



CSV
Centre for the Study of
Violence and Reconciliation

An integrated model for working with communities



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Introduction

An overview of CSVR's annual reports for the years 1990-2010 reveals a consistent drive towards working in and alongside communities and community structures to end the rampant violence, which is such an integral part of South Africa's past and present. However, the focus of the organisation's work in that period seems to focus more on research-based activities, the generation of resources and the provision of individualised services to people suffering the consequences of violence. The year 2011 marks a clear shift in this regard, with the development of a set of documents framing community-based interventions as an integral part of the CSVR's activities.

The inclusion of community-based interventions in the service of violence and injury prevention represents an important theoretical shift away from more traditional models addressing the causes and effects of violence and injury at the level of the individual¹. Bantjes² notes the fraught nature of the term "community" and the different ways in which this term has been enacted through various community intervention models. This ability of the concept to be enacted in different ways at different times holds significant implications for the planning of a community intervention or the development of a model for community intervention, in that the concepts "community" and "community intervention" cannot be separated from the political, geographical and material realities in which they are located.

Since 2012, CSVR has been driving community-based interventions in four communities: Ekangala, Kagiso, Johannesburg Inner City, and Marikana. While the contexts and main foci differ for each community, the interventions share a similar model, aimed at the reduction of violence and the negative effects of violence through the development of community action groups. These interventions gave rise to the development of a model for the planning, implementation and evaluation of similar interventions.

This document provides a concise overview of best practice guidelines for community-based violence prevention initiatives. Secondly, it presents an integrated model for working with

¹ Kim-Ju et al., 'Community Mobilisation and Its Application to Youth Violence Prevention'; Bantjes, 'Appendix A: Theories of Community Intervention – Implications for the Centre for the Study of Violence and Reconciliation Torture Project'.

² Bantjes, 'Appendix A: Theories of Community Intervention – Implications for the Centre for the Study of Violence and Reconciliation Torture Project'.

communities, which integrates the findings of CSVR's reflective assessment, which was completed in 2017.

Background to CSVR's community work

Over the past 27 years CSVR has worked with a myriad of communities to prevent violence and heal its effects. It has implemented a number of psychosocial and violence prevention interventions aimed at addressing the underlying drivers of violence, healing the effects of violence and building functional and resilient communities.

A review of CSVR annual reports³, project proposals and project reports⁴ reveals the extent of the organisation's involvement in violence prevention initiatives, as well as initiatives addressing the impact of violence, since its inception in 1989. While detailed information on the conceptualisation, implementation, outcomes and impact of each intervention was not available for this review, the documents under review do provide an indication of the evolution of the organisation, in line with prevalence and types of violence in each reporting period⁵.

CSVr interventions initially focused on preventing violence and the negative impacts on violence as it related to the abuses of the apartheid state, including violence perpetrated by the police and correctional system. When the Truth and Reconciliation Commission was implemented, CSVr was ideally placed to provide consultation and work in concert with it, and while the organisation continued monitoring and advocacy work around policing and correctional services throughout this time, much of its work in the 1990s focused on reconciliation initiatives in various communities. Schools and youth groups were also beneficiaries of CSVr interventions on violence and violence prevention.

³ Annual reports for the period 1990-2009, excluding the years 2002 and 2008, were accessed at www.csvr.org.za on 1 October 2016.

⁴ Project proposals and project reports, as well as other documents related to the projects in Marikana, Ekangala, Kagiso and Johannesburg Inner City, were received from CSVr for the purpose of this review. These documents span the period 2011-2016.

⁵ A detailed analysis of the drivers of violence in the period 1989-2016 is provided in an accompanying report.

The second decade of CSVr's existence saw a rapid expansion of its projects, housed under six programme areas: criminal justice, gender-based violence, peacebuilding, transitional justice, trauma and transition, and youth violence prevention. Each programme area housed a number of individual projects, and the organisation published a wide range of violence-related outputs in this time. This period saw an increased focus on the plight of foreign nationals in South Africa – a focus area brought into the national consciousness by the widespread xenophobic attacks of 2008. The related focus area of torture and working with victims of torture also features prominently in the documents from that era, where torture and its effects are viewed as a legacy of apartheid policing, as well as a prevalent feature of post-apartheid policing, especially in relation to the influx of foreign nationals into South African cities.

The year 2011 marks a point in the history of CSVr where community-based interventions became a specific programmatic focus area, with staff generating a number of research outputs related to the prevention of violence, especially torture and its negative effects, as well as the provision of psychosocial support to traumatised communities from a community-based model⁶. In line with this focal intensification, the period 2012-2016 saw the implementation of community-based interventions aimed at preventing violence and addressing the pernicious effects thereof in three communities: Ekangala, Kagiso and Johannesburg Inner City. A fourth community, Marikana, became the site of a community-based intervention aimed at providing emotional support to traumatised community members. Intensive work was undertaken in these four communities in this period, focusing initially on torture and cruel, inhumane and degrading treatment and later including gender-based violence in its scope.

Theoretical and key principles underlying the integrated model

CSVr's community model is underpinned by principles drawn from theories of community work, principles of community psychology, as well as its experiences in community work. The points listed below represent the principles that CSVr has found most useful in this work:

Conceptualisation of community: CSVr recognises the multiple meanings assigned to the concept of community, as a group of individuals living in the same location or setting, or a group of individuals sharing characteristics, values, interests, practices and beliefs. The organisation also

⁶ Bantjes, Langa, and Jensen, 'Finding Our Way: Developing a Community Work Model for Addressing Torture'.

understands that the concept is subjective and experienced at an individual level. The implication for community work is that the individual cannot be separated from the community and vice versa. Community work therefore has to work at the level of the individual as well as at a systemic level. It also has to be contextually appropriate and responsive to shifts in the context.

Masuku⁷ notes the different meanings of community, or *umphakathi*, as experienced by CSVr community practitioners themselves. In short, community practitioners use the term to refer to a group of people who share similar experiences (e.g. refugees, ex-combatants and migrants); who live in the same geographic area; who share similarities in terms of language, country of origin, race or identity; who work in the same sector; or who fall in the same age group and/or conduct themselves in a certain way (e.g. violent teenagers, or youth who abuse illicit substances). Masuku⁸ also points out that differences in the definitions of “community” within the CSVr stems from different focus areas - each department within the organisation defines the concept according to its own scope of practice - he seemingly argues for fluidity in interpreting and applying the concept.

Current CSVr interventions seem to use various combinations of these definitions, based on the needs at a particular site, when initiating an intervention. At all four sites, the broader geographically-bound community is the ultimate beneficiary of the interventions, as the envisioned changes for each intervention will benefit the community at large. However, the action groups – hereafter referred to as psychosocial para-professional (PPP) groups – for each site were drawn from a specific subsection of the community.

