poor handling of complaints, corruption and the lack of anonymity and protection for witnesses. Communities respond either by not reporting or by taking the law into their own hands.

9.6 Intersectoral collaboration – In contrast to other studies (Nagia-Luddy & Mathews, 2011; Jamieson et al., 2017) our findings suggest that services in both sites were working together well. An interesting phenomenon is that although the mandate for coordination lies with the government, it was the NGOs that were central to ensuring that women received the full complement of services that they required. This essential role was played by a linkage officer located at the TCC or the SAPS units but funded by Masimanyane in both sites.

9.7 Families, churches and traditional leaders play a role in supporting or silencing victims of abuse – In rural/traditional communities, families handle domestic violence and abuse by calling a family meeting in which all sides are heard. However, the victim does not have the authority to call the meeting, families do not intervene where the couple is not married, and the outcome can be partisan where key members protect the perpetrators. Likewise, churches and religious institutions can hold men accountable for their violent actions against women in marriages and provide a supportive environment where mentors and registered social workers counsel victims and support them to report to the police. However, some institutions place the preservation of marriage over and above the safety of women and children, insisting that women remain in abusive relationships and do not report to statutory authorities. Whilst under the law the traditional courts have no authority to deal with rape, they can adjudicate matters relating to marriage and assault, including domestic violence. Cultural mores and practices in rural areas dictate that women continue to report to these structures.

9.8 Services that include men are very limited – From the community engagement dialogues, it was determined that GBV pre- and post-response programmes focus on women and children. It is however important to note that this study was purposefully designed to understand what women and their children, who experienced men's violence need from services, and to document how service providers experience the

services they render. This means that men as perpetrators were intentionally excluded from the research, but male service providers were not, as such, their voices are part of the service provider interviews. However, there was very little representation by men in the community dialogues, with only one man (service provider) present.

9.9 Patriarchal norms promote violence and obstruct access to services – Women are turned away when laying charges at police stations and silenced in church. Equally, some traditional customs and practices must be taken into consideration when women seek help and justice in their communities, for example, a woman must be represented by a male family member when addressing traditional leaders at traditional councils.

9.10 GBV training is not cascaded down by senior government officials to community level staff – Government departments do receive training on Acts, but those training opportunities are exclusive to senior management staff. Participants highlighted this as a challenge because it means that the staff who must implement the training to victims in their work are excluded from acquiring the knowledge as they are at lower levels in the organogram.

10 DISCUSSION

Who will revere the Black woman? Who will keep our neighborhoods safe for Black innocent womanhood? Black womanhood is outraged and humiliated. Black womanhood cries for dignity and restitution and salvation. Black womanhood wants and needs protection, and keeping, and holding. Who will assuage her indignation? Who will keep her precious and pure? Who will glorify and proclaim her beautiful image? To whom will she cry rape? Abbey Lincoln (1966, pp. 20)

Women's vulnerable position in society continues to be a matter of concern. Social and cultural structures uphold patriarchal social norms that contribute to the silencing of women and children. bell hooks' (2000) analysis of a patriarchal society shows how social order privileges Black men over Black women and children, but also that Black men are also dehumanised by White men and women. Through the application of the colonial matrix to social phenomena, we begin to understand the drivers of social problems emanating from capitalism and patriarchy; and affect the family system. These drivers also in turn influence pathways to accessing services.

An understanding of African culture is critical for understanding the construction of African families as IPV mainly occurs in the home. In African cultures; customs, and not necessarily biological ties, determine who is deemed fit to be a parent, and this is influenced by social, economic and moral dimensions (Mkhize, 2006). Parent-child relationships, for instance, are explained through the use of language as language is a tool for transmitting culture and determining what is normal and acceptable in communities (wa Thiong'o, 1986). For example, in isiXhosa, if a child refers to their mother as *uSisi*, it is understood that the child's mother conceived the child early or married a man who is not the child's biological father and the child was raised by their grandparents. In this example, the child might therefore not have a secure attachment bond with their biological mother, but instead, have this secure attachment relationship with their grandmother who is their primary caregiver. This demonstrates how culture is a resource for identity and facilitates how people find meaning and express their experiences (Keesing, 1974; Mkhize, 2018; Nobles, 1986; wa Thiong'o, 1986).

