

A RAPE INVESTIGATION IN
THE WESTERN CAPE

A study of the treatment of rape
victims at three police stations in the
Cape Flats, South Africa

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Introduction

Police, prosecutors, and government leaders agree that improving the investigation of rape cases and the treatment of rape victims is a priority. Low conviction rates and numerous accounts of poor treatment of victims highlight the ineffectiveness of the current system. Between January and June 1999, 23,900 cases of rape were reported to the police throughout South Africa, of which under 10 percent reached court. Frustration with the low rate of successful investigation and prosecution has led to increased vigilantism in many communities.

Is it possible to improve the service provided to rape victims, and if so, how? These are the questions the Minister of Justice and Constitutional Development and the National Director of Public Prosecutions asked the Bureau of Justice Assistance (BJA) to answer in September 1999. To this end, the bureau, a joint project of the New York-based Vera Institute of Justice and the South African Ministry of Justice and Constitutional Development, has conducted the present study and has designed a demonstration project for implementation in the Cape Flats based on the results.

The study traced rape victims for one month after they reported at a police station. The aim was to hear their stories and to learn from their experiences how to strengthen the services that police and justice provide to rape victims. As the study revealed, several features of police work are operating effectively and are appreciated by the victims; but systemic problems continue to frustrate victims and lead to weakened or withdrawn prosecutions later on. As a result of this study and discussions with officials who play a role in the process, the BJA has designed a demonstration project for immediate implementation that would first strengthen the investigation of rape cases and treatment of victims, and then strengthen liaison with the court and prosecution as the cases move through the court process.

Methodology

The study sites comprised three police stations in the Western Cape that indicated a large number of rape reports. Each police station serves 350,000 to 1 million people, and receives on average 20 to 40 rape cases each month.

We conducted structured interviews with a sample of 15 adult rape survivors (16 years and over) who reported at the police stations. A project planner from the BJA and two trained volunteers interviewed each survivor three times over a period of a month. The first interview took place immediately after the rape was reported; the second interview was two weeks later; and the third was conducted one month after reporting. We chose these time frames to allow us to compare the treatment of victims in the first month of the investigation.

We chose to include only a small number of women in the study so that we could assemble detailed case histories for each person. A larger sample would have made it difficult to ask the kind of in-depth questions that would reveal the complexity of the victims' experiences. Each set of interviews was structured to deal with different aspects of reporting to a police station and the follow-up process. We did not track individual cases through court.

We chose victims based on their willingness to participate in the study. All rape victims who reported at the pilot sites were informed of the study and invited to participate. They were also informed that their participation or nonparticipation would not affect the outcome of their cases. Most victims consented. We conducted each interview at the interviewee's convenience and at a place designated by her.

Interviews were in Xhosa, Afrikaans and English, by the interviewees' request. The interviews were translated into English, as close as possible to the survivors' actual wording, and the translations were corrected for grammar.

One of the interviewers was a man, and this required a greater level of cooperation from the interviewees. The decision to be interviewed by a man was left to the women; none of them declined. Wherever possible, the BJA researcher or one of the volunteers was present with the male interviewer during the interviews.

Rape cases reported by minors are channeled to the Child Protection Unit (CPU), a unit of the South African Police Services (SAPS), and are not included in this study. Child rape cases are treated differently from adult rape cases, since different methods are required to get evidence and in-camera hearings are the main form of testifying.

We encountered a few problems in conducting the study. Sometimes police officers, concerned about confidentiality, were reluctant to provide the necessary information. In addition, it was sometimes difficult to trace victims who live in squatter camps and who do not have telephones.

Analysis

We interviewed the women three times in the course of the study. Interview one focused on the actual rape and reporting procedures. Interview two captured family background and follow-up in the two weeks after reporting the incident. Interview three focused on follow-up procedures during the two weeks following the second interview (which was actually one month after the incident was reported). Fifteen women completed interview one, 14 completed interview two, and 14 completed interview three.

Who are the victims?

The victims are women between 16 and 43 years old.

