

South Africa's Domestic Violence Act (DVA) (116 of 1998) places an obligation on members of the South African Police Service (SAPS) to provide specified services to victims of domestic violence. These services include referring and transferring women to shelters. The Act is however, silent on whose statutory duty it is to provide and fund those shelters.

Shelter services fall under the broader ambit of the national government's Victim Empowerment Programme (VEP), a key component of South Africa's crime prevention strategy. The Department of Social Development (DSD) is the lead department in the VEP largely responsible for coordination of these services. While National DSD is responsible for policy making and monitoring, provincial departments are responsible for implementation – whether they provide services themselves or ensure that others provide these necessary services.

Ensuring that others provide includes ensuring that the services provided reach all who need them, and that the services are of adequate quality. This, in turn, means that service providers must have adequate resources to deliver quality services. However, the existence of shelters is constantly under threat with the potential closure of such institutions holding significant implications for abused women's safety and security, as well as their prospects of leaving abusive relationships. Is the DSD therefore playing an adequate role in ensuring the provision of sheltering services to women?

Between 2011 and 2012, two shadow reports were compiled which focused on shelter policy, funding and practice.

The first report profiled five shelters in Gauteng and the second, three shelters in the Western Cape. Together, the two reports aimed to analyse trends in:

- the implementation of government policy;
- the extent of funding available to shelters from the DSD and an assessment of whether this was adequate in relation to the operational expenditure of shelters; and
- the needs of shelter residents and whether the services provided by shelters were able to meet these needs.

The reports were developed with the intention to support the lobbying and advocacy of the Gender Based Violence sector for greater resource allocation for shelters that provide services to abused women and their children.

This policy brief describes the methodology used and presents the findings of the two reports. In recognising that some of the shelters have received increases in funding from the DSD since the research was conducted, this brief revisits one of the participating shelters. It describes the funding that the shelter currently receives while analysing the extent that the increase meets the expenditure of the shelter. This is done by costing the needs of a family currently residing at the shelter. The brief concludes with recommendations for the improvement of sheltering services for abused women and their children.

Methodology

The general description of policy and practice provided in the reports was primarily based on documentary research. The criteria for the profiling of shelters included that (1) shelters had to

provide services to women experiencing intimate partner violence and (2) had to receive funding from the DSD. Five shelters in Gauteng (four independent non-profit organizations and one located in a government run one-stop Victim Empowerment Centre) and three shelters in the Western Cape (St. Anne's Homes, Sisters Incorporated and the Saartjie Baartman Centre for Women and Children) agreed to participate in the study. Gauteng shelters asked not to be identified in the report.

Fieldworkers interviewed senior staff at each shelter on funding, expenditure, staffing, services and other issues relating to the shelter's operation. Fieldworkers undertook a census of client records held by each of the participating shelters for a 12-month period. For Gauteng the period ran from October 2010 to September 2011 and for the Western Cape from January to December 2011. Only cases of women who were at the shelter as a result of domestic violence were included in the sample. Once the relevant cases had been identified, field workers read through all the files and

In their 'Enhancing State Response to Gender Based Violence' project, the Heinrich Böll Foundation (HBF) and the Tshwaranang Legal Advocacy Centre (TLAC), seek to promote more just outcomes for survivors of rape and domestic violence through enhancing the capacity of civil society to hold the state accountable for delivering services to abused women. The project is funded by the European Union.

extracted data according to a precoded data schedule. Data was postcoded and captured before being analysed and written up. A preliminary analysis of the data was presented to shelters for discussion and commentary.

As with all studies, there were some limitations in the methodology. Firstly, not all shelters in the provinces were covered. Secondly, some shelters had

mislaid client files, thus reducing the number of records available for scrutiny. In addition, staff turnover at shelters meant that there was often not a consistent standard or style of record-keeping. In some instances, files contained almost no notes regarding the counselling of clients or their psychosocial needs. Thirdly, some shelters in Gauteng were hesitant about giving detailed information on their funding as they feared this might jeopardise future

funding from the DSD. In addition, not all shelters in the Gauteng study provided financial audits for the same year, hence for some, information on income and expenditure was based on the financial year of 2010/2011 while others for the 2011/2012 financial year.

