

Survivor Experiences

The Gender Based Violence programme, funded by the Global Fund, supports community based organisations to place social auxiliary workers (or first responders) and social workers at Thuthuzela Care Centres (TCCs) and designated centres to support government service providers and to fill the gaps in the provision of psychosocial services to survivors of sexual violence.

These are stories from five survivors interviewed at TCCs as part of an evaluation of the programme. Names and some details have been changed to protect the anonymity of survivors. Interviews with survivors were conducted by specially-trained nurses who were skilled in empathetic listening, emotional containment, and responding to cases of gender-based violence and trauma.

Zodwa: Empathy during crisis

Zodwa was brought to the TCC by a passerby who found her on the roadside. She did not remember arriving at the centre and it was challenging to remember details of the rape event. Because Zodwa had no control over the situation that placed her in TCC care, it was immensely important that the staff helped her regain a sense of calm and control.

Zodwa was referred to the local clinic to follow-up the wounds she sustained. At the clinic, she also met for the first time with a psychologist, with whom the NGO staff had connected her.

“The counsellor was very supportive to give me a room where I could rest. She came to check up on me, [asked] how am I feeling, do I want something to eat, things like that. And the counsellor was like she was a mother. She counselled me in a way that she was very open. She was someone who was not afraid to touch me even if I was full of blood. Yes, she was very open.”



Nombuso: Soothed and supported

When Nombuso arrived at the TCC at five on a Sunday morning, she was nervous about what would happen. She had not heard of the TCC until the local policemen escorted her there. The first thing the social worker explained was that everything they spoke about would stay private, and that at future visits the social worker would never point out the problem that Nombuso was dealing with to other patients. Everyone Nombuso met focused on keeping her in the moment, so that she was not tempted to return to the incident in her mind. The social worker, nurse, and doctor each spoke to her humbly, which made Nombuso open up and tell her story calmly.

Nombuso was struck by the care and attention that staff gave each client:

“What I can tell you is that the counsellors here are very patient. They have love. From the way I saw them, they can handle even young children. This is what I saw while I was sitting there waiting for help. They have love.”

Nombuso completed all her counselling sessions and attended two support groups. Beyond the psychological support from the counselling, Nombuso also appreciated the chance to see that her experience aligned with others. Though she had arrived at the TCC with suicidal thoughts, the new knowledge that it was not her fault and that she was not alone helped sustain her emotionally.

Mpefe: A mother’s courage

Mpefe is a 31-year-old mother of three children, the youngest of whom was raped over the December holidays the year before her interview took place. Mpefe heard about the TCC from her cousins, who told her it was a “place of help” that can help a child move forward after a rape.

Beyond the child’s own trauma, Mpefe was surprised to find that she herself was “really disturbed” following the events of her child’s rape. Part of the message of the social worker was to explain to Mpefe that her daughter would have a happy and successful life even after the trauma.

“I was strengthened. I was helped to realise that the child’s life had not come to an end. This child must find themselves accepted in society and amongst people, and not see themselves in another light.”

Mpefe was worried that the rape would impact her daughter’s performance at school. A star pupil in maths, her daughter remains focused on her school work and ready to learn. Mpefe diligently checks in with her daughter’s teachers to make sure school work and emotions are in check following her rape.

“The help we received was tremendous. I see a change in my child. She is still the caring child, she is still herself, still a good child.”

Tebogo: Helped and then lost

Tebogo, a 24-year-old from a nearby neighbourhood, was raped by her cousin while he lived with her family. Her introduction to the Thuthuzela Care Centre came through a kind policewoman, who personally escorted her to the TCC and ensured she received the care required post-rape.

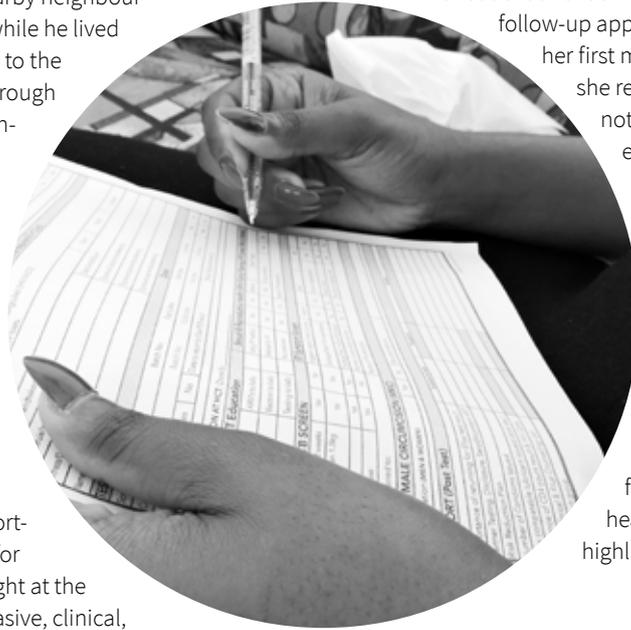
The social worker who met Tebogo at the centre was kind and helped Tebogo feel comfortable sharing her story. The social worker explained that Tebogo could share as much or as little as she wanted, and that she could choose the person to speak with. This supportive environment was refreshing for Tebogo, who had just spent a night at the nearby hospital and found it invasive, clinical, and unaware of her immense need for privacy while processing the trauma.

Keneoue: 'At home' but still struggling

Keneoue arrived at the TCC with her mother and was dizzy and vomiting. The local clinic had sent Keneoue to the centre after she was raped, so she assumed the TCC would be like a hospital. She was surprised to see, upon entering, that the TCC was more "like a home" with people who were there to support her. Without hesitation, Keneoue explained that the counsellor was the person who most supported her during her time at the TCC:

"Because of the love she showed me, in times when I cried, she was the person who jumped and came to me and say "I know how you are feeling, you are going to get through this, like it or not, I know it is painful but in life you will have to pass it and get through it". That's why I feel like she is the person that who made me feel like I am at home."

One challenge was the length of time it took to complete all the necessary TCC services. Keneoue arrived at five-thirty in the morning and returned home later that night at eight. The lengthy time to complete services was not due to patient load, as there were only three other clients throughout the day. Rather, each step along the TCC set of services was conducted by a new person and required coordination.



Keneoue found it difficult to return to the TCC for follow-up appointments due to flashbacks of her first moments there. While cognitively, she recognised that the space itself did not cause her trauma, it was hard to erase the memories of sitting in the waiting room crying after the initial event.

Lessons Learnt

Whilst all survivors interviewed spoke highly of their experiences at TCCs, the stories presented here highlight the many challenges that staff and survivors face as they begin the road towards healing. Important lessons learnt are highlighted below:

- 1. A sense of calm and control is an essential service offered by NGOs and should be supported by all TCC service providers where possible.**
- 2. Survivors need regular follow-up to ensure they access all TCC required services and should be followed-up at 3 and 6 months after their initial visit to the TCC to ensure they are still coping after their trauma.**
- 3. Support groups can be helpful, but should be coupled with individual therapy.**
- 4. Caregivers of child survivors also sustain emotional trauma and need targeted care.**

These stories were captured as a part of a process evaluation conducted between 2017 and 2018 to assess the progress and quality of the implementation of services provided by NGOs in Thuthuzela Care Centres as part of the Global Fund grant, Investing for Impact against Tuberculosis and HIV. The evaluation was conducted by Creative Consulting and Development Works for the AIDS Foundation of South Africa (AFSA) and the Networking HIV & AIDS Community of Southern Africa (NACOSA) with funding from The Global Fund to Fight AIDS, Tuberculosis and Malaria.