Table 1: Age of women interviewed for the study

Age Group	Number
16 – 20	8
21 – 25	3
26 - 30	1
31 – 35	2
36+	1
Total	15

At the time of the study twelve women were single, one was married, and one was widowed. Six of the women have children. One victim has never been to school due to ill-

health, one has completed grade two, 11 have completed between grade six to grade ten, and two were still attending school when the incident happened. Thirteen of the women were unemployed and two were at school. Seven women lived in households that have three to five occupants, six lived in households of six to ten occupants, and one lived in a household of over ten occupants.

Who are the rapists?

In 14 of the 15 cases the women reported that they had been raped. One woman reported an attempted rape. In 11 cases the victims knew the perpetrators. The perpetrators in these cases are part of a close circle—they are friends, relatives, and ex-boyfriends. In four cases the victims did not know the perpetrators. In 11 cases there was one perpetrator, and four cases involved two to four perpetrators.

When did the rapes occur?

All of the incidents occurred between 7 p.m. and 5 a.m., and nine occurred between midnight and 5 a.m.

How did the rapes occur?

In four cases the women were walking alone, returning home either from visiting a friend or from a party. One woman walked home alone at 8 p.m., and two others between 3 a.m. and 5 a.m. In another case the person was kidnapped at midday and held hostage for approximately 17 hours.

In four cases the victims were at parties and told the interviewer that they were drinking excessively. In three of these cases the victims slept at the scene of the party because they were drunk. In two of these three cases the victims reported that they were not consciously aware of being raped. In one case the victim states that she found her clothes in the perpetrator's room and then suspected that she had been raped by him. In the other case the victim became aware that something was wrong when she awoke. She realized she had been raped and was told so by other people. Unfortunately, such incidents call attention to the credibility of the victim's charge against the perpetrator and lead to withdrawal of many of these charges due to a lack of sufficient evidence.

In some of the cases the victims told the interviewers that the community did not interfere when they were raped, and sometimes did not encourage them to report the matter to the police. In one case a family member of the perpetrator advised the victim not to tell anyone, including the police, that she had been raped. With support from her family, the victim did report the rape to the police but eventually dropped the charge, and the case was withdrawn before going to court.

One woman told the interviewer that she was dragged from her friend's house in front of the perpetrator's brother, who did nothing to assist her. Another woman said that she screamed and was heard by her neighbor. Unfortunately, the neighbor was having a quarrel

with her boyfriend and did not respond to the screams. In only one case did people respond to a victim's cries for help.

Reporting to the police station

Most women laid a charge within an hour to nine hours after the incident. In four cases the victims reported after 24 hours, and two women reported more than five days later. In 14 cases the women reported first at a police station, but in one case the victim first went to the community street committee.¹

The police officers on duty were generally aware that rape cases should follow a different protocol. In most cases the women were referred to a female officer or to the victim support room.² Most women received attention in less than an hour.

However, there were some instances of poor treatment. In one case, the victim told the interviewer that the police officer on duty was drunk and that another officer was asleep when the victim and her father arrived at the station. The victim reported that her father was forcibly removed from the charge office when he tried to explain to one of the police officers what had happened to his daughter. In another case the police officer told the victim not to lay a charge against the perpetrator, and further that no docket would be opened on her complaint. The same police officer offered to call the perpetrator (who is the victim's ex-boyfriend) and reprimand him.

In one case, the victim first went to the street committee before going to the police. The street committee found the perpetrator and then took the victim and the accused to the police station, where he was arrested.

The excerpts below indicate some of the women's first impressions at the police stations:

On arrival at the police station I sat on the bench, waiting to be called by the police officer who was attending to the people. After five minutes I was called to the front desk by a male police officer. Immediately after hearing that it was a rape case, he advised me to go to another room inside the station. He then took a statement from me. (Case 1)

I remained at the charge office for approximately five minutes before a Nicro counselor could arrive. She took me to another room in the police station where a statement was taken. (Case 2)

A female officer attended to me. She treated me with respect and was very helpful.
(Case 3)

¹ The street committee is a community structure that is set up to mediate in petty offense matters, such as shoplifting or vandalism.

² The victim support room is a separate room within the police station, secluded from the public and more private, where the statement is usually taken.