In Kagiso⁹, geographic location was the first delineator of “community”, and this was then refined further to gender (young men on street corners, although this was later expanded to include young women), age (all group members were between 20 and 30), and likelihood of shared experiences (young men on street corners are the most likely to become victims of police torture – the initial focus of the intervention). In Ekangala¹⁰, the focus was again firstly on geographic location, and then on presumed shared interest (organisations were approached to contribute to

⁷ Masuku, ‘CSVr Approach to Violence Prevention: Perspectives of Community Facilitators Working with Communities on Violence Prevention’.

⁸ Masuku.

⁹ Langa et al., ‘The Journey of the Kagiso Anti-Torture Community Group’.

¹⁰ Langa, ‘The Story of the Advisory Group in Ekangala’.

increasing safe spaces for children and youth in the community; members of the Ekangala Advisory Group were drawn from these organisations). While the group's composition shows a wide age range (23-62) and consists of both men and women, these were not attributes that played a role in the recruitment of group members. In Marikana¹¹, community was defined mainly by geographic location – the community was in need of psychosocial support following the Marikana massacre. PPP group members were drawn from a subsection of the community, defined by their shared interest (to provide emotional support to the rest of the Marikana community). In Johannesburg Inner City¹², "community" was defined firstly by geographic location, then by shared experiences (asylum seekers, refugees, foreign nationals and migrants; the group members were recruited from organisations who work with migrants).

When it comes to implementation, the beneficiaries of the interventions are the community as defined by geographic boundaries, although the various activities undertaken during implementation often focus on certain subsections of the communities, including victims, likely victims and perpetrators of various types of violence. In Kagiso, activities targeted the broader community, young men addicted to nyoape, young men socialising on street corners, and young men at risk of police torture, among others.

Activities in Ekangala targeted the broader community (e.g. through community dialogue and a public protest), young men and boys (soccer matches), learners at local schools (school-based dialogues on GBV and risky sexual behaviour), school-going mothers (life skills training), and men (community men's indaba, men's dialogue on GBV and men organising to go to a march). Marikana activities targeted the broader community (public meeting and commemoration of the massacre), schools (awareness-raising campaigns), parents of school-going children (awareness-raising campaigns) and families of the deceased following the massacre (emotional support during Farlam Commission hearings), among others. In the Inner City, the activities focused on the community at large (community meetings and workshops) and hawkers (awareness-raising campaigns).

Conceptualisation of healing: As mentioned in the background section, CSVr's clinical and community teams have found how apartheid and non-national survivors of torture (SoT) often

¹¹ Langa, 'The Story of Hope in Marikana – Tshepo-Themba'.

¹² Langa, 'Our Journey as the Voice of the Voiceless: A Case Study'.

report symptoms or difficulties outside of the physical and psychological consequences of torture. CSVr recognises the importance of a holistic approach to healing that recognises the multiple and complicated effects of torture and other forms of violence. Resounded by *The Centre for Victims of Torture*¹³, CSVr recognises that there are multiple pathways to healing and that not all survivors require rehabilitation services that focus on the physical and psychological symptoms of torture. As such, through its experience (see Bandeira¹⁴), CSVr's community work has attempted to provide survivors with the physical, psychological, social, economic, spiritual and/or legal assistance that they might require. At an individual level, greater healing would be recognised by greater reported functioning in the different areas of an individual's life.

Similarly, adopting an ecosystemic perspective, aspects of healing at the familial and community level have also been noted by the community practitioners. This includes the need to include family members in workshops focusing on torture, conducting home visits to reduce barriers to psychosocial support, as well as utilising different events community-level events to raise awareness of or generate conversations around issues such as torture or other forms of violence – for example, utilising the photovoice method to commemorate and discuss the collective trauma of the 2012 Marikana Massacre.

Community strengths and resilience: The community model maintains that all communities have existing strengths and resources that can be called upon and further developed in order to overcome adversity and meet shared needs or goals. However, the model also notes that contextual factors may limit the amount of resources that communities and individuals can draw on in order to reach these objectives. The community team aims to work with, develop, and add to the resources that exist within a community, through training, capacity development, referral networks and the development of social capital.

Collaboration and participation: Linked to McMillan and Chavis¹⁵ concept of sense of community, the community team recognises that the success of its work depends on the extent to which community members are involved in and feel that they have an important role to play in the project. This is noted by the fact that the community model commences with an attempt to

¹³ The Centre for Victims of Torture, *Healing the Hurt*.

¹⁴ Bandeira, *Developing an African Torture Rehabilitation Model: A Contextually-Informed, Evidence-Based Psychosocial Model for the Rehabilitation of Victims of Torture. Part2: Detailing an African Torture Rehabilitation Model through Engagement with the Clinical Team*.

¹⁵ McMillan and Chavis, 'Sense of Community: A Definition and Theory'.

develop a network of stakeholders who support the vision of the community work as well as the activities carried out by the PPP group. Participation is also noted in the activities of PPP groups, where group members all have a voice or the opportunity to shape the formation of a group and its activities.

It is crucial that CSVr, PPP group members and stakeholders create activities that also provide community members with the opportunity to actively participate in activities and in working towards the vision set out in a project. Whilst levels of citizen participation in projects may vary^{16,17}, this participation can move from community members being encouraged or supported in monitoring and reporting incidents of violence in their community and providing referrals or information to community members through to taking responsibility for and being supported in organising events that can support the vision set out in the project. This emphasis on collaboration ties in strongly with the need for empowerment and efforts to create sustainable projects.

Empowerment: The process of empowerment is understood as the development of mastery and autonomy in individuals, groups and communities, demonstrated through the ability to challenge unfair practices and inequality and transforming social situations as a result of this. In the current context, three aspects are relevant: skills development to enable community members to be more effective in their attempts to transform their current situation; economic empowerment to counteract the oppression and marginalisation they are subjected to as a result of their current economic positions; and psychological empowerment to facilitate the development of a sense of self-determination, which will in turn foster their confidence in challenging inequality and unfair practices.

An emphasis on empowerment also aims to address issues of dependence, which is a common concern in community work. However, various authors have highlighted how this issue is also of great importance when working with survivors of torture - SoT¹⁸. Together with this literature, CSVr's clinical and community experience has highlighted how different levels of trauma require

¹⁶ Spears Johnson, Kraemer Diaz, and Arcury, 'Participation Levels in 25 Community-Based Participatory Research Projects'.

¹⁷ Ghulam, 'Levels of Participation | Participatory Methods'.

¹⁸ Bantjes, Langa, and Jensen, 'Finding Our Way: Developing a Community Work Model for Addressing Torture'; Blackwell, 'Holding, Containing and Bearing Witness: The Problem of Helpfulness in Encounters with Torture Survivors'.

different levels of support. Whilst some of the healing activities provide assistance and support, CSVr constantly strive to move SoT to greater levels of autonomy or interdependence – where community members mutually support one another.

Sustainability: As with previous community work¹⁹, CSVr aims to ensure that the skills, resources and knowledge generated within a community, continue to work and benefit the community beyond CSVr's involvement in the community. CSVr believes that project sustainability is developed through the principles of collaboration, participation, and empowerment. Furthermore, the importance of project sustainability is raised with PPP group members from the second phase of the community model. As such, group members are prepared to take full control of the group by the end of the fifth phase.

