



**iThemba**

RAPE & TRAUMA SUPPORT CENTRE

**NAME OF SERVICE PROVIDER:** iThemba Rape and Trauma Support Centre: (Non Profit Number: 049-275)  
**APPLICANT ORGANIZATION:**  
**PROPOSAL SUBMITTED TO:**  
**DATE SUBMITTED:** 6 May 2007  
**PROJECT PERIOD:** July 2007 – July 2008  
**FUNDING CATEGORY:**

**PERSON SUBMITTING THIS BUSINESS PLAN**

**NAME** :Philip Stoneman

A handwritten signature in black ink, appearing to be 'P. Stoneman', written on a light grey background.

**POSITION** :Director

**SIGNATURE :**

## Executive Summary

### History of Project

The iThemba Rape and Trauma Support Centre was established in March 2005 by Philip Stoneman, who was working as a chaplain in the emergency services chaplaincy in Benoni, after going out to scenes of violence and sexual assault, and noting problems faced by trauma survivors. Some of the problems identified were:

- 1 1 No crisis intervention and no short, medium and long term trauma counseling available for survivors of violent crime, sexual violence and domestic violence.
- 2 2 No immediate medical, forensic or emotional assistance provided to survivors of sexual violence
- 3 3 No follow ups at a central venue for survivors of sexual violence.
- 4 4 Compassionate fatigue and negative resilience of frontline workers, social workers and emergency services personnel.

**Location:** Benoni – Ekurhuleni; Province: Gauteng, South Africa.

**Project Period:** July 2007 – July 2008

**Project Costs:** R1 '115 '306. 56

Category	Cost per annum	notes
<b>Administrative &amp; Personnel</b>	R517, 000.00	
<b>Medical</b>	R 273,306.60	<i>Inclusive of medical costs and personnel costs</i>
<b>Trauma Support &amp; Training</b>	324 999.99	<i>Includes community awareness, training and trauma support.</i>
<b>Total</b>	<b>R1'115 306.56</b> <b>Projected costs</b>	<i>All financial documents are audited and submitted to Department of Social Development within six months of Audit.</i>

### Project Objectives

To provide immediate, centralized and follow up medical, forensic and trauma support to survivors of trauma and sexual violence to reduce long term trauma resulting from violent crime and sexual violence for 1975 survivors from July 2007 – July 2008

### Project Description

The iThemba Rape and Trauma Support Centre is a one stop rape and trauma support centre that assists with the examination, medico-legal aspects and emotional support for survivors of crime and sexual assault and ensures the survivors receive support in timeously. The iThemba Centre also provides pre and post HIV counseling and post trauma support and education, carries out research, notifies the investigators of trends and offers training to members of the Judiciary and Police Services in forensic and trauma support procedures.

At its inception, the centre was originally intended to service 10 (ten) cases a month. In the first month the centre was overwhelmed with 52 rape cases, and in the first year of operation the centre assisted with 411 rape cases, more than 1 case a day. The judiciary has complimented the centre on the high standard of forensic evidence provided to the courts. (See attached letter: Annex 2) Fewer cases are now being struck off the court roll because of the high standard of forensic evidence presented leading to a higher conviction rate.

**Amount Requested:**

**Anticipated Project impact**

Immediate, centralized and follow up medical, forensic and trauma support treatment will be provided to at least 1975 survivors of sexual violence and trauma from within the Greater Benoni community.

**TABLE OF CONTENTS**

**SECTION 1**

1.	Administrative details .....	3
1.1.	Registration .....	3
1.2.	Service Provider details.....	4

**SECTION 2**

2.	Programme details .....	5
2.1.	Name/Title of the Programme .....	5
2.2.	History of the Programme .....	5
2.3.	Target Groups .....	6
2.4.	Purpose of the Programme .....	8
2.5.	Activity Plan .....	9
2.6.	Implementation plan.....	10
2.7.	Summary of Cost Implications .....	13- 15

**SECTION 3**

3.	Governance and Management .....	16
3.1.	Structure and Management .....	16
3.2.	Profile of staff members .....	17
3.3.	Volunteers .....	18
3.4.	Capacity.....	19
3.5.	Affiliation with other service providers/entities .....	20
3.5.1.	Which networking or coordinating structure is the organisation affiliated to? .....	20
3.5.2.	Networking with other service providers .....	20

**SECTION 4**

4.	Sustainability Plan .....	22
<b>SECTION 5</b>		
6.	Financial Matters .....	25
6.3.1.	Assets and Liabilities .....	26
6.4.	Summary of Projected Income and Expenditure .....	27
<b>SECTION 6</b>		
7.	Monitoring and Evaluation .....	29
7.1.	Balanced Score Card .....	29
	Annexure A	30
	Annexure B	31
	Annexure C	33

**Section 1.01 Section 1.01 1. ADMINISTRATIVE DETAILS**

**(a) (a) 1.1. Category and Registration**

1) 1) CATEGORY	2) 2) REGISTRATION						3) 3) DATE OF REGISTRATION
	Type of Registration (Tick ✓ applicable box or choose one)						
	1	2	3	4	5	6	
NPO	✓						2006
NGO							
CBO							
FBO							
National Organisations				✓			2005: Themba Lesizwe, 2005: South African institute for traumatic stress.
Other (specify) - - -							

\* Attach proof of registration

**Legend**

- 1. 1. Non-Profit Organisation (NPO)
- 4. Affiliation with registered network
- 2. 2. Trusts
- 5. In process applying for registration
- 3. 3. Section 21
- 6. Other (specify)

**(b) (b) 1.2 Service Provider Contact Details**

1.2.1 Physical Address

26 Bunyan street, Benoni

.....  
.....