Approximately after thirty minutes I was told by another male officer to go to a room at the back of the station. After I arrived in that room I found a white woman who questioned me about what happened. (Case 4)

When I arrived at the police station, I waited for the police officer to finish assisting someone else. I was then called by the police officer and asked about what happened. While we were talking, another police officer came and talked to the one attending to me. I was then told that someone else would come and assist me. The police officer who was attending to me asked another lady to assist and he then left. This lady took me to another room where she asked me a few questions. She then took a statement. (Case 6)

They only helped me at 1:15 a.m. The policeman on duty was sleeping. They had to wake him up. One of the other policemen, who was behind the counter, was drunk. My father tried to explain to them what had happened and they chased him out. (Case 7)

I arrived at the charge office and I was told to wait. I then waited for two hours. When my turn came I talked to a male police officer who then advised me to wait for someone else who would attend to me. The statement was taken at approximately 10 p.m. (Case 8)

When I arrived at the station there was no queue. I met with a male police officer who asked me what my complaint was. When I told him, he immediately stopped me and called a female officer to attend to me. After telling her that I was raped by my ex-boyfriend, she told me not to lay a charge against him. Instead, she offered to call him and reprimand him. She emphasized that the docket would not be opened. She also said that she does not want to get involved in such matters, and she was angry. My mother cried bitterly. It was then that a male officer said he would do us a favor by opening a docket. He opened a docket and when we asked for a case number he refused. (Case 9)

When we arrived at the police station I sat on the bench and the perpetrator was taken inside. They took him to the cells and shortly thereafter a male officer attended to me. I was then taken to another room where they normally take statements. (Case 10)

Taking a statement

All three police stations appear to have set protocols for the initial treatment of rape victims. Some police officers made sure the victim was not unduly detained and that a female officer took the statement. These statement-taking procedures took between twenty and sixty minutes.

However, in one case a female police officer was unwilling to take a statement because the perpetrator was an ex-boyfriend. The reluctance of police to proceed with a charge in such cases surfaced consistently throughout the study. Investigating officers told the BJA that where the perpetrator is an ex-boyfriend, victims often eventually withdraw the charge. As

well, these officers told the BJA that these cases, as well as cases where the victims are drunk, are more difficult to investigate successfully. On the other hand, victims reported feeling frustrated with the police officers' reluctance to assist them, especially when they identified the perpetrator as an ex-boyfriend.

The victims also complained about the environment in which they were assisted. In some cases, other people interrupted the police officer on duty while the officer was taking a statement. Also, the women reported that they had to repeat the incident to too many officers before a statement was taken.

Immediately after hearing it was a rape case, he advised me to go to another room inside the station. He then took a statement from me for approximately 20 minutes. (Case 1)

Distractions and disruptions while the statement was taken were intolerable. There were people disturbing us while the statement was being taken. The person who was taking the statement was fine and caring but she was constantly disturbed and I was not happy with that. (Case 5)

I met with a male officer who asked me what my complaint was. When I told him, he immediately stopped me and called a female police officer to attend to me. While the statement was being taken by the male officer, the female officer continued to utter abusive language at me. (Case 9)

Handover to an investigating officer

At the charge office (or community service center as the charge office is now called), the police officer on duty either takes a statement or locates a female police officer to take a statement. After the statement, an investigating officer (or detective) is assigned the case for investigation and follow-up. The police officer who takes the initial statement is not involved in the case after the handover.

The investigating officer is responsible for checking that the statement is accurate and for taking the victim for a medical examination that same day. Investigating officers were often not available at the police station when a victim reported a rape. On average, most women spent three to four hours at the station before meeting with an investigating officer. This caused delays and prevented smooth handovers from police officers to investigating officers.

Also, one investigating officer is not responsible for the full investigation of a case. These officers rotate. Thus, an investigating officer who takes the victim to a doctor might not be responsible for arresting the perpetrator or investigating the case. Victims reported annoyance at not having one investigating officer to contact.

Some investigating officers treated the victims very well, but other victims reported poor treatment. In one case, the victim said that the investigating officer was impatient and hurried her to make her statement. In two cases, where the perpetrators were an ex-boyfriend and a friend, the victims were encouraged to reconsider their decisions to lay a charge.

Investigating officers told us that sometimes they spend a lot of time trying to locate a perpetrator, only to find that the victim withdraws the case soon after. This is often the case when the perpetrator is an ex-boyfriend. For this reason investigating officers are sometimes reluctant to invest time trying to find the perpetrator and are not sympathetic to the victim.