Gender-sensitivity: Gender has been an area of focus for CSVr since 1996 though more concerted efforts to integrate gender across all programmes and operations started taking place in 2014. The results of this greater gender-sensitivity contributed to internal research that highlighted how gender role expectations may have influenced the symptom expression as well as the challenges that men and women experienced in healing from the effects of torture²⁰. This research suggested that the expectation that women should be other-orientated and responsible for child care, meant that they often subverted their own needs. CSVr's community work has also highlighted how gender often intersected with religion, which meant that in some instances, it was more difficult to access and provide services to women.

CSVr has also adopted a gendered lens to understand other forms of violence such as gender-based violence²¹ and collective violence. In the case of collective violence, Langa and Kigawa²² found that some young male participants, who participated in services delivery protests, did so because of their sense of being emasculated by their lack of employment and seeing 'their women' being stolen by flashy black elite men – including a ward councillor. Participation in service delivery protests represented a symbolic attempt to regain their masculinity by toppling

¹⁹ Bantjes, Langa, and Jensen, 'Finding Our Way: Developing a Community Work Model for Addressing Torture'.

²⁰ Goodman and Bandeira, *Gender and Torture Does It Matter? An Exploration of the Ways in Which Gender Influences the Impact of Torture and Rehabilitation Services*.

²¹ Langa, *Gender-Based Violence (GBV) in South Africa: A Brief Review*.

²² Langa and Kiguwa, 'Violent Masculinities and Service Delivery Protests in Post-Apartheid South Africa: A Case Study of Two Communities in Mpumalanga'.

this elite ward councillor as well as other councillors and possibly securing employment or tenders by occupying these vacant positions.

CSVr has also recognised the strong intersections between gender and factors such as age, marital status, socioeconomic status, religion, culture and race. For example, whilst conducting a workshop on gender-based violence in Pretoria, it was recognised how some older male participants believed that a young female facilitator would not understand their reasons for having to discipline their wives. In this situation, it seemed as though the men may have had to power to exclude or subdue the facilitator, perhaps feeling threatened by her views, which were different to theirs. However, based on her training on gender sensitivity, the facilitator was able to hold or keep a healthy space open, for both male and female participants, to discuss the various factors (e.g. culture, religion, social norms) that may influence social expectations and behaviours of men and women in their community.

Whilst attempting to be gender sensitive, CSVr also recognises that each individual is unique, holding unique strengths and facing unique challenges. As such, CSVr recognises that its clinical and community teams are constantly faced with the need for *critical reflection*.

Critical consciousness: Freire's²³ pedagogy of the oppressed captures many of the above-mentioned principles of CSVr's community model. In trusting individual and community strengths, CSVr community practitioners attempt to model a way of thinking and interacting that strengthens PPPs and community members understanding of the various factors (from personal to structural) that contribute to their current social position. Whilst these consciousness-raising activities are discussed in greater detail at a later stage, these activities often involve attempts to facilitate dialogue, where both community workers and members teach and learn from each other (e.g. torture, healing, accessing resources, community activities). An ethos of mutual respect and trust contributes to opportunities to both reflect and act upon collective needs.

The need for the development of critical consciousness, in the healing process, has been noted in work with survivors of torture and violence from across the globe²⁴. Drawing on Freire's²⁵ work,

²³ Freire, *The Pedagogy of the Oppressed*.

²⁴ Feitlowitz, *A Lexicon of Terror*; Gorman, 'Refugee Survivors of Torture: Trauma and Treatment'; Ngwenya, 'Healing the Wounds of Gukurahundi: A Participatory Action Research Project'.

²⁵ Freire, *The Pedagogy of the Oppressed*.

Gorman²⁶ highlighted that it was important for survivors of torture (SoT) to find their own voice and means of describing their condition. Furthermore, considering the fact that torture is perpetuated by public officials, the more structural nature of torture suggested that there was healing to be found in SoT being able to both understand and attempting to change the structure and conditions that contributed to their experiences.

With time, this way of being assists SoT in reflecting on the challenges they face and in identifying actions that could be taken in an attempt to overcome these challenges. This way of being also assists PPP groups, community members and other stakeholders in developing a deeper understanding of the factors that contribute to other forms of violence and the actions that they could take in order to prevent these forms of violence.

Overview of best practices

Community development, as a broad category of community intervention, is based on the premise that active participation of community members and groups will lead to greater effectiveness and efficiency in addressing problems²⁷. It is built on a cooperative and coordinated process that privileges community-building and social capital to foster positive connections inside the community, as well as empowerment-based interventions to strengthen the problem-solving resources of the community. There is a substantial body of work on community development initiatives that target health, environmental, economic, and psychosocial challenges, informed by a variety of community intervention theories. This section provides a snapshot overview of a selection from this body of work. Specifically, it focuses on the specific best practice guidelines developed from this body of work.

Bullen²⁸ notes that the lines are often blurred when conceptualising supposedly different concepts such as “community action” and “strengthening community connectedness”, and proposes a conceptual framework to make distinctions between four forms of community development. Community development takes place either in communities of place or communities of interest, and includes actions taken by proactive people, leadership and skill

²⁶ Gorman, ‘Refugee Survivors of Torture: Trauma and Treatment’.

²⁷ Kim-Ju et al., ‘Community Mobilisation and Its Application to Youth Violence Prevention’.

²⁸ Bullen, *Community Development Models and Language*.

development, community action, strengthening community connectedness, building service networks and organisational infrastructure, community building through community services partnerships, and economic development. Direct services with a community development orientation takes place inside communities of service users, and includes direct services to individuals and families, direct services to groups and direct services to organisations, all with a community development orientation. Direct services (without a community development orientation) consist of direct services to individuals, groups, families and organisations. Service planning and development includes social planning, service planning and development, building service networks, infrastructure planning and development, policy development and advocacy, and community consultation and engagement. Importantly, Bullen notes the ability of direct service delivery to incorporate a community development orientation.

Community development is a process and is often viewed in terms of its constituent stages. One model²⁹, for example, proposes a five stage process: establish a steering group to explore community issues, set priorities, make contact with relevant stakeholders and identify available resources; develop capacity for strategic planning, interpersonal communication and group processes; assess the needs and issues most important to the community; perform targeted community interventions; and, evaluate the process through its documentation, the identification of barriers and the redirection of efforts to more effective activities. Another five-step model³⁰ prioritises a transparent process for selecting a target community; the mapping of community priorities and the identification of community leaders through community assessments; facilitation of preliminary meetings with community leaders to enlist their support to mobilise community participation; the facilitation of community assembly meetings to elect local representation to coordinate the intervention activities; and allowing the communities to prioritise and select quick-impact projects to solidify support and galvanise local participation in the process.

A third model³¹ shifts away from the apparent focus on achieving results, to advance a 12-step framework that focuses on the process of facilitating change. The framework is divided into five process clusters, each containing a set of constituent processes. This model is very community-

²⁹ Kim-Ju et al., 'Community Mobilisation and Its Application to Youth Violence Prevention'.