Code 1501

1.2.2. Postal Address

**PO box 448 Benoni,**

Code 1503

Tel Number : (011) 422-4107

Cell Number : 073 270 3375

Fax Number : (011) 421-2301

Email address : [info@traumasupport.org.za](mailto:info@traumasupport.org.za) / [www.traumasupport.org.za](http://www.traumasupport.org.za)

Article II.

Article II.

1.2.3.

Contact person's details

NAME (Please print)	POSITION/CAPACITY	TEL / CELL NO	ADDRESS
1. Philip Stoneman	Director	073 270 3375	13 stymie ave Westdene benoni
2. Ama Rose Jugdew	Treasurer	072 514 6496	
3. Carl Schultz	Chairperson	082 897 4529	
4. Heather Crossan	Secretary	083 702 3216	

## SECTION 2

### 2. PROGRAMME DETAILS

#### 2.1. Name / title of the programme

(Specify the name/title of the programme for which funds are sought) e.g. Home for orphaned children

NATURE AND SCOPE OF THE SERVICE	AREA OF OPERATION			
	Province	Village	City/Municipal District	To
<i>eg Orphaned children between 0 – 18 years</i>	<i>Limpopo</i>	<i>Nqwenani wa Themeni</i>	<i>Thohoyandou</i>	<i>Makhado Township</i>
Trauma Support Centre for survivors of gender violence	Gauteng		Ekurhuleni	<sup>1</sup> Daveyton, Etwatwa
2. HIV aids Counseling & support	Gauteng		Ekurhuleni	Daveyton Etwatwa
3. Victim empowerment	Gauteng		Ekurhuleni	Daveyton Etwatwa
4. Ongoing Community Research	Gauteng		Ekurhuleni	Daveyton, Etwatwa
<ul style="list-style-type: none"> <li>• Of the 411 rape cases between 2005 and 2006, 88% were from previously disadvantaged communities such as Daveyton, Etwatwa</li> <li>• See annex 1 : Statistics of 200</li> </ul>				

### 2.2. 2.2. History of the programme

The iThemba Rape and Trauma Support Centre, was established in March 2005 by Philip Stoneman, who was working as a chaplain in the emergency services chaplaincy in Benoni, after going out to scenes of violence and sexual assault, and noting problems faced by trauma survivors. Some of the problems identified were:

1. 1. No crisis intervention and no short, medium and long term trauma counseling available for survivors of violent crime, sexual violence and domestic violence.
2. 2. No immediate medical, forensic or emotional assistance provided to survivors of sexual violence
3. 3. No follow ups at a central venue for survivors of sexual violence.
4. 4. Survivors of sexual violence waiting up 12 hours for medical, forensic and interventive trauma support.
5. 5. Investigators of sexual offences not able to investigate offences immediately as time was being used to obtain medical and forensic assistance for survivors of sexual offences.
6. 6. No central point available to provide all necessary requirements' for support of survivor, i.e.: Survivor taken to three separate venues for forensic and medical examination, blood tests and trauma counseling.
7. 7. Conditions in emergency trauma units were not conducive to prioritization of sexual assault cases, resulting in forensic documentation and evidence being compromised leading to a lower conviction rate.
8. 8. No central database of statistics for greater Benoni region, which did not allow for identification of trends to inform service delivery.
9. 9. Compassionate fatigue and negative resilience of frontline workers, social workers and emergency services personnel.

The iThemba Rape and Trauma Support Centre is now a one stop rape and trauma support centre that assists with the examination, medico-legal aspects and emotional support for survivors of crime and sexual assault and ensures the survivors receive support timeously. The iThemba Centre also provides pre and post HIV counseling and post trauma support and education, carries out research, notifies the investigators of trends and offers training to members of the Judiciary and Police Services in forensic and trauma support procedures. At its inception, the centre was originally intended to service 10 (ten) cases a month. In the first month the centre was overwhelmed with 52 rape cases, and in the first year of operation the centre assisted with 411 rape cases, more than 1 case a day. The judiciary has complimented the centre on the high standard of forensic evidence provided to the courts. (See attached letter: Annexure C) Fewer cases are now being struck off the court roll because of the high standard of forensic evidence presented leading to a higher conviction rate.