The investigating officer was not patient with me. He kept telling me to be quick in relating my plight. He kept telling me that he has no time to waste and this caused undue pressure on me...The investigating officer then advised me to be sure that I wanted to lay a charge against the perpetrator. I never doubted to lay a charge. He advised that I go home and decide whether I want to press charges. (Case 1)

The police officer advised me that I needed to speak to an investigating officer and she went to look for one. She came back and said there was no investigating officer to help at that time and those that were there were not interested in helping me. I had to wait because no one was available to take me to a district surgeon. When we were about to leave an investigating officer arrived. (Case 5)

After three hours an investigating officer arrived who looked at the statement and asked some questions about the incident. This took about 30 minutes. (Case 11)

The incident happened in A and I went to a police station nearby. I was told that the computers were offline. I was then told that they would call an investigating officer in B, so that the case could be transferred. I waited four hours for an investigating officer from B. (Case 6)

The investigating officer treated me very well. (Case 8)

Going to a doctor

Police took most statements soon after the victim arrived at the station. However, the process of waiting for an investigating officer and then going to the doctor lasted much longer. The time it took to go to a district surgeon varied from one hour to a few days. Although a lack of available transportation was frequently the problem, most of the investigating officers ensured that the victims eventually got to a district surgeon.

At approximately 11 p.m. a male investigating officer took me to a district surgeon at Victoria hospital in Wynberg. I complained about going to Wynberg because that was very far. (Case 8, reported at 8 p.m.)

After three hours of waiting at the station I was taken to a doctor. Apparently there was no transport. This frustrated me so much that I nearly left the police station. I hated this

because I stayed there with the dirty and bloody clothes for more than three hours. (Case 10)

I stayed for an hour in this room before going to a district surgeon. (Case 4)

Yes, they (police officers) did refer me to a doctor and took me there. (Case 12)

I was not referred to a doctor or a counselor. (Case 13)

After three hours an investigating officer arrived who looked at the statement and asked me some questions about the incident. He then advised me to wait until 9 o' clock so that we could go to a district surgeon. (Case 11. This was four hours after reporting the incident.)

I was referred to a doctor the following day. The investigating officer took me to a doctor. (Case 2. Victim reported the incident two days after the rape.)

I was not referred to a doctor. I had to go the next morning. (Case 7)

I told the police that I wanted to go home so they called B police station. They took approximately two hours to arrive. After arriving at home they took me to a doctor. We left at approximately 10 p.m. and came back at approximately 3:30 a.m. We took about five hours. (Case 14. Victim reported to a police station that was far from her home.)

The medical examination

In general, most of the women received good treatment from the doctor when examined for rape. They were examined, comforted, and referred for counseling. However, the doctor did not explain the examination procedure or the findings to the victim. The examinations lasted from 15 to 60 minutes. All communication appeared to be directly between the investigating officer and the doctor. Except for one victim, all others were handed a letter, referring them to a day hospital for an HIV/AIDS test. In one case the doctor did take a blood sample from the victim but she was not told the reason for this. No follow-up medical care was offered to the victims.

In the case mentioned above where the victim did not get a referral letter for an AIDS test, she went to a hospital and explained what had happened. She was refused an AIDS test until she produced such a letter. Contacting the doctor who initially examined her proved futile, and one month after being raped she was still uncertain about her HIV status. In one case the doctor refused to fill out the standard medical examination form (known as the J88). The investigating officer had to force the doctor to complete the necessary documentation.

The doctor treated me well and he was very concerned about me. He examined me and he was very comforting. He contacted the police and told me to go there. (Case 12 - She had been to the police first.)

The male doctor treated me well. He examined me and comforted me but I could not understand what he was saying to me. Fortunately my sister understood. (Case 5)

After examining me the doctor asked some questions about how I was raped. My family was present at the time. The doctor did speak to the IO while we were in the surgery. (Case 11)

The doctor examined me and took a sample of my blood, but he did not say anything to me about the examination. I was not happy about the doctor's treatment because he ignored my complaints. (Case 4)

The doctor talked to me and the police officers who were with me. The doctor refused to fill in a form that the police asked him to complete. The police and the doctor argued because the doctor advised them not to open a charge, citing reasons like I looked mentally disturbed. The police insisted that the form be completed. (Case 14)

The doctor spoke to me but the IO always answered the questions. (Case 15)

Identifying the perpetrator

In seven cases at least one perpetrator had been arrested. In most cases victims were taken by the investigating officer to identify the perpetrator, sometimes on the day of reporting. In one case the investigating officer informed the victim that the perpetrator was arrested, but she expressed skepticism about the authenticity of the information. Since the victims only communicated with the investigating officers, they had no other authority to confirm the information and had no choice but to accept the investigating officer's version.

