



# Victim Friendly System– Mid Term Evaluation

## Final Report

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## **Acronyms**

CALF	Child and Law Foundation
CCW	Case Care Workers
CSO	Civil Society Organisation
DoL	Division of Labour
DSS	Department of Social Services
DSSO	District Social Services officer
FGD	Focus Group Discussion
JSC	Judicial Services Commission
PCN	Primary Care Nurse
PVFU	Provincial Victim Friendly Unit
SCN-Z	Save the Children Norway Zimbabwe
SRGN	State Registered General Nurse
VFC	Victim Friendly Court
VFS	Victim Friendly System
VFU	Victim Friendly Unit
VSA	Violence and Sexual Abuse

## **Executive Summary**

This report presents findings of a mid-term review of the Victim Friendly System (VFS). The purpose of the evaluation is to determine the extent to which the project has achieved its intended results, outcomes or impacts from inception to date.

A qualitative and quantitative approach was adopted for the evaluation. Interviews were held with all stakeholders of the VFS in the courts, police, social services, health, education and Attorney General's Office. Focus group discussions were held with children in the community, and their care givers separately. Additional interviews were held with child survivors of sexual abuse. Quantitative data was drawn from secondary databases of the VFU and court case records from the regional courts visited for the evaluation. Lastly, observations were made of court proceedings for children who were sexually abused and Victim Friendly System (VFS) sub-committees.

## **Findings**

The Victim Friendly System has been a success. It demonstrates milestones that can be achieved between government civil society partnerships. Although there are still challenges mainly due to capacity gaps in government, the foundation and structural framework for the system is strong. Government ownership and leadership with consistent development partner support has enabled the establishment of the system. As a result, children are better protected at this point than they were in 1997 as more children are reporting sexual abuse cases and receiving fairer trials. The success of the VFS including ability to use information on child sexual abuse has raised national interest in the issue and provided a national response in the revision of legislation and policy to better protect children from and support child survivors of sexual abuse.

While the VFS has been, in general, a success there are still challenges and the programme has not been able to fully meet its intended results. Results that still lag behind include support and integration of child survivors of sexual abuse back in the community; and data management for monitoring of the system and lobbying and advocacy. Issues that need to be addressed to ensure the system works better for children include:

- limited government financing of the VFS limiting sustainability of the initiative beyond development partner support;
- lack of a clear and shared exit strategy for government to fully support the system;
- linkage between the VFS and the broader child protection system to ensure the continuum of care from pre-trial to post trial is provided to every child entering the system; and
- sharing of information between stakeholders to reduce children who enter the system to drop out.

The need to address these issues is urgent as sexual violence for children (girls and boys) and women is increasing. A recent study, the National Baseline Survey on the Life Experiences of Adolescents (NBSLEA) in 2012, showed that a third of girls (32.5%) and 1 in 10 boys (8.9%) aged 18-24 had experienced sexual violence in childhood. Nearly 1 in 10 girls compared to less than 1% of boys experienced physically forced sex (rape) prior to age 18. In the Zimbabwe

Demographic Health Survey of 2010-2011 at least 27% of women reported to have experienced sexual violence at some point during their lives.

## **Recommendations**

Based on the findings of the evaluation the following recommendations are proposed.

### **Recommendation 1: Strengthen national commitments (Strategic Plan for the VFS)**

Develop a national strategy or policy that is multi-faceted and systematic. The protocol provides the implementation framework for the Strategy or Policy but what are the Government Commitments that ensure that each stakeholders is operating within an agreed frame and facilitating the attained of agreed country goals.

- JSC to issue out a green paper to enable in-depth discussion on the issue of commitments and a finalized white paper
- National strategy, national plans or a national policy around the VFS led by a secretariat
- Multi-sectoral planning rather than sector silo based planning

### **Recommendation 2: Business Investment case**

There is need for a business investment case for the VFS

- The advantage of having a business case each supporting agency will plug resources into an already existing plan, so they fund areas that not funded and should be in accordance with the agreed plan covered under recommendation one.
- JSC will work on advancing the establishment of standardized plan that is costed so that they lobby Ministry of Finance and engage other external funding partners. Consideration should be given to both Human and financial resources to support implementation

External support should be complemented with lobbying the MoF with a costed plan and agreed time-bound deliverables.

### **Recommendation 3: Strengthen Stakeholder capacity (professional and non-professionals)**

This should be two pronged – pre-service and in-service aimed at ensuring highly functional staff and high quality services for children. The Government should invest in systematic education and training programme both for professional and non-professionals that is standardised. The key issues of focus should be:

- i. JSC facilitating the inclusion of the Protocol in the curriculum of Judicial Officers and influencing the Law Society of Zimbabwe
- ii. Facilitate inclusion of the protocol for managing survivors of sexual abuse in induction programmes for prosecutors, intermediaries and magistrates.
- iii. Police – integrate into the Police curriculum training concepts of working with children in contact with the law and support capacity of Police Updating centres for in-service training
- iv. Health – integrate forensic examination training into the curriculum of nurses
- v. National Prosecuting Agency – integration of child focused trial procedures
- vi. Court intermediaries – harmonized training that involves REPPSI and Lupane State University
- vii. Probation Officer – commitment to the programme
- viii. Higher Learning Institutions – integrate issues on the VFS in their learning agenda and have accredited training programmes

#### **Recommendation 4: Build confidence in the Judicial System**

Build trust in the services and make people aware of where to get help through creation of accessible and child friendly reporting systems and services - i.) establish safe, ii.) well published, iii.) confidential and iv.) accessible mechanism for reporting and receiving feedback. This may include using social media as reporting platforms.

Secondly support for civil society to support accountability of the system by strengthening community civil society linkages to ensure all cases go through the system.

In building confidence in the justice delivery system, there is need to:

- a) address abuse at community level:
  - create opportunities of ensuring linkages between the Chiefs at community level to other protection mechanisms for children
- b) Bring perpetrators to justice
  - ensure that they are held accountable through appropriate civil, administrative and professional proceedings
- c) implement a gender sensitive approach
  - consider the different risks that children encounter
  - promote and protect rights of women and the girl child
  - address gender discrimination as part of the comprehensive prevention strategy

#### **Recommendation 5: Improve data management**

There is need to strengthen use of evidence from the VFC data to inform policy and programming and track progress towards the goal of preventing violence and abuse.

JSC with stakeholders might develop one reporting system for stakeholders both Government and complementing NGOs in the VFS based on one monitoring and evaluation framework:

- agree indicators, and results (outputs, outcomes and impact as stated in the agreed strategy
- compile cross sectoral data that is shared amongst stakeholders, analysed and disseminated to monitor progress and inform programming

There is need to develop a research agenda for the VFS;

- Determine the magnitude, characteristics and trends of many forms of violence and abuse.
- This is critical for knowledge building and improved programme development. In addition, the research will build on evidence based policy

There is also need to agree on a compliance system that will make in mandatory for other stakeholders to provide data.

#### **Recommendation 6: Legislation Review Process**

Legislative provisions and national priorities need to aligned to the new Constitution.

- Align all Acts to the new provisions set in the Constitution
  - Children's Act
  - Criminal Procedure and Evidence Ammendment Act
  - Marriage Act
  - Domestic Violence Act 2006

- Births and registration Act.
- Civic education on the prohibition of violence and abuse needs to ensure that there is an element of legislative awareness

**Recommendation 7: Division of labour (DoL) to improve coordination support for the VFS**

To ensure coordination of support for the VFS and avoid duplication or piece-meal support, technical partners to the VFS should explore a division of labour (DoL) approach. With this approach funding partners shall divide support according to their technical and financial capacities. On lead partner should be selected to work with the JSC to coordinate technical partner support for the scale up of the system. In implementing the DoL approach technical partners should be allowed to contribute, technically or financially, to another partner designated as lead for a particular component of the VFS.

**Recommendation 8: Improve child and community participation**

The evaluation noted that child participation was non-existent in the VFS from national to regional court levels. It is therefore recommended that stakeholders put in place mechanisms to increase the voice of children in the planning and implementation of the VFS. Community participation is also weak with community representatives not participating or aware of the existence of VFS subcommittees. There is need to raise awareness among the VFS subcommittees of the need to include children and community representatives. However, the likely barrier to this would be the unavailability of resources to finance transport for community representatives and children to participate as these meetings were not funded at the time of the evaluation. This is a barrier stakeholders need to resolve.

**Recommendation 9: Save the Children to strategically position itself**

With the advent of many partners in the system and the advance of the VFS, Save the Children support needs to be more strategic taking advantage of its technical and financial capabilities to facilitate further expansion and sustainability of the system. Given its long standing relationship with the JSC and the Chief Magistrate’s Office the evaluation recommends the following:

- Save the Children continues financing the post of VFS National Coordinator but with a time bound exit strategy
- Save the Children should contribute technically and financially to the development of the national strategy

Save the children possesses a wealth of experience working with community based organisations across the country. There is scope for Save the Children to technically lead efforts aimed at building confidence in the system mentioned under **Recommendation 4**.

Save the Children should **NOT** support witness expenses as they have the danger of displacing government responsibility. Rather they should focus on building an investment case for witness expenses.

Training and capacity building should focus on long term sustainability that is mainstreaming the required skills and knowledge in existing curricula and induction processes. Save the Children’s participation should be at this level, working with other partners in advocating this to happen.



## 1 Introduction

This report presents findings of a mid-term review of the Victim Friendly System (VFS). The purpose of the evaluation is to determine the extent to which the project has achieved its intended results, outcomes or impacts from inception to date. More specifically the evaluation:

- a) assessed the extent to which the project has achieved its expected results (i.e. key milestones, outcomes and impacts in the short to medium term);
- b) assessed the cost and efficiency (in terms of value for money) of service provision through the VFS per child survivor, examining the added value of each technical and funding partner as well as exploring the most effective approach (whether cooperation or specialization) that will give the best/optimal use of position, skills and resources;
- c) identified the strengths, gaps, challenges and risks involved in this project taking special consideration of the likelihood and controls/measures (where relevant) to mitigate them.
- d) assessed the impact on how victims are dealt with in Zimbabwe and how they have recovered changed (have attitudes towards them and how they are treated at the community level, among professionals changed and how the children look at themselves and recover; and
- e) identified existing systems and structures that promote programme sustainability and exploring opportunities to strengthen the coordination of the Victim Friendly System
- f) drew lessons learnt and recommendations to strengthen project activities including specific areas of comparative advantage for Save the Children and other priorities that could be recommended for development partners to complement.

### 1.1 Background to the Victim Friendly System

The Victim Friendly System in Zimbabwe commenced in the 1990s. This has been documented by those who worked in pioneering the development of the system. The concept of the Victim Friendly Court System in Zimbabwe was a simultaneous development initiated by the Government, women and children's rights activists in the early 1990's. However, during that time things were somehow disjointed as there was no proper coordination<sup>1</sup>, in 1992, the vulnerable witness committee was set up by the Ministry of Justice, Legal and Parliamentary Affairs. The committee which comprised magistrates, prosecutors, and police officers was tasked to investigate problems faced by vulnerable witnesses in the Criminal Justice System in Zimbabwe.

In 1993 the committee presented the "Vulnerable Witnesses Committee Report" outlining the problems encountered by victims of crime and the suggested recommendations incorporated contributions by most stakeholders with an interest in women and children's rights and related issues. The report of the Vulnerable Witnesses Committee found that women and children were unfairly treated by the courts.<sup>2</sup> The findings and recommendations led to the formation of the Victim Friendly Court Committee that had oversight of the implementation of the protection of

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<sup>1</sup> Jusa D, (Superintendent Deputy National Coordinator (Victim Friendly Unit), Zimbabwe Republic Police. PART 1: PROTECTION OF VICTIMS OF CRIME AND THE ACTIVE PARTICIPATION OF VICTIMS IN THE CRIMINAL JUSTICE PROCESS IN ZIMBABWE, 131<sup>ST</sup> INTERNATIONAL TRAINING COURSE PARTICIPANTS' PAPERS, RESOURCE MATERIAL SERIES No.70, Country Report – Zimbabwe

<sup>2</sup> Jonathan Brakash: July 2003: (The Victim Friendly Courts System in Zimbabwe: A Holistic Approach To Child Sexual Abuse and HIV Prevention): Centre for Sexual and Reproductive Health

victims of crime and their active participation in the criminal justice system: (courts, police, hospitals, office of the attorney general, schools and the Department of Social Welfare). The foregoing introductory remarks will be the basis of examining the current situation, and effective counter measures under implementation in Zimbabwe.

NGO collaboration started in 1994 by the Ministry of Justice with the initial objective of making the courts accessible and responsive to the needs of vulnerable witnesses, especially women and children who were survivors of sexual offences (ibid).<sup>3</sup> The Ministry of Justice set up the National Committee for the Victim Friendly Courts. The mandate of the committee was to oversee the implementation of the protection of survivors of crime and their active participation in the criminal justice system: (courts, police, hospitals, schools and the Department of Social Welfare). This paved way for collaborative partnership and the inclusion of non-state actors.<sup>4</sup> It gradually expanded and now aims to provide care for the medical, legal, psychological and educational needs of the children and their families. An ultimate aim is to demonstrate through the actions of all government sectors that adults will protect children from violence and abuse.

The period between the years 1994 to 2002, the working relationships with NGO strengthened. The Family Support Trust was created in 1998 in partnership with the Ministry of Health and Child Welfare. The Ministry of Health provided a functioning working space at Harare Hospital, with STD/HIV testing for survivors of sexual violence. The Family Support Trust provides the salaries for trained staff (doctors, nurses, social workers and psychologists), conducts training workshops on child sexual abuse for hospital staff, and provides free services for survivors of child sexual abuse. A consortium of NGOs working against child abuse and the National Victim Friendly Committee later joined forces, creating the coordinating body “The Child and Law Foundation”<sup>5</sup>, which now holds all members accountable to each other, and sources and manages funds. Reddbarna (Save the Children Norway – Zimbabwe) <sup>6</sup> as it was known then came on board to support the committee’s work in its capacity as both a funding and technical partner through the Violence and Child Sexual Abuse (VSA) Programme. <sup>7</sup>At the present moment a total of more than ten survivor friendly clinics have been established with support from Save the Children and UNICEF through the National Action Plan for Orphans and Vulnerable Children.<sup>8</sup>

Given the above, the key drivers of abuse against children were the upsurge in the number of orphans and vulnerable children and this is attributed to the impact of the HIV and AIDS problem. At the present moment it is estimated that the number of orphans and vulnerable children is 1.6 million.<sup>9</sup> Other key drivers include cultural and religious belief systems that contribute to the abuse of children, the conflicts between customary marriage principles and the

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<sup>3</sup> Ibid

<sup>4</sup> Jusa D, 131<sup>ST</sup> INTERNATIONAL TRAINING COURSE PARTICIPANTS’ PAPERS, RESOURCE MATERIAL SERIES No.70, Country Report – Zimbabwe

<sup>5</sup> The organisation was formerly known as TARSC and now it was closed in 2005. The Consortium was under the leadership of Naira Khan

<sup>6</sup> The following names shall be used interchangeably that is Reddbarna, Save the Children – Norway Zimbabwe but they refer to Save the Children but for purposes of document clarity and credibility JIMAT shall use the names as they were known at the time of programming before the unification process in 2010.

<sup>7</sup> See Save the Children Norway – Zimbabwe Country Strategic Plan and Annual Plan Documents 2002 – 2005, and 2006 – 2009 documents.

<sup>8</sup> This is a Government of Zimbabwe national programme that is funded by a consortium of donors who support child protection interventions

<sup>9</sup> National Action Plan document 2010 – 2015, Government of Zimbabwe and UNICEF, 2010

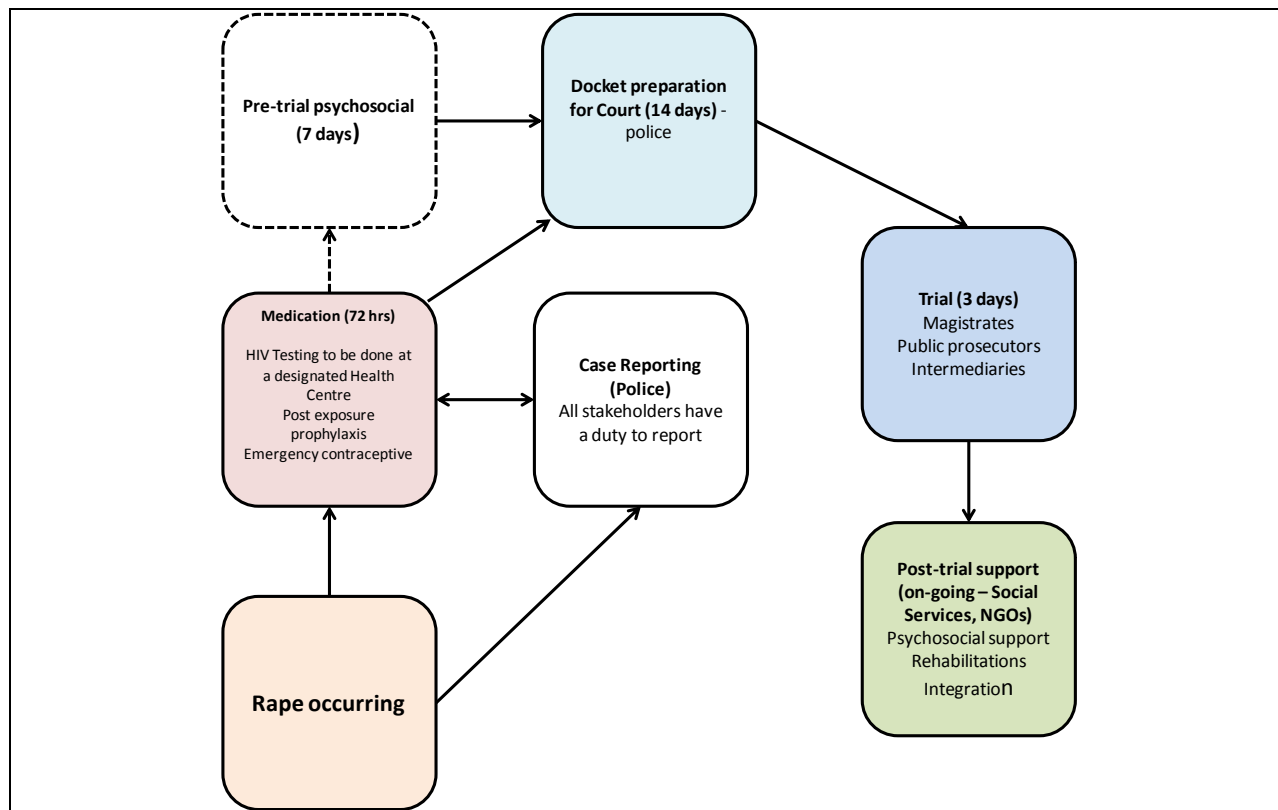
Marriages Act. Whilst it is permissible for a child to be married off after puberty in indigenous customary law this contradicts with the Sexual Offences Act which was repealed and now it is included in the Criminal Code.<sup>10</sup> The situation has been complicated now with the new Constitution of the Republic of Zimbabwe, 2013 which has set the marriageable age to 18 years without discriminating on the basis of sex as now it applies to both girls and boys. The legislative framework with its inherent flaws in a way contributed to the limited understanding of violence against children as they have conflicting provisions but since the supreme law now takes precedence therefore the situation is likely to be different.