a. a. Target Groups

TARGET GROUPS	Beneficiaries	Total Number projected per annum								Total No.
	Age group, e.g. 10 -14 years or all	African		Coloured		Asian		White		
		M	F	M	F	M	F	M	F	
1. Children	0 mnths-12 years	58	201	4	8	3	6	12	20	312
2. Youth	12 years- 16 years		180		12		8		40	240
3. Women	16 yrs – 45 years		740		12		16		120	888
4. Older Persons	45 years +		60		6		6		18	90
5. Persons with disabilities										
6. Persons with HIV / AIDS										145
7. Other (specify)										
- male 16 >		160		40		40		60		300
-										
-										
<b>Grand Total</b>										1975

2.3.1. 2.3.1. Describe how beneficiaries (target group) of the programme participate in the planning, implementation, monitoring and evaluation of the programme:

1. 1. The statistics gathered on an ongoing basis directly inform service delivery.
2. 2. The centre assists with education in the community and does extensive training and outreach in the targeted communities. Information from discussion groups is recorded and informs service delivery.
3. 3. Recipients of the training courses are offered volunteer positions and on a weekly basis the volunteer staff meet for a planning meeting where all participants make suggestions and participate in the development of programmes and protocols which contributes directly to service delivery response.
4. 4. Volunteers with experience are being developed to train other volunteers, whilst during this process the beneficiaries participate in the planning, implementation, monitoring and evaluation of the programme.

✓

2.3.2. Are the poor and vulnerable involved? (Tick applicable box)

2.3.3. Describe how you will reach out to poor and vulnerable.

- Of the 411 rape cases between 2005 and 2006, 88% were from previously disadvantaged communities such as Daveyton, Etwatwa, Wattville and Tembisa.
- The poor and vulnerable are assisted in the following manner:
  1. 1. A free medical and forensic examination is carried out by a registered forensic nurse.

2. 2. *The HIV Rapid and the Eliser HIV blood test, provided to the recipient free of charge are carried out in partnership with Lancet Laboratories who provide the tests to the centre at cost of R60.00.*
3. 3. *Free medication, fulfilling international standards and protocols, comprising of the following is provided to the rape survivor:*
  - o o *Anti retroviral's for a period of 28 days*
  - o o *Antibiotics to combat sexually transmitted infections*
  - o o *The morning after pill*
  - o o *Calming medication if necessary.*
4. 4. *Free follow up blood tests at the six week, three month and six month period is provided and carried out by Lancet Laboratories in partnership with the iThemba Rape and Trauma Support Centre.*
5. 5. *Ongoing trauma support is offered to the survivors. The trauma support counsellors have been trained by the South African Institute for Traumatic stress (SAITS) according to the national standards authority for trauma support. Based on a model developed by the South African Institute for Traumatic Stress, developed in direct response to the needs of the South African community.*
6. 6. *Ongoing research in collaboration with SAITS further develops the trauma response model mentioned above to respond to the changing needs of the poor and disenfranchised members of our community.*
7. 7. *Positive and constructive collaboration with the SAPS and Judiciary and Department of Health ensures that poor and disadvantaged members of the community receive ongoing communication relative to their case.*
8. 8. *The centre has developed a programme named the C.A.R.E. programme; Care, Awareness, Response and Empowerment. This programme aims to assist disenfranchised and impoverished community members with training in an awareness of gender violence, trauma and HIV aids.*
9. 9. *The research undertaken with SAITS can be used to inform decision makers on all levels to improve services offered to the poor and disenfranchised.*
10. 10. *The intervention model can be replicated and used in other communities comprising the poor and disenfranchised.*
11. 11. *The centre assists with education in the community and does extensive training and outreach in poor communities who thus receive free psycho-education which impacts the community in the following ways:*
  - o o *Educated Individuals are empowered to seek to assistance.*
  - o o *Educated communities provide an environment in which survivors of sexual violence are supported and are not further victimized.*
12. 12. *Recipients of the training courses are offered volunteer positions and on a weekly basis the volunteer staff meet for a planning meeting where all participants*
13. 13. *Volunteers with experience are being developed to train other volunteers during which process the beneficiaries participate in the planning, implementation, monitoring and evaluation of the programme.*

#### **2.4. Purpose of the Programme:**

1. 1. *To provide immediate, centralized and follow up medical, forensic and trauma support to survivors of trauma and sexual violence*
2. 2. *To Reduce long term trauma resulting from violent crime and sexual violence*
3. 3. *To increase the conviction rate of sexual violence offenders by improving the quality of evidence submitted and reducing the time spent in obtaining medical and forensic assistance and the prioritizing of sexual assault cases.*
4. 4. *To develop and practice a replicable and effective and responsive trauma support model for survivors of trauma and sexual violence.*
5. 5. *To reduce violence against men, women and children and the long term effects of violence in our community by informing and empowering survivors to seek assistance.*

## 2.5. Activity Plan

### 2.5.1 OBJECTIVES

	OBJECTIVES	NUMBER OF BENEFICIARIES
		Target area/communities
1	Provide immediate, centralized and follow up medical, forensic and trauma support to survivors of trauma and sexual violence	East Rand
2	Reduce long term trauma resulting from violent crime and sexual violence	East Rand
3	Increase the conviction rate of sexual violence offenders by improving the quality of evidence submitted and reducing the time spent in obtaining medical and forensic assistance and the prioritizing of sexual assault cases.	East Rand
4	Develop and practice a replicable, effective and responsive trauma support model for survivors of trauma and sexual violence.	East Rand
5	Reduce violence against men, women and children and the long term effects of violence in our community by informing and empowering survivors to seek assistance.	East Rand