³⁰ Global Communities, 'Five Steps to Successful Community Engagement and Mobilisation'.

³¹ Watson-Thompson, Fawcett, and Schultz, 'A Framework for Community Mobilisation to Promote Healthy Youth Development'.

driven and is designed as a collaborative approach to community development. As such, the community should play the leading role in each process described in this framework. This model is also intentionally designed to reflect the circularity of the process, and highlighting the importance of sustainable community action.

The first phase of this model, community assessment, prioritising and planning, comprises of the following processes: analysing information about the problem, goals and factors affecting the community; establishing a vision and mission; developing a framework for change; developing and using strategic plans; and defining organisational structure and operating mechanisms. The second cluster, implementing targeted action, consists of developing leadership and arranging for community mobilisers. The third, changing community conditions and systems, comprises implementing effective interventions; assuring technical assistance; and documenting progress and using feedback. The fourth cluster, achieving widespread change in behaviour and risk factors, contains incentives to make outcomes matter to the community in the long term; and sustaining the work through the leveraging of various community supports. Finally, the fifth cluster, improving population health and development, takes the process back to the start, by analysing information about the problem, goals and factors affecting the community; and establishing a vision and mission for a new iteration of the intervention.

The Community Action Cycle³² for community development is a widely used model consisting of seven phases: preparing to mobilise; organising the community for action; exploring the issue and setting priorities; planning together; acting together; evaluating together; and preparing to scale up. This process was specifically designed to be cyclical, and starts again once preparation for scale up has been completed. It has also been designed not only with sustainability in mind, but also with the aim of fostering the community's potential to facilitate improved interventions with each iteration of the cycle.

Each phase contains a set of activities centered around building community trust and facilitating community participation. In the first phase, preparing to act, an issue and community are selected and defined; the community organisation team is put together; the team gathers information about the health issue and the community; resources and constraints are identified; a community organisation plan is developed; and the team is developed through capacity-building. The

³² Howard-Grabman and Snetro, 'How to Mobilize Communities for Health and Social Change'.

second phase, organising the community for action, consists of the following activities: orienting the community towards the intervention; building relationships, trust, credibility, and a sense of ownership within the community; inviting community participation; and developing a “core group” from the community. The third phase, exploring the issue and setting priorities, includes: deciding on the objectives for the intervention; exploring the issue with the core group; exploring the issue in the broader community, with the core group; analysing the information; and setting priorities for action. In the fourth phase, planning together, the following activities take place: deciding the objectives of the planning; determining who will be involved in the planning and their roles and responsibilities; designing the planning session; and conducting/facilitating the planning session to create a community action plan. The fifth phase, acting together, consists of defining the team’s role in the community action; strengthening the community’s capacity to carry out its action plan; monitoring community progress; and problem-solve, troubleshoot, advise and mediate conflicts. The sixth phase is evaluating together, and the following activities take place: determining who wants to learn from the evaluation; forming a representative evaluation team with community members and other interested parties; determining what participants want to learn from the evaluation; developing an evaluation plan and evaluation instruments; conducting the participatory evaluation; analysing the results with the evaluation team members; providing feedback to the community; documenting and sharing lessons learned and recommendations for the future; and preparing to reorganise. The final phase, preparing to scale up, incorporates the following: have a vision to scale up from the beginning of the project; determine the effectiveness of the approach; assess the potential to scale up; advocate for supportive policies; define the roles, relationships and responsibilities of implementing partner; secure funding and other resources; develop the partners’ capacity to implement the programme; establish and maintain a monitoring and evaluation system; and support institutional development for scale.

Best practice guidelines

While there are different ways of envisioning a community intervention process, certain factors are considered to be critical to this type of work across the board³³. Strong leadership is regarded

³³ Huberman, Klaus, and Davis, *Strategies Guided by Best Practice for Community Mobilisation*.

as of critical importance in several interventions³⁴, and is especially important when considering the issue of sustainability. Leaders in this context include both individuals and organisations, and their purpose is to drive all aspects of the intervention. Lead organisations should be able to commit to serving the project for a significant period of time; should have the capacity to provide infrastructure and human resources support; should have the ability to access and manage financial resources, and should have the respect and support of the community. This does not disqualify external organisations from taking the lead on community intervention projects, but it does require careful and respectful entering into the community in order to foster the necessary support and respect³⁵.

The establishment of a formal structure that can drive intervention efforts is another important facet noted in the literature³⁶. This structure may take any form that is contextually relevant, and serves six functions: providing strategic direction; facilitating dialogue between partners; managing data collection and analysis; handling communication, coordinating community outreach and mobilising funding. The development of guiding documents forms part of this process and assists in the clarification of roles and responsibilities.

In order for the initiative to gain traction, stakeholders need to be drawn from diverse sectors of the community. This means going beyond the stakeholders one would usually engage with to include community members who are likely to support the mobilisation efforts, but would not usually be engaged in it³⁷. For example, in a violence prevention campaign, the usual stakeholders would include the police and at-risk youth; stakeholders who are likely to lend their support but who would not necessarily be engaged include business owners and media personalities.

Shared decision-making and the establishment of clear roles and responsibilities will support a sense of commitment and ownership by stakeholders, which will deepen further when community

³⁴ Jolin, Schmitz, and Seldon, *Needle-Moving Community Collaboratives: A Promising Approach to Addressing America's Biggest Challenges*.

³⁵ Huberman, Klaus, and Davis, *Strategies Guided by Best Practice for Community Mobilisation*.

³⁶ Butterfoss, Lachance, and Orians, 'Building Allies Coalitions: Why Formation Matters'; Zakocs and Edwards, 'What Explains Community Coalition Effectiveness?: A Review of the Literature'; Foster-Fishman et al., 'Building Collaborative Capacity in Community Coalitions: A Review and Integrative Framework'; Raynor, *What Makes an Effective Coalition: Evidence-Based Indicators of Success*.

³⁷ Foster-Fishman et al., 'Building Collaborative Capacity in Community Coalitions: A Review and Integrative Framework'; Silberberg et al., 'Principles of Community Engagement (2nd Ed.)'; Kegler et al., 'Mobilizing Communities for Teen Pregnancy Prevention'; Joffres et al., 'Factors Related to Community Mobilization and Continued Involvement in a Community-Based Effort To Enhance Adolescents' Sexual Behaviour'; Huxham and Vangen, 'Working Together'.

members are placed in key decision-making roles³⁸. The mobilisation process as a whole needs to be driven by members of the community, and there needs to be space for both youth and adults to participate on an equal level, especially with regards to interventions that impact on the youth³⁹. This can be facilitated through assigning appropriate roles for both youth and adults⁴⁰.

Once the group has been formed and roles assigned, it is necessary to develop a shared vision of the group⁴¹. While the lead organisation and the directives of funders may influence aspects of the vision, it is important for the group to play a leading role in developing a vision that speaks back to their context and that contains the essence of their voices. The vision will guide the parameters of the needs assessment, which will assist the group in developing a deep understanding of the problem in their specific context⁴². A variety of methods are available, and the group should choose a method that is relevant to the issue they wish to address and their vision. This will serve as the basis of their strategic plan, programme activities and campaigns⁴³.