The child protection sector especially the victim friendly system has expanded since inception as new players and stakeholders including funding partners have come on board. New areas are being pioneered as others are considering other categories of children which the system had not considered. This includes persons living with disability, provision of legal assistance to some of the children etc.

### 1.2 Structure of the Victim Friendly System

The Victim Friendly System incorporates a multi-sectoral approach based on providing a continuum of care from pre- to post trial support (Figure 1). The chain of care is premised on a referral system between the multi-sectoral service providers for survivors of sexual abuse. These service providers or stakeholders and their roles are presented in Table 1 below.

**Figure 1: Continuum of care in VFS**



<sup>10</sup> Criminal Law Reform and Codification Act : Chapter 9:23 . Zimbabwe 2004

**Table 1: Multi-sectoral stakeholders in the VFS**

<b>Stakeholder</b>	<b>Roles/Responsibilities</b>
Police	<ul style="list-style-type: none"> <li>Receive report</li> <li>Preparation of docket</li> <li>Investigating case</li> <li>Referral/accompaniment for medical treatment and support</li> <li>Referral to court</li> <li>Informing on bail conditions</li> <li>Ensuring victim or witness is adequately prepared for first court appearance</li> </ul>
Clinic	<ul style="list-style-type: none"> <li>HIV Testing</li> <li>Provision of Post exposure prophylaxis</li> <li>Provision of Emergency contraceptive</li> <li>Referral to police</li> <li>Preparation of medical affidavit</li> <li>Provision of counselling and psychosocial support</li> </ul>
Department of Social Services	<ul style="list-style-type: none"> <li>Allocate a Probation officer to manage the case</li> <li>Provide Probation Officer's report</li> <li>Referral to police and medical care</li> <li>Assist in identifying a place of safety</li> <li>Keeping regular contact with the child survivor, witness and their family to ensure they remain abreast of progress on the case</li> <li>Development and implementation of a case plan for monitoring and managing the case from onset to after trial. I abuse case from</li> </ul>
Judicial Services Commission/Court	<ul style="list-style-type: none"> <li>Conclude trial within three days</li> <li>Judgment and sentencing of alleged perpetrator</li> </ul>
Civil Society	<ul style="list-style-type: none"> <li>Reporting cases of sexual abuse to police</li> <li>Referral to Department of Social Services for case management</li> <li>Develop and implement prevention programmes</li> <li>Support functionality of VFCs</li> <li>Advocacy and lobbying for the fulfillment of the child survivor's rights</li> </ul>
CBOs/FBOs/Traditional leaders	<ul style="list-style-type: none"> <li>Reporting cases of sexual abuse to police</li> <li>Facilitating prevention programmes</li> <li>Ensure protection of survivor</li> </ul>
Child protection committees	<ul style="list-style-type: none"> <li>Reporting of cases</li> <li>Ensuring safety and protection of child survivor</li> <li>Facilitating prevention programmes</li> </ul>
School	<ul style="list-style-type: none"> <li>Formulation and implementation of child protection policies</li> <li>Proper investigation of cases happening at the school</li> <li>Refer cases to DSS/Police</li> <li>Educate children on measures to protect themselves from sexual abuse</li> <li>Offer psychosocial and morale support to children sexually</li> </ul>

	abused
Child led groups	Conscientise children on abuse Report cases of child sexual abuse
Parent or guardian	Conscientise children on abuse Report cases of child sexual abuse Cooperate with police/DSS during investigations

## 2 Methodology

The evaluation adopted a combination of quantitative and qualitative research methods to address the objectives of the study. Using appropriate tools of data collection, several sources of data were utilised and these included: (i) key informant interviews; (ii) Focus Group Discussions; (iii) in depth case study interviews; (iv) observation of court proceedings and VFS sub-committee meetings; and (v) literature review.

**Literature review:** At inception several documents were reviewed that included the following: Save the Children strategic plans from 1997 to the period 2010-2014; Evaluation of the Save the Children Norway's programme on reducing child sexual abuse; and annual reports of Save the Children Norway. During the evaluation several documents were reviewed including: (i) minutes/quarterly reports of the National VFS committee; multi-sectoral protocol on the management of sexual abuse and violence in Zimbabwe; programme reviews of other civil society organisations; studies within the system and other documents that may be identified during the consultations.

Data was also extracted from the JSC, VFU and MoPSE databases, and from court records in the regional courts that were visited.

**Key informant interviews:** Key informant interviews were held with the cross section of stakeholders in the VFS. These included:

- The police
- Judicial Services Commission
- Regional Courts
- Ministry of Primary and Secondary Education
- Ministry of Health and Child Care,
- Ministry of Labour and Social Services,
- Civil Society Organisations providing services and supporting the VFS
- Traditional Leaders

Key informants were purposively chosen based on their knowledge and participation in the VFS.

**Focus group discussions:** were held in selected communities with: caregivers; child survivors of sexual abuse; children in child led groups; and children out of school.

**Case study interviews:** were held with child survivors of sexual abuse and family members in households where child survivors had been reintegrated.

## 2.1 Selection of regional courts to visit

A combination of multistage and stratified random sampling was used to select a representative sample of cases of child sexual abuse and violence from court records. Provincial and regional courts were listed by region in line with the regions used by Judicial Service Commission. In stage one, stratified random sampling was used to select 40% of all provincial and all regional courts in each of the 3 regions used by Judicial Service Commission in the routine data reporting system. The following regional courts and provincial courts were selected:

**Table 2: Sampled district centres by region**

Count	Region	Sampled district centre
1	Eastern	Chitungwiza
2	Eastern	Harare
3	Eastern	Mutare
4	Eastern	Bindura
5	Central	Gokwe
6	Central	Gweru
7	Western	Bulawayo
8	Western	Hwange

## 2.2 Selection of respondents

Victim Friendly System Sub-committee members (Justice, Health, Education, Police, and CSOs) were interviewed at selected VFC. These members were interviewed individually or as a group if the field visit coincided with the VFSSC monthly meetings.

Child survivors were selected by partners working with Save the Children. Interviews were held at places that are safe and where issues of stigma and other negative perceptions are not reinforced.

Community members were randomly selected from communities where child survivors of sexual abuse were identified. During the focus group discussions no mention of the child visited was done. To date xxx number of children reached?

## 2.3 Value for money assessment

The following indicators were measured with the value for money assessment where possible:

- 1) Cost per child for different services in the VFC
- 2) Cost for supporting the VFC system per child
- 3) Cost per % increase in case reporting between 2009-2012
- 4) Cost per case averted between 2009-2012

## 2.4 Data analysis

Specific indicators were generated in SPSS in line with the list of indicators outlined in Table 1. Comparison between values of indicators before the project and after the project were used to

assess impact of the project and appropriate statistical tests were used to confirm whether differences were significant.

Cross-tabulations and statistical tests were used to enhance interpretation of data where necessary. The chi-square test was used to test for association.

### 3 Findings

There are at least 16 or 17 VFCs output results put together by the consultants. Need to cluster these outputs.

How has the report outlined the key components of CP systems (enabling environment, structures, functions, capacities, process of care, continuum of care, management and coordination etc)

How is the Theory of change linked to the CP System?

#### 3.1 VFC fully functional

Since inception, the focus of the Victim Friendly System (VFS) has been to increase the number of VFC in Zimbabwe as a central founding pillar for building the VFS. Spurred by the positive effects of VFC on the delivery of testimonies by child survivors of abuse, the government of Zimbabwe in cooperation with development partners has established 22 VFC as compared to none before 1997. The plan for VFC is well thought out and based on international best practice such as the **Guidelines on Action for Children in the Justice System in Africa**. Each VFC is to have a closed circuit system, child friendly waiting room, digital recorders and trained staff. The impact of the establishment and spread of VFC on realization of children's right to be heard and receive justice are immense. The evaluation team was inundated with testimonies from Regional magistrates and children on how the use of the VFC has improved the delivery of justice for child survivors of violence and abuse by ensuring they speak freely without fear of victimization from the perpetrator or the court room environment. The number of children handled by VFC has also increased from less than 500 in 1997 to 4705 in 2013 representing a 900% increase.

To support effectiveness of the VFC, revisions of legislation were undertaken to safeguard the rights of the child survivor and recently offender. Over the years the programme shifted focus from "during trial" support to encompass "pre- and post trial" support as a response to the realization of the need to maintain the continuum of care for survivors from reporting to recovery. To support this continuum of care efforts were made in establishing and strengthening a multi-sectoral approach to responding and managing survivors of sexual abuse and violence. This approach culminated in the institutionalizing of multi-sectoral VFC committee at regional courts and national level to manage and monitor implementation of the VFCs.

All these institutions were to ensure the VFCs function efficiently, offer child friendly services and environment and provide the space for children to realize their right to be heard. Resultantly, the evaluation set out to understand to what extent the VFCs are functional.

##### 3.1.1 Efficiency in completion of cases

Results of the evaluation show that as a direct result of the VFC and other initiatives to improve efficiency such as through the multi-sectoral protocol for the management of sexual abuse strengthened by a circular from the Chief Magistrate to limit trial of cases of child sexual abuse to three days have had a significant impact in reducing the time taken to conclude cases of child sexual abuse. Reduction in time taken to conclude cases gives the child survivor more time to heal and recover emotionally from the violence as they not continually asked to go through the experience during court examination. As per Table 3, sexual abuse cases brought to VFCs in 2000 took an average of 324.9 days to process until completion and this translates to an



average of 10 months and 25 days. Sexual abuse cases brought to Victim Friendly Courts in 2008 took an average of 170.3 days to process until completion and this translates to an average of 5 months and 18 days. Sexual abuse cases brought to Victim Friendly Courts in 2012 took an average of 122 days to process until completion and this translates to an average of 4 months and 3 days.

**Table 3: Time taken by the VFCs to process sexual abuse cases**

	<i>Mean in days</i>	<i>Mean in months</i>
2000	324.89	10.8
2008	170.26	5.7
2012	122.03	4.1
Overall	162.61	5.4

A p-value much less than 0.05 from the ANOVA test showed that the decrease in the time taken by Victim Friendly Courts to process sexual abuse cases between 2000 and 2012 was highly significant. This implies that the Victim Friendly system had a significant impact on reducing the sexual abuse case processing time by Victim Friendly Courts.

While the time taken to complete cases in the regional court has greatly improved by 62% since 2000 it is still higher than the target of 3 days per court case agreed in the Protocol on the Multi-sectoral Management of Abuse and Violence in Zimbabwe. This is a result of several factors. First, due to shortage of staffing in the regional courts a huge backlog of cases developed. In 2012 this huge backlog still existed. However, in 2013 an observable decrease in time taken to complete cases was noted primarily as a result of the circular from the Chief Magistrate's office that required all courts to clear their backlog. Discussions with Regional magistrates confirmed the decrease in the time taken to complete cases. However, they have been unable to meet three day standard.

Lack of decentralisation of regional courts is also a major reason for delays in the completion of cases. This issue was raised in 87.5% of the Regional Courts visited for the evaluation. While circuit courts are held to lessen this challenge, due to shortage of staff they are not held for the length of period required to ensure cases are completed and in some cases they are not held at the frequency required (e.g. Bindura). Survivors have to travel long distances, incur comparatively high costs which are not always reimbursed and in many cases they do not have a safe house or accommodation where the regional court is located. The evaluation team heard many cases of children sleeping at bus stations, shop pavements and (in one case) in a prison cell without adequate blankets or food waiting for their court case. In Mutare, the evaluation team observed a court case where the child survivor could not go through the court process as she felt cold and needed warm clothing. The reason was she had slept at the local bus station the night before the court case. All these factors negatively affect attendance of child survivors and other witnesses in court which in turn lengthens the court process. In Chitungwiza, the evaluation team observed a case being postponed because the key witness for the complainant could not afford to come to the regional court because he did not have money to finance the long journey to the court. The long distance might also be denying access to justice by marginalized and remote populations – for example it was reported that there were very few cases reaching the regional magistrate in Gokwe but on discussions with the District Social Services Officer (DSSO) and communities (care givers and traditional leaders) it was reported that cases are reported at the local police but because of the lack of means of travel very few would agree to taking the matter to courts. However, it is important to note that the Chief Magistrate's office already has plans to decentralize with about seven courts already identified

at the time of the evaluation (Chipinge, Guruve, Karoi, Plumtree, Mutoko, Tsholotsho and Chiredzi/Triangle).

Other reasons include:

- **Shortage of staff in the Legal Aid Directorate** has also slowed the conclusion of court cases as provision of legal assistance to deserving respondents is delayed.
- **Transfer of regional magistrates.** There are cases that have been put on hold, some for more than a year, due to transfers of regional magistrates who were handling the cases as cases cannot be handed over to another candidate without approval of a *denovo* application at the High Court.
- **Incomplete or inadequate dockets presented by Police and Area Prosecutors.** Although this has been on the decrease due to the VFS sub-committee meetings, the issue was highlighted to still contribute to delays in completion of cases.

Another reason of concern is the lack of common understanding between court staff and prosecutors on the need to conclude cases of child sexual abuse in a reasonable time<sup>11</sup>. Speaking with regional magistrates and court interpreters there is common understanding on the need to complete cases in the shortest time possible. On their part they prioritise cases involving child sexual abuse and aim to finish the case within three days. The evaluation team, heard of examples of court cases that had been concluded in a single day and some within three days but these were few and far between. However, this same understanding may not be apparent among prosecutors – mainly a result of their lack of training on handling child survivors of sexual abuse and the Protocol. For example, in Mutare the evaluation observed a court case involving two minors who had been involved in sodomy. Before the court session started the prosecutor, without prior discussions with the guardian or child, called the guardian sitting in the court and told her the case will be postponed to first week of December 2013 (some two months later) without regard to the implications of the postponement e.g. their ability to make it back to court given their financial circumstances, the emotional and psychological status of the child etc. When the court session eventually started the case was immediately postponed to this date without being heard.

### 3.1.2 Functionality and use of VFC equipment

VFC equipment include: the closed circuit system - TV, court public address system, earphones, recorders and separation room. In all but 2 regional courts the closed circuit system was working but at varying degrees. In Gweru, for example, the equipment was functioning. However, the equipment installed is different from the rest of the courts and the interpreters/intermediaries complained of the picture and audio quality which sometimes slows court proceedings (which have a knock on negative effect on use of VFC). Maintenance of equipment was fairly efficient at the time of the evaluation with the Chief Magistrate's office having one maintenance contractor for all VFC closed circuit equipment. Downtime of closed circuit equipment was on average two weeks an improvement from previous years but in some cases maintenance was delayed because the maintenance contractor is located in Harare.

The evaluation team however noticed a majority of the equipment was old and prone to frequent breakdowns making operating them inefficient and costly for the Chief Magistrate's office (in one case equipment would breakdown four times a month!). Court staff also complained of frequent

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<sup>11</sup> This is mainly due to the differences in understanding on the negative impact the delays hve on psychological status of the child.

breakdowns. Some of the equipment was last installed prior to 2000. Equipment of this nature needs to be replaced and serviced to make the VFC efficient.

The conference facility and recording equipment installed is not appropriate for a court set up and too old respectively. Regional court staff were of the view that the recording equipment should be similar to that in the high court which is best suited to a court set up and allows for digital recording etc. For recordings, in most regional courts there were reports of: (i) recycling of tapes which affects sound quality and (ii) frequent breakdown of the recording equipment which compromise documentation of proceedings.

Another challenge in equipping VFCs has been that several partners are involved but without an agreed standard for equipment (e.g. clear equipment specifications). The result has been either incomplete set of equipment, or wrong equipment all together in the case of the conference equipment and sub-standard equipment in the case of Gweru.

### *3.1.3 Utilisation of VFC*

The evaluation finds that VFCs are not being used whenever needed. Only two regional courts (25%) were using VFC whenever needed effectively. There are several reasons for this but three stand out as major contributors. First is inadequate VFCs at regional courts. In Harare for example, seven regional magistrates share two VFCs while in Bulawayo four regional magistrates share one VFC. The inadequacy of VFC in the regional courts is a direct result of the lack of space at Regional courts particularly for separation rooms. The acute shortage of space is apparent in Bindura and Mutare where the separation room doubles as an office for the interpreters and intermediaries. There have been attempts by technical partners to address this challenge at least in the short term by providing temporary structures such as the one in Mutoko but their appropriateness is yet to be determined. The chief challenge in creating more space is that all government buildings are owned and maintained by the Ministry of Housing and Public works which constrains the Chief Magistrate's office and technical partners who might want to assist.

The second issue is the directive by the Chief Magistrate's office for all regional courts to clear their backlog. While the directive has had a great positive effect on reducing the backlog (from 302 cases in 2012 to 209 at the time of the evaluation) and increasing the speed at which cases are completed it has had a negative ripple effect on use of the VFC. In all regional courts visited for the evaluation it was highlighted that using the VFC instead of the open court slows down proceedings (e.g. the time needed to communicate with the child and the availability of space, e.t.c). Because of the pressure to clear the backlog and slow nature of court proceedings in VFCs some regional magistrates preferred to hold a majority of the court proceedings for cases of child sexual abuse in open court. This sentiment was expressed in three regional courts visited by the evaluation team but could be widespread. For example, in focus group discussions with groups of child survivors of sexual abuse in Harare and Mutare about the 42.5% of the children had not gone through the VFC despite some highlighting that they were frightened to see the perpetrator in court. In Harare children below the ages of 12 years are the only ones using VFC because of high number of cases.