Despite these limitations the reports provided good qualitative information.

Policy Framework for the Provision and Funding of Shelter Services

According to the *Minimum Standards* on *Shelters for Abused Women*, national DSD is required to "facilitate and fast track the provision of shelters for abused women" (DSD, 2001:1). Some of DSD's responsibilities in respect of shelters includes the following:

- To provide short-term intervention for women and children in crises (DSD, 2001: 5);
- To ensure that interventions meet basic needs as well as provide support, counselling and skills development to women and children;
- To ensure that shelters maintain an effective level of safety and security for staff and residents; and
- To ensure that shelters have responsible managers who are involved with the running of the shelter.

An estimated 60% of social welfare services for women and children are currently being provided by Non-Profit Organizations (NPOs) (PMG, 16 August 2012). Some, but not all, receive funding from government to do so. Where funding is provided, it covers only part of the cost. This is different from instances, such as construction of roads or provision of other services, where government pays service providers the full cost plus profit.

In 2011 national DSD released a new *Policy on Financial Awards to Service Providers*. The policy is based on the assumption that the DSD will not be the sole funder of social welfare services. Instead, NPOs are expected to meet the shortfall between the costs of delivery and what DSD provides through securing funds from other donors. This places significant pressure on organizations and reflects a distancing by the state from its

responsibilities.

In its August 2011 briefing to the Committee on Women. Select Children and Persons with Disabilities (WCPWD), national DSD indicated that it had applied to the National Treasury for additional VEP funding (PMG, 30 August 2011). The 2012/13 budget books report that an additional R77 million will be added to the equitable share that National Treasury provides to provinces in 2013/14 and 2014/15 and that the intention is that provinces use this money for VEP services. With this significant increase, it is hoped that shelters will also be included in the budget.

Unfulfilled Undertakings

Currently, there is no legislative provision for regulation of shelters for victims of domestic violence and the services that they provide. In 2009, DSD stated that it had commissioned a feasibility study in order to facilitate the development of a comprehensive legislative framework to address the regulation of shelters, their accreditation and registration (PMG, 3 November 2009). It said that norms and standards would be drafted by the end of the 2009/10 financial year to guide the operation of NGOs. **This has not yet happened.**

Most women who access shelters are in need of health, psycho-social services, and legal services. The DVA does not impose an obligation on government to fund access to health and social services in shelters (Parliament, 2010). In 2010, the parliamentary Portfolio Committee on WCPWD proposed a legislative amendment to the DVA so as to provide for inclusion of specific obligations in the regulations.

In the 2009 public hearings to Parliament on the DVA, TLAC called for a review of the funding criteria of

shelters. In response to its recommendations, the DSD undertook to establish and improve two shelters annually, per province, over five years, if funding was available. At the time of the Gauteng study no new shelters for abused women had been established in Gauteng. In her speech on the budget vote for 2011/12 then MEC for the Western Cape DSD Patricia de Lille prioritised R7 million of the VEP to increase the number of shelters for gender violence from 12 to 14. The 2011/12 Annual Report of the DSD notes that this target was not met because "two shelters...did not have suitable properties. The funds were utilised by the programme for other VEP service providers as part of an appeals process" (Annual Report 2011/12, Page 34).

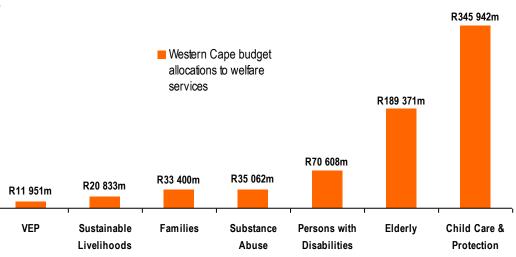
At the DVA hearings, DSD also said that it would guarantee that VEP services would be made available to victims with disabilities (PMG, 3 November 2009). This would be done, among other means, through an audit of facilities and their programmes (PMG, 3 November 2009). This, too, at the time of the Gauteng study, had not hapened.