Isihlonipho is another example of the cultural nature of communication, which if its existence is not understood and applied could lead to the misjudgement and misinterpretation of women, especially with the criminal and justice systems. Service providers also find their identities in their languages and cultures, and how they provide services is also linguistically and culturally informed (Khoza-Shangase & Mophosho, 2018). A decolonial and African-situated framework helped us understand how culture and language influence the experience and delivery of services and if applied will ensure that services are accessible and contextual.

Access to services is hindered by local communities' inability to verbally communicate with service providers, and service providers' inability to speak indigenous languages. Key legislation and language strategies of the democratic era in South Africa must therefore promote the use of indigenous languages as an effort to redress the Apartheid-era practices that excluded Africans from services (Bamgbose, 2011; Mncwango, 2012). The language of the people which is isiXhosa in the Eastern Cape, for example, should be made to have equal status as English (Cakata & Segalo, 2017). From a decolonising feminist perspective, language practicality for ease of court processes such as documentation for instance should not take precedence over indigenous women's and children's access to justice and quality service provision to them.

In terms of distrust of police, history is a critical component of the Afrocentric lens. The legacy of Apartheid continues to affect access to and service delivery not only in public health but also in terms of psychosocial support and justice. The link between poor police services and vigilantism or mob justice based on Super's (2022) analysis of non-state infrastructures of vigilante violence in marginalized spaces in South Africa traces violent responses to the time when authorities i.e the police lawfully met out unappealable, immediate justice on black people. A decolonial Afrocentric lens acknowledges that violence is a symptom of the violent legacy of our country and is evidenced in the violence still experienced in post-Apartheid South Africa. Black townships continue to be scenes of bloodshed and vigilantism is arguably an expression of self-hate as a consequence of the inhumane conditions people live in. Self-hate has been ascribed to the internalised colonial gaze of being bad, savage, and uneducated which still rules Black communities (Baloyi, 2020). The upholding of English as the medium for adequate access to services reinforces that English i.e. Whiteness is the better condition of existence. Acknowledging colonial and Apartheid history, may bring decolonial (and Fanonian) healing to Black communities, what Maldonado-Torres et al (2021) refer to as:

> *"one [healing] that calls attention to the role of alterity and sociality in the making of human reality and that seeks to restore the basic coordinates that make up*

the human world – to restore the fundamental instability and interconnections among humans that make that possible. This oath would also be a call for self-transformation, for the creation of community, for collective action, and for political reparation."

The focus on the church in this study is because the study settings were in communities that are predominantly of Christian faith. The 2015 General Household Survey (GHS) data on religious affiliation and adherence show that 86% % of the population identifies with the Christian faith and the Eastern Cape has the fifth highest representation (Stats SA, 2015). Africans are raised with exposure to religion, spiritual convictions, and a belief in God or a higher power (Phasha, 2010; Sanchez & Carter, 2005). Spirituality has been associated with families' ability to negotiate successful adaptation after a crisis and is instrumental in helping children find healing from trauma (Greeff & Loubser, 2008; Titi, 2021). However, religion, across affiliations, faith groups and racial communities, is also a key instrument among institutions in perpetuating harmful patriarchal attitudes and norms that encourage silence, and the acceptance of female subjugation (Gordon, 2008; Kobo, 2018; Messina-Dysert, 2015; Sigsworth, 2009). This reality does not disregard the fact South Africa has a diverse religious landscape and faith plays a significant role in communities (Schoeman, 2017). This is evidenced in our findings, we can see how organisations are acknowledging the social capital of the church and are partnering with religious institutions for programmes that address gender-based violence. The Africa-centred lens requires a contextual analysis and through it, we begin to appreciate the complex love-hate relationship local communities have with the church. We derive an understanding that the church was instrumental to both colonial and Apartheid oppression and suffering but that it is also a communal space that offers a place for collective witnessing of pain and upliftment.

A decolonial analysis of religion exposes the complex layers of coloniality of power in which religion is implicated (Yountae, 2020). Christianity played an instrumental role in the justification of the Apartheid political system while simultaneously providing a primary source of strength to those involved in the struggle because of the community that was formed in churches (Struby, 2018). With this contextual background, we can derive some explanation for communities' trust in the church over the local police stations (Rule & Mcwango, 2010:187). It is also from the church where the biggest political party in South Africa was formed and advocated for the liberation of Africans, pre-democracy (Schoeman, 2017). Structural inequalities are the foundation on which democratic South Africa is built and precipitate socio-demographic factors characteristic of community disorder that intersect with intimate partner violence, domestic and community violence, as well as violence against children. These socio-demographic factors include race, class,

gender level of education, employment status, profession, number of people living in the house and living arrangements. These are the drivers of violence and disproportionately affect Black communities.