The third reason is that Area prosecutors are not fully aware of their roles and responsibilities with regards the Protocol on the multi-sectoral management of sexual abuse in Zimbabwe. For example, it requires the Prosecutor to determine, "whether a recommendation should be made to the court for the use of a separation room or other victim friendly provisions." However, most prosecutors do not have the skills to make this determination and rarely do they work with court

interpreters to assess the child. Therefore in most cases the child survivor is put in open court even if their emotional status may not have allowed it. The evaluation team observed two such cases where the child could not speak and when she did the testimony was not coherent – she looked visibly shaken.

In some cases interpreters complained that the way Prosecutors interview the children disturbs them mentally. However, majority of child survivors interviewed did not reflect this perspective. But as shown in the case of Mutare the main issue remains that, the prosecutor, in a majority of cases, may not understand their roles. Furthermore, and an issue of concern is that in most cases the intermediary only meets the child during court proceedings because prosecutors fail to introduce them prior to the court proceedings. This denies the intermediary the chance to create rapport with the child survivor important for ensuring effective delivery of testimony and in making the decision of whether to use open or closed court. In focus group discussions with child survivors of sexual abuse in Bulawayo and Harare, children highlighted that they did not get a chance to meet with the intermediaries before the court proceedings confirming the sentiments raised by intermediaries.

### 3.1.4 Capacity of staff at regional courts to handle child survivors of abuse

At the beginning of the VFS, the then Save the Children Norway Zimbabwe through the Child and Law Foundation, conducted an intensive training on child psychology and the handling of child survivors of sexual abuse for all court interpreters and translators from the first VFCs (the major cities – Bulawayo, Harare and Bindura). Discussions with intermediaries who underwent this training and still available highlighted that the training was relevant, comprehensive and adequate. It gave them the right skills and knowledge to be able to handle child survivors of sexual abuse before and during court proceedings. Interviews with two such trainees in Bindura and Bulawayo showed the importance of this kind of training. It was highlighted that in some instances intermediaries are unsure how to deal with certain circumstances (e.g. where the child survivor refuses to speak or they are too young e.g. below five years) which they can handle easily because of the training they received. However, a small number of this pool of trained intermediaries remains as many are no longer with the regional courts.

However, from year 2000, a renewed focus on strengthening the multi-sectoral approach was followed (with Save the Children taking the lead). This culminated in the launch of the first edition of the protocol on the multi-sectoral management of child sexual abuse and violence. With the introduction of the protocol the focus of training also shifted to implementation of the new protocol targeting the multi-sectoral stakeholders. But in all the training was mainly targeted at regional magistrates and police staff in the Victim Friendly Unit (VFU)<sup>12</sup>. Over the years the training shifted to nurses and doctors for forensic assessments as state registered nurses were allowed to conduct forensic assessments admissible in court. With the third generation protocol training has been expanded to prosecutors. In all the training of intermediaries was not prioritised (with a small proportion of the intermediaries only trained but mainly on the protocol) yet they have direct contact with the child and are charged with ensuring the child provides their oral evidence. According to intermediaries interviewed, the mainstream training for intermediaries does not cover handling child survivors of sexual abuse adequately<sup>13</sup>. Therefore, the combination of inadequate mainstream training (with regards to handling child survivors of

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<sup>12</sup> Promulgation of the Sexual offences Act (2001) also contributed to this focus. It defined the various forms of sexual abuse and respective sentencing structure including sodomy

<sup>13</sup> This needs to be explored further with a training follow up and feedback exercise to determine the specific gaps.

sexual abuse) and lack of in service training is negatively affecting intermediaries' ability to discharge duties to expected competency levels.

There have been efforts from the Chief Magistrate's office to equip intermediaries with additional skills in-service through partnerships with Lupane University (Court Translation and Interpretation) and REPSSI (Child Protection and Community Development). Interviews with intermediaries currently attending the two courses were held. There is a general satisfaction with the quality of training being offered but they raised concerns on the adequacy of the Lupane University training to adequately equip them with the skills for handling child survivors of sexual abuse. However, these two courses provide opportunities for improving intermediaries' skills in handling child survivors of sexual abuse.

There is need to include a component of how to handle child survivors of sexual abuse during the induction programme for intermediaries. This was said to be absent in the induction programme. This will provide a good platform for mainstreaming sustainability of training.

Training of prosecutors has also been a major gap in the training of staff at courts. Their conduct, reflected in the Mutare example of unilateral postponement of a case, demonstrates the inadequate capacity to handle child survivors of sexual abuse. Rarely are children given an orientation of the court environment and adequately prepared for court proceedings a responsibility of prosecutors working with intermediaries. In one focus group discussion in Bulawayo a child survivor of sexual abuse commented, *"...in the court I did not understand the questions they were asking me. I understood very little of what was happening."* This situation compromises the delivery of justice as the child may give an incoherent testimony (as the case in Mutare where evaluators witnessed a similar situation). During 2013, partners in the VFS realised this gap and training of prosecutors on the third generation protocol began mainly through funding from Save the Children.

While knowledge and skill capacity is still a gap for intermediaries and prosecutors, some of the challenges observed are not merely a result of this but also the shortage of staff at courts. Shortage of staff (intermediaries, magistrates and prosecutors) results in staff being overburdened leading to them not conducting their work to the expected levels. For example, in one training of trainers of workshop for prosecutors it was highlighted that there are about 700 dockets of rape cases ready for regional court in Chinhoyi but with only one regional magistrate the cases will never take off. In the same meeting they highlighted that, "Preparation for rape cases is not being given enough time because of work overload." In some cases Area Prosecutors and Public Prosecutors in charge are referring junior prosecutors to handle cases without any orientation given. This compromises the delivery of justice as cases are flawed.

### 3.1.5 Appropriateness of design and quality of training

Apart from the trainings at the beginning of the VFS in 1997, the training of court staff has largely centred on the current protocol for managing sexual abuse in Zimbabwe. This training while fundamental, only equips trainees with procedural ability – roles, responsibilities and relationships. It does not equip them with the softer skills of handling, caring, and managing child survivors of sexual abuse and conducting sexual offences court cases. This aspect of the training needs to be included for all categories of court room staff – intermediaries, magistrates and prosecutors.

The design of the trainings is premised on a cascading model – equipping trainers who will in turn train others. This is a commendable approach to ensuring the training is efficient and

sustainable. However, it has its challenges in the current context of staff shortages. The high level of staff shortage makes the current staff overwhelmed by their core business leaving very little time to effectively train others. Other options that could be explored may include influencing induction programmes and in-service trainings such as those for intermediaries highlighted earlier.

Follow up of trainees is a critical component of training that confirms whether the skills and knowledge transferred are used. It can also be used as an opportunity to assess other factors that support or undermine utilisation of these skills and knowledge that maybe issues for advocacy and lobbying or improvement of training content and approach. This increases the “*value for money*” of the training. The evaluation finds that follow up of trainees has been minimal and needs to be added to the current design of training programmes.

Cross-departmental training sessions with external trainers (e.g. prosecutors and intermediaries and magistrates) could be a good addition to the training design to enhance the relationship building important to facilitate effective utilisation of skills and knowledge.

### 3.1.6 Child friendliness of the court environment

The evaluation assessed the child friendliness of the court environment. This was defined according to the following:

- 1) Equipment available and functional
- 2) Child friendly space available and adequately furnished – breakaway room/interview room (toys, other play materials for the child)
- 3) Children have no contact with perpetrator
- 4) Separation room for child is available and fully furnished (anatomically correct dolls, wall murals/decorations and play material)
- 5) Child friendly interviewing skills for court staff and prosecutors
- 6) Child provided with information about court processes
- 7) Children are being heard
- 8) Children are being given feedback
- 9) Snacks and food are available
- 10) Safe house for overnight stay available for the child during trial

Using these criteria Table 4 presents an assessment of the extent of child friendliness at VFCs visited. From the table it is evidently clear that none of the VFCs visited is fully child friendly. When the different components are considered significant progress has been made in creating and equipping separation rooms, provision of closed circuit equipment and snacks and food for children. But challenges exist in capacity to handle child survivors, provision of information to children about the court process, feedback to children and their caregivers on progress with the trial and availability of safe-houses for overnight stay.

**Table 4: Child friendliness of Victim Friendly Courts**

Key								
<b>Red</b>	<b>Not child friendly</b>							
<b>Orange</b>	<b>Somewhat child friendly but additional attention and capacity required</b>							
<b>Green</b>	<b>Child friendly</b>							
<b>Criteria</b>	<b>Hwange</b>	<b>Gokwe</b>	<b>Gweru</b>	<b>Bindura</b>	<b>Bulawayo</b>	<b>Harare</b>	<b>Chitungwiza</b>	<b>Mutare</b>
Equipment available and functional	Green	Green	Orange	Orange	Red	Red	Orange	Orange
Child friendly space available and adequately furnished – breakaway room/interview room (toys, other play materials for the child)	Red	Green	Red	Red	Red	Red	Orange	Red
Children have no contact with perpetrator	Orange	Orange	Red	Red	Red	Red	Orange	Red
Separation room for child is available and fully furnished (anatomically correct dolls and play material)	Green	Green	Green	Orange	Green	Green	Green	Orange
Child friendly interviewing skills for court staff and prosecutors	Orange	Orange	Orange	Orange	Orange	Red	Orange	Red
Child provided with information about court processes	Red	Red	Red	Red	Red	Red	Red	Red
Children are being heard	Orange	Orange	Orange	Orange	Orange	Orange	Orange	Orange
Children are being given feedback	Red	Red	Red	Red	Red	Red	Red	Red
Snacks and food are available	Orange	Orange	Orange	Orange	Orange	Orange	Orange	Orange
Safe house for overnight stay available for the child during trial	Green	Red	Red	Red	Orange	Orange	Red	Red

Below we detail the rationale behind the rating above.

#### 3.1.6.1 Equipment available and functioning

Frequent breakdowns, obsolete and in some cases wrong equipment were limiting the use of VFCs resulting in a majority of children having their cases tried in open court despite their vulnerability. Of the areas visited only Hwange and Gokwe seem to have fully functioning equipment with very few breakdowns when compared to the rest of the regional courts. In some cases such as Bulawayo, VFC have not been used for more than a year because of breakdowns.

#### 3.1.6.2 Child friendly space available and adequately furnished – breakaway room/interview room (toys, other play materials for the child)

In a majority of the regional courts visited breakaway rooms or waiting rooms were not available due to limited space. These are rooms that children can wait in while awaiting the beginning of court proceedings to avoid contact with the perpetrator. In most cases children wait together with the caregivers on the benches outside court rooms. Because of the absence of these rooms there is little prior interviewing of children by intermediaries. In some cases, Bulawayo, Bindura and Gweru, the office of intermediaries is used for interviewing. But this has its limitations as in all these courts there is only one office for intermediaries so creating this space is a challenge. The rooms also still need to be fully furnished with play materials. This can be achieved at the local level. For example, in Hwange, the VFS sub-committee requested civil society and Hwange Colliery to provide play material, snacks and blankets for the safe house built by Save the Children.

#### 3.1.6.3 Children have no contact with perpetrator

The limitation of space at courts is undermining this objective. With limited space for breakaway rooms and breakdown of VFC equipment child survivors in most cases are in contact with the perpetrator. In Gweru for example the waiting benches are directly opposite the holding cells for alleged perpetrators. The perpetrator has to go past the benches that the child survivor is seating on their way to court in chains. Children interviewed highlighted that this experience negatively affects their emotional status. In some cases intermediaries reported, child survivors after going through such a situation, have changed their testimonies – exonerating the alleged perpetrator.

Gokwe is an exception when compared to other VFCs. This mainly due to the limited number of rape cases that the regional court handles.

#### 3.1.6.4 Separation room for child is available and fully furnished (anatomically correct dolls and play material)

All VFCs had a separation room refurbished to make them child friendly and well equipped with anatomically correct dolls. In 75% (6 VFCs) of the VFCs visited the separation rooms provide the ideal environment that is child friendly. But due to shortages of space, in two of the VFCs (Bindura and Mutare), the separation room doubles as the office of the intermediaries or recorder. The office type environment deflates the purpose of the decorations on the walls as children may find the set up intimidating.



#### 3.1.6.5 Child friendly interviewing skills for court staff and prosecutors

As highlighted earlier, in all the VFCs visited the majority of intermediaries and all prosecutors have not been trained in handling child survivors of sexual abuse. This also extends in child friendly interviewing skills. Often complaints were raised on how prosecutors cross-examine child survivors and that intermediaries face challenges in handling child survivors of sexual abuse. Despite this, some progress has been recorded especially with the training on the protocol which has conscientised court staff on the need to handle child survivors of sexual abuse differently resulting in endeavors to achieve this. However, the lack of child friendly skills still undermines their effectiveness. For example, caregivers in FGDs complained that prosecutors had limited child interviewing skills, rather they interrogated children. It was also highlighted that children from rural areas find it difficult to testify in rape case because the names of private parts may not be socio-culturally correct to speak. Urban children are easier to handle in this respect as they are more exposed than their rural counterparts. However, these nuances are not always considered by prosecutors or defendants' private practice lawyers.

The court system still faces challenges in handling child survivors of abuse who are living with a disability such as the deaf and dumb. For example, a trial involving a child survivor who was deaf and dumb in Mutare had to take almost a year to complete because it was difficult to find an intermediary to communicate with the child. This was made worse because the child was not literate in sign language.

#### 3.1.6.6 Child provided with information about court processes

Rarely are children provided information about court processes. This is a function of lack of knowledge on the part of prosecutors and the work overload they experience due to understaffing.

#### 3.1.6.7 Children are being heard

The establishment of the closed system ensures children are heard. However, frequent breakdowns in some cases undermine this. Secondly, children seem not be having much say in how the trial proceeds. For example, as observed by the evaluation team during one trial and highlighted earlier in Mutare, children are not always consulted on the postponement of cases by prosecutors. When child survivors of sexual abuse were asked on whether they knew why their cases had been postponed and asked to vote a majority (in Mutare, Harare and Bulawayo), 82%, said they did not know why the trial was postponed and they had not been consulted on the decision by the prosecutor. This shows our observations in Mutare trial may be widespread and therefore need to be addressed through training, awareness and monitoring.

In a few of the cases children reported that statements they made at the police station were not read out to them and found them changed during trial. This compromises the children's right to be heard.

#### 3.1.6.8 Children are being given feedback

Children are not being given feedback on the outcome of the trial or the stage at which the trial is at across all VFCs. For example in focus group discussions with child survivors of sexual abuse the following were said by children:

*"I don't know what happened I just saw him come back. No one told me why he came back we suspected he paid the prosecutors and judge." FGD Mutare*

*“I was told by my friends that he was released from remand prison. I was so scared to walk in the streets.” FGD Bulawayo*

Some were unaware of the outcome of the case because once the child survivor finishes their cross-examination they are free not to attend trial.

#### 3.1.6.9 Snacks and food are available

As many child survivors of sexual abuse travel long distances to attend trial and in some cases spend the greater part of the day without eating, the provision of snacks and food to children helps in making the court environment child friendly. While snacks and food were not always available, the evaluation noted the situation had vastly improved from pre-2010 levels. This has mainly been because of funding from technical partners. At local level VFS subcommittees especially in Bulawayo and Hwange have also been pursuing local civil society organizations to provide snacks and food for children.

#### 3.1.6.10 Safe houses for overnight stay available for the child during trial

With exception of Hwange where Save the Children assisted with the building of a safe house at the VFU, the availability of safe houses for overnight stay during trial is a major challenge for VFCs. At these regional courts availability of safe houses depended on the extent of civil society activity particularly those operating residential care for children deprived of parental care. This is because places of safety from government as provided for in the Children’s Act are not always available or full. In Gokwe where such activity is low it was reported that in some cases witnesses have to sleep at the local police station in a police cell because there is no safe house and the few facilities for residential care are always full and are unable to accommodate witnesses. In Mutare witnesses sleep at the local bus station in the open when places are full in residential care. Bulawayo, although there is high civil society activity places are not always available when required. For example, the team coincided with a case involving two children who stay in Plumtree who had been physically abused by their maid while the parents stayed in South Africa. They had come to Bulawayo for the initial hearing of the case. The District Social Services Office was frantically looking for a house to place the children without success as all were full. Only after begging one of the residential care providers, did the children get a place. In Gokwe, one guardian vowed to the magistrate they would not return for the court proceedings after the trial was adjourned because they had spent the night in a police cell, without blankets, food and water for bathing as there were no rooms for overnight stay.

#### 3.1.6.11 Witnesses expenses available and accessible

Reimbursement of witness expenses is an important part of the justice delivery system in Zimbabwe and is safeguarded by law. This ensures that witnesses are able to attend trial and provide testimonies without being prejudiced due to lack of money. However, due to hyperinflation – before 2009 – and government being under-resourced – after adoption of multi-currency – JSC had found it difficult to meet witness expenses when required. This was in turn compromising the delivery of justice as cases were lengthened because witnesses could not come to court. Since 2011, UNICEF and Save the Children have been supporting the Chief Magistrate’s office to meet this need for cases of child sexual abuse. Through this support technical partners have improved the justice delivery system by enabling some 3,705 witnesses

attend court representing some 305 cases<sup>14</sup>. A total of \$84,306.00 has been provided over the three years. Provision of witness expenses has also enabled cases to be heard in a timely manner as this has reduced the period of unavailability of witness expenses from as much as 6 months to two weeks.

However, delays in disbursements which are in turn a symptom of late acquittals from the Chief Magistrate's office have resulted in some witnesses failing to attend court because reimbursements will not be available. In Chitungwiza, the evaluation team coincided with the postponement of a case where the chief witness for the complainant in a child sexual abuse case could not turn up for court because reimbursements were not available. In all VFCs visited stories were abundant of how regional and provincial magistrates and intermediaries have had to use their personal finances to either buy food or provide money for transport for traveling witnesses. Secondly, witness expenses are treated as a reimbursement. In many cases, especially witnesses from rural areas may not even have the money to travel to the regional court. This is another area of concern which needs to be critically assessed.