Budget Allocations: Gauteng

For the 2011/12 financial year, the Gauteng DSD and Health allocated 2% (R36 444 697) of its annual budget to VEP. Of this just under 1/4 of VEP funding (R8 653 815) was transferred to 21 women's shelters at an average of approximately R412 000 per shelter. In comparison, the 2011/12 budget allocation to the Crime Prevention and Support Programme was 5% of the Department's vote and R41 763 360 was assigned for secure care facilities for children in trouble with the law.

Budget Allocations: Western Cape

In the same financial year the Western Cape DSD allocated less than 1% (R11 951 million) of its annual budget to VEP. Of this just over a 1/3rd of VEP funding (R4 million) was transferred to 12 shelters at an average of approximately R333 333 per shelter. The amount allocated to NPOs working on VEP in the province was significantly less than the amount transferred to NPOs for other welfare service areas.



Shadow reports: Samples and User Profiles

This section provides a description of the women accessing services at the shelters that were profiled in the studies.

Western Cape

She's between 29 and 34 years of age, is coloured and is married to the abuser.

Gauteng

She's between 27 and 36 years of age, is African and is not married to the abuser.

both studies revealed that. In general...

She does not have a protection order against the perpetrator of abuse. It's her 1st shelter stay. Not all her children come with her to the shelter, but those that she brings with her are under the age of 6. She has not matriculated. She's unemployed and has no access to income. She has multiple health conditions and requires significant practical, medical and legal support.



| Gauteng Shelters | N Year | N Sample |
|---------------------|--------|-------------|
| 1 | 23 | 12 |
| 2 | 45 | 22 |
| 3 | 89 | 57 |
| 4 | 80 | 23 |
| 5 | 66 | 33 |
| TOTAL | 303 | 147 |

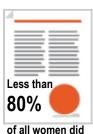
| Western Cape Shelters | N Year | N Sample |
|-----------------------------|--------|-------------|
| St. Anne's | 53 | 16 |
| Sisters Inc. | 24 | 12 |
| SBC | 101 | 41 |
| TOTAL | 178 | 69 |

Fewer than 50%

of all women brought all their children with them to the shelter



of Western Cape women it was their first time at a shelter



not have protection orders



of Western Cape women suffered from depression or other psychiatric conditions



Only 32% of

Western Cape women had a high school education



medical care

75%

of Gauteng women it was their first time at a shelter

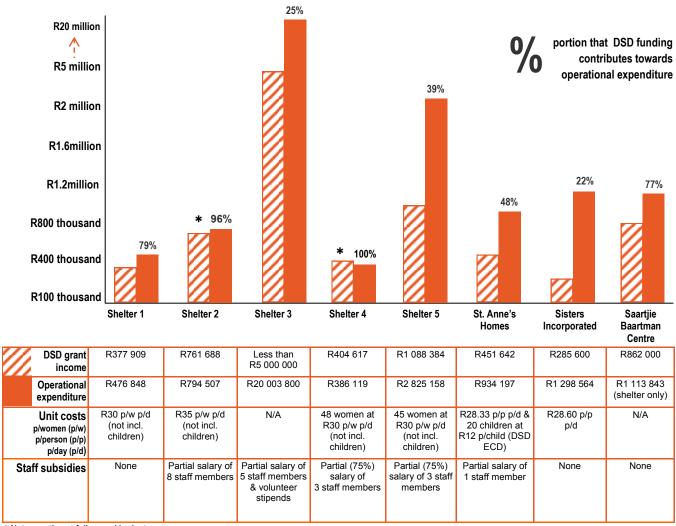
"Shelters represent an absolutely critical point of crisis intervention...[and] are therefore a crucial base of information on the extent to which the legal system is effective in protecting the enormous amount of women seeking such protection."

Minimum Standards on Shelters for Abused Women, (DSD, 2001: 1)

Shadow report findings

1. DSD funding to shelters is not sufficient

As required by the study, all eight shelters received funding from the DSD. The following table lists the amount of funding that shelters received from DSD and compares how this income contributed to the shelters overall expenditure. Where applicable, the table also outlines the subsidy rates that shelters received for residents and staff costs. As was mentioned earlier, shelters in Gauteng opted to remain anonymous therefore only the names of the Western Cape shelters are provided.