Once the needs assessment is completed, the group needs to draft a strategic plan that clearly outlines their goals and objectives, as well as the levels of influence they understand the different aspects of their intervention to be targeting - individual, relational, community or societal⁴⁴. It is important for the goals and objectives to be realistic and achievable, as this has implications for the success of the intervention as well as its sustainability. In order to achieve these goals and objectives, the group needs to decide on the activities that will be undertaken to achieve them,

³⁸ Butterfoss, 'Evaluating Partnerships to Prevent and Manage Chronic Disease'; Kegler et al., 'Mobilizing Communities for Teen Pregnancy Prevention'; Guo and Saxton, 'Voice in, Voice out: Constituent Participation and Nonprofit Advocacy'; Winer and Ray, *Collaboration Handbook: Creating, Sustaining, and Enjoying the Journey*.

³⁹ Ramey, 'Organizational Outcomes of Youth Involvement in Organizational Decision Making: A Synthesis of Qualitative Research'; Schulman, 'Terms of Engagement'; Klindera and Menderwald, *Youth Involvement in Prevention Programming*.

⁴⁰ Huberman, Klaus, and Davis, *Strategies Guided by Best Practice for Community Mobilisation*.

⁴¹ Butterfoss, 'Evaluating Partnerships to Prevent and Manage Chronic Disease'; Raynor, *What Makes an Effective Coalition: Evidence-Based Indicators of Success*; Kania and Kramer, 'Collective Impact'; Austin, *The Collaboration Challenge: How Nonprofits and Businesses Succeed Through Strategic Alliances*; Roussos and Fawcett, 'A Review of Collaborative Partnerships as a Strategy for Improving Community Health'; Lovick Edwards and Freedman Stern, *Building and Sustaining Community Partnerships for Teen Pregnancy Prevention: A Working Paper*.

⁴² Jolin, Schmitz, and Seldon, *Needle-Moving Community Collaboratives: A Promising Approach to Addressing America's Biggest Challenges*; Roussos and Fawcett, 'A Review of Collaborative Partnerships as a Strategy for Improving Community Health'; Lovick Edwards and Freedman Stern, *Building and Sustaining Community Partnerships for Teen Pregnancy Prevention: A Working Paper*; Centres for Disease Control and Prevention, 'Community Mobilization Guide: A Community-Based Effort to Eliminate Syphilis in the United States'; Centres for Disease Control and Prevention, 'Little (PSBA) GTO: 10 Steps to Promoting Science-Based Approaches (PSBA) to Teen Pregnancy Prevention Using Getting To Outcomes (GTO), A Summary'.

⁴³ Huberman, Klaus, and Davis, *Strategies Guided by Best Practice for Community Mobilisation*.

⁴⁴ Roussos and Fawcett, 'A Review of Collaborative Partnerships as a Strategy for Improving Community Health'.

informed by an understanding of key strategies that will support the overall effort⁴⁵. These strategies can be developed by the group or can be drawn from other initiatives, and they will most likely change over time as the community changes or as new funding requirements arise⁴⁶. Innovation and creative strategies, as well as culturally meaningful strategies are encouraged as a means of embedding an ethos of transformation in the community⁴⁷.

In order to bolster the sustainability of the project, the group needs to create a fundraising strategy, and it may be useful to develop a set of fundraising tools that clearly outline the vision, goals, objectives and other relevant information on the intervention⁴⁸. Effective internal communication through the adoption of formal communication strategies⁴⁹ will ensure that the intervention remains on target, that problems are addressed shortly after they arise, and that the intervention remains responsive to the needs of the community. External communication through the continuous engagement of the community is as important⁵⁰ and keeps the community focused on the issue at hand. It also assists in sustainability efforts as it positions the group as a central participant in community life.

During the planning stages, the group needs to decide how it will measure its success, which indicators are indicative of success and how often each indicator needs to be monitored⁵¹. Based on these decisions, the group needs to design an evaluation strategy that also takes into account the needs of the funder. The strategy needs to include both process and outcome evaluations

⁴⁵ Kania and Kramer, 'Collective Impact'; Lovick Edwards and Freedman Stern, *Building and Sustaining Community Partnerships for Teen Pregnancy Prevention: A Working Paper*; Centres for Disease Control and Prevention, 'Little (PSBA) GTO: 10 Steps to Promoting Science-Based Approaches (PSBA) to Teen Pregnancy Prevention Using Getting To Outcomes (GTO), A Summary'; Feinberg et al., 'Community and Team Member Factors That Influence the Operations Phase of Local Prevention Teams'.

⁴⁶ Huberman, Klaus, and Davis, *Strategies Guided by Best Practice for Community Mobilisation*.

⁴⁷ Kim, *The Community Engagement Continuum: Outreach, Mobilisation, Organising and Accountability to Address Violence against Women in Asian and Pacific Islander Communities*.

⁴⁸ Joffres et al., 'Factors Related to Community Mobilization and Continued Involvement in a Community-Based Effort To Enhance Adolescents' Sexual Behaviour'; Roussos and Fawcett, 'A Review of Collaborative Partnerships as a Strategy for Improving Community Health'; Lovick Edwards and Freedman Stern, *Building and Sustaining Community Partnerships for Teen Pregnancy Prevention: A Working Paper*.

⁴⁹ Butterfoss, 'Evaluating Partnerships to Prevent and Manage Chronic Disease'; Raynor, *What Makes an Effective Coalition: Evidence-Based Indicators of Success*; Huxham and Vangen, 'Working Together'; Austin, *The Collaboration Challenge: How Nonprofits and Businesses Succeed Through Strategic Alliances*.

⁵⁰ Lovick Edwards and Freedman Stern, *Building and Sustaining Community Partnerships for Teen Pregnancy Prevention: A Working Paper*; Whitley, *A Guide to Organizing Community Forums*.

⁵¹ Joffres et al., 'Factors Related to Community Mobilization and Continued Involvement in a Community-Based Effort To Enhance Adolescents' Sexual Behaviour'; Roussos and Fawcett, 'A Review of Collaborative Partnerships as a Strategy for Improving Community Health'; Lovick Edwards and Freedman Stern, *Building and Sustaining Community Partnerships for Teen Pregnancy Prevention: A Working Paper*.

and the intervals at which each will be conducted⁵². A separate evaluation also needs to be conducted to evaluate the performance of the PPP group itself⁵³.

Levels of intervention

Kim⁵⁴ distinguishes between four levels of community engagement: community outreach and education; community mobilisation; community organising and community accountability. Each of these works at a different level. Community outreach and education is generally aimed at raising awareness of the issue at hand, and while it often takes the form of group or community interventions, it is ultimately aimed at the individual level.