### 3.2 Victim Friendly Unit is fully functional

This section details findings of the evaluation on the functionality of the Victim Friendly Unit. It answers the following questions according to the Evaluation Framework:

- Are police officers manning VFU adequately trained? What proportion of the VFU have specialized trained staff **(only for those VFU to be visited by the evaluation and broader if data exists)**?
- What mechanisms have been instituted to integrate the management of sexual abuse in the training curriculum of Police training Depot? **Note:** background, action taken, consequences and knowledge gained (BACK framework)
- Was special training offered outside the Police Training Depot adequate? Who provided the training and what are/were the gaps?
- Are VFU manned by specialist staff or general police station staff?
- Are VFU staff aware and knowledgeable of guidelines and standards for supporting and assisting child survivors and child offenders? Are these being followed and what are the challenges?
- What are child survivors' views on the quality of support offered by the VFU? How does this compare with the guidelines and standards?
- To what extent have the VFS guidelines been shared with Police Officers? What was done in the past and how best should guidelines be shared in the future?

#### 3.2.1 *Speciality training*

Since establishment of the Victim Friendly Unit in the Police, Save the Children and other partners including UNICEF, Childline, Msasa, etc, have been involved in supporting building the capacity of police officers manning VFUs in handling sexual abuse cases for children and adults.

**Despite the numbers of police staff who were trained, the proportion of police staff currently in post at VFUs who have received specialized training in handling child survivors of sexual abuse is variable** with some VFUs having no trained staff, or low

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<sup>14</sup> UNICEF and JSC (2013) VFC Mid Term Review

proportions, while in some almost all staff received training. **Nonetheless over half of the VFUs visited (62.5% (5/8)) had at least 50% of staff that had received training in handling child survivors of sexual abuse** with those in urban areas likely to have more trained staff than in rural areas. But our sample size was too small to make a conclusive judgement on this but it does provide an indication of the current situation. In the provinces visited the proportion of VFU staff that had received training on handling sexual abuse cases ranged from 33.3% (1/3) in Gokwe to 100% (4/4) in Bulawayo and Hwange. At district VFU level the proportion of VFU staff that had received training on handling sexual abuse cases ranged from 0% in Gokwe and Manoti to 78.6% (55/70) and 66.7% in Rusape. The specialized training is provided in-service with the most critical provider being the Professional Updating Centres<sup>15</sup>, Legal Resources Foundation, JSC, Childline, Musasa Project, Ministry of Health, Ministry of Education facilitators. However, it was not clear whether standard training guidelines are used by the different stakeholders and further investigation is required.

There are several factors that affect sustainability of capacity in the VFU including:

1. **Staff rotation in the police force.** Frequent staff rotation between departments and geographical locations depletes capacity in the VFU as trained police staff are relocated to other departments. Rotation of police staff results in depletion of the trained in-post staff at VFU.
2. **Inadequate resources at VFU and linkages with other service providers.** The police force in general faces transport challenges and the VFU is not spared. This results in police manning VFUs using public transport to get the child survivor and perpetrator to court in many cases in the same vehicle. In some instances, as reported by police officers in Bindura during a VFS subcommittee meeting attended by the evaluation team, police staff have to use their own money to enable the survivor or perpetrator go to court. In other cases, a child survivor might have nowhere to go as the perpetrator might be a guardian they are living with. Police officers reported in some cases having to offer accommodation and food to child survivors because “there would be nowhere else to go.” This makes the VFU unattractive for most police officers affecting their motivation. **The provision of accommodation and food from personal funds shows two critical shortcomings in the system at present: i) limited linkages between different service providers to provide the required service adequately and in a timely manner and ii) the limited availability of service providers and services available for child survivors of sexual abuse.**

There were attempts, by the JSC, during the period of the evaluation to provide sustainability to training of police staff through incorporating a module on handling survivors of sexual abuse in the Police Staff Training College but this was not successful because it required the review of the entire College training curriculum. **However, there may be a middle of the road solution by building the capacity of staff in the Provincial Updating Centres to provide in-service training for new staff in the VFU.** This would ensure a more targeted training and aligned to the Police force’s own internal training programmes.

### 3.2.2 *Perceptions on the quality of in-service training on sexual abuse case handling*

Respondents from 4 out of the 7 Provincial VFUs (PVFUs) visited viewed the training as being relevant and the content as being adequate. However, all PVFU respondents were of the view that the duration of training needs to be longer and frequency of training needs to be increased.

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<sup>15</sup> A police in-service training department based at provincial level. It is also responsible for induction programmes.

The content of training for VFU staff was cited as management of sexual abuse cases, counselling and management of domestic violence cases, investigation and evidence gathering, docket compilation, human rights, gender issues, handling of victims, appreciating efforts of others, conducting crime awareness campaigns. Officers who received training were of the view that training received was very helpful since it shaped their attitudes towards work, gave knowledge and boosted confidence on how to manage sexual abuse cases.

### 3.2.3 Knowledge on Guidelines and standards for supporting child survivors and child offenders

Officers in 5 out of the 7 VFUs visited had adequate knowledge of guidelines and standards for supporting child survivors and child offenders. There was a strong association between exposure to training on sexual abuse issues and knowledge of guidelines and standards for supporting child survivors and child offenders. Officers who had received training had up to date knowledge of standards and guidelines whereas officers without training did not have adequate knowledge.

Guidelines were cited as Multi-sectoral protocol on management of sexual abuse cases, “Guidelines on Handling Victims of Sexual Offences and Aspects of the Investigation” document by Isabel N. Sergio, pocket books on effective police responses to violence against women and children in Zimbabwe, and internal circulars on handling victims of sexual abuse.

Officers who are trained are following guidelines when they are in the office but outside the office it is not possible to follow guidelines when they are not supported with necessary resources. Responding officers indicated that at times they are forced to travel with a survivor of sexual abuse and a perpetrator in the same vehicle due to unavailability of transport required for guidelines to be followed.

### 3.2.4 Views of children on functionality of VFU

A majority of children interviewed were satisfied with services provided at the police stations visited. Children highlighted being put in a separate room from other visitors, and the general friendliness of police staff. However, there were complaints related to being: interviewed by too many police officers at the same time; made to wait in a long queue and called names. Others complained of not receiving explanations for transfer of cases from one police station to another leaving them confused as to how the seriously the police were treating their cases, while others viewed delays in investigations into cases as deliberate or corruption because no feedback is provided for the delays. A child in Bulawayo complained the statement she gave at the police station was different from that read at the court.

## **3.3 Pre, during and post trial service provision is adequate, of the right quality and provided in a timely manner leading to sexually abused children fully integrated into society**

This section details findings of the evaluation on the ability of the VFS to provide pre, during and post trial support.

### 3.3.1 Availability of services for survivors and witnesses

Service provision has evolved over the period of the evaluation. From a focus on during trial support to building a continuum of care from pre-, during and post trial. One of the land mark

successes is the advocacy and lobbying by CSOs led by Save the Children and UNICEF, to change the Criminal Procedure and Evidence Act to allow state registered nurses to perform forensic examinations, which was a prerogative of trained and registered medical doctors. This presented immense opportunities for expanding pre-trial support to reach even the remotest parts of the country. Subsequent to this has been training of nurses in forensic assessments across the country. Save the Children since 2005 had also increased focus on expanding pre-trial support (to include psychosocial support) and post trial support focusing on successful reintegration into society of child survivors of sexual abuse.

Save the Children, UNICEF and partners (particularly through supporting the Family Support Trust model) has also successfully lobbied for the establishment of survivor friendly clinics within public district hospitals and run by government staff. Already, in addition to those run by the Family Support Trust, a total of 2 such clinics have been established through Save the Children support. These clinics allow survivors of sexual abuse to receive assistance in a discreet and survivor friendly environment allowing more survivors to seek treatment.

From the survivors interviewed for the evaluation several services were being offered to survivors of abuse across the continuum of pre-, during and post trial through various organisations and government departments including:

- Department of Social Services (DSS);
- Family Support Trust run survivor friendly clinics in selected government hospitals, survivor friendly clinics run by government,
- NGO's with support from Save the Children, Child Protection Fund, UNICEF and private funders.

**Table 5: Provides a list of services being provided to child survivors of sexual abuse**

Institution	Pre-trial	During trial	Post trial
Department of social services	Placement of survivors in places of safety Counselling Link to other service providers	None	Reintegration of child survivor and follow up Link to other service providers
Survivor Friendly Clinics (government run)	Medical assistance and completion of medical affidavits	None	
VFU	Preparation of docket	Accompaniment of survivors to court	
Family Support Trust survivor friendly clinics	Medical assistance and completion of medical affidavits Counselling and psychosocial support Link to other service providers Advice on court processes		Counselling and psychosocial support

NGOs (including private homes)	Safe houses Counselling and psychosocial support Helping survivors access the justice system	Snacks Safe houses	
Save the Children and Unicef	Through NGO's above	Witness expenses Snacks	

As can be seen from Table 5 above service provision is concentrated during pre-trial and reduces along the continuum (during and post trial). As the child progresses through the system they are less likely to receive support. This is because of things: post trial support is longer term and more expensive and therefore concentration is upstream. In addition in Zimbabwe, according to the Children's Act [Chapter 5:06] civil society organisations are prohibited from managing cases of child abuse, including sexual abuse. This role is the prerogative of government through the Department of Social Services. However, despite efforts to capacitate the department through the Child Protection Fund, the department remains incapacitated in terms of human resources and transport to be able to play this role effectively. This has resulted in many children being supported at pre-trial stage dropping out of the system. Since most perpetrators are relatives or family members, reporting and incarceration of a fellow family member or relative can lead to the child being an outcast in the family leaving them without adequate care and support from immediate family support systems. One such case was met in Bulawayo and highlighted later in the report in Section 7, case study 1.

Services across the continuum of care<sup>16</sup> are not always available in all places and at all times. For example most of the pre-trial support being offered to child survivors interviewed is located in urban centres covering large catchment areas. For example, the child survivor friendly clinic at Gokwe district hospital covers the whole of Gokwe (Gokwe North and Gokwe South) a radius of more than 200km. Many child survivors cannot easily access this service and if they do, it is delayed and evidence may be destroyed. Again the long distances deprive them of the constant counseling and psychosocial support they require. Although, the the Criminal Procedure and Evidence Act permits state registered nurses in any health facility to conduct forensic assessments many nurses in rural clinics are reluctant to do this as (i) they do not want to be involved in the court proceedings or (ii) they have not been trained in forensic assessments. What this shows is that although the Sexual Offences Act allows for pre-trial medical assistance to be widespread nurses in most parts of the country are not providing this service.

### 3.3.2 *Medical assistance*

At health facilities survivors of sexual abuse are supposed to undergo forensic examination and receive: HIV testing, post exposure prophylaxis, emergency contraceptive and pregnancy termination (if requested) services. They are also supposed to receive these services free of charge. Children confirmed receiving these services at health facilities. In Bulawayo children reported that their stay at the hospital was "comfortable" "friendly" and were "treated well". They reported on arrival at the clinic they got tested for HIV and went for counseling.

However, discussions with health staff in victim friendly clinics, revealed that these services were irregular in primary health facilities as some were manned by Primary Care Nurse (PCN) who are not authorized to conduct forensic assessments. In such cases it was reported that the survivor would be referred to a higher level facility without any service being offered e.g. HIV

<sup>16</sup> See Figure 1 for illustration of the continuum of care

testing and post exposure prophylaxis. Even in higher level facilities not all services are available. For example, nurses at Mutare Provincial Hospital highlighted that pregnancy termination services were unavailable because the hospital did not have a scanner. A child survivor needed to pay US\$20 for pregnancy scanning at a private facility for termination services to be provided at the health facility. There is scope here for the extension of Assisted Medical Treatment orders.

### 3.3.3 Safe houses

For those children abused by their primary caregivers, safe houses, which are mainly institutions for children deprived of parental care, are the main the sources. But these are in most cases full as there is a shortage of institutional care residences. Stories were abound from DSS staff about how difficult it was to find a safe house for a child survivor as institutions of care are always full. In Mutare the evaluation team visited Simukai Trust – the main institution of care in Mutare for sexually abused children. The institution was full and could not take any more children even for a short timeframe while a child survivor awaits trial.

### 3.3.4 Witness expenses

As highlighted earlier in this report, the availability of witness expenses has greatly improved enabling many children and witnesses to access the justice system who would otherwise not have been able. The replenishment period has also been reduced to about two to three weeks meaning this service is almost always available.

### 3.3.5 Victim Friendly Unit

As discussed under the section on the Victim Friendly Unit, great strides have been made in improving the quality of service offered to child survivors of sexual abuse at police stations. A majority of child survivors interviewed in Mutare and Bulawayo, highlighted that they had been treated well and were satisfied with the service they were provided. This can be attributed to greater awareness among police manning VFUs of the need to treat child survivors of sexual violence differently. In these cases child survivors reported they were taken to a separate room for interview but some had to wait in line with others requiring service. However, as highlighted in the VFU section, many police officers manning VFUs still remain untrained due to frequent rotations of duty stations within the police force. This has resulted in some survivors not getting a child friendly service. For example, one child survivor in Mutare had to narrate her story to three different police officers. The statement she gave the police and compared to that which was read in the court were different.

Interviews with VFS members had consensus on the improvement in completeness of dockets prepared by the police. The evaluators were informed of how in the past police dockets were incomplete which delayed completion of trials and also delivery of justice.

Police staff from the VFU were also reported to be accompanying child survivors to court. However, the quality of this service is compromised by inadequate resources within the police. The evaluation team was informed that because of that because of inadequate staff at VFU and lack of money for transport, the perpetrator and child survivor would travel to the court with one police staff member in most cases in the same vehicle. This has a negative effect on the friendliness of this service from police. In some cases police staff have to use their own resources to assist survivors to reach the court. The evaluation team attended a VFS meeting in



Bindura which had 75% of the attendees being police. They highlighted the issue of having to use their own money to pay for transport to bring survivors to court.

### 3.3.6 Mandatory reporting

Mandatory reporting of child sexual abuse as required by the Children's Act, as a service in pre-trial support, is not being done in all cases and especially so when the survivor enters through the public health system. There were reports of police conniving with perpetrators to drop the case and even playing middlemen between the perpetrator's family and survivors family to reach a negotiated solution or simply receiving bribes from the perpetrator or their family to not proceed with case including delays in investigation. One such incidence was recorded in one of the districts visited and case was resolved by the provincial commanding Officer. Clinic or hospital staff at survivor friendly clinics were either too afraid to report as they live in the same communities and feared retribution or witchcraft, or were not aware of the mandatory reporting.

### 3.3.7 Post trial support

Post trial support services mainly focus on reintegration of child survivor back into the community or family. Reintegration focuses on reducing the child's vulnerability to repeat abuse. From the results of the evaluation post trial support was being provided by FST clinics and DSS. There were also cases where local NGOs worked with the DSS to identify family members of the child for reunification and integration. However, these services are by Law (Children's Act [Chapter 5:06]) the prerogative of the DSS. There were cases of successful reunification of child survivors with relatives such as those reported by DSSOs in Hwange and Gokwe where with the help CBOs children placed in safe houses were able to be reunited with other family members sometimes in other districts. But, for a majority of child survivors post trial support is unavailable exposing them to repeat abuse especially when the majority of perpetrators are close family who reside in the same house with them. A combination of factors cause this, some of which have been discussed above, including incapacitates of the DSS to satisfy the scale of need, lack of formal linkages between the VFS and the broader child protection system, and the cost of service provision.

### 3.3.8 Adequacy of services

The adequacy of services is variable. In intensively supported FST clinics survivors with support from the CPF are provided the full range of pre-trial support including: HIV testing, post exposure prophylaxis, emergency contraceptive and pre-trial psychosocial support. In government run survivor friendly clinics, where nursing staff have other responsibilities within the facility apart from serving in the clinic, psychosocial support is in most cases an event and not continuous as at FST run clinics.

### 3.3.9 Coordination among service providers

Coordination of service delivery is currently weak resulting in children not receiving all the services they require and also dropping out of service provision during the continuum of care. There is little sharing of databases between stakeholders, despite several platforms to do so including the District Child Protection Committees and the VFS subcommittees. This results in very little complimentary in service provision between different service providers, which in turn limits the provision of a comprehensive package for the child survivor. Furthermore children, from the VFS do not enter the child protection system which would provide the longer term support required post trial mainly because there are weak linkages between the VFS and the

broader child protection system and institutions including the Child Protection Committees. The main reason is that there are no formal arrangements to share databases of cases between stakeholders to enable this to happen.

### 3.3.10 National Case Management System

To address the weaknesses in service delivery DSS with support from development partners, World Education (with USAID funding), UNICEF, Save the Children and UMCOR developed and are now scaling up a new case management model that aims to improve access to pre-, during and post trial support for child survivors of sexual abuse and violence. The Case Management model centers on case care workers (CCWs), trusted community volunteers who often already assist vulnerable children through local child protection committees or other 'safety net' structures. Under the Case Management model, case care workers receive:

1. Skills to identify, reach, and respond to vulnerable children who need assistance.
2. A comprehensive understanding of community services and methods to make and follow up on referrals sent to community and government providers through the DSS.
3. An understanding of case reporting structures and protocols between the community, district, and national structures.

Case care Workers are paired with vulnerable children identified by communities, schools, churches, NGOs, etc., and help them access necessary support. Case care workers remain with children until they receive services.

The case management model also aims to bring together community and government service providers so they can learn about each other's services and set up a basic referral system. By strengthening coordination between providers, DSS ensures that children and families access critical services.

Parallel to setting up the case management system, the DSS is reviewing the national case management policy through standardizing the response to vulnerable children by incorporating community care resources into a formal referral network. The revised policy will train and deploy DSS social work staff to assist over 30,000 vulnerable households by 2017.

At the time of the evaluation this system was only starting and therefore not evaluable to determine the extent to which it had improved the access to care by survivors of sexual abuse and violence.

## **3.4 Information management and utilisation**

### 3.4.1 Chief Magistrate's Office

Information management, analysis and its use for decision making is key for programme planning and implementation. The VFS has received support from Save the Children and UNICEF to support data management and analysis. Save the Children provided support for JSC to develop a database of sexual abuse cases handled through the courts. This included financing the establishment of a central automated database of child sexual abuse and violence cases handled by the courts. The aim was to facilitate evidence based decision making at all

levels of the VFS. Support for the National VFS coordinator by Save the Children also aimed to improve utilisation of information collected through this VFS monitoring system. Since 2010 UNICEF has been providing technical assistance for analysis of information in the database to inform policy, programme planning and implementation. In 2012, UNICEF supported a review of the database which culminated in a subsequent revision of data collection forms but which were yet to be rolled out at the time of the evaluation.