^{*} Not operating at full annual budget

As evidenced by the graphic, income from DSD differed across and within the provinces. Unit costs for the Gauteng shelters were higher than Western Cape shelters however Gauteng DSD did not cover the costs of children accompanying mothers to the shelter whereas Western Cape DSD did. This is reflected in the table when specifying unit rates as per women per day for Gauteng shelters versus per person per day at Western Cape shelters. Not all shelters received funding towards staff salaries.

In almost all but one case the full cost of operating the shelter service exceeded the contribution of DSD. For some the variance was rather significant. Funding provided by the DSD for Shelter 5 covered 39% of the shelters operational expenditure and for Sisters Incorporated the funding covered 22% of their overall expenditure for the year. This means that the shelters had to source funding from

other sources to cover the short-fall.

At other shelters the variance between DSD income and expenditure seemed less significant. The operational expenditure of Shelter 2 for example only exceeded the DSD income by 4% whereas the funding that Shelter 4 received was fully covered by DSD funding. However, while it may appear that these shelters fared better than others, they were not operating at a full annual budget as they had been unable to secure funding from other sources. Shelter 4 explains that ordinarily DSD income for their shelter covers less than 25% of the shelter's annual operating budget of about R1 million. A significantly reduced budget means that shelters are often forced to cut back on programmes, staff and services over time. Lack of funding has forced shelter 2 to discontinue some programmes so as to focus the limited funding on the core service of providing shelter and the VEP. The transport costs for this shelter are substantial at 60% of the cost of food. Staff report that when the shelter does not have money for transport, money intended for groceries is used to subsidise transport costs.

The expenditure of Shelter 1 and the Saartjie Baartman Centre (SBC) exceeded DSD funding by just over 20%. Because of limited funds, expenses at Shelter 1 are limited to what is urgently required for the basic day-to-day running of the shelter. Costs have been cut repeatedly as a result of the worsening funding environment. There are glaring funding shortfalls for salaries which creates difficulties in respect of retaining staff particularly social workers. In the case of SBC, the historical trend of inadequate financial support from the DSD together with a falling-off of partner NGO services eventually resulted in a process of institutional restructuring, significant

retrenchments and cutting back of programmes. In January 2012, SBC had three months of funding remaining. The organisation undertook a major media campaign to highlight its dire financial state, imminent closure and the services gap it would create if it were to close. In response to the media campaign, Provincial DSD committed a further R250 000 to its annual set grant of R862 000 (an amount that has been received by SBC over the last nine years). This additional amount was a once-off contribution to assist the organisation during its financial crisis. In a media state-

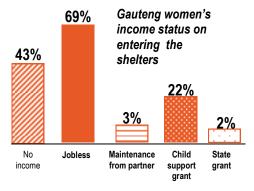
ment, the Western Cape MEC for Social Development lambasted the National Lottery Distribution Trust Fund for dragging their feet in funding NGOs in dire financial circumstances. The overall message was (once again) that "NGOs are independent organisations responsible for their own fundraising".

However, there are other means by which the state can alleviate some of the challenges facing other shelters. For example, while the operational expenditure of **Shelter 3** exceeds the funding received from Gauteng DSD rather significantly, in this case the shelter is one of several services at a government VE centre and receives the majority of its funding from the Gauteng Department of Community Safety. The Department of Health also covers the costs of children's schooling if the children access schools near to the shelter. This is significant and reflects that collaboration between the DSD and other government departments is an effective strategy in providing services and support to shelters and their residents. Strategies to replicate collaborations such as these should be explored in more detail.

2. Women and children had significant practical needs and limited or no means to cover them

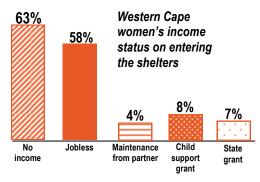
Over a 12-month period, the eight profiled organizations had provided sheltering and care to a total of 216 women and 308 children who were at the shelter as a result of intimate partner violence.