The feminist intersectional lens considers the multiple oppressions embedded in these factors and directs us to what may hinder women and consequently children from accessing services and the creative measures they take to make use of their community assets to ensure community safety and protection due to failures by the government. Power and patriarchy influence the community's response to intimate partner and domestic violence as it does to victims. Participants understood community members' non-response to be influenced by compassion fatigue due to (a) them having intervened many times but the victim always goes back to the perpetrator, (b) reporting criminal activity means that they must take time away from work to testify in the court, (c) whistle-blowing exposes them to violence because the law systems force people to identify themselves. Although communities put measures to help themselves maintain some form of order amid the community disorder they exist in, capitalism forces communities to consider the negative effects on their own lives when intervening in violent situations. For example, community members will have to choose between not going to work and loosing their daily wage or losing their job and testifying in court.

Ubuntu is a value describing the human community (Goboda-Madikizela, 2015) and is hindered by in-access to services and failures of the system. In societies where there is perpetual violence, responding to the impact of violence daily can be stressful and traumatic and have negative consequences for one's own life and is therefore a barrier to community support. Through a decolonial African Feminist lens, we begin to see that violence against women is exacerbated by an array of factors that expose the whole of society to violence: (1) the police in local communities are vulnerable to (and also fear) community violence due to community marginalisation, (2) the community must choose between ubuntu and power, and (3) men are confronted and betrayed by hegemonic masculinity that propels them to resorting to violence to defend their socially enforced masculinity coupled with the accompanying norms which expose even them to violence (Idriss, 2022).

The discussion points of the community engagement dialogue (June 2022) reflected people who want to recreate their communities. Participants called for the traditional council to be included as part of the GBV sector to improve the coordination of responsive services is in line with the decolonial African Feminist lens that concerns itself with the struggles of both women and men and wants to bring men into conversations that affect them. This is a humanising principle that seeks to bring harmony and peace to

communities; but also recognises that patriarchy affects everyone and must be addressed in all spaces. Restorative justice as a feminist practice gives amplifies women's voices and empowers them to confront their perpetrators and through community engagement strategies with the employ of an intersectional lens transform patriarchal power structures and end violence against women (Goodmark, 2018). Bringing traditional councils into the GBV agenda, therefore, has restorative justice principles as it sees men as part of the solution to ending GBV.

11 POTENTIAL STRATEGIES TO ADDRESS THE GAPS

The study was exploratory with a small sample and raised interesting questions for further exploration and research. From the community engagements, we derived recommendations for how to address the gaps. However, some of the respondents pointed to strategies that could address gaps in services that have been noted in this and other studies. These include:

1. **Use indigenous languages in the criminal justice system** – Witness statements and affidavits should be written in the home language of the complaint to allow her to check the accuracy of what has been recorded. Court proceedings should also be conducted in one of the indigenous languages and the written record translated where necessary for appeal. This would prevent meaning from getting lost in translation and help ensure that services are culturally sensitive.

2. **Services for women affected by GBV must cater for the needs of their children** – Children have rights to be protected from maltreatment, abuse and neglect; to family care, parental care, or alternative care; and to have their best interest be of paramount importance in all decisions that affect them. Children should never be left without proper care. Ideally, shelters would accommodate women with all their children, however, this is not always practical or desirable, as the presence of young men in the shelter may constitute a physical or psychological threat to the other residents. In this case, the team should work with child protection services to ensure that adequate care is provided or find alternative care placements when women are admitted to shelters. However, the Children's Act fails to recognise that children of women affected by violence may require care and protection. Services should also include boys in early intervention programmes that prevent GBV.

3. **Include adolescent boys in shelters** – It is well understood that the exclusion of adolescent boys from shelters is a safety measure for themselves and other people in the shelters. However, by excluding boys we expose them to further harm and create broken men as they do not receive psychological interventions for their

trauma like the mother/caregiver and younger siblings. Othering the adolescent boy child adds to their trauma and excluding them from rehabilitative services potentially reinvents the cycle of violence in families.