#### 3.4.1.1 Findings

**The evaluation found that regional courts were sending required information to the Chief Magistrate's office on a monthly basis.** Data being captured from the Victim Friendly Court system was being compiled manually in the form of monthly returns and these were being submitted to JSC Head Office as hard copies. Data on individual sexual abuse cases was also being captured using a sexual abuse data collection form and completed forms were being submitted to Head office on a monthly basis. Sexual abuse data collection forms were being entered into a database at Head Office.

**The quality of this information sent by regional courts is not verified in a majority of cases by the Chief Magistrate's office as the National VFS coordinator is most often overwhelmed with work at national level. This lack of verification and over dependence on self reporting compromises quality of data.** For example, there have been concerns raised on reporting on case backlog for cases of child sexual abuse and violence by regional courts as some may under report their case backlogs to fit within the directive of no case backlogs by the Chief Magistrate's office.

**Furthermore, while provinces were submitting monthly returns to the Chief Magistrate's Office on a monthly basis these were not in standardized formats.** For instance some regional courts used summary data sheets with variables that included name of court, date, cases brought forward, cases completed and cases carried forward, whilst others included name of court, cases brought forward and cases completed but excluded date or cases carried forward. **It is recommended that the monthly return form proposed by the Secondary Data Review consultant in 2012 be adopted as a standard instrument for monthly returns and this will improve the quality and quantity of data available for policy decisions.**

**Data utilisation at national level remained a challenge in the period of the evaluation.** Data from the database at Head Office was only analysed for the first time in 2012 with assistance from a database review consultant with financing from UNICEF. **This implies that information from the VFS did not add significant value to policy formulation and programme implementation during the period 1997 to 2011.** In addition a review of National VFS Subcommittee minutes since 2011 shows that data from the database is not used in discussions which affects some of the decisions made or delays decision making affecting effectiveness in implementation of the VFS. Thus apart from the 2012 comprehensive review there has not been extensive use of the database.

On the database, the evaluation team's review of the database at the Chief Magistrate's Office revealed that some variables on the 'Sexual Abuse Data Capture Form' were not being interpreted in a standard way by different courts. For instance the variable on place of occurrence were interpreted as the description of the environment in which the abuse occurred by some courts whilst other courts stated village or physical address as the place of occurrence. **The mismatch between the number of sexual abuse cases reported through the monthly return system and the number of cases in the database revealed that regional courts**

were not capturing a lot of cases through the sexual abuse data collection form. It is recommended that all clerks at the Victim Friendly Courts need to undergo training on standard procedures for completing the sexual abuse data capture forms and how to ensure high quality standards. JSC is also recommended to fast track adoption of the real time data system proposed by the database review consultant in 2012 to improve completeness and timeliness of data.

Data utilisation to inform programme implementation at regional court level is limited. Several challenges are faced including:

1. **lack of computerisation at regional court level.** Thus, data can only be analysed manually. This is pain stacking work and many regional courts see this not worth the trouble.
2. **lack of knowledge on use of data for decision making.** There is limited knowledge at regional courts on how the information they are being asked to collect by the Chief Magistrate's office is used for and how the information could benefit implementation of the VFS at the local level. There is limited knowledge of the analysis that can be made from the data and decisions that can emanate from it.
3. **limited feedback from the Chief Magistrate's office on results of data analysis.** There is limited feedback to regional courts on results of data they collect for the VFS. This has resulted in regional courts viewing data collection as a duty for head office rather than as an exercise for self introspection.

**Resultantly, in most VFS sub-committee meetings, data collected for the VFS by regional courts is not used in VFS sub-committee meetings at regional level.**

#### 3.4.2 Management of data by VFU

The evaluation revealed that VFUs were capturing data in a standard format at district and provincial level. Variables in the database included type of offense, district, age of offender, age of complainant, relationship between accused and complainant and place of occurrence.

Sexual abuse data was being analysed and used at provincial level. Analysis was being done manually and included establishing of trends and patterns in the occurrence of sexual abuse at provincial level. Graphs were also being drawn manually. Information generated by VFUs was being used to inform campaign strategies for communities and schools. Data was also submitted to VFU Head Office on a regular basis.

#### 3.4.3 Information sharing among VFS stakeholders for planning

**There is a general lack of information sharing among stakeholders in the VFS.** The study revealed that in the subcommittee meetings VFUs were sharing information on trends in the occurrence of sexual abuse but detailed information was not shared due to the policy on confidentiality. The same was for databases from the Ministry of Health victim friendly clinics whose statistics were rarely shared in VFS sub-committee meetings. The Victim Friendly Courts were only being able to share administrative information (e.g. shortage of funds for witness expenses) since data was not being analysed at Regional Court level.

**The fact that VFS subcommittee members were not sharing information in meetings can be attributed to lack of standard indicators to monitor the activities within the system according to an agreed Monitoring and Evaluation plan.** Secondly, the capacity within the different stakeholders to collate and analyse data is also weak.

### **3.5 VFS is well coordinated with all multi-sectoral members aware of their roles and responsibilities**

The evaluation sought to understand the extent to which the VFS is coordinated to ensure efficiency and effectiveness of the delivery of services for child survivors of violence and sexual abuse. The following questions were answered by this section:

- a) How is the programme coordinated?
- b) How often are coordination meetings carried out? Are minutes available and actions undertaken as a result of the coordination role?
- c) Which institution carries the coordination role? How appropriate is it to carry out this role? How effective has been (clear roles and responsibilities, well informed members, communication channels are smooth, human capacity and other resources)? What challenges exist? (**Issues:** Are coordination structures working? What is the perspective of members on the state of coordination? What are the strengths and weaknesses?)

VFS programme coordination has evolved since initiation in 1997. At inception the VFS was housed in the Child and Law Foundation with funding from Save the Children Norway in Zimbabwe (SCN-Z). Through the Child and Law Foundation, government departments including the police were funded to roll out the initiative in different regional courts and police stations. Capacity building was also a central component of this work through to 2005. During this period, 1997-2005, coordination of the VFS was centralized at national level led by Child and Law Foundation. This parallel system of management of an ideally government led programme undermined government leadership and in turn sustainability of the initiative. Secondly with the growth in number of regional courts, VFUs and adoption of a multi-stakeholder approach (with various government departments, ministries and the civil society) in the VFS the need for a coordinating body capable of the impetus to bring government and civil society together became apparent. Child and Law Foundation was no longer relevant to take the coordination role of the initiative as it did not have the capacity to bring government and civil society together and to support a decentralized coordination structure in a sustainable manner. Therefore coordination responsibilities were institutionalized within government through the Ministry of Justice, Legal and Parliamentary Affairs (MoJLPA). Within the MoJLPA the Judiciary Services Commission was selected with the Chief Magistrate's Office taking lead in coordination as the coordinating agency.

Due to the lack of capacity in the Chief Magistrate's Office a joint decision (Save the Children Norway and Chief Magistrate's Office) was made to recruit a national coordinator for the VFS responsible for day to day management of coordination activities, providing technical and administrative support and monitoring of the implementation of the VFS. The position was fully funded by SCN-Z. This arrangement was planned as a transitory strategy while government's capacity was built to fully takeover coordination responsibilities and their financing. However, there was no clear strategy specifying the timeframe for this transition, the processes of weaning off and for complete exit by Save the Children.

In the process a National VFS coordinating body was instituted – the VFS National Committee chaired by the Chief Magistrate and comprising all stakeholders involved in the VFS. In the process decentralized institutions were also established in the form of VFS Sub-committees chaired by regional magistrates. The regional sub-committees mirrored the representation in the

national committee in terms of the broadness of stakeholders involved in the VFS which include government departments and ministries, civil society and private sector (in some regions e.g. Hwange). The regional chairpersons of the VFS sub-committees were to report to the Chief Magistrate but working on a day to day with the National Coordinator. The aim of the sub-committees was to increase coordination of activities, build local response in the issue of sexual abuse and violence for children and to monitor progress in the implementation of the VFS. Issues from the sub-committee would be brought to the National Committee for deliberation and decisions on way forward.

### *3.5.1 Functionality of the VFS coordination structures*

#### Strengths

At the time of the evaluation this system of coordination was still in existence and operational. The VFS subcommittees and national committee were meeting on a monthly basis as planned (every last Thursday of the month). It seems coordination has been improved by these meetings at sub-committee level. In interviews, evaluators were given several examples of changes and initiatives that have been taken as a result of the sub-committee meetings which would not have happened in its absence. In Mutare, a case involving a child survivor of sexual abuse who was dumb and deaf was taking too long to complete because the court could not source a sign reader which could understand the informal sign language. The issue was raised in the VFS sub-committee and an interpreter was found through the help of an NGO, Nzeve Trust and the case was completed and the perpetrator convicted. In Gweru, the VFS sub-committee members decided to invite the media to one of the meetings to raise awareness on the issue of child sexual abuse and violence through the print media. A subsequent article was then produced and included the local paper on the issue. In Hwange, the regional court through the VFS sub-committee was able to raise the issue of lack of play material and lack of snacks for children while waiting for trial, and the lack of blankets at the safe house. Through the VFS sub-committee blankets were sourced from Hwange Colliery Company, snacks and play toys were provided by a local NGO thus improving the child friendliness of the VFS..

In addition, in Gokwe, Gweru and Bindura, it was reported that after observations on the increase of child sexual abuse cases it was agreed that the Police, Department of Social Services and the Regional Magistrates conduct joint awareness visits in communities. These contributed to increasing knowledge and awareness on the dangers of child sexual abuse and what to do in the event such cases being unearthed. Lastly, across all regional courts visited the following were also reported as having been improved after they were raised in VFS sub-committee meetings reducing the time period for trial and enhancing child friendliness of the VFS: (i) incomplete dockets; and (ii) incorrectly completed medical affidavits.

The VFS sub-committee meetings have also enabled stakeholders to know who to approach for different situations. For example in Mutare and Hwange it was highlighted by court staff that they now know whom to contact for different services required by children during trial e.g. place of safety, food or transport etc. In all areas visited there was improved understanding of stakeholder roles although there are still challenges. The sub-committees have provided a cost efficient way of disseminating information to stakeholders. For example, in all sub-committees visited the multi-sectoral protocol was being disseminated through shared reading during sub-committee meetings ensuring all stakeholders were aware of its contents.

Support for the National Coordinator has enabled the decentralized structures to be sustainable. The need for constant reporting on activities and meetings has enabled the meetings to be

continuously held at regional level and monthly reports submitted to the National Coordinator. Without this position coordination would have been weak.

Leadership and passion from the Chief Magistrate is also contributing to continued functioning of the subcommittees. In addition, personal interest and passion for the issue of reducing child sexual abuse among regional magistrates is also a strong contributor to sustained functioning of the sub-committees. These attributes need to be built upon to strengthen sustainability of the system.

### Weaknesses

However, there are several issues that still undermine their effectiveness. First not all stakeholders participate in the VFS sub-committee meetings. In particular staff from Ministry of Education, Ministry of Health and the Department of Social Services did not participate consistently throughout the regional courts visited and minutes reviewed for the evaluation while the police were the most consistent. Civil society participated to varying degrees in the different sub-committees with none in Bindura and several in Harare. The non participation of these critical stakeholders undermines the effectiveness of the system and in particular issues of providing the continuum of care to child survivors. For Ministry of Health staff and Department of Social Services staff the main reason provided is shortage of staff in post resulting in the work load not allowing them time to attend the meetings. While this may be true, given that the meeting is held once a month and takes less than two hours (from the sub-committee meetings attended by the evaluation team) the issue maybe lack of prioritization of the VFS by the staff members.

With the regional court, it seems the VFS is seen as responsibility of the Regional Magistrate with little involvement from the provincial magistrates yet they are key staff within the VFS as administrators of witness expenses, the courts and allocation of its staff.

*"I am involved sometimes but since it is a regional court issue I do not have much interest in it".* **Provincial magistrate**

Child participation is still weak in the coordination structures. Not one VFS sub-committee involved children and had plans to do so. All stakeholders expressed ignorance on this need. In addition to participation of children community leaders are not participating in the meetings as envisaged with the exception of Gokwe for some meetings. The main issue raised in the VFS sub-committees was the non-availability of funding to bring these community leaders to meetings as there is no budget for the VFS sub-committee meetings. In some cases regional courts have had to use money for snacks allocated to children to fund these meetings which is an issue of concern. Where community leaders attend it is because the centre is close to their homes and they do not incur huge expenses to attend the meetings. The experience of the evaluation team shows the agenda for the meetings are not always clear and shared before the meeting. Stakeholders come unprepared or not expecting what the discussions will focus on which makes the meetings unstructured and in some cases lack direction. The meetings are also not informed by any particular monitoring data from police, clinics, VFC and civil society as there is lack of an M&E system. This compromises the quality of discussions which in turn can result in fatigue and lack of interest among stakeholders, thus, weakening coordination. Furthermore, while meetings are conducted not all sub-committees are sending their minutes consistently to the coordinator. This affects nationwide coordination and oversight of the VFS.

Monitoring visits by the National Coordinator to the VFS subcommittees to offer technical support and supervision are few and far between. This undermines continued improvement in

the operations of the sub-committees. Secondly, there is little feedback on the minutes and reports sent by sub-committees from the Chief Magistrate’s office. This again negatively affects commitment at local level and in turn functioning of the sub-committees. Analysis done by the Chief Magistrate’s Office shows that all sub-committees were not consistent in submitting their minutes with the exception of Rusape as presented in Table 6.

**Table 6: Sub-committee minutes sent to the National Coordinator**

	Jan	Feb	March	Apr	May	Jun	Jul	Aug
<b>Bindura</b>					■	■		
<b>Bulawayo</b>					■	■		
<b>Chinhoyi</b>								
<b>Chivhu</b>			■	■	■			
<b>Chitungwiza</b>				■				
<b>Gokwe</b>								
<b>Gwanda</b>	■	■	■					
<b>Gweru</b>	■	■	■	■				
<b>Harare</b>	■	■	■	■	■	■		
<b>Hwange</b>				■				
<b>Marondera</b>		■						
<b>Masvingo</b>								
<b>Murehwa</b>	■		■					
<b>Mutare</b>			■	■	■			
<b>Rusape</b>	■	■	■	■	■	■	■	

Source: UNICEF and Chief Magistrate’s Office (2013) Mid Term Review of the VFS

\*Areas in black bars represent submission of minutes

There is need for sharing of best practice and lessons between the subcommittees to ensure they learn from each other. While annual meetings are held for regional magistrates, this is not adequate as it captures only one stakeholder. For example the evaluation unearthed many lessons and initiatives in the different regions that could be applied to others with great success. A newsletter and facilitation of exchange visits would be effective in this regard.

There is no clear understanding of roles and responsibilities among different stakeholders at local level. The court cases observed in Mutare and highlighted earlier in the report, the lack of



participation of some stakeholders in the VFS sub-committee meetings all point to this. While there is a good understanding at national level, this has not translated to the local level. There is need for awareness sessions on the roles and responsibilities of different stakeholders within the system at local level. This affects participation of primary stakeholders in the sub-committee meetings and contributions to the system. However current dissemination of the protocol during subcommittee meetings is likely to improve this issue.

Perhaps one of the major issues that will affect future sustainability of coordination of the system is the lack of a clear strategy for full control and financing of coordination by the Chief Magistrate's office. For example there is no clear exit strategy for the National Coordinator post. While it was relevant to continue with financing of the post there is need for a clear and mutually understood and agreed exit plan for the position. This would allow efforts aimed at building capacity for exit to be implemented.

### ***3.5.2 Relevance of the coordinating agency***

The selection of MoJLPA as the coordinating agency was relevant at the time of the decision. The Ministry was responsible for administration of courts which are central to the VFS. Secondly being a government ministry it would have the capacity to bring together other government ministries and civil society. Lastly, placing responsibility for day to day coordination within the Judiciary Services Commission and in the Chief Magistrate's Office was also relevant as the Commission has the mandate for court administration. As evidenced by results of improved coordination discussed earlier, the Chief Magistrate's Office has demonstrated that it has the capacity within its regional courts to coordinate the sub-committees.

But there are challenges. As with all government institutions, the Chief Magistrate's Office is resource constrained. This affects its capacity to fully coordinate the system. With the shift of the Judicial Services Commission to an independent institution under the new constitution, the Chief Magistrate may lose its "ministry" status which may result in other government ministries not responding well to coordination meetings or needs of the VFS.

While this may be a challenge the Judiciary Services Commission, the Chief Magistrate's Office remains the most appropriate institution to coordinate the VFS because they administer courts which are central to the system. Without their leadership it will be difficult to implement the VFS as it stands. The focus should be on strengthening the capacity of the Judicial Services Commission to carry out this role. This can be done by adopting a transitional strategy for the post of National Coordinator that situates the position as an MoLJPA position but working under delegated authority in Judiciary Services Commission. This would mean MoLJPA will have overall authority on coordinating the VFS. In this way, the Chief Magistrate's Office's capacity in dealing with other government ministries in the VFS would be strengthened..

## **3.6 Performance of stakeholders**

This section details an assessment of the performance of various VFS stakeholders in line with their roles and responsibilities. These include government stakeholders and development partners.

### ***3.6.1 Government stakeholders***

The performance of various government stakeholders in the VFS was assessed against the criteria presented in Annex 2 for each stakeholder. In general performance of government stakeholders varies between little progress to some progress to ideal scenario. The worst performers in the VFS are Ministry of Primary and Secondary Education, Department of Social

Services, Ministry of Health and Child Care and the Attorney General's (AG) office. Police show some progress towards the ideal with over 50% police officers manning VFU trained and a majority of them handling survivors in a friendly manner. However, incidences of collusion in handling cases of child sexual abuse where some officers were reported to facilitate negotiations between the perpetrator and survivor representatives to avoid prosecution threaten to draw back progress. Rotation of police officers between police stations and sections displaces capacity and without institutionalization of capacity building towards dealing with child sexual abuse cases, capacity will dwindle over time and this progress might regress.

The AG's office is severely under staffed and also lacks training in their responsibilities in the multi-sectoral protocol on managing child sexual abuse. This has resulted in very limited pre- and during trial support for survivors such as:

- a) orientation on court processes, providing children and their caregivers adequate information on the proceedings and progress on the case;
- b) expediting court processes for child sexual abuse cases; and
- c) lobbying the court for timeous/prioritisation of completion of child abuse cases and introducing the child to intermediaries and other facilities before trial.