The majority of women entering the shelters were **unemployed** (67% in Gauteng and 58% in the Western Cape) and had **no access to income** (43% of women in Gauteng and 63% of women in the Western Cape). **Income for child care was limited** to 22% women of Gauteng women who had child care grants and 10% who received maintenance from a partner. Only 8% of Western Cape women received child care grants and only 4% received maintenance from a partner.



In order to improve women's economic empowerment, shelters offered a range of skills development programmes. Shelters also assisted women with developing CVs and providing access to newspapers, the internet and phone facilities to find work. In some cases shelters also actively assisted with job placements.

Half of the unemployed women in the Western Cape had found employment by the time they had left the shelter. This is a remarkable achievement given the strained resources that shelters have at their disposal.



Women were not as successful in finding jobs in Gauteng as only 12% of the unemployed women had found employment by the time they left the shelter. This may be that the skills offered at the Gauteng shelters are not as competitive on the open market and women have therefore limited success in finding work. Additionally, women's poor education status, and the high level of unemployment in South Africa makes it more difficult for them to find work. Another contributing factor could also present itself by the fact that 12% of the women in Gauteng shelters were non-South African citizens - accessing employment was therefore limiting for these women.

"Inevitably the daily costs of providing basic necessities like toiletries, food, transport, and school fees for women and their children were passed on to shelters."

3. Women and children had significant health and psychological needs

Across both studies women's most frequent health concerns were depression or other psychiatric conditions, HIV, pregnancy and substance abuse. Most women had more than one health condition however and most were of a serious nature requiring on-going health

care but only 15 women in the Western Cape and eight women in Gauteng were recorded to have received treatment at a local health facility, private doctor, psychologist or psychiatrist.

Most shelters were not able to provide psycho-social services to children. In Gauteng, 14 children in the sample had health care needs, but fewer than four were seen by a medical doctor or a psychologist. In the Western Cape, only St Anne's Shelter provided children with psychosocial services such as play therapy and counselling. Nine children in the sample had health care needs, but only one was recorded as having been attended to by a medical doctor.

4. Women's legal needs were extensive

Only 25 women in Gauteng and 11 in the Western Cape arrived at the shelter with a protection order. Women's legal needs extended beyond applying for protection orders however. Legal needs included: applications for IDs and child certificates, following up on domestic violence cases. maintenance applications, instituting divorce and custody proceedings, court preparation, matters related to adoption, application for state arants and state-assisted housing, opening bank accounts and Gauteng some women had requested assistance with asylum seeking. While the three Western Cape shelters were able to assist most women or refer them to other agencies for support, Gauteng did not fare as well as in most cases the shelters were unable to help beyond providing basic information. Very few women could afford private legal assistance.

5. Women and children require postshelter accommodation

The majority of women accessed shelter services for the first time and stayed between 1—5 months at the shelter. At times this stay was significantly extended with some living in the shelter for up to a year.

Information on where women went after the shelter was only available for 126 women. Of these, only 10% returned to the marital home. The rest went to live with family members (27%), found their own accommodation (21%), or moved in with an employer or a friend (2%). In one case a woman went to live with a new partner and another went to a psychiatric facility. In 36% of cases however women were still accessing shelter services, either by still being at the shelter during the time of the study; having requested an extension of stay; having sought refuge at another shelter; or in the case of the Western Cape having accessed secondary stage housing. Requests for extensions to stay at the shelters were granted in situations where women had not been able to find alternative free accommodation or employment to fund their own accommodation. For a number of varied reasons shelters are not always able to follow-up on residents after leaving the shelter. This picture may be somewhat different should a shelter contact a women 3-6 months after their shelter stay.

6. Police were a source of referrals to shelters but are not adequately equipped

Twenty-two percent of women in the Western Cape and 34% of Gauteng women were referred to shelters by the police.

To determine how effective the police's referral systems are, 134 police stations in Gauteng and 147 in the Western Cape were called by researchers posing as abused women seeking a referral to a shelter. The findings revealed that **61% of Gauteng**

police stations and only 29% of Western Cape police stations could refer the caller to a shelter. Seven percent of the Western Cape police stations were able to provide the location of a shelter but did not know the name or the contact details of the shelter. In 24% of cases the designated domestic violence officer or the trauma counsellor was not available to assist or was on leave.