## 2.6. IMPLEMENTATION PLAN

## OBJECTIVE ONE:

**Provide immediate, centralized and follow up medical, forensic and crisis intervention to survivors of trauma and sexual violence**

ACTIVITIES	PERFORMANCE INDICATORS	OUTCOMES	NO TO BE reached	LOCATION	COSTS
Project management and administrative functions	Sustainable one stop rape and trauma support centre. Reduction of waiting period for rape and trauma survivors. Improved 1 <sup>st</sup> contact and follow ups to survivors of rape and trauma.	Improved networking among service providers. Marketing of Centre. Organizational development Training	1975	East rand	*Project manager R116 000.00pa *Receptionist R48 000.00 pa Book keeper R24 000.00 <i>*Rates as provided by Department of Social Development</i>
To offer forensic and medical examinations to survivors of Sexual violence	Rape survivors assisted medically and forensically. Trauma support provided: defusion and containment	Prevention of HIV/ AIDS Prevention of sexually transmitted infections Prevention of unwanted pregnancy	1975	East Rand	Forensic Nurse: R132 000.00
To offer immediate trauma support to survivors of sexual offences and violence.	of traumatic stress and effective referrals to in-house counselor.	Reduced trauma after rape and traumatic incidents.	1975	East Rand	*Project coordinator and Social Worker, R92 000 pa
To offer immediate trauma support to survivors of sexual offences and violence.		Reduced trauma after rape and traumatic incidents.	1975	East Rand	*Volunteers R76800.00 (8)

**Objective 2: Reduce long term trauma resulting from violent crime and sexual violence**

ACTIVITIES	PERFORMANCE INDICATORS	OUTCOMES	NUMBER TO REACHED
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To offer medium and long term trauma counseling to survivors of traumatic events	Reduced trauma after violent crimes.	Reduced trauma after violent crimes.	500
To offer support to emergency services personnel affected by exposure to violent crime.	Reduced trauma, compassionate fatigue and burnout exposure to violent crimes.	Reduced trauma, compassionate fatigue and burnout exposure to violent crimes.	30- 2 voluntary meeting with personnel for times a week

**Objective 3: Increase the conviction rate of sexual violence offenders by improving the quality of evidence submitted and reducing the time spent in obtaining medical and forensic assistance and the prioritizing of sexual assault cases.**

ACTIVITIES	PERFORMANCE INDICATORS	OUTCOMES	NUMBER TO BE REACHED
Training course for SAPS members	Attendance registers, Training evaluation forms, improved service delivery from SAPS members due to increased awareness and education.	SAPS members educated in sexual offence evidence collection procedures	100
Training course for Court staff and prosecutors	Attendance registers, Training evaluation forms, improved service delivery from court officials due to increased awareness and education.	Court personnel trained in sexual offences protocols	30
Training course for Forensic nurses.	Attendance registers, Training evaluation forms, improved service delivery from registered nurses in community due to increased awareness and education.	Registered nurses trained to assist at the centre in forensic examinations	10

**Objective 4: Develop and practice a replicable, effective and responsive trauma support model for survivors of traumatic and sexual violence.**

ACTIVITIES	PERFORMANCE INDICATORS	OUTCOMES	NUMBER TO BE REACHED
Research undertaken with SAITS Whereby statistics, Court data and convictions are analyzed allowing for researchers to plot trends and further develop counseling and trauma support systems and models.	Ongoing training Reports Respond to needs identified Data to be standardized	Effective and replicable models relevant to community developed	1975

**OBJECTIVE 5: Reduce violence against men, women and children in our community by informing and empowering survivors and communities to seek assistance. See Annexure b: The CARE Programme**

ACTIVITIES	PERFORMANCE	OUTCOMES	NUMBER TO BE
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	INDICATORS		REACHED	
Recruitment, screening training and management of volunteers for all the projects	Positions filled Training registers	Volunteers trained for specific tasks; Projects supported and run by volunteers	15	Wattvill
Community awareness days	Community awareness day to be held at Daveyton, Wattville and Etwatwa community centre and police stations ( 6 community days) at schools, churches and community centers	Community educated about the effects of trauma and what they can do if someone they know has been raped or indecently assaulted	600 people	Wattvill
To provide workshops in the community as to the effects of trauma and violence on a community	120 people: 40 people per workshop 4 times per year	members of community versed in effects of trauma and conflict resolution in collaboration with Phaphama initiatives	120 people: 40 people per workshop 4 times per year	Wattvill
To educate and present awareness programmes as to the effects of sexual offences and gender violence	120 people trained	Members of community versed in effects of domestic violence and sexual offences.	120 people trained	Wattvill

2.6. 2.6. Summary of cost implications : *Proposal funding as presented to Department of Social Development*