Identifying the perpetrators posed some problems. In many instances, police allowed the victim to accompany them when they were in the field. Unfortunately, in some of these instances the victim told the interviewer that the police treated her disrespectfully. In an extreme case, when they were unable to find the perpetrator, police forcibly removed the victim and her aunt from the van and left them alone in a deserted area. Eventually other police officers came to their assistance and took them home.

In one case, the victim first went to the street committee, who found the perpetrator and then took him to the police station. One victim was asked to go to the police station for an identity parade (lineup). When she got there, the police told her that they were not ready and they would call her again. In another case the victim was picked up by the investigating officer to assist with identifying the perpetrator. During this time, she reported that he asked her personal questions and made advances to her.

The police visited me and asked me about the perpetrator. I told them someone who knows the perpetrator. We found the person who knows the perpetrator, but the IO advised him not to point the perpetrator out because they did not want to cause problems for him. (Case 4)

The police contacted me. I went with him to show him where the perpetrator stays. We found him and he was then arrested. (Case 8)

Two weeks ago the detective came to my house. I was in the house and heard a car hoot outside. I went outside and the detective asked me to get into the car. Other detectives were in the car with him. I felt upset that he was talking to me in front of them in his car and not in my house. One of the other detectives also humiliated me by asking me 'Yes, why do you make a rape charge against your ex-boyfriend? Before you slept with him 200 times, or 100 times or 50 times.' I feel disturbed because I have been raped. It does not matter whether he was my boyfriend or not, he raped me. What hurt me the most was to think that the people that I trusted treated me so badly. To them it was a joke that my ex-boyfriend raped me. I never knew that they were so rude and mean. The police sent my ex-boyfriend to talk to me about withdrawing the case. He hasn't been arrested. I feel he should have been picked up already because the police saw him but did not take him into custody. (Case 3)

The perpetrator has been arrested. He was arrested a day after I reported. I do not know whether he has been to court. What I do know is that he is no longer in custody. He was kept in custody for a very short period of time. It is rumored that he has since left for the Eastern Cape. (Case 5)

The IO called me to ask whether I had seen the perpetrator. I told him that I had seen the perpetrator. The IO advised me not to talk to him and not to tell him that I had laid a charge against him. The IO said we should try and locate him during the week, but he has not yet been arrested. (Case 1)

We asked them (three police officers) to go with us to find the perpetrator. On the way these police officers would just beat up anyone they met with. We could not find the perpetrator and they were angry with us. They took a route which was far away from the houses so that they could drop us off. We didn't want to get out of the van as we were far away from the houses. They dragged us out of the van and my aunt got injured in the process. They dragged her and tear-gassed her such that she had to go to hospital. We were subsequently helped by other police that offered us a lift to our home. (Case 9)

Going to court

Of the seven cases where the police arrested someone, none of the women went to court when the perpetrator made his first appearance. Where an arrest was made, and the case proceeded to court, the victim was often not informed. Most women told the interviewers that they would have liked more information about the perpetrators' court appearances and bail status.

I was never told about whether the perpetrator was granted bail, the progress of the case or whether I should appear in court and the court date. (Case 11)

I do not know what is happening with my case. I have never been to court. I am not even told when I must go to court. I should have gone to court and the case should have been disposed of by now. (Case 7)

My complaint is that I need to be told of what is happening in my case, whether or not he has been granted bail and when the case is going to be heard. (Case 10)

The IO told me that it would not be easy for the perpetrator to get bail, but I am not sure whether he has been granted bail. (Case 8)

According to the IO there was an arrest but I doubt that arrest took place. If it had taken place then I have every reason to be angry at whoever granted the bail. (Case 15. The perpetrator is a police officer's brother.)

General follow-up and contact

Police. In the two weeks immediately after victims reported being raped, most investigating officers made contact with the victims. Usually it was to invite the victims' assistance with arrests, but sometimes it was to get additional statements or to complete some part of the initial investigation (such as taking the victim to a doctor).