4. **An integrated package of care for children to support women** – For children who are exposed to violence against their mothers, or experience violence concurrently, therapeutic services should be integrated or offered as part of a combined treatment plan. Such plans should be responsive to the needs of the members of the family individually and collectively. In addition to focussing on their own recovery, women need skills and capacity building to provide nurturing care and support their children to recover. A need for after-care services for children in the form of sports and extra-mural activities was also highlighted.

5. **GBV services and initiatives must include me**n – While more efforts must be made to carry men along in efforts to end violence and address GBV, men also need to show commitment and include themselves. Most of the organisations reported not working with men but reported being aware of organisations who do, to which they do referrals as and when necessary. In South Africa, to end the cycle of GBV, we require shelters and outreach programs that include men to ensure that men receive psychosocial support and intervention as a prevention measure to end GBV. We recommend follow-up research initiatives to include men as perpetrators and additionally, be intentional about the participation and involvement of male service providers.

6. **Services must offer gender-transformative programmes that work with all genders** – There is a need for trauma-informed services across government departments that will enable staff to be attentive to the psychological needs of victims and survivors of violence. For example, SAPS and justice officials need to understand the trauma caused by GBV and respond appropriately.

7. **Improve criminal justice services must be applied through a transformation len**s – More awareness campaigns in the area of GBV services are needed. Women and children should be informed about the services available and their rights. As a priority, communities require public education about the protection order application process, its requirements, and its uses, so that they can know what to expect from services. For example, if women and children are to have a meaningful choice, women and children need to be informed about their rights and the professional services available to them.

8. **Strengthen the role of traditional and religious authorities** – Both service providers and women and children who have experienced violence see a role for

traditional authorities and religious leaders as part of an intersectoral partnership to prevent and respond to violence. Safeguards also need to be in place to regulate and reform these structures to ensure the participation of women and prevent the perpetuation of patriarchy.

9. **Conduct extensive research is needed to understand what motivates women's help-seeking behaviour** – We do not know enough about women and children's choices, what kind of support they would like from traditional institutions, and how they could be combined with professional services to ensure that women and children can choose different pathways at any point in their journey to recovery.

10. **The concepts of justice and restoration are worthy of investigation using the decolonial African Feminist Lens** – There was a reported discrepancy between what those close to victims do in private and how they conduct themselves in public. There were multiple reports of family members silencing victims of abuse, but the same people support the direct interventions of communities that lead to mob justice and, in the most extreme cases, vigilante killings.

11. **A cascade approach to GBV training in government departments** – A series of training processes across all departments and organisations working with violence against women and children. All service providers and role players must be workshopped on relevant laws and policies to understand their role. Organisations should therefore prioritise training front desk staff and those who deal with clients.

12. **Awareness campaigns about how protection orders work and training for SAPS on how to deal with protection order applications** – Protection orders are not a magic wand to stop IPV. Professionals require training in assessing the risk women are at, and how to effectively communicate to women about the use, limitations and procedures of obtaining a protection order.

12 CONCLUSION

Decolonisation gives voice to the marginalised in structures where they are commonly silenced and seeks to prioritise those whom society renders last, first, and those whom it renders first, last (Fanon, 1963/2004). This study explored two communities' experiences of service delivery from the perspectives of service recipients and service providers in local communities. We wanted participants to reflect on services and help us develop solutions about responsive services to violence against women and children. We applied a decolonial African-centred methodology and theoretical framework to understand African people's realities. Our methodology resisted the tendency toward studying Africans out of context or imposing knowledge generated elsewhere upon them in terms of content and methodology thereby disrupting colonial logic in social phenomena. Through this lens, we considered how gender and power contribute to the inter-play of IPV and access to services. Our study found that language and culture are important for understanding women and children's help-seeking behaviour, and reporting IPV, but they are also an important gateway to accessing services from service providers as well as understanding service provider attitudes. Services should be delivered in a culturally sensitive manner that respects and affirms the traditions and values of the women and children who access them as well as the communities they live in. Notwithstanding the ambiguities and contradiction of culture and modernisation/coloniality, by so doing, there would be a centring of Africa and Africans that are currently missing from services. In addition, a decolonising Afrocentric perspective considers the transformation needs in services in local communities. Therefore, while cultural norms, culture and values come to play in service delivery, the level of training, literacy levels and linguistic capabilities of law enforcement officers working in GBV broadly should also be considered and addressed through training and gender sensitisation programmes.

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