ITEM	TOTAL NUMBER REQUIRED	Section 2.02 TOTAL COST	Section 2.02 TOTAL COST
1. Personnel	1 Social Worker / Project coordinator	R92 000	
2. Administrative	2 – administration manager, receptionist Book keeper: accounting fees	R48 000.00 R24 000.00	
3. Operational	1 Project manager,	R116 000.00	
4. Training and Development	855 people trained and educated.	R91 000	
5. Other (specify) Volunteers	10 volunteers	R96000	
- Research	Research project	R50 000	
-			
<b>GRAND TOTAL:</b>	14	<b>R517 000.00</b>	

**Proposed Budget for CARE Project 2007 /2008**

**iThemba Rape and Trauma Support Centre: CARE Project 2007-2008**

	Monthly Budget	Total monthly	Total project per annum
<b><u>Expenses</u></b>		R 49,858.88	<b>R 598,306.60</b>
<b>Community Awareness</b>	<b>R 7,500.00</b>		
<b>Medical programme</b>	<b>R 22,775.55</b>	<i>* See table 1for item breakdown</i>	
<b>Trauma support</b>	<b>R 15,000.00</b>		
<b>Training programme</b>	<b>R 4,583.33</b>		
<b>Community Awareness</b>		<b>R 7,500.00</b>	<b>R 90,000.00</b>
educational material	R 1,500.00		
multi media(fliers/posters etc)	R 2,000.00		
project manager	R 3,500.00		
travel expenses	R 500.00		
<b>Trauma support Programme</b>		<b>R 15,000.00</b>	<b>R 180,000.00</b>
Trauma counsellor	R 4,500.00		
Social Worker	R 10,500.00		
<b>Training Programmes</b>		<b>R 4,583.33</b>	<b>R 55,000.00</b>
Forensic nurses training	R 15,000.00		
Advanced trauma training	R 10,000.00		
Trauma Support Training	R 15,000.00		
Training	R 15,000.00		

**Confirmed & estimated Sources of income: 2007 / 2008 (per annum)**

<b><u>Confirmed</u></b>	<b>Total</b>	<b>Designation</b>	<b>Notes</b>
<b>Cms:</b>	R252 000	Salaries	<b>Directors &amp; Forensic Nurses salary.</b>
<b>Debit order donations</b>	R6000	operational	
<b>Miss Benoni</b>	<b>R60 000*</b>	operational	*estimated donation,
<b>Sms campaign</b>	<b>R3600</b>	operational	
<b>Fundraising events</b>	<b>R35 000</b>	Operational	

<b>Grants ( to be confirmed)</b>			
<b>Department Social Development</b>	R517 000	<b>Salaries / project</b>	<b>Proposal submitted for 2008 financial year</b>
Estimated income for 2007/2008 financial yea.	R813 000.00		

<b>TABLE 1:</b>					
<b>Medical Programme</b>				<b>R 22,775.55</b>	<b>R 273,306.60</b>
<b>Product /expense</b>	<b>Unit cost</b>	<b>Monthly average</b>	<b>Monthly cost</b>	<b>Per Annum</b>	
HIV Rapid	R 16.96	45	R 763.20	R 9,158.40	
Pregnancy Test	R 2.18	45	R 98.10	R 1,177.20	
Lancet Laboratory	R 60.00	45	R 2,700.00	R 32,400.00	
Urine Dipstix	R 1.06	45	R 47.70	R 572.40	
Nordiol* 4	R 7.32	45	R 329.40	R 3,952.80	
Cyprobay	R 2.39	45	R 107.55	R 1,290.60	
Augmentin	R 39.20	45	R 1,764.00	R 21,168.00	
Flagyl	R 2.13	45	R 95.85	R 1,150.20	
Gloves	R 0.03	45	R 1.35	R 16.20	
Speculum	R 5.45	45	R 245.25	R 2,943.00	
Chloranycetin	R 3.15	45	R 141.75	R 1,701.00	
Linnen Saver	R 0.05	45	R 2.25	R 27.00	
Alcohol Swab	R 0.01	45	R 0.45	R 5.40	
Stavudine	R 33.60	45	R 1,512.00	R 18,144.00	
Lamivudine	R 75.00	45	R 3,375.00	R 40,500.00	
Ativan * 1	R 0.07	45	R 3.15	R 37.80	
Brufen *12	R 1.50	45	R 67.50	R 810.00	
Panado * 20	R 0.07	45	R 3.15	R 37.80	
Voltren Suppository	R 3.79	45	R 170.55	R 2,046.60	
Indocid Suppository	R 3.91	45	R 175.95	R 2,111.40	
Dressing	R 4.29	45	R 193.05	R 2,316.60	
Maxalon *5	R 0.02	45	R 0.90	R 10.80	
Medication Labels *4	R 0.01	45	R 0.45	R 5.40	
Medication Bags *4	R 0.02	45	R 0.90	R 10.80	
Erythromycin	R 10.58	45	R 476.10	R 5,713.20	
<b>Total medical consumables</b>			<b>R 12,275.55</b>	<b>R 147,306.60</b>	
Forensic nurse # 2			R 10,500.00	R 126,000.00	