Of the 41% of stations in the Western Cape who were not able to refer the caller to a shelter:

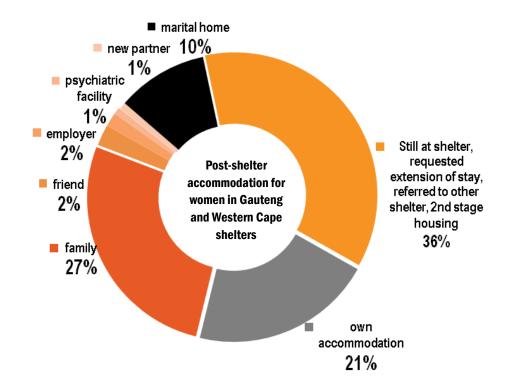
- 31 referred the caller to another police officer, trauma counsellor or department (including a HR Department) within the station;
- 14 referred the caller to another facility (e.g. police station, court, hospital, ngo, and on one occasion a refugee centre)
- 12 offered to take the caller to a family member, friend/offered the use of their trauma room/someone's home as there were no shelters in the area
- 2 did not know of any shelters and were not able to provide further advice

Nine percent of Gauteng police stations and 12% of Western Cape police stations refused to refer the caller to a shelter service. Reasons provided included (1) they were unable to disclose the names or locations of the shelters (although only 3 police stations in the Western Cape said this) or (2) that the victim would have to present herself at the station if she needed help. One of the police stations that refused to disclose the name/location of a shelter indicated that they would only take a victim to a shelter once they had visited her home and established whether she was in danger. Reasons provided for requiring that the victim present herself at the station included that this was standard procedural practice; that the shelter required a referral letter or that the caller would need to lay a charge and/or apply for a protection order before she could be referred to a shelter. The DVA does not require a woman to present herself in person to be assisted with the contact details of a shelter. In 14 Gauteng police stations and 15 Western Cape police stations telephones were not answered, had faulty lines, or the call was disconnected.

In conclusion, the reports found that

- Women and their children have extensive needs
- Shelters needed to cater for these needs
- Providing child services and legal services proved challenging as most did not have the staff capacity, skills or programmes to do so
- Although some shelters were able to provide longer-term accommodation to residents this is not a provision that the majority can offer.
- Funding constraints can result in only core services being maintained.
 Admin functions and posts suffer as a result
- Shelters cannot afford the number and variety of staff required and most social workers have substantial case loads. In addition, shelters are unable to pay market-related salaries. Retaining staff therefore proves a challenge. Government remuneration for social workers is much higher than what NGOs can afford.
- Given that legislation requires that the police be able to refer abused women to shelters, the reports concluded that the funding that shelters received from DSD was not sufficient to allow the shelters to meet all the legitimate needs of the women and their children.

On a positive note however, the reports also highlighted that despite all of these challenges shelters do an admiral job, and while funding received from the DSD may not overall be sufficient there are other means by which these two stakeholders can be assisted in delivering services to women and children seeking reprieve from domestic violence. Collaborations between different government departments does work as evidenced in one of the profiled Gauteng shelters. Strategies at developing such collaborations will significantly alleviate the burden that is almost always solely carried by shelters and the DSD.



Further Challenges & Recommendations

Although the reports did not venture into outlining recommendations, the following sets out a number of suggestions to address some of the issues raised. An additional survey conducted by HBS with members of the National Shelter Movement (NSM) revealed further challenges faced by shelters and solutions to address these:

- Lack of legislation on shelters. There
 is currently no legislative provision for
 the regulation of shelters. This needs
 to be developed in consultation between the DSD, shelters and other
 civil society organizations.
- Overall lack of co-ordination with the DSD and other government departments. A co-ordinated, multidepartmental and agency response is needed to facilitate improved shelter service delivery and support to women.
- Shelters are unable to keep up with capacity demands. The DSD reports the existence of 96 shelters for victims of violence nationally, yet the NSM has only 64 shelters on its national database. This discrepancy needs to be clarified. Regardless of this, domestic violence is prevalent and there are not enough shelters to keep up with the demand. Sisters Incorporated, for example, states that between April-June 2013, they were unable to accommodate 35 women and 33 children experiencing domestic violence as they were filled to capacity. A shelter in the Free State (that participated in the survey) had also had to turn away 27 women and 15 children. During the same time-frame. The DSD should fund shelters to increase their capacity enabling them to accommodate more women; and should assist more shelters in getting