The Government of Zimbabwe has contributed to the VFS in various ways. First, government has full ownership of the programme as the lead of the initiative. Through this, government with technical assistance from civil society has provided a strong legal framework for the establishment and operation of the VFS including the following:

- Promulgating the Sexual Offences Act (2001) which defines the various forms of sexual abuse and respective sentencing structure including sodomy
- Child Protection and Adoption Act Amended in 2001
  - establishment of Child welfare fund –
  - Child welfare council – with the responsibility to advise the Government on children's issues (welfare and protection)
- Amending the Criminal Procedure and Evidence Act to facilitate establishment of VFCs and further amending it into one single code Criminal Act (Codification and Reform Act 2006) allowing doctors and State Registered Nurses to provide forensic evidence admissible in court
- Domestic Violence Act 2006

While government has shown ownership of the initiative, it has not provided the ideal vision and strategic leadership for the VFS in the form of a clear strategy for its growth and sustainability. In particular, a clear pathway to full government control, financing and ownership of the operations of the system has been lacking since inception of the initiative. In the past government contributed to during trial support in the form of witness expenses, legal assistance from the Legal Aid Directorate. However, its capacity to continue doing so has dwindled with contraction of the economy since 2000 although the provisions are still in place. Resultantly financing of activities of the VFS have mainly been development partner driven. Given the lack of strategic direction from government this support has been provided in a disjointed manner.

Table 7 (overleaf) provides a summary of the performance of key government stakeholders.

### 3.6.1.1 Government contribution to the VFS

The Government of Zimbabwe has contributed to the VFS in various ways. First, government has full ownership of the programme as the lead of the initiative. Through this, government with technical assistance from civil society has provided a strong legal framework for the establishment and operation of the VFS including the following:

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While government has shown ownership of the initiative, it has not provided the ideal vision and strategic leadership for the VFS in the form of a clear strategy for its growth and sustainability. In particular, a clear pathway to full government control, financing and ownership of the operations of the system has been lacking since inception of the initiative. In the past government contributed to during trial support in the form of witness expenses, legal assistance from the Legal Aid Directorate. However, its capacity to continue doing so has dwindled with contraction of the economy since 2000 although the provisions are still in place. Resultantly financing of activities of the VFS have mainly been development partner driven. Given the lack of strategic direction from government this support has been provided in a disjointed manner.

**Table 7: Summary of performance assessment of stakeholders in the VFS**

**Key for colour codes**

Ideal performance	
Progress towards ideal	
Little progress towards ideal	
No progress towards ideal	

<b>Stakeholder</b>	<b>Performance rating</b>	<b>Summary</b>
Ministry of Primary and Secondary Education		<p>Limited number of cases of child sexual are reported to the police</p> <p>Disciplinary procedures in place for perpetrators but partially followed</p> <p>Limited liaising with parents/caregiver providing information on the processes to be adhered to</p> <p>Survivors receive limited counseling with support from DSS and teachers</p> <p>Limited reintegration of survivors of sexual abuse into the education system especially second chance education</p> <p>Limited number of teachers are fully trained on managing child sexual abuse at school level</p> <p>Limited number of appropriate platforms are in place to ensure children report at school level</p> <p>Limited number of Children are educated about abuse through any interaction process at school level</p> <p>Disciplinary procedures are partially adhered to: i.e. – best interest of the child, child’s right to heard in the internal tribunal process</p>
Department of Social Services		<p>Limited number of Staff are trained to adhere to protocol guidelines</p> <ul style="list-style-type: none"> <li>• DoSS staff are fully trained on managing child sexual abuse at school level</li> </ul> <p>Limited Updating of available data and limited application of data into programming</p> <p>Limited number of cases child sexual are reported to the police for investigation</p> <p>Procedures in place to support child victims as well as child perpetrators of violence and abuse</p> <p>Limited liaising with parents/caregiver providing information on the processes to be adhered to in the justice system</p> <p>Limited pre-trial support provided to child survivors and during trial</p> <ul style="list-style-type: none"> <li>• Survivors receive adequate counseling with support from DSS</li> </ul>

		<ul style="list-style-type: none"> <li>• Ensure the safety of the child that is finding alternative places of safety</li> </ul> <p>Limited coordination of stakeholders in ensuring that children receive comprehensive services within a continuum care (coordinate PVO stakeholders and District Child Protection Committees)</p> <p>Limited reintegration of survivors of sexual abuse into society (e.g enrolment in the education system especially second chance education)</p> <p>Limited platforms are in place to ensure children report abuse especially those in residential care institutions</p> <p>Compilation of Probation reports for Court processes</p>
Ministry of Health and Child Care		<p>Limited number of Staff are trained to adhere to protocol guidelines and provide the requisite forensic medical examinations</p> <ul style="list-style-type: none"> <li>• MoHCC staff are fully trained on managing child sexual abuse at health facility level</li> </ul> <p>Limited compilation of medical affidavits and participate in court processes</p> <p>Limited provision of PEP to eligible survivors within the stipulated timeframe</p> <p>Limited adherence to Protocol guidelines and circulars on free medical assistance for survivors of abuse</p> <p>Limited reporting to the Police for those that are attended at Out patient department</p> <p>Limited availability of drugs especially for PEP</p> <p>Limited provision of medical assistance for 24 hours 7 days a week</p> <p>Up to date data based available and data being utilized for programming</p> <p>Limited application of procedures in place to support child victims as well as child perpetrators of violence and abuse</p> <p>Limited liaison with parents/caregiver providing information on the processes to be adhered to in the health care system</p>
Police		<p>A majority of Police manning VFU are trained (over 50%)</p> <p>Majority of children undergo Child friendly interviews and investigations are conducted in a child friendly manner</p> <p>Police are receiving reports and acting on a majority of them</p> <p>Police are accompanying a majority of children for medical care and support;</p> <p>Police are investigating a majority of cases in a professional manner until finalisation</p> <p>Police provide support throughout the justice process for a majority of children</p> <p>Police provide feedback on the outcome of the court case for a majority of cases</p> <p>Dockets prepared after 14 days but within 21 days</p> <p>Attend consistently and participate effectively in VFS Sub-committee</p> <p>Data not managed and used for planning some of the time</p>
Department of Public		<p>Privacy of a survivor or minor offender not respected at all times.</p>

<p>Prosecutions, Attorney General's Office</p>		<p>Separate and appropriate transportation arrangements for survivors and perpetrators to and from the court not being ensured.  Limited promotion of safety of a survivor throughout the investigation.  Children not given enough information about court processes and feedback  Contact between the survivor and alleged offender is not being minimized.  Some prosecutors not executing their duties professionally.  Prosecutors not always advising the survivors and witnesses of the outcome and the possibility of civil action on conviction of the perpetrator where they can claim damages from the civil Courts.  There is evidence of alleged perpetrators of a sexual offence being released on bail when there is likelihood that the release of the perpetrator will cause additional hardship for the survivor.  Some prosecutors not explaining the reasons for , and conditions of, bail to the survivor and witnesses.</p>
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### 3.6.2 *Technical partners*

Technical partners have played a critical role in establishing the VFS through financing its establishment and providing technical support. The number of civil society supporting the VFS has grown from one (SCN-Z) at inception to the current 8 partners. With the exception of Plan International Zimbabwe, the majority of these civil society organisations are funded by either Save the Children or UNICEF and in some instances were receiving funding from both organisations (e.g. Family Support Trust). The Danish Royal Embassy is also funding the system through Leonard Cheshire Foundation.

In addition to supporting financially and technically the VFS, development partners have played a critical role in advocating for the establishment of an appropriate legal framework in support of the VFS including technical and financial support in their development.

#### 3.6.2.1 Save the Children

SCN-Z has played the greatest role in supporting the VFS through guaranteed financial support and technical assistance since 1997. Its support has varied from supporting initial establishment of VFCs to funding a significant part of the scale up of the VFS. Save the Children through SCN-Z took leadership of the initiative among development partners until the advent of unification of Save the Children UK and Norway in Zimbabwe. This process resulted in changes in staffing and loss of institutional memory.

SCN-Z's successful work with the Child and Law Foundation helped trigger additional funding and technical support from other development partners including UNICEF to scale up the initiative. However, Save the Children's support of the VFS National Coordinator has been instrumental in sustaining the multi-stakeholder approach. Additional technical and financial contribution to the development of the first and current protocol on multi-sectoral management of sexual abuse cases in Zimbabwe is also strengthening the multi-sectoral approach. Furthermore, in support of this multi-sectoral approach Save the Children financed the development of a database to facilitate learning and assessment of progress and impact of the initiative.

With the change in model of the VFS to supporting the continuum of care, Save the Children has expanded support to pretrial support through establishing victim friendly clinics, one stop centres for survivors of sexual abuse. Save the Children has also supported pre- and post trial activities implemented by FST clinics and other short term project support to Simukai, Fynex, Connect and Contact. It has also been jointly training nurses, regional magistrates and recently prosecutors. For during trial support Save the Children has funded establishment of VFCs and is currently jointly financing witness expenses and snacks for child survivors of sexual abuse and building of safe houses.

### **3.7 Children in Zimbabwe are better protected as a result of the VFS**

Through the VFS various initiatives were implemented including:

- establishment of VFCs, VFUs and victim friendly clinics;
- Establishment of databases for the VFU, Ministry of Education and VFCs to monitor child abuse cases
- legal reform to better protect child survivors of sexual abuse; and

- supporting awareness campaigns on child sexual abuse e.g. Zero tolerance campaign against child sexual abuse, Sixteen (16) days of activism against child abuse.

### 3.7.1 Successes

The evaluation finds that the VFS has indeed led to better protection of children from sexual abuse when compared to prior the VFS. In all communities visited adults and children showed a great awareness of the dangers of child sexual abuse and the need to report it to the police and have perpetrators convicted. In Gweru and Hwange, adult community members interviewed kept giving reference to convicted adults who were involved in child sexual abuse who are currently in prison on long terms. Such success stories and long sentences have provided a deterrent for would be offenders for fear of incarceration. The complimentary work on raising awareness on children's rights has also contributed to children being better protected.

*“People are now afraid to sexually abuse children because you will be arrested. There are people in this community that have been arrested after abusing children. One is serving 20 years in prison...Even these children are very aware of their rights and they can report you to the police.”* **Adults in Gweru rural**

Because Zimbabwe in a majority of cases does not use scientific evidence such as DNA, there is overreliance on viva voce evidence and the evidence of witnesses. If the victims get threatened by the perpetrators or fail to accurately relate events leading to the sexual abuse, offenders have the opportunity to walk scot free. However, through the VFCs and VFUs the VFS has provided platforms for survivors to effectively deliver their evidence in non-intimidating environment resulting in better and more coherent evidence which in turn leads to conviction.

Furthermore, as can be seen from the discussion with the Gweru community, community members feel sexual abuse cases are reported more now than in the past. This is also corroborated by data within the VFS. From less than 500 reported cases before 1997 the number of reported cases at the police has been on an increase. Between January and October 2013 a total of 3,421 cases were reported at the VFU. The number of reported cases has been increasing year on year since establishment of the VFS (over the same period in 2012 a total of 2,400 children were sexually abused). Thus the VFS has managed to remove a lid on the issue which has resulted in several initiatives to address child sexual abuse.

First, by improving data management and reporting of reported cases, the VFS has been able to raise the extent of the issue and in the process mobilise both political and public support for reducing child sexual abuse. Annual reporting on child sexual abuse by the national VFU has resulted in widespread discussions on the issue in the media and parliament and also awareness among the general population. In the process, the VFS galvanized support for legal reform to better support survivors of child sexual abuse e.g. reform of the Criminal Evidence and Codification Act to allow for stricter sentences for perpetrators and admissible forensic evidence from state registered nurses. This reporting has also raised support for the issue from the presidium providing immense opportunities to strengthen current government leadership and support.

Second, better data management has also resulted in a shift in policy. For example, the second Government of Zimbabwe National Action Plan for Orphans and Vulnerable Children (NAP for OVC II 2011-2015) has a stronger focus on strengthening the justice delivery system and the continuum of care for survivors of abuse than in the former NAP for OVC I. The Child Protection Fund, the largest multi-donor child protection funding mechanism in Zimbabwe administered



through UNICEF, mirrors this focus of the NAP II and provides for increased investments for actions to better protect children from sexual abuse and support to survivors.

Third, at the community level, the increased focus on child sexual abuse through campaigns and awareness raising on children's rights has also resulted in community based responses to the issue in some communities. In Gweru, for example, after police at a local police station had facilitated negotiations between the perpetrator's family and that of the survivor for a settlement out of court, local community members took up the issue and reported to a local NGO, Padare. Padare in turn took the issue to the Provincial Police Head Quarters where it was addressed and the respective police officers put under disciplinary action. The case was reopened and proceeded to court where the perpetrator was convicted.

In one high school visited in urban Gweru, discussions with the child led Child Protection Committee (CPC) highlighted the impact of awareness conducted by the local VFS sub-committee and the police from VFU. It was highlighted after their visit at least 5 sexual abuse cases were reported after the meeting they held with students on the importance of reporting sexual abuse and provisions available for protection. Thus a strengthened multi-sectoral approach also provides a good foundation for protecting children against sexual abuse in addition to facilitating provision of the continuum of care.

### 3.7.2 Challenges

Data collected from regional courts on the relationship with the perpetrator and survivor is presented in 8. The data shows the main perpetrators of rape are strangers in all the years but rape is increasingly being committed by extended and immediate family members (30.8% in 2000 and 40.4% in 2012).

**Table 8: Distribution of sexual abuse cases by type of offence and relationship of accused to complainant**

	<i>Rape</i> <i>n=1522</i>	<i>Indecent assault</i> <i>n=40</i>	<i>Aggravated assault</i> <i>n=33</i>	<i>Sodomy</i> <i>n=7</i>	<i>Attempted rape</i> <i>n=4</i>	<i>Sexual relationship with a minor</i> <i>n=6</i>	<i>Total</i> <i>n=1612</i>
<i>Year 2000</i>							
Lover	8.8	0.0	0.0	0.0	0.0	0.0	8.6
Stranger	38.0	0.0	0.0	50.0	0.0	0.0	37.7
Neighbour	14.6	0.0	0.0	0.0	0.0	0.0	14.3
Extended family	21.6	0.0	0.0	0.0	0.0	0.0	21.1
Immediate family	9.4	0.0	0.0	50.0	0.0	0.0	9.7
Employee/employer	4.7	0.0	0.0	0.0	0.0	0.0	4.6
School or college mate	1.2	100.0	0.0	0.0	0.0	0.0	2.3
Workmate	0.6	0.0	0.0	0.0	0.0	0.0	0.6
Other	1.2	0.0	0.0	0.0	0.0	0.0	1.1
<b>Total</b>	<b>100.0</b>	<b>100.0</b>	<b>0.0</b>	<b>100.0</b>	<b>0.0</b>	<b>0.0</b>	<b>100.0</b>
<i>Year 2008</i>							
Lover	5.6	0.0	0.0	0.0	0.0	100.0	6.3
Stranger	46.3	77.8	28.6	0.0	50.0	0.0	46.7
Neighbour	8.2	0.0	0.0	0.0	0.0	0.0	7.5
Extended family	22.1	0.0	28.6	100.0	50.0	0.0	21.6

	<i>Rape</i> <i>n=1522</i>	<i>Indecent assault</i> <i>n=40</i>	<i>Aggravated assault</i> <i>n=33</i>	<i>Sodomy</i> <i>n=7</i>	<i>Attempted rape</i> <i>n=4</i>	<i>Sexual relationship with a minor</i> <i>n=6</i>	<i>Total</i> <i>n=1612</i>
Immediate family	10.4	22.2	0.0	0.0	0.0	0.0	10.2
Employee/employer	2.6	0.0	42.9	0.0	0.0	0.0	3.5
School or college mate	2.6	0.0	0.0	0.0	0.0	0.0	2.4
Workmate	1.3	0.0	0.0	0.0	0.0	0.0	1.2
Other	0.9	0.0	0.0	0.0	0.0	0.0	0.8
<b>Total</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>
<i>Year 2012</i>							
Lover	5.7	0.0	0.0	0.0	0.0	100.0	5.5
Stranger	42.1	52.9	58.8	0.0	0.0	0.0	42.6
Neighbour	16.4	35.3	5.9	100.0	0.0	0.0	16.9
Extended family	23.9	11.8	29.4	0.0	0.0	0.0	23.5
Church member	0.7	0.0	0.0	0.0	0.0	0.0	0.6
Immediate family	8.8	0.0	5.9	0.0	0.0	0.0	8.5
Employee/employer	2.0	0.0	0.0	0.0	0.0	0.0	1.8
School or college mate	0.5	0.0	0.0	0.0	0.0	0.0	0.5
Workmate	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Other	0.0	0.0	0.0	0.0	0.0	0.0	0.0
<b>Total</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>0.0</b>	<b>100.0</b>	<b>100.0</b>

Source: Case records at regional courts

While community members find it easy to report sexual abuse by strangers it is more difficult when committed by an immediate family member and in some cases who are the breadwinners. In many of these instances, the case is held under secrecy while negotiations happen within the family to settle on a way forward. In some instances as highlighted in Gokwe and Gweru, police officers at VFU in base stations might facilitate negotiations between the family members to avoid it proceeding to court. In Hwange, community members highlighted such cases are sometimes handled by the traditional leaders who fine the perpetrator livestock as penalty for the abuse. The driving factor is to keep the family united as reporting would fracture the family unit.

While alternative reporting channels are available for children, the fear of destitution and isolation or ex-communication from the family, forces many children to remain silent. This is made worse by the absence of adequate support systems in the event of reporting including places of safety before, during and after trial. As many of the victims are double orphans such as Jane (see story in section 7), they have limited options for protection once they report therefore in many cases they remain silent and exposed to repeated sexual abuse.

Furthermore, while a majority of those sexually abused are between the ages of 10-17 years, a large proportion is between the ages 0-9 years see Table 9. In 2012, 33.6% of those sexually abused were between the ages 0-9 years.