SECTION 3

3. GOVERNANCE AND MANAGEMENT

3.1. 3.1. Structure and management of the programme

See organigram or schematic representation of the organisational structure: **Annexure E:**

NAME	POSITION	CONTACT DETAILS	ID NUMBER	GENDER		RACE	NATURE OF DISABILITY (Where applicable)
				M	F		
1. Carl Schultz	<i>chairperson</i>	<i>Home No.:9183456</i>	7008265001087	*		W	
		<i>Tel No.:</i>					
		<i>Cell No.:</i>					
Heather Skinner	<i>Secretary</i>	<i>Home No.:</i>	5101230039084		*	W	
		<i>Tel No.:</i>					
		<i>Cell No.: 083 702 3216</i>					
Ama Rose Jugdew	<i>Treasurer</i>	<i>Cell:072 514 6496</i>	6309100096089		*	B	
David Payaniandi		<i>Board member</i>					
Adam Taylor	<i>Board member</i>	<i>Cell 0836569141</i>	7108045073081	*		W	
Philip Stoneman		<i>director</i>	<i>Cell: 073 270 3375</i>	7105285211082	*		W

a.

a.

**Profile of staff members**

Article III.  
(programme)

Article III.

(Provide position of key staff members involved in the

Categories of Staff Members (Identify categories of personnel from Schedule 1)	Number of staff with disabilities	1) 1) REPRESENTIVITY (State number)								Total Number
		2) 2) AFRICAN		3) 3) ASIAN		COLOURED		4) 4) WHITE		
		No. of M	No. of F	No of M	No. of F	No. of M	No. of F	No. of M	No. of F	
1. Trauma Support counselors & care-givers	0	0	7	0	0	0	1	1	3	12
2. Forensic Nurses	0	0	0	0	0	0	0	0	3	3
3. Administration	0	0	1	0	0	0	0	1	0	1
4. Outsourced medical assistance: Benoni Clinicross ; Lancet Laboratories	0									Not known.
5.										
6.										
<b>TOTAL</b>			8				1	1	6	14

b. b. Volunteers

Position of Volunteers	5) 5) RACE AND GENDER								TOTAL
	6) 6) AFRI CAN		7) 7) ASIA N		COLOURED		8) 8) WHIT E		
	No. of M	No. of F	No. of M	No. of F	No of M	No. of F	No. of M	No. of F	
1. Management		1	0	0		1	3	2	7
2. Fundraising	0	0	0	0	0	1	1	0	
3. Staff									
4. Other (specify)		7		1		1		3	
4.1.									
4.2.									
4.3.									
<b>TOTAL</b>		<b>8</b>		<b>1</b>		<b>3</b>	<b>4</b>	<b>5</b>	<b>21</b>

Yes

3.3.1. Does your organisation make use of volunteers?

11

3.3.2. If yes, please state the number of volunteers.

Yes

3.3.3. Do your volunteers receive stipend?

If yes, indicate amount R R50.00 per day = R600.00 per month.....

5 -five

3.3.3. Number of volunteers in receipt of stipend, if any.

3.3.4. What activities do your volunteers undertake?

Trauma Support...; Trauma Care givers, administrative functions, housecleaning; assistance with training.

3.3.5. Describe how volunteers participate in the planning, monitoring and evaluation of the service / programme?  
**Volunteers form part of the decision making process, and through the training aspect of the programme are encouraged to give feedback in order to improve service delivery**

**Capacity**  
**Yes**

**3.4.1. Does your organisation have sufficient capacity to implement the programme?**

3.4.2. If no, is there anything being done to improve that? If so please specify.

The centre is able to implement the plan – has done so since December 2005, however the need is so great capacity needs to be increased. The centre is currently evaluating how the centre can increase capacity and sustainability.

3.4.3. What is being done to improve the situation?

An organizational model and fundraising strategies are being developed to ensure organizational sustainability in consultation with Leonie Futter of the South African Institute for Traumatic Stress. Means of developing sustainable income via marketing programmes and the leasing of advertising space is being investigated.

**3.5. Affiliation with other service providers / entities**

3.5.1. Which networking or co-coordinating structure is the organisation/service affiliated to? This is not applicable to government services/projects.

NAME OF NETWORKING / CO-ORDINATING STRUCTURE	TICK ✓ APPLICABLE BOX	DATE OF AFFILIATION
National Coalition of Social Services (NACOSS)		
National Welfare Forum (NWF)		
Community Based Organisation network (CBO network)		
South African NGO Coalition (SANGOCO)		
National Council (Specify)		
NONE		
Other (Specify) -	Yes	Themba Lesizwe- South African network trauma service providers, South African Institute of traumatic stress : 2005 April

**3.5.2. Networking with other service providers**

*(List all the service providers known to you that are providing similar or other services in your area of operation)*

(a) similar services

Name of service	Nature of relationships (if any)
-----------------	----------------------------------

1. Kidz Clinic : Boksburg	Sharing of information / referrals
2. Kids Haven	Sharing of information / training
4.	

**(b) other services**

<i>Section 3.02</i>	<i>Section 3.02</i>	<i>Name of service</i>	<i>Nature of relationships (if any)</i>
1.	CMR		referrals
2.			
3.			
4.			