Community interventions should move beyond awareness-raising and encourage active community participation in efforts to curb the issue at hand. These are targeted at relational and community levels. Community organising is also targeted at the relational and community levels, though encompasses longer term strategies aimed at increasing the community's capacity to address the issue. Community accountability works at relational, community and societal levels and increases the capacity of community members to create supportive environments and hold perpetrators and state actors accountable.

Community initiatives can also be understood in public health terms as aimed towards different levels of prevention. Community interventions can be designed to simultaneously or separately address primary prevention (preventing violence before it occurs), secondary prevention (reducing risk factors associated with violence), and tertiary prevention (reducing negative effects stemming from violence)⁵⁵.

Phases of the integrated model

⁵² Huberman, Klaus, and Davis, *Strategies Guided by Best Practice for Community Mobilisation*.

⁵³ Lasker and Weiss, 'Broadening Participation in Community Problem Solving: A Multidisciplinary Model to Support Collaborative Practice and Research'; Zakocs and Edwards, 'What Explains Community Coalition Effectiveness?: A Review of the Literature'; Lovick Edwards and Freedman Stern, *Building and Sustaining Community Partnerships for Teen Pregnancy Prevention: A Working Paper*; Feinberg et al., 'Community and Team Member Factors That Influence the Operations Phase of Local Prevention Teams'.

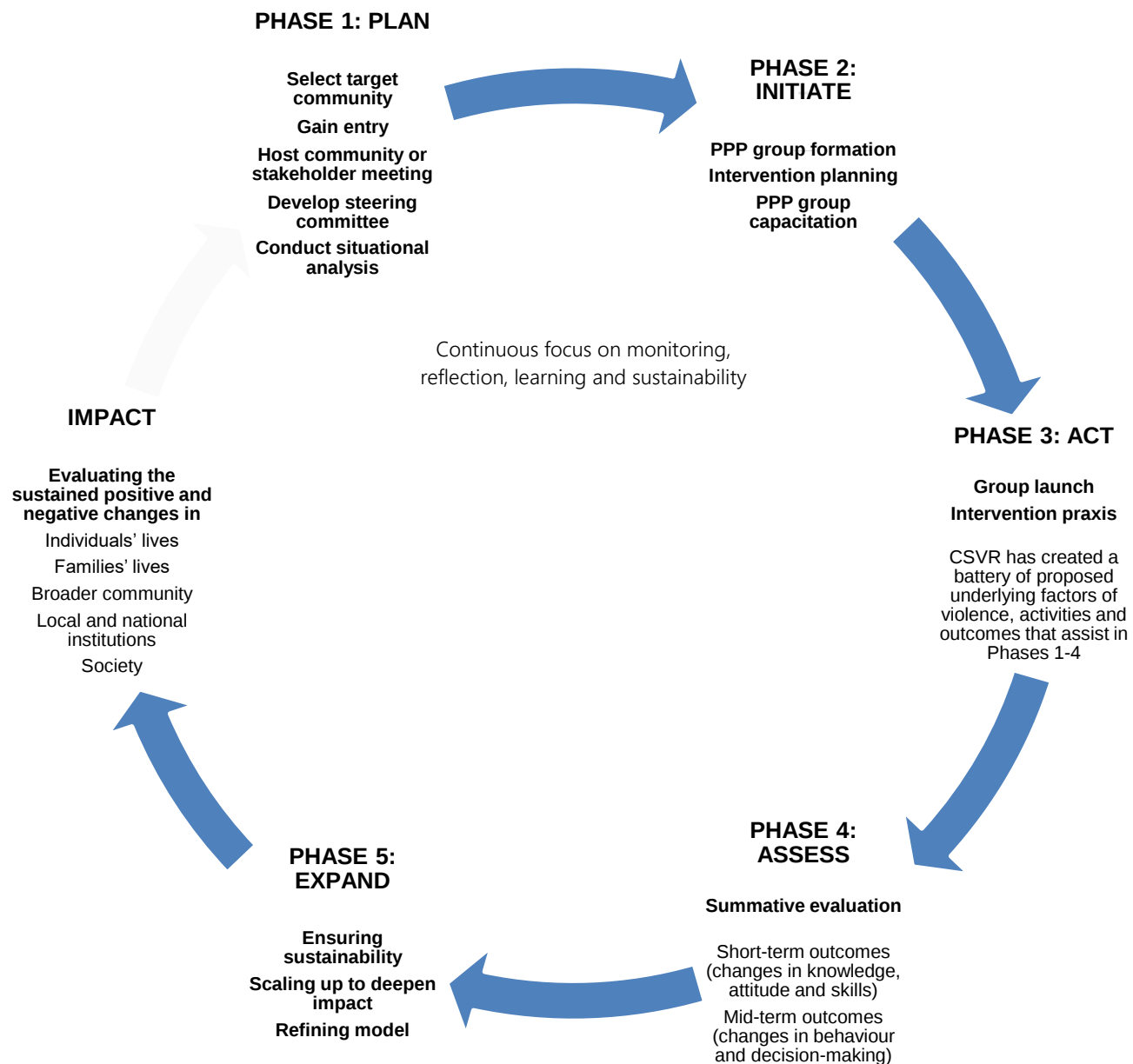
⁵⁴ Kim, *The Community Engagement Continuum: Outreach, Mobilisation, Organising and Accountability to Address Violence against Women in Asian and Pacific Islander Communities*.

⁵⁵ Kim-Ju et al., 'Community Mobilisation and Its Application to Youth Violence Prevention'.

Together with an overview of best practices in community interventions, mobilisation and action, a review of CSVr's work across multiple communities has indicated the need for a revised, integrated model for working with communities. Through these experiences, this model recognises the need for a framework that is easy to understand and implement – for both new and experienced CSVr community practitioners (CPs).

This model aims to provide a standardised approach to CSVr's work, though also aims to recognise the need for flexibility to address the unique contexts in which it may be implemented. Furthermore, aligned with the principles of empowerment and sustainability, the phases of the model attempt to ensure that PPP groups are able to continue their work without CSVr's support.

The diagram below provides a representation of the five broader phases involved in CSVr's integrated model for working with communities:



Phase 1: Plan

The first phase of the integrated model involves four components:

- Selecting the target community and issue
- Gaining entry
- Hosting a community or stakeholder meeting
- Developing steering committee
- Conducting a situational analysis

Selecting a target community and issue

CSVr has utilised different approaches in selecting communities and the forms of violence (issues) addressed in each community. These methods have included establishing PPP groups through former clients (victims of torture), through CPs pre-existing knowledge and networks within their communities, through crisis interventions, through previous projects that highlighted issues such as violence, or through the identification of violence hotspots (such as the cases of xenophobic attacks in Soshanguve or Diepsloot).

Whilst CSVr would like to adopt a standardised approach to selecting target communities, where CSVr's research programme and CPs collaborate in conducting desktop research on the history and nature of violence in a community, it has found that this is not always possible. This may be due to a lack of coverage, reporting or research on the incidents of violence that may have occurred in a community. This was noted in Ekangala where, under the apartheid-era government, there was little coverage or reporting of the torture and violence that occurred as Kwa-Ndabele struggled over the issue of homeland independence. Subsequently, CSVr recognises that phase one of the model needs to make use of a multi-pronged approach, which utilises information collected from desktop research, stakeholder engagement and a situational analysis.