**Table 9: Distribution of sexual abuse cases by age group of survivor and type of offence**

	Rape n=1522	Indecent assault n=40	Aggravated assault n=33	Sodomy n=7	Attempted rape n=4	Sexual relationship with a minor n=6	Total n=1612
<b>Year 2000</b>							
< 5	15.0	100.0	0.0	0.0	0.0	0.0	16.1
5-9	24.6	0.0	0.0	0.0	0.0	0.0	23.8
10-13	29.2	0.0	0.0	50.0	0.0	0.0	28.6
14-17	23.8	0.0	0.0	0.0	0.0	0.0	23.0
18-29	6.2	0.0	0.0	50.0	100.0	0.0	7.3
≥30	1.2	0.0	0.0	0.0	0.0	0.0	1.2
<b>Total</b>	<b>100.0</b>	<b>100.0</b>	<b>0.0</b>	<b>100.0</b>	<b>0.0</b>	<b>0.0</b>	<b>100.0</b>
<b>Year 2008</b>							
< 5	10.2	0.0	28.6	0.0	50.0	0.0	10.5
5-9	23.0	42.9	14.3	0.0	0.0	0.0	23.0
10-13	27.0	28.6	42.9	0.0	0.0	0.0	26.7
14-17	26.3	14.3	0.0	100.0	0.0	100.0	26.0
18-29	12.4	14.3	14.3	0.0	0.0	0.0	12.5
≥30	1.1	0.0	0.0	0.0	50.0	0.0	1.4
<b>Total</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>
<b>Year 2012</b>							
< 5	10.6	21.1	16.7	0.0	0.0	0.0	11.1
5-9	22.4	15.8	38.9	0.0	0.0	0.0	22.5
10-13	27.5	15.8	16.7	0.0	0.0	0.0	26.9
14-17	23.6	26.3	16.7	0.0	0.0	100.0	23.5
18-29	11.9	21.1	11.1	100.0	0.0	0.0	12.2
≥30	4.0	0.0	0.0	0.0	0.0	0.0	3.8
<b>Total</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>0.0</b>	<b>100.0</b>	<b>100.0</b>

Source: Case records at regional courts

This group is unable to report on their own and require vigilance and responsiveness from community members to report. However, discussions with communities in Hwange and Gokwe revealed that communities are afraid to report for fear of victimization, reprisals or witchcraft. This is because: (i) there are no systems for anonymous reporting or systems are there (e.g. the Police suggestion boxes, or Childline Helpline) but are not trusted due ingrained traditional beliefs of witchcraft; and (ii) perceptions that nothing will happen even after reporting because of perceptions that the police, prosecutors and the judiciary are corrupt. Despite initiatives such as the Childline anonymous hotline for reporting sexual abuse many communities interviewed in Gokwe, Hwange and Gweru rural were unaware of such facilities and attributed the lack of reporting of child sexual abuse they are aware of. In Hwange especially, the feeling of reprisals in the form of witchcraft were very strong resulting in members not reporting cases they suspected or knew had occurred. In Gokwe, community members interviewed highlighted that the police station was far from their communities and not accessible. The only option to report is the neighborhood police a group volunteers supervised by the formal police. This group is not trusted by community members. Furthermore, because members of the neighborhood police are also drawn from the community in which they police they were said to be also afraid to fully commit themselves to handle such cases. Community members gave examples of cases reported to neighborhood police and never taken forward. Community based structures such as Child protection Committees (CPCs) could have helped, but in all areas visited except Gweru rural, they were inactive. In Bulawayo, caregivers of child survivors of child sexual abuse were

so disappointed with the judiciary system that they were planning a petition on the perceived high corruption among prosecutors and the judiciary targeted at the President's Office.

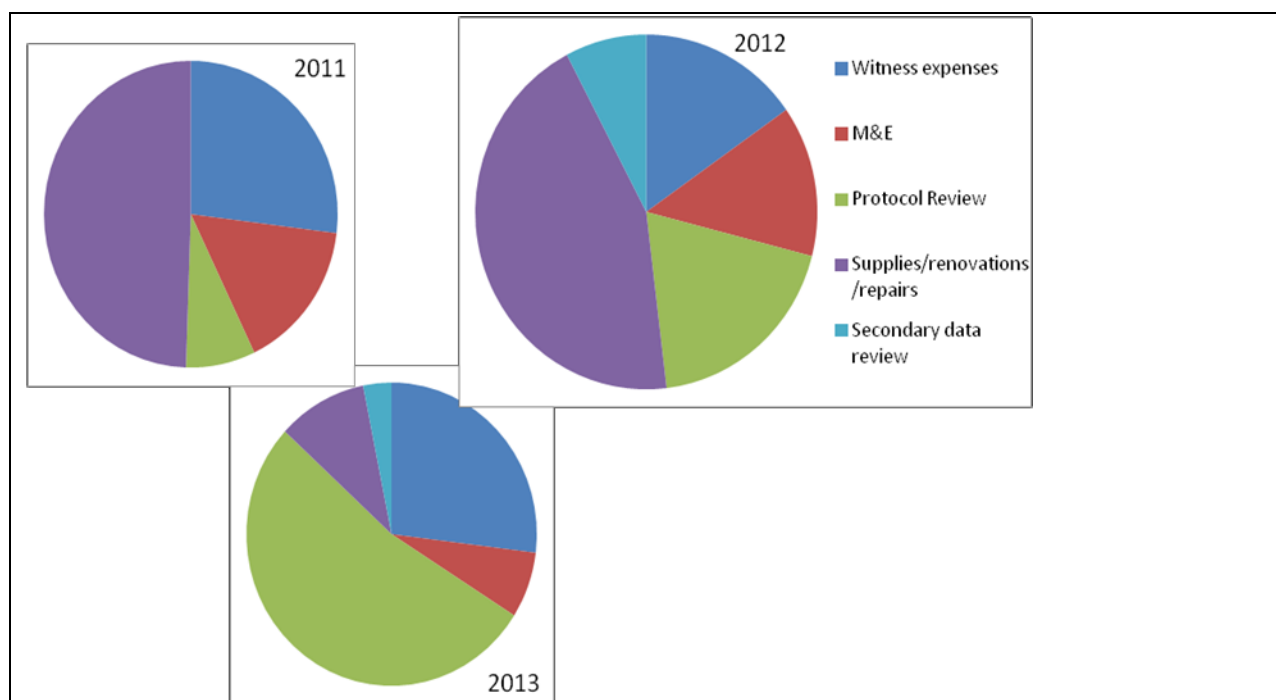
These issues are undermining protection of children in Zimbabwe and need to be addressed.

### 3.8 Cost of implementing the VFS

This section analyses the costs of implementing the VFS. It is limited to the period 2009-2012 when the multi-currency system was introduced.

Figure 2, presents the expenditure in the VFS. The greater proportion was used for Witness expenses, M&E, and Supplies and repairs of equipment. In 2013 a majority of the funding for the VFS was used for production of the Protocol for Multi-sectoral management of sexual abuse.

**Figure 2: Fund utilisation in the VFS**



Source: UNICEF and Chief Magistrate's Office (2013) Mid Term Review of the VFS

#### 3.8.1 Witness expenses

This section draws from an analysis already carried out by UNICEF and the Chief Magistrate's office for the years 2011-2013 as part of a mid-term review of UNICEF's support to the VFS.

Results from this data are shown in Table 10. A total of 3,705 survivors were reached with witness expenses representing 77.7% of survivors going through the system at an average cost of US\$22.7 for each child supported. However, the cost per child fluctuates with every year mainly because children come with a number of family members whose number is not regulated. For example in 2013 a child survivor was accompanied by an average of 3.8 family members while in 2012 one number of child survivors was accompanied by 2.1 family

members. At US\$22.6 the cost is reasonably low when compared to other child protection activities. For example child protection work by the USAID funded Children First Project cost USD174 per child while the Programme of Support for Vulnerable Children cost US\$122 per child<sup>17</sup>. However, at a larger scale and assuming full coverage for the 22 operational VFCs the total cost for witness expenses will total US\$139,459.91 per year<sup>18</sup>. Technical partners provide about 50% of this amount. Without increases in the budget allocations, with more VFCs a number of children will remain un-supported and witnesses may not attend court slowing down the court process or jeopardizing the cases all together. This is because government's capacity to fully meet the required witness expenses is limited but at the same time capacity of development partners in the long term is not guaranteed. A middle of the road solution comprising of an exit strategy for government to fully take over this responsibility should be discussed and agreed.

**Table 10: Total number of new cases receiving witness expenses between 2011-2012<sup>19</sup>**

Year	Number of survivors	Witness Expenses, US\$	Cost per case
2011	1184	24800	21
2012	1456	19236	13
2013	1065	40000	38
<b>Total</b>	<b>3705</b>	<b>84036</b>	<b>22.681</b>

*Source: UNICEF and Chief Magistrate's Office (2013) Mid Term Review of the VFS*

#### 4 Discussion

The design of the VFS in conceptual and operational terms has evolved from its initial years, a prime result of learning and improvement among stakeholders. In terms of conceptual design the programme has evolved from first focusing on pre- and during trial support through review of legislation and facilitating access by children to the justice delivery system. The aim was to ensure justice is delivered for child survivors of sexual abuse. With the realization that post trial support was required to ensure children were better protected and less vulnerable to repeat abuse, post trial support was included in the design to ensure a child survivor that enters the system receives the full continuum of care. At the same time the design included a component on awareness raising to reduce the incidences of child sexual abuse. Throughout the beginning until the mid 2000, the focus was on the victim. However, children in contact in with the law as perpetrators were also increasing and required specific attention in the justice delivery system especially with: (i) legal representation, and (ii) ensuring they do not mix with hardcore adult criminals in prisons or police holding cells. Resultantly, the VFS took on a dual focus: the victim and the perpetrator.

From an operational perspective, the VFS has moved from a loosely connected multi-sectoral approach (mainly consisting of three partners MoJLPA, MOESC, Police and CALF) to a more coordinated and structured multi-sectoral approach (from 2004) comprising a national coordinator, provincial VFS subcommittees and national VFS subcommittees. The multi-sectoral

<sup>17</sup> Jones S, Chisvo, M. Muchini, B. and Marimo, N. (2010) Impact Assessment of the Programme Support for Orphans and Vulnerable Children. A consultancy report prepared for the UK Department for International Development. JIMAT Development Consultants, Harare

<sup>18</sup> This assumes an average 280 child survivors are reached in each VFC per year based on volumes at the 17 VFCs used for the analysis of costs.

<sup>19</sup> The figures only cover for 17 VFCs out of the current 22 VFCs

approach is governed by the Multi-Sectoral protocol for the Management of Sexual abuse and Violence, which provides the different roles, responsibilities to be taken by each responsible stakeholder. At the beginning implementation and coordination of the VFS was vested in the Save the Children funded CALF. Due to the need to have the VFS led by government implementation and coordination was moved to government through the MoJLPA in the Chief Magistrate's office led by a National coordinator within the Chief Magistrate's office.

### Strengths, weaknesses and opportunities

#### 4.1.1.1 Strengths

Supporting the continuum of care for the child survivor is commendable and good practice. It ensures a child survivor receives the medical, legal and emotional and other support necessary for justice delivery and their reintegration into society. A clear example of how this continuum of support can help a child survivor is illustrated by Jane's story. Without the linkages and referrals within the system Jane might probably not have received justice and she would not have been able to fully recover from the ordeal and could have faced repeat abuse as she had nowhere else to go. The continued support by case care volunteers through visiting and counseling provide her the emotional support she needs to be able to cope with the challenges she currently faces.

#### **Case study 1: Story of Jane**

Jane (not real name) is a 17 year old single mother who stays in Bulawayo. Her young son is one year and three months old.

Before the pregnancy, Jane used to stay with her uncle after her mother passed away in 2010. She has never met her father. When her mother died she was doing Form 1 but her uncle refused to continue paying her school fees. This led to her dropping out of school in the second term of form 1.

Whilst living with the uncle, in 2011 he started to sexually abuse her. The abuse went on for three months. During this time she was not allowed to leave the house or go outside. One day when the uncle was away she sneaked out of the house and reported to her neighbor what was happening. They neighbor immediately took her to the local police station where the case was reported. They spent about an hour at the police station where her statement was recorded, read to her and she signed. While the police station was very uncomfortable the support from the female police officer gave her some bit of comfort to tell her story. After the police report was made, she was directed to the hospital for forensic examination and other assessments. At the hospital she was told she had not contracted any STI and did not have HIV. However, she was informed that she was one month pregnant. Because the neighbor could not keep Jane she informed the hospital which then referred her to the Department of Social Services for assistance. The DSS working with Childline managed to find a temporary shelter for the child at local residential institution for children deprived of parental care. Meanwhile a warrant of arrest was issued for the uncle and he was arrested and put on remand in custody.

At the residential care she received medical support for her pregnancy and counselling. Jane stayed at the residential care for the duration of the trial and the birth of her baby. The trial took two months between January and February 2013. The uncle was sentenced to 20 years in jail.

After the trial and the birth of her baby, her mother's sisters and brothers, her grandmother and the majority of her extended did not want anything to do with her because they accused her of wrongly sending their relative to prison.

However, one relative was willing to help Jane buy letting her know that her grandfather had left behind a house in her mother's name where two of her mother's sisters were staying. All efforts to try and persuade the family members to let Jane stay at this house failed. Childline was informed and helped with sourcing free legal assistance to enable Jane gain access to the house. At the time of the interview Jane was now staying at her mother's house together with her mother's sisters. However, she has to fend for herself through casual labour which is not always available and she is finding life very difficult.

Similar stories were told in the evaluation team's interviews with child survivors of abuse supported through the Family Support Trust clinics. Children supported through these clinics are provided the full continuum of care from pre-, during and post trial.

While such services are provided they may not be adequate. For example, Jane still needs support to look after her baby as the casual paid work she depends on is not always available. Furthermore, she may need support with continuing school to provide her opportunities for escaping the poverty trap. The unavailability of this support increases her vulnerability to negative coping mechanisms such as prostitution which can further worsen her vulnerability to repeat abuse.

However, for the majority of sexually abused children this continuum of care is not yet a reality. Children still drop out of the system at various stages: police, clinics and courts for various reasons (see Table 11). In Gokwe for example, the local Victim Friendly Clinic has higher reported cases of child sexual abuse than compared with the local police Victim Friendly Unit. In turn the Regional Magistrate has even far less cases.

In the communities many more cases go unreported. For example in a focus discussion with community members in Chief Njelele's area in Gokwe South it was estimated 1 in every 10 households has experienced child sexual abuse. This means even a higher population is not reporting. This trend is the same at the national level. For example between January and October 2013, the National VFU reported 3,421 rape cases while the Chief Magistrate's Office handled only 1,059 rape cases in the same period – representing 30% of reported cases at VFUs. This means 70% of cases reported at VFUs did not proceed to court. The reasons for this are varied and Table 11 provides a summary.

**Table 11: Reasons for child survivors dropping out of the VFS**

<b>Stage child drops out</b>	<b>Main Reasons</b>
Community not reporting	<p>Agreements between families of perpetrator and victim to not report the case, in most cases in the presence of the traditional leader if in a rural set up. A settlement in cash and livestock is reached in most cases.</p> <p>Perceived corruption of law enforcement and courts strengthened by community members seeing alleged perpetrators roaming the communities after case has been reported. Therefore communities see no reason to report</p> <p>If perpetrator is a family member, there is a fear of disrupting family relations or losing a breadwinner through imprisonment</p> <p>The distance to the nearest service provider and police station also undermines reporting and seeking of health care for survivors of sexual abuse. While they are local neighborhood watch, communities do not trust them.</p>

Stage child drops out	Main Reasons
	Reluctance on whistle blowing by community members also undermines reporting of cases.
Survivors dropping out at clinic	Majority of those that seek health care do so to get curative treatment rather than to obtain forensic evidence for prosecution Factors that undermine community members from reporting also apply here
Survivors dropping out at police	Slow pace of investigations by police officers or incomplete evidence to warrant proceeding with trial Corruption of police officers at the VFU. In Gweru VFU police officers were suspended over corruption in one case involving child sexual abuse (see section 5). Parents of child survivors of sexual abuse in Bulawayo were planning to put up a petition over alleged lack of transparency in the judiciary, prosecutors and police officers. The distance that has to be travelled to regional courts is too long and expensive. With no proper accommodation and withdrawn trials, some community members find it not worthwhile to go through such pains especially with the backdrop of a perceived corrupt system.
Survivors dropping out at court	After conclusion of trial there is no follow up support for the majority of children. There is a weak link between the courts, DSS and civil society to facilitate post trial support – including data sharing and coordination. However, from evaluation findings DSS may not have the capacity (numbers and mobility) to sustain post trial by covering the number of child survivors who go through courts and providing services at the required levels. This is especially so given the other responsibilities for Social Services Officers in child and social protection.

The expansion of focus from a survivor only focused to system also incorporating children in contact with the law is commendable and should be strengthened to ensure right to justice for all children.

**Embedding the coordination of the system within government** has strengthened government leadership and ownership of the system.

VFS sub-committees are working well and could work better with support to ensure all stakeholders attend. The design of the coordination is good as it gives ownership at local level and allows for local level solutions and management. However, more on the ground support is required from the National coordinator – at least one visit per VFC per half year to offer technical backstopping and on the ground verification of monitoring data.

#### 4.1.1.2 Weaknesses

**The VFS in principle is a subset of the broader child protection system, but in practice is a standalone system.** This has presented challenges to **consistently** create linkages between the different partners. This is exemplified by inconsistent participation of the Department of Social Services in VFS sub-committee meetings – some DSSOs interviewed were not aware of what was discussed in the VFS sub-committee meetings and the progress.

**Support to Witness expenses** is good as a stop gap especially after dollarization where communities were left bankrupt and in poverty. But this is not sustainable and replaces



government responsibility as it is a statutory requirement which government should fulfil. Phasing out should be gradual.

**Community awareness:** this broadens the VFS and encroaches it in the Child protection programmes. Resultantly should not be part of the VFS but should be done as part of a broader child protection strategy. Data from the VFS should be used to compliment the Child Protection strategy.

#### 4.1.1.3 Opportunities

The design of the VFC needs to be broader in terms of covering all children that come through the court system including those that pass through the civil court, and provincial magistrates not currently covered in the current VFS which focuses on the regional courts. This includes civil matters, sexual harassment, custody, estate matters etc. There is recognition of this need with the Chief Magistrate's Office and should be taken advantage of.

There is great interest on the issue from the presidium which the VFS stakeholders can take advantage to galvanize support within government.

## 4.2 Conclusion

The Victim Friendly System has been a success. Although there are still challenges mainly due to the incapacities of government the foundation and structural framework for the system is strong. Government ownership and leadership with consistent development partner support has enabled the establishment of the system. Resultantly, children are better protected at this point than they were in 1997 as more children are reporting sexual abuse cases and receiving fairer trials. The success of the VFS including ability to use information on child sexual abuse has raised national interest in the issue and provided a national response in the revision of legislation and policy to better protect children from and support child survivors of sexual abuse.