- registered and becoming fully operational.
- Women struggle to find accommodation post-shelter. Shelters can only provide short-term housing reprieve for women. The Department of Human Settlements could assist women to access affordable second stage housing. The Department should fast-track its Special Needs Housing Policy. The DSD could also assist with developing a shelter to run purely as a second-stage shelter. This would also reduce waiting lists at shelters.
- Shelters are not able to accommodate whole families. Shelters are restricted from accommodating boy children over a particular age. Women are required to either leave their child in the care of someone they know or the child is placed in a children's home while the mom resides at the shelter. This is not an ideal situation for a family trying to heal from the trauma already suffered. Women may opt to remain in an abusive relationship so as not to be separated from her children. The DSD should identify shelters that are able to accommodate whole families.
- Police lack full understanding of their role in referring women to shelters. A database of shelters and information on referral processes and procedures should be provided to all police stations and all police officers should have access to this referral source. There is also a significant need for more officers to be trained on domestic violence and how to effectively and empathetically engage with women in such situations.
- Women's health needs are extensive and often require substance abuse treatment. Women had many health needs and were not always able to access

- medical care. Shelters are also not equipped to deal with women who abuse substances. The DSD should assist in identifying a shelter that specializes in the provision of sheltering services to abused women in the context of substance abuse, and ensure that staff is adequately capacitated to provide rehabilitation and support. The **Department of Health** could also assist shelters by offering free monthly medical care and treatment (including psychiatric) to shelter residents at the shelters. In addition, the department should train personnel at clinics and hospitals to be more cognisant of domestic violence and be sensitive to their needs. These two agencies can also play an important role in providing advice to abused women and refer them to shelters.
- Children and schooling. The Department of Education should assist with
 the transfer of children to schools
 nearer to shelters. The department
 should assist with the provision of free
 schooling and travel for children residing at the shelters.
- Shelters struggle to provide legal assistance to women. Legal Aid organizations must be more aware of providing services to women at shelters. Department of Justice should train personnel to be more understanding and empathetic to abused women. The department could further assist by offering legal skills training to shelter staff.
- Women struggle to find employment.
 The Department of Trade and Industry and the Department of Labour could assist shelters by providing residents with specialized skills training and with finding employment.

An Update: Funding Increase to Sisters Incorporated

At the time of the study Sisters Incorporated was receiving R28.60 per resident from DSD totaling to an overall grant of R285 600. A year later, DSD's grant to the shelter increased to R463 641.00—a far healthier contribution to its overall expenditure of R1 225 million in that financial year.

The shelter has since signed a new grant agreement with the department. For the next two financial years (2013 – 2015) the shelter has been awarded a grant of R544 137.50 per year. This funding will cover some administrative costs; housing of residents at a unit rate of R39.40* per person per day; and whereas the shelter had not previously received funding towards staff salaries, the grant now partially funds the social workers salary. The funding increase has been welcomed by the shelter.

To analyse how the increase of R39.40 per person per day contributes towards the needs presented by women and children residing in a shelter, a costing exercise was undertaken. The exercise unpacked the needs of a small family when first entering a shelter and what it cost to house them and cater for these needs for the first month. The following case study is based on a family that currently resides at the shelter. Events leading up to their entry at the shelter and the names of family members is fictional, however the health, legal and practical needs presented by this family are real.