Whilst there are communities that may have experienced high levels of violence, it is also important to take practical and budgetary restraints into consideration when selecting a community. CSVr has worked in communities that are just over 100 km (60 miles) from its office in Johannesburg and this has made it difficult and costlier to visit these sites on a weekly basis.

When selecting a community and this definition of community is based on a more geographical understanding of 'community', it is also important to define the boundaries of this community. This is important as some communities may be quite large (e.g. the Inner City versus Marikana) and would perhaps require greater effort in ensuring that a diverse group of stakeholders are consulted when entering a community.

Gaining entry

Gaining entry in to a community includes the steps or actions that should be considered when entering a community as an external organisation. These steps aim to create awareness of as well as develop relationships, trust and mutual support for the work that is being done, within the community, to prevent or bring about healing from violence. CSVr has found that these steps may vary across communities, often depending on the type of violence, existing relationships that it may have had with stakeholders within a community, the relationships partner organisations or stakeholders may have had with a community or the strength of the stakeholder networks within a targeted community. In instances where it may be difficult to identify all of the stakeholders within a community, desktop research and a snowballing technique can be utilised in developing a more detailed understanding of the different stakeholders that may need to be consulted when entering a community.

The order in which stakeholders are approached may also vary, where initial conversations with a diverse group of community members may highlight potential leaders or potential tensions within the community. This was highlighted in Marikana, where CSVr recognised that attempting to build relationships with local government representatives or institutions (such as the police), prior to engaging with community members, may have made it exceptionally difficult to develop trust with community members.

Through these initial meeting, CSVr aims to develop a broader understanding of the various levels of interest and influence that various stakeholders have in the selected area of intervention. Once this broader picture emerges, it is important to work with potential stakeholders in identifying a venue that CSVr could utilise for a community or stakeholder meeting.

Hosting a community or stakeholder meeting

Historically, CSVR has utilised community or stakeholder meetings to provide stakeholders with an overview of its history, vision and mission. CSVR would also provide stakeholders with an overview of the type of project that it aims to implement in the community and in the interests of transparency and clarifying expectations, would create space to outline and discuss the duration of CSVR's involvement, potential benefits of participating in the project or the lack thereof, as well as the need to develop capacity, within the community, in the interest of project sustainability. However, CSVR's CPs have found that entering a community with a pre-defined agenda can limit levels of buy-in from different stakeholders, contribute to gaps in theories of change and ultimately limit the potential outcomes and impact at the level of the community. For example, in Ekangala, PPPs found that some community members were not as interested in the issue of torture and were more concerned about issues such as substance abuse and gang violence. Subsequently, the group found that it was necessary to talk to multiple issues and how, in some instances, these issues may be interlinked – linked to a history of violence.

Subsequently, CSVR aims to utilise a community or stakeholder meeting as the first opportunity for collaboration and participation. Whilst CSVR's vision and mission may still limit the scope of projects to those that can logically prevent or bring about healing from violence, it is hoped that a community or stakeholder meeting can provide stakeholders with the opportunity to discuss the different forms of historical or current violence experienced in their community, select a form of violence to focus on in their community, discuss the potential causes of this form of violence, as well as discuss what they see as ways of preventing or bringing about healing from this form of violence.

It is possible that CSVR may have to host more than one stakeholder meeting in order to provide sufficient opportunities for stakeholders to discuss these points. However, the information gained from these meetings would be invaluable for the subsequent steps in this model – particularly the development of a situational analysis, baseline assessment, theory of change as well as monitoring and evaluation framework.

It is also important that this or these meetings have created spaces to hear and include the voices of multiple stakeholders. CSVR has noticed how various factors and dynamics may influence the actual presence or space provided to different stakeholders within such meetings. For example, in Mayfair, community practitioners recognised how the factors of religion or patriarchy shaped

gender dynamics in the community. In some instances, husbands would escort their wives to meetings and would first find out what a meeting was about before allowing their wives to attend. In other instances, men and women would not be able to attend joint meetings and separate meetings or events would need to be held in order to work with both men and women.

Similarly, CPs have found that different processes and timelines need to be recognised in order to improve the likelihood of different stakeholders attending such meetings. This was noticed with officials from different levels of government, including police officials, where providing station commanders with an invitation letter, at least 4-6 weeks before a meeting, increased the likelihood of their attendance. The presence of state actors in the inception, conceptualisation, implementation and evaluation of a project has also been noted as important in facilitating civic cohesion, access to state mechanisms at a later stage in the intervention as well as the potential sustainability of a project.

Developing a steering committee

Aligned with literature from the best practices guidelines⁵⁶, the next step in this phase involves the creation of a steering committee that serves a number of purposes. Firstly, the committee should be made up of multiple stakeholders and should also ensure that there is a wide variety of input in relation to the community's needs and priorities. Secondly, the committee should assist in developing a deeper understanding of the community in terms of its composition, challenges and resources. Thirdly, the steering committee works to facilitate continued access to the community and provides CSVr with advice on the appropriate strategies for engaging with the community.

Members of the steering committee can be selected at the community/ stakeholder meeting or those present at this meeting can be invited to a subsequent meeting where the steering committee will be selected. It is important to clarify the roles and expectations of those who may be nominated to the steering committee – this clarification of roles and expectations could perhaps also be formalised through a memorandum of understanding between the members of

⁵⁶ Butterfoss, Lachance, and Orians, 'Building Allies Coalitions: Why Formation Matters'.

the steering committee. This is done in order to ensure that nominees understand the requirements and benefits that may be accrued from being on this committee.

This includes the need to clarify that those who occupy these positions are not employees of CSVr and may not receive a stipend for this position. While this poses an ethical dilemma, CSVr and its funders may not always be in a position to offer such stipends. Furthermore, as discussed in the ethical considerations section of this report, it is perhaps important to balance the need to ensure that individuals do this work out of passion and the need to ensure that this passion is not exploited. In an attempt to navigate this dilemma, it is proposed that CSVr will attempt to provide stipends, where possible, or reimburse steering committee members for their travel costs and other costs which have been mutually agreed to before such costs are incurred. Covering the travelling and other agreed-upon costs of steering committee members could perhaps also ensure that they receive basic training on and are compensated for their involvement in a situational analysis.

Conducting a situational analysis

This situational analysis represents an attempt to clarify assumptions made in CSVr's theories of change for the different forms of violence addressed in this model and identify any unforeseen or unique factors that may need to be considered in proposed interventions. This situational analysis could also be viewed as an attempt to strengthen intervention planning and develop a baseline measure of the current situation – factors that facilitate or hinder the prevention or healing of violence in a community.

The content of the situational analysis develops from the theory of change, monitoring and evaluation guidelines document (Appendix A). The content and suggested indicators of outcome and impact level change can be adjusted, based on the inputs and insights shared during the community or stakeholder meeting(s), prior to implementing the situational analysis within the community.