With the broadening in focus to children in contact in law through Juvenile Diversion and provision of free legal assistance to children in contact with law, the VFS aligns with the UNCRC and the Zimbabwe constitution which guarantees everyone, including children, full protection of the law in the presumption of innocence and the right to prepare a defence.

But there are still challenges that need to be addressed to ensure the system works better for children. These include:

- lack of a clear vision and strategy building the VFS;
- limited government financing of the VFS limiting sustainability of the initiative beyond development partner support;
- lack of a clear and shared exit strategy for government to fully support the system;
- linkage between the VFS and the broader child protection system to ensure the continuum of care from pre-trial to post trial is provided to every child entering the system; and
- sharing of information between stakeholders to reduce children who enter the system to drop out.

## 5 Recommendations

Based on the findings of the evaluation the following recommendations are proposed.

### **Recommendation 1: Strengthen national commitments (Strategic Plan for the VFS)**

Develop a national strategy or policy that is multi-faceted and systematic. The protocol provides the implementation framework for the Strategy or Policy but what are the Government Commitments that ensure that each stakeholder is operating within an agreed frame and facilitating the attainment of agreed country goals.

- JSC to issue out a green paper to enable in-depth discussion on the issue of commitments and a finalized white paper
- National strategy, national plans or a national policy around the VFS led by a secretariat
- Multi-sectoral planning rather than sector silo based planning

### **Recommendation 2: Business Investment case**

There is need for a business investment case for the VFS

- The advantage of having a business case each supporting agency will plug resources into an already existing plan, so they fund areas that not funding and should be in accordance with the agreed plan covered under options one.
- JSC will work on advancing the establishment of standardized plan that is costed so that they lobby Ministry of Finance and engage other external funding partners. Consideration should be given to both Human and financial resources to support implementation

External support should be complemented with lobbying the MoF with a costed plan and agreed time-bound deliverables.

### **Recommendation 3: Strengthen Stakeholder capacity (professional and non-professionals)**

This should be two pronged – pre-service and in-service aimed at ensuring highly functional staff and high quality services for children. The Government should invest in systematic education and training programme both for professional and non-professionals that is standardised. The key issues of focus should be:

- ix. JSC facilitating the inclusion of the Protocol in the curriculum of Judicial Officers and influencing the Law Society of Zimbabwe
- x. Police – integrate into the Police curriculum training concepts of working with children in contact with the law
- xi. Health – integrate forensic examination training into the curriculum of nurses
- xii. National Prosecuting Agency – integration of child focussed trial procedures
- xiii. Court intermediaries – harmonized training that involves REPPSI and Lupane State University
- xiv. Probation Officer – commitment to the programme
- xv. Higher Learning Institutions – integrate issues on the VFS in their learning agenda and have accredited training programmes

### **Recommendation 4: Build confidence in the Judicial System**

Build trust in the services and make people aware of where to get help through creation of accessible and child friendly reporting systems and services - i.) establish safe, ii.) well published, iii.) confidential and iv.) accessible mechanism for reporting. This may include using social media as reporting platforms.

Secondly support for civil society to support accountability of the system by strengthening community civil society linkages to ensure all cases go through the system.

In building confidence in the justice delivery system, there is need to:

- d) address abuse at community level:
  - create opportunities of ensuring linkages between the Chiefs at community level to other protection mechanisms for children
- e) Bring perpetrators to justice
  - ensure that they are held accountable through appropriate civil, administrative and professional proceedings
- f) implement a gender sensitive approach
  - consider the different risks that children encounter
  - promote and protect rights of women and the girl child
  - address gender discrimination as part of the comprehensive prevention strategy

### **Recommendation 5: Improve data management**

There is need to strengthen use of evidence from the VFC data to inform policy and programming and track progress towards the goal of preventing violence and abuse.

JSC with stakeholders might develop one reporting system for stakeholders both Government and complementing NGOs in the VFS based on one monitoring and evaluation framework:

- agree indicators, and results (outputs, outcomes and impact as stated in the agreed strategy
- compile cross sectoral data that is shared amongst stakeholders, analysed and disseminated to monitor progress and inform programming

There is need to develop a research agenda for the VFS;

- Determine the magnitude, characteristics and trends of many forms of violence and abuse.
- This is critical for knowledge building and improved programme development. In addition, the research will build on evidence based policy

There is also need to agree on a compliance system that will make in mandatory for other stakeholders to provide data.

### **Recommendation 6: Legislation Review Process**

Legislative provisions and national priorities need to aligned to the new Constitution.

- Align all Acts to the new provisions set in the Constitution
  - Children's Act
  - Criminal Law Reform and Codification Act
  - Marriage Act
- Civic education on the prohibition of violence and abuse needs to ensure that there is an element of legislative awareness

### **Recommendation 8: Division of labour (DoL) to improve coordination support for the VFS**

To ensure coordination of support for the VFS and avoid duplication or piece-meal support, technical partners to the VFS should explore a division of labour (DoL) approach. With this approach funding partners shall divide support according to their technical and financial

capacities. On lead partner should be selected to work with the JSC to coordinate technical partner support for the scale up of the system. In implementing the DoL approach technical partners should be allowed to contribute, technically or financially, to another partner designated as lead for a particular component of the VFS.

**Recommendation 9: Save the Children to strategically position itself**

With the advent of many partners in the system and the advance of the VFS, Save the Children support needs to be more strategic taking advantage of its technical and financial capabilities to facilitate further expansion and sustainability of the system. Given its long standing relationship with the JSC and the Chief Magistrate's court the evaluation recommends the following:

- Save the Children continues financing the post of VFS National Coordinator but with a time bound exit strategy
- Save the Children should contribute technically and financially to the development of the to the development lead support for the development of the national strategy

Save the children possesses a wealth of experience working with community based organisations across the country. There is scope for Save the Children to technically lead efforts aimed at building confidence in the system mentioned under **Recommendation 4**.

Save the Children should **NOT** support witness expenses as they have the danger of displacing government responsibility. Rather they should focus on building an investment case for witness expenses.

Training and capacity building should focus on long term sustainability that is mainstreaming the required skills and knowledge in existing curricula and induction processes. Save the Children's participation should be at this level, working with other partners in advocating this to happen.

## 6 Annex 2: Rating Scales for VFS Government Stakeholders

### 6.1 Police

<p><b>Ideal:</b>          Police manning VFU fully trained          Child friendly interviewing and investigations are being conducted          Police are receiving reports and acting on them          Police are accompanying the child for medical care and support;          Police are investigating the case in a professional manner until finalisation          Police provide support throughout the justice process          Police provide feedback on the outcome of the court case          Dockets prepared within the accepted timeframe of 14 days          Attend consistently and participate effectively VFS Sub-committee          Data managed and used for planning</p>	
<p><b>Progress towards ideal:</b>          A majority of Police manning VFU are trained (over 50%)          Majority children undergo Child friendly interviews and investigations are conducted in a child friendly manner          Police are receiving reports and acting on a majority of them          Police are accompanying a majority of children for medical care and support;          Police are investigating a majority of cases in a professional manner until finalisation          Police provide support throughout the justice process for a majority of children          Police provide feedback on the outcome of the court case for a majority of cases          Dockets prepared after 14 days but within 21 days          Attend consistently and participate effectively in VFS Sub-committee          Data not managed and used for planning some of the time</p>	
<p><b>Little progress towards ideal:</b>          A majority of Police staff manning VFU not trained (below 50%)          Few children undergo Child friendly interviews and investigations are conducted in a child friendly manner          Police are receiving reports and acting on a few of them          Police are accompanying few children for medical care and support;          Police are investigating few cases in a professional manner until finalisation          Police provide support throughout the justice process for few children          Police provide feedback on the outcome of the court case for few cases          Dockets prepared after 21 days but within one calendar month          Attend consistently and participate effectively in VFS Sub-committee          No data management and use for planning some of the time</p>	
<p><b>No progress towards ideal:</b>          Police manning VFU not fully trained          Child friendly interviewing and investigations are not being conducted          Police are receiving reports and not acting on them          Police are not accompanying the child for medical care and support;          Police are not investigating the case in a professional manner until finalisation          Police do not provide support throughout the justice process          Police do not attend consistently and participate effectively in VFS Sub-committee          Dockets and not prepared          Police do not provide feedback on the outcome of the court case          No data management and use for planning</p>	

## 6.2 Ministry of Education

<p><b>Ideal:</b>  Majority of cases of child sexual are reported to the police  Disciplinary procedures in place for perpetrators  Liaising with parents/caregiver providing information on the processes to be adhered to  Survivors receive adequate counseling with support from DSS  Reintegrate survivors of sexual abuse into the education system especially second chance education  Teachers fully trained on managing child sexual abuse at school level  Appropriate platforms are in place to ensure children report at school level  Children are educated about abuse through any interaction process at school level  Disciplinary procedures are adhered to: i.e. – best interest of the child, child’s right to heard in the internal tribunal process</p>	
<p><b>Progress towards ideal:</b>  All cases of child sexual are reported to the police  Disciplinary procedures in place for perpetrators  Liaising with parents/caregiver providing information on the processes to be adhered to  Survivors receive adequate counseling with support from DSS  Reintegrate survivors of sexual abuse into the education system especially second chance education  Teachers fully trained on managing child sexual abuse at school level  Appropriate platforms are in place to ensure children report at school level  Children are educated about abuse through any interaction process at school level  Disciplinary procedures are adhered to: i.e. – best interest of the child, child’s right to heard in the internal tribunal process</p>	
<p><b>Little progress towards ideal:</b>  Limited number of cases of child sexual are reported to the police  Disciplinary procedures in place for perpetrators but partially followed  Limited liaising with parents/caregiver providing information on the processes to be adhered to  Survivors receive limited counseling with support from DSS and teachers  Limited reintegration of survivors of sexual abuse into the education system especially second chance education  Limited number of teachers are fully trained on managing child sexual abuse at school level  Limited number of appropriate platforms are in place to ensure children report at school level  Limited number of Children are educated about abuse through any interaction process at school level  Disciplinary procedures are partially adhered to: i.e. – best interest of the child, child’s right to heard in the internal tribunal process</p>	
<p><b>No progress towards ideal:</b>  No cases of child sexual are reported to the police  No Disciplinary procedures in place for perpetrators  No Liaising with parents/caregiver providing information on the processes to be adhered to  No Survivors receive adequate counseling with support from DSS</p>	

<p>No reintegration survivors of sexual abuse into the education system especially second chance education</p> <p>No teachers are fully trained on managing child sexual abuse at school level</p> <p>No appropriate platforms are in place to ensure children report at school level</p> <p>No Children are educated about abuse through any interaction process at school level</p> <p>No Disciplinary procedures are adhered to: i.e. – best interest of the child, child’s right to heard in the internal tribunal process</p>	
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### 6.3 Ministry of Public Service Labour and Social Welfare

<p><b>Ideal:</b></p> <p>Staff are trained to adhere to protocol guidelines</p> <ul style="list-style-type: none"> <li>• DoSS staff are fully trained on managing child sexual abuse at school level</li> </ul> <p>Up to date data based available and data being utilized for programming</p> <p>Majority of cases of child sexual are reported to the police for investigation</p> <p>Procedures in place to support child victims as well as child perpetrators of violence and abuse</p> <p>Liaise with parents/caregiver providing information on the processes to be adhered to in the justice system</p> <p>Adequate pre-trial support provided to child survivors and during trial</p> <ul style="list-style-type: none"> <li>• Survivors receive adequate counseling with support from DSS</li> <li>• Ensure the safety of the child that is finding alternative places of safety</li> </ul> <p>Ensure that children receive comprehensive services within a continuum care (coordinate PVO stakeholders and District Child Protection Committees)</p> <p>Reintegrate survivors of sexual abuse into society (e.g. enrolment in the education system especially second chance education)</p> <p>Appropriate platforms are in place to ensure children report abuse</p> <p>Compilation of Probation reports for Court processes</p>	
<p><b>Progress towards ideal: (above 50%)</b></p> <p>Staff are trained to adhere to protocol guidelines</p> <ul style="list-style-type: none"> <li>• DoSS staff are fully trained on managing child sexual abuse at school level</li> </ul> <p>Up to date data based available and data being utilized for programming</p> <p>Majority of cases of child sexual are reported to the police for investigation</p> <p>Procedures in place to support child victims as well as child perpetrators of violence and abuse</p> <p>Liaise with parents/caregiver providing information on the processes to be adhered to in the justice system</p> <p>Adequate pre-trial support provided to child survivors and during trial</p> <ul style="list-style-type: none"> <li>• Survivors receive adequate counseling with support from DSS</li> <li>• Ensure the safety of the child that is finding alternative places of safety</li> </ul> <p>Ensure that children receive comprehensive services within a continuum care (coordinate PVO stakeholders and District Child Protection Committees)</p> <p>Reintegrate survivors of sexual abuse into society (e.g enrolment in the education system especially second chance education)</p> <p>Appropriate platforms are in place to ensure children report abuse</p> <p>Compilation of Probation reports for Court processes and support during processes</p>	
<p><b>Little progress towards ideal:</b></p> <p>Limited number of Staff are trained to adhere to protocol guidelines</p>	

<ul style="list-style-type: none"> <li>DoSS staff are fully trained on managing child sexual abuse at school level</li> </ul> <p>Limited Updating of available data and limited application of data into programming</p> <p>Limited number of cases child sexual are reported to the police for investigation</p> <p>Procedures in place to support child victims as well as child perpetrators of violence and abuse</p> <p>Limited liaising with parents/caregiver providing information on the processes to be adhered to in the justice system</p> <p>Limited pre-trial support provided to child survivors and during trial</p> <ul style="list-style-type: none"> <li>Survivors receive adequate counseling with support from DSS</li> <li>Ensure the safety of the child that is finding alternative places of safety</li> </ul> <p>Limited coordination of stakeholders in ensuring that children receive comprehensive services within a continuum care (coordinate PVO stakeholders and District Child Protection Committees)</p> <p>Limited reintegration of survivors of sexual abuse into society (e.g enrolment in the education system especially second chance education)</p> <p>Limited platforms are in place to ensure children report abuse especially those in residential care institutions</p> <p>Compilation of Probation reports for Court processes</p>	
<p><b>No progress towards ideal:</b></p> <p>No Staff are trained to adhere to protocol guidelines</p> <ul style="list-style-type: none"> <li>DoSS staff are fully trained on managing child sexual abuse at school level</li> </ul> <p>No up to date data based available and data being utilized for programming</p> <p>No cases of child sexual are reported to the police for investigation</p> <p>No procedures in place to support child victims as well as child perpetrators of violence and abuse</p> <p>No liaising with parents/caregiver providing information on the processes to be adhered to in the justice system</p> <p>No adequate pre-trial support provided to child survivors and during trial</p> <ul style="list-style-type: none"> <li>Survivors receive adequate counseling with support from DSS</li> <li>Ensure the safety of the child that is finding alternative places of safety</li> </ul> <p>No children receive comprehensive services within a continuum care (coordinate PVO stakeholders and District Child Protection Committees)</p> <p>No reintegration of survivors of sexual abuse into society (e.g enrolment in the education system especially second chance education)</p> <p>No appropriate platforms are in place to ensure children report abuse</p> <p>No compilation of Probation reports for Court processes</p>	

#### 6.4 Ministry of Health and Child Care

<p><b>Ideal:</b></p> <p>Staff are trained to adhere to protocol guidelines and provide the requisite forensic medical examinations</p> <p>Compilation of medical affidavits and participate in court processes</p> <p>Provision of PEP to eligible survivors within the stipulated timeframe</p> <p>Adherence to Protocol guidelines and circulars on free medical assistance for survivors of abuse</p> <p>Ensure that cases are reported to the Police for those that are attended at Out patient department</p>	
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<p>Availability of drug especially PEP  Provide medical assistance for 24 hours 7 days a week  MoHCC staff are fully trained on managing child sexual abuse at health level  Up to date data based available and data being utilized for programming  Procedures in place to support child victims as well as child perpetrators of violence and abuse  Liaise with parents/caregiver providing information on the processes to be adhered to in the health care system</p>	
<p><b>Progress towards ideal: above 50%</b>  Staff are trained to adhere to protocol guidelines and provide the requisite forensic medical examinations  Compilation of medical affidavits and participate in court processes  Provision of PEP to eligible survivors within the stipulated timeframe  Adherence to Protocol guidelines and circulars on free medical assistance for survivors of abuse  Ensure that cases are reported to the Police for those that are attended at Out patient department  Availability of drug especially PEP  Provide medical assistance for 24 hours 7 days a week  MoHCC staff are fully trained on managing child sexual abuse at health level  Up to date data based available and data being utilized for programming  Procedures in place to support child victims as well as child perpetrators of violence and abuse  Liaise with parents/caregiver providing information on the processes to be adhered to in the health care system</p>	
<p><b>Little progress towards ideal:</b>  Limited number of staff Staff are trained to adhere to protocol guidelines and provide the requisite forensic medical examinations  • MoHCC staff are fully trained on managing child sexual abuse at health level  Limited compilation of medical affidavits and participate in court processes  Limited provision of PEP to eligible survivors within the stipulated timeframe  Limited adherence to Protocol guidelines and circulars on free medical assistance for survivors of abuse  Limited reporting to the Police for those that are attended at Out patient department  Limited availability of drug especially PEP  Limited provision of medical assistance for 24 hours 7 days a week  Up to date data based available and data being utilized for programming  Limited application of procedures in place to support child victims as well as child perpetrators of violence and abuse  Limited liaison with parents/caregiver providing information on the processes to be adhered to in the health care system</p>	
<p><b>No progress towards ideal:</b>  No Staff are trained to adhere to protocol guidelines and provide the requisite forensic medical examinations  No Compilation of medical affidavits and participate in court processes  No Provision of PEP to eligible survivors within the stipulated timeframe  No Adherence to Protocol guidelines and circulars on free medical assistance for survivors of abuse  No cases are reported to the Police for those that are attended at Outpatient department</p>	

<p>None Availability of drug especially PEP No provision of medical assistance for 24 hours 7 days a week No MoHCC staff are fully trained on managing child sexual abuse at health level No Up to date data based available and data being utilized for programming No procedures in place to support child victims as well as child perpetrators of violence and abuse No liaising with parents/caregiver providing information on the processes to be adhered to in the health care system</p>	
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