3.5.3. 3.5.3. Do you have written agreements with other service providers in relation to this or other organizations. If formalised, please submit proof of agreement(s).

**None**

## SECTION 4

### 4. SUSTAINABILITY PLAN

#### 4.1. Describe how the organization will sustain itself in the future to ensure continued service provision

The centre is at present developing a five year strategic objective and sustainability plan with Leonie Futter of South African Institute of traumatic stress to meet the needs of the centre. This plan includes our fundraising strategy and internal controls and measurement protocols to ensure sustainability. The centre has established a debit order facility, sms fundraising facility and an electronic media newsletter to raise awareness and market the centre. A Website, sponsored by the Aurora Rotary has been developed.

##### 4.1.1. 4.1.1. After cessation of funds from donor:

The strategic plan is based on the premise that funds will be raised from at least seven major donors between the years 2007 – 2012 with twenty percent of costs being raised from the community through fundraising events.

## SECTION 5

### 6. FINANCIAL MATTERS

#### 6.1. Name of the person responsible for managing your financial records

- ❖ ❖ Ama Rose Jugdew : Bookkeeper;
- ❖ ❖ Bruce Rees : CA

**See Attached Annexure: Audited Financial Documents. DOCUMENT AVAILABLE ON REQUEST.**

**Audit for 2006 – 2007 were as yet not available as the audit is still being carried out.**

**Unaudited financial statements AVAILABLE for April 2006- April 2007.**

#### 6.2. 6.2. Assets and liabilities

TYPE OF ASSETS AND LIABILITIES	A = Assets B = Liability (use A or L where applicable)	NUMBER	AMOUNT/VALUE
Buildings			
Motor Vehicle			
Cash at Hand			
Cash at bank: as at 6 May 7, 2007	A		R5800
Prepaid – accounts			
Accounts receivable			
• • Debtors			
• • Interest -			

Accounts payable:			
• • Taxes			
• • Creditors	L	4	
• • Rent			
• • Interest			
Accruals			

6.3. 6.3. **Summary of projected income and expenditure** (specific to this programme – Schedule 2 and 2.1)

**see audited documents:annexure d**

<b>INCOME</b>	<b>Financial Year (Past year) 200... / 200...</b>		<b>Financial Year (Current year) 2007... / 2008...</b>		<b>Financial Year (Next two years) 200... / 200...</b>	
<b>Expected / Current Income</b>						
International Donor Agencies						
Corporate Business						
National Development Agency						
National Lottery						
Departmental:- Financial Award/subsidy						
- Grant (HIV/AIDS)						
- EPWP						
- Poverty Funds						
Other departments-						
Membership Fee						
Interest received						
Other (specify)						
-						
<b>Subtotal</b>						
<b>INCOME</b>	<b>Financial Year (Past year) 200 / 200...</b>		<b>Financial Year (Current year) 2006 / 2007</b>		<b>Financial Year (Next two years) 200... / 200...</b>	
<b>EXPENDITURE</b>						
<b>Personal Expenditure</b>						
- Salary and Wages						
- Bonus						
- Honorarium						
<b>Office Expenditure</b>						
- Rent						

- Insurance						
- Books and Journals						
- Post & Telecommunication Services						
- Affiliation fees						
- Printed matter						
Other (specify) medical costs						
- accounts						
-						
<b>Subtotal</b>						

INCOME	Financial Year (Past year) 200... / 200...		Financial Year (Current year) 200... / 200...		Financial Year (Next two years) 200... / 200...	
<b>Social Relief</b>						
- Food						
- Clothing						
- Accommodation						
Other (specify)						
-						
-						
<b>Subtotal</b>						
<b>Special Services</b>						
- - Audit Costs						
- - Bank notes						
- - Fund raising						
Other (specify)						
-						
-						
<b>Subtotal</b>						
<b>Grounds and Buildings</b>						
- Capital and interest						
- (Private)						
- Capital and Interest (State)						
INCOME	Financial Year (Past year) 200... / 200...		Financial Year (Current year) 200... / 200...		Financial Year (Next two years) 200... / 200...	
- Maintenance						
- Insurance						
Other (specify)						
-						
-						
<b>Subtotal</b>						
<b>Domestic Expenditure (Facilities only)</b>						
- Food & Groceries						
- Linen						

- Toiletries						
- Medical						
- Pocket Money						
Other (specify)						
-						
-						
<b>Subtotal</b>						
<b>INCOME</b>	<b>Financial Year (Past year) 200... / 200...</b>		<b>Financial Year (Current year) 200... / 200...</b>		<b>Financial Year (Next two years) 200... / 200...</b>	
<b>Special Programme Expenditure</b>						
- Equipment						
- Transport						
- Refreshments						
- Hiring of						
- Halls/Facilities						
Other (specify)						
-						
-						
<b>Subtotal</b>						
<b>Sundries</b>						
- Research						
- Public Relations & Marketing						
- Security Equipment						
Other (specify)						
-						
-						
<b>Subtotal</b>						
<b>TOTAL INCOME</b>						
<b>TOTAL EXPENDITURE</b>						
<b>SURPLUS / SHORTAGE</b>						