*Please note that an unintentional error was made in the calculation of the unit rate on first publication of this brief. The daily unit rate per person was reported as R44 at the time. The unit rate of R39.40 per person per day is calculated at 365 days instead of an average of 30 days per month. Marie is 24 yrs old. She has two kids, 7yr old Sufiya and 2 yr old Jonathon. She's 8 months pregnant. Marie did not believe in love at first sight until she met Anthony. He was young, successful, charming, and caring...the relationship was beautiful she says. Two months after they started dating she found out she was pregnant. She was petrified of what her mother would say but her reaction was far worse than Marie imagined. One day when arriving home from school, she found her clothes packed in a suitcase outside her house. The door was locked and a note taped to her suitcase said "now it's Anthony's turn to look after you". That was the last time she saw her mom. She moved in with Anthony and all was well until he started yelling at her. Then the slapping started and by the third month so did the punching and the kicking. Embarrassed by the evident bruises and five months pregnant she stopped going to school

and cut off ties with her friends. When Sufiya was born he was elated. Cradling the baby in his arms he proposed marriage to her. He told her that he had never loved her as much as he did at that moment and promised that things would get better. She thought the nightmare was over until they discovered that Sufiya needed a kidney transplant and the violence erupted again. Six years down the line and a broken arm, dislocated shoulder, three cracked ribs, countless black eyes and bruises, pregnant for the third time and a gun shoved in her face was what it took for her to finally realize that if she didn't leave, her children would not have a mother one day. While he was sleeping that evening, Marie and

her two kids fled the home. Too scared to wake him up, they left everything behind. They arrived at the shelter with only the clothes they were wearing and penniless because he had never let her work. Fortunately the shelter was able to take them in as another family had moved out that morning.

Costing shelter services for women and children

Practical needs

The shelter provided a warm bed for each member of the family; three meals a day including two tea breaks; three sets of clothing; toiletries including diapers for Jonathon and maternity pads for Marie; and school uniform and stationery for Sufiya. The shelter was able to move Sufiya to another school and pays for transport to and from school every day for Sufiya as well as Marie who accompanies her daughter. Travel includes taxi and train fare for both. Jonathon spends his day at the crèche.

Medical and legal needs

The shelter helped Marie open up a bank account and paid for a new ID for her, and birth certificates for her children. She was taken to the Magistrates court to apply for a protection order and for a child care grant. She has instituted divorce and custody proceedings. Marie is taken to a maternity hospital for a weekly check-up. Marie has decided to give the baby up for adoption once it's born and the shelter has assisted in setting this up. Sufiya is taken to a children's hospital once a month where she receives post-operative supervision and medication for the kidney transplant she had as a baby. Jonathon was taken to hospital for X-rays following a fall at the crèche. Marie attends weekly counselling sessions at the shelter and Sufiya has been referred to a child psychologist. The children have had a supervised visit with their dad at another location. Marie will start looking for a job after she gives birth. In the meantime she attends skills training workshops at the shelter.

The following is what this service provision offered cost for this family's first month's stay. The costing acknowledges that clothing is a once-off contribution.

| Category of expenditure for all 3 family members | Cost |
|--|---------|
| Clothing & school uniform | 4014.84 |
| Toiletries | 1007.63 |
| School stationery | 432.75 |
| Food | 2744.85 |
| Medical | 750.50 |
| Legal | 515.00 |
| School travel | 1040.00 |
| Supervised visits | 70.00 |
| Cleaning & Operational Costs | 4740.02 |

| Total cost | 15315.59 |
|-----------------------|-----------|
| DSD Contribution @ | |
| R39.40 p/person p/day | 3546.00 |
| Deficit | -11769.59 |

Contribution required:

The unit rate required to cover the full costs for this family's first month of stay would have needed to be the following:

| Total expenditure | 15315.59 |
|------------------------|----------|
| / nr of family members | 3 |
| / nr of days | 30 |
| Contribution per | |
| person per day | R170. 17 |

In firstly considering that clothing would not be an on-going cost, and secondly that contributions to cover the cleaning and operational costs would not necessarily need to be covered under a unit rate if it is separately funded, the following provides a description of what the unit rate for each family member would need to be to cover the on-going expenses of meals, toiletries, and medical/legal support:

| Total monthly cost | 6127.98 |
|------------------------|---------|
| / nr of family members | 3 |
| / nr of days | 30 |
| Contribution needed | R68.09 |

This costing exercise concludes that a unit rate of almost R70 and additional funding towards the administrative and staffing costs of the shelter would greatly improve the ability of this shelter to meet the needs of this family.

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