After four weeks, most of the women stated that they would have liked to have had more contact with the investigating officer about what was happening with their cases, as well as information pertaining to the perpetrator's arrest.

Trauma counseling. Only four victims were in any trauma counseling at the end of one month. Two women were being counseled by social workers at a hospital, one was with Rape Crisis, and in one case the counseling center is unknown. All four women reported that the counseling was useful. Two other women stated that they would have liked to receive some form of counseling, but it was not offered to them.

Conclusions and recommendations

There is widespread agreement among the women interviewed that some parts of the system work well and some do not. In general some good practices have been developed.

The study helped to highlight the strengths and weaknesses of each part of the reporting and investigation process.

Stage of Investigation	Strengths	Weaknesses
<ul style="list-style-type: none"> Reporting to the police station and taking a statement 	<ul style="list-style-type: none"> The women had their statement taken under an hour. Most often, a female officer was assigned to take the statement. The women were referred to the victim support room within the station. 	<ul style="list-style-type: none"> Women reporting rapes by ex-boyfriends or ex-husbands were sometimes discouraged from making a report.
<ul style="list-style-type: none"> Handover to an investigating officer and investigation 	<ul style="list-style-type: none"> The investigating officers ensured that the women were taken to a doctor. 	<ul style="list-style-type: none"> In most cases, the women waited two to four hours before the handover from the police officer to the investigating officer took place. Investigating officers made unilateral decisions about how to proceed with the investigation. Women were often poorly treated by the investigating officers.
<ul style="list-style-type: none"> Going to a doctor and having a medical examination 	<ul style="list-style-type: none"> The district surgeons generally treated the women sensitively and were comforting. 	<ul style="list-style-type: none"> Most women waited three to four hours before being taken to a district surgeon. There was little communication between the district surgeon and the victim.
<ul style="list-style-type: none"> Two to four week follow-up 	<ul style="list-style-type: none"> During the first two weeks after reporting, investigating officers contacted victims. 	<ul style="list-style-type: none"> Only four women were in any counseling after the rape. During the third to fourth week after reporting, there was less contact between victims and investigating officers. There was little or no contact with the district surgeon after the initial examination.

Recommendations

Experience in South Africa and many other countries has frequently confirmed that effective early investigation of cases is crucial to successful later prosecution. The reverse is also sadly true: poor investigation at the start of a case can doom a prosecution that proceeds to court months or years later. Not only is good investigation necessary to secure the evidence needed for conviction, but good treatment of the victim is necessary to ensure her continued cooperation with the system of justice. The results of this study suggest that while some

aspects of police work in rape cases are generally done well, the following improvements would strengthen the investigation and the chances for successful prosecution:

- A rape victim should immediately be referred to a victim support room.
- The victim should be given the choice to make a statement.
- An investigating officer should be available to take her for a medical examination within the hour of reporting.
- The victim should immediately have an HIV/AIDS test.
- The victim should be referred for and be given the name of a center that is most convenient to her.
- The investigating officer should find out the perpetrator's details from the victim and arrest him immediately, if possible.
- The victim should be provided with transportation to her home.
- The investigating officer should arrange to regularly follow up with the victim about the investigation.
- The victim should be informed about any arrests or court appearances.

This study finally reveals that police and volunteers who currently handle rape cases are generally committed to their work and to serving the women who are victims of these crimes. Although communication is often strained, and priorities may be somewhat different, virtually all the officials and volunteers we encountered during this study wanted to provide good service, and all of the women wanted to cooperate with the police and the courts.

Taking lessons from these women's experiences, the BJA has offered to assist the departments of justice, police, and health to design a pilot that can address some of the important issues that surfaced from this study. A project description and flow diagram outlining the demonstration are attached to this report. It is hoped that this demonstration would give all the different role players an opportunity to show their commitment to justice.

Acknowledgments

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The Bureau of Justice Assistance is a joint project of the South African Ministry of Justice and Constitutional Development and the New York-based Vera Institute of Justice. It is dedicated to making government policies fairer, more humane, and more efficient for all people. Working in collaboration with government and local communities, the bureau designs and implements innovative programs that expand the practice of justice.

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