**Yes**

6.4.3. Has your organisation received any other donations (in kind) in the last 3 years?

6.4.4. If Yes complete the following:

Name of Donor organisation	Type of donation received	Purpose for which donation was used	Date received
1. Miss Benoni	R167 000	Operational costs	May, / Oct 2006
2. Caxton newspapers	Cash R28 000	medication	November 2006
3. Community Monitoring services	Salaries for seconded staff	Personnel- previously salaries were paid directly to staff by Cms. As of June 2007 donation amount will be donated to the centre in order to pay staff directly.	2005 December to current
4.			

## SECTION 6

Article IV.

Article IV.

### 7. 7. MONITORING AND EVALUATION PLAN

#### 7.1. Balanced scorecard

Financial perspective	Customer perspective	Organisational (internal business perspective)	Innovation and learning perspective
1.monthly reports on progress to Board and as requested by donors.	Client questionnaires and surveys	Employee assessments	Training with SAITS
2. weekly statistics and report to Cms as requested.		Assessments with SAP	
3.		Assessments with Judiciary	
4.		Assessments with Clients	
5.			

#### 7.2. How often will monitoring and evaluation be conducted?

Evaluation is to be conducted on a monthly basis with prepared documents. Evaluation will monitor the outcome of services offered and will focus on the following projected outcomes:

1. 1. Time taken to assist client.
2. 2. Were full protocols followed with reference to S.A.P. and judiciary
3. 3. Are there successful convictions
4. 4. Did client receive correct medical and counseling support.
5. 5. Has client received ongoing counseling and medical support

## **Annexure A: Organisational Structure / Organogram**

## **Annexure B:**

The iThemba centre believes that the "Violence against Women" project for 2007/2008 can significantly reduce violence against women in the Greater Benoni East Rand Region and that the spread of HIV/AIDS due to Sexual violence can be reduced

However, in order to make a lasting difference in the battle against the twin pandemic of violence against women and the spread of HIV AIDS (*via sexual assault*) the community needs to be consulted, be a part of the process, play an integral role in the project and take ownership of the project.

The proposed violence against women project for 2007 / 2008 has four core elements necessary to address the high level of violence against women and stem the pandemic spread of HIV amongst women survivors of sexual offences.

### **Community Care.**

*Caring for the survivor- Re-connection with and re-integration of survivors into society.*

88% of the cases seen by the iThemba rape crisis centre are from the disadvantaged community. In essence this means that many of the survivors are unable to return to the centre for follow up blood tests, counselling and support. The concept of community care would be realised by the training of community members to establish a network of support groups for survivors of sexual violence. These members would then make contact with the survivors after the initial examination and counselling session and offer trauma support.

The community carer would then assist the survivor to return for her follow up blood tests.

### **Community Awareness**

*An awareness of the risks related to HIV and sexual violence and the risks in which people place themselves.*

The awareness programme will focus on educating the schools, churches and community based organisations in the Greater Benoni region. The education and awareness will focus on the following:

1. 1. Prevention of rape.
2. 2. Understanding the effects of HIV/AIDS and Sexually transmitted infections in the context of sexual offences
3. 3. Understanding Trauma

This awareness programme also serves as a means to introduce members of the community to the CARE programme

### **Community Response**

*The response of community based organisations, and services participating in the process of medico-legal services, social services and court support.*

The programme consists of the following:

A registered nurse conducts a forensic examination on the survivor of sexual assault. As part of the examination the nurse also performs a blood test for HIV/AIDS, a pregnancy test

and will provide Post-Exposure Prophylaxis, antibiotics and the morning after pill. Follow up HIV blood tests are arranged for six weeks, three months and six months. The forensic

sexual assault examination collection kit is then handed over to the South African Police Services for submission as evidence to the Benoni Prosecutorial authority. The Registered

Nurse may then be subpoenaed to testify. The iThemba Centre has established itself as an effective service provider to the judiciary services.

(Please note attached letter from prosecutors)

### **Community Empowerment**

Empowerment through the process of education and training, community members are enabled to offer trauma support to survivors in their community and assist with the process of re-integration. **The trauma support programme will work in partnership with the community awareness and training programme. Trauma counseling or support cannot exist on its own and needs to form part of a strategy that trains members of the community in trauma support and raises awareness about trauma.**

The following programme consists of five different spheres of training:

1. 1. Forensic nurses in-house training course.
2. 2. Advanced Trauma training (TT1) offered by the South African Institute of traumatic stress.
3. 3. The trauma support certificate course presented by the South African Institute of traumatic stress is an entry level course designed to provide volunteers with the skills needed for trauma work. Duration of the course is 12 days with 3 half days of supervision.
4. 4. Training of community care-givers.

**Annexure C**