Where possible, a participatory process could be utilised where steering committee members receive basic training on interviewing skills, data collection and ethics. The level of participation in data analysis, interpretation and reporting and feedback would depend on the desires of the steering committee as well as the time and budget allocated to the project. With less

collaboration in aspects of the situational analysis, phase one of the model is expected to take 4-6 months to complete.

Phase 2: Initiate

Phase 2 focuses on the formation of a PPP group and preparing the group for action. The steps involved in this phase include:

- PPP group formation
- Intervention planning
- PPP capacitation

Psychosocial para-professionals (PPP) group formation

The belief in the formation of PPP groups, as a vehicle for social upliftment or justice, is tied to CSVr's conceptualisation of prevention and healing as well as its recognition of community strengths and resilience. CSVr recognises that efforts to prevent and bring about healing from different forms of violence requires sustained efforts by multiple stakeholders, at multiple levels, over time. Whilst CSVr may not be able to sustain its focus on prevention or healing at an individual or community level, over prolonged periods, it can utilise its experience to contribute to or build on the existing strengths and resilience of individuals and local organisations, who are often working towards a similar vision. This group of selected stakeholders, either interested in or affected by a selected form of violence, are then well-positioned to further develop capacity within their communities, find healing or prevent violence within their communities, well beyond CSVr's involvement.

CSVr has found that the way in which a PPP group is formed may differ across communities. Following the steps outlined in Phase 1, group members could be identified through the situational analysis, steering committee or street corner approach. The situational analysis could assist in identifying group members as one of its aims is to gain a deeper understanding of the incidence, prevalence, perpetrators and victims of the form of violence selected in a target community. Members of the steering committee may be able to identify group members through their existing knowledge of the community, networks, as well as their interactions with different

stakeholders during the situational analysis. The street corner approach may be useful where the intervention targets marginalised groups, such as those affected by substance dependence, who are at risk of being victims of ABUV. The election of group members through a follow-up community or stakeholder meeting could also be considered.

The different means of identifying and selecting PPP may all have their strengths and weaknesses. Two existing intervention sites, Ekangala and Kagiso, provide divergent examples of this. In Ekangala, group members were recruited from existing community-based organisations in the area and as a result had considerable experience in community-based interventions, as well as the organisation and administration of most aspects of such work. This translated practically into a variety of creative and, according to the group members, successful activities, with relatively little input from CSV⁵⁷. However, this group was not as representative of victims or survivors of ABUV.

In contrast, in Kagiso, CSV⁵⁸ utilised a street corner approach to identify and recruit young men who had been addicted to drugs and who had also been victims of ABUV. While the PPP group was highly representative of victims of ABUV, the group required intensive input from CSV⁵⁸, in their own healing processes as well as in skills development, prior to the implementation phase⁵⁸.

While there are different ways of identifying and selecting PPP group members, it is important that CSV⁵⁷, firstly, and the steering committee, secondly, have some level of control over the size and composition of the group. Through its experience, CSV⁵⁷ has come to recognise that it may need to recruit approximately 10-15 PPP, primarily due to the issues of drop out, budget, and a difficulty in ensuring that all group members are provided with an equal amount of roles and responsibilities. It is also important to ensure that a PPP group includes those directly affected by the selected form of violence, as being part of a group can facilitate their healing (e.g. through counselling, trainings, testimony, and meaning associated with group membership), as well as the healing process of others within the community. However, a group that is diverse in terms of age, gender, race, nationality, culture, religion, experiences of violence, community work and so forth, can also assist with empowerment and skills transfer between group members. In this way,

⁵⁷ Kotze and Langa, 'CSV⁵⁷ Community Work Impact Report: Ekangala, Kagiso, Johannesburg, Inner City and Marikana'.

⁵⁸ Kotze and Langa.

a skills audit can assist CSVR in recognising what hard and perhaps soft skills group members bring to the group and where it may be necessary to offer complementary training.

CVR has recognised that age can play a role in the effectiveness of interventions and should therefore also be considered when recruiting group members. The youthfulness of the Kagiso group, combined with their reputation as street corner boys and troublemakers⁵⁹, might have made it difficult for them to be taken seriously by older community members, stunting the implementation of the group's interventions. The dynamics in the group changed after females were recruited by their male counterparts. Initially, the males lacked some sense of agency. It was only after the females joined the group that a name for the group was adopted – Kagiso Anti-torture Community Project (KACP). Thereafter the members drafted a working document which included its vision, mission, objectives, group rules of engagement and activities.

Similarly, an older group may struggle to facilitate deep engagement with younger community members. Again, while the recruitment of group members needs to take into account contextual factors, it seems as if a mixed age range may facilitate deep engagement with a broad section of the community. However, conflict because of age differences within PPP groups has been noted⁶⁰ and should therefore be addressed, before it becomes a problem for the group, through the facilitation of discussions around the following topics, as well as any other topics that may seem relevant:

- Intergenerational communication
- Evaluating the appropriateness of cultural practices across contexts
- The impact of gender differences on intragroup communication, especially across generations
- Negotiating difference in order to reach a communal goal

The steering committee should also play a role in identifying and selecting group members – where members of the steering committee are not guaranteed positions in the PPP group. This is primarily due to the belief that the committee should be representative of the broader community and as such, should be viewed as a means for the broader community to provide inputs and feedback on the group's activities and the potential positive and negative expected

⁵⁹ Kotze and Langa.

⁶⁰ Kotze and Langa.

and unexpected outcomes thereof. Essentially, it is hoped that a well-functioning steering committee could assist CSVR and the group in maintaining positive relationships with the community.

Another important aspect to consider when identifying and selecting group members is that of stipends. The issue of stipends was a concern across communities where CSVR's initial model had been implemented. CSVR's work typically takes place in communities characterised by severe poverty and group members are often unemployed. The stipend therefore serves as a way of assisting group members in meeting their basic needs. The issue of remuneration is complex, however.

There is a general perception that stipends will somehow corrupt PPP group members' motivation and that they will carry out their activities for money, not because of their community-mindedness. As a result of this perception, the consensus among CSVR's CPs has been that where funding is available, group members should be compensated for travel and any other costs that have been mutually agreed to prior to these costs being incurred by group members – the distance that group members may need to travel for regular trainings and supervisions is an aspect that may need to be included as part of the PPP selection criteria. Stipends could then be instituted at a later stage; for example, after capacitation and with the commencement of activities.

At the same time, it needs to be noted that the payment of stipends may have an impact on the sustainability of an intervention, as stipends may dissolve once CSVR leaves the community. This can be counteracted by the development of a fundraising strategy, which will also contribute to the financial empowerment of the group – as noted by Langa⁶¹. The payment of stipends is further entangled with ethical concerns when external funding comes into play: if CSVR receives money for the implementation of an intervention in a specific community, this funding contributes to the sustainability of the organisation, even though it may benefit the community in which it works. If stipends are not paid in a case like this, the community or PPP group members may rightly feel that they are being used for the benefit of the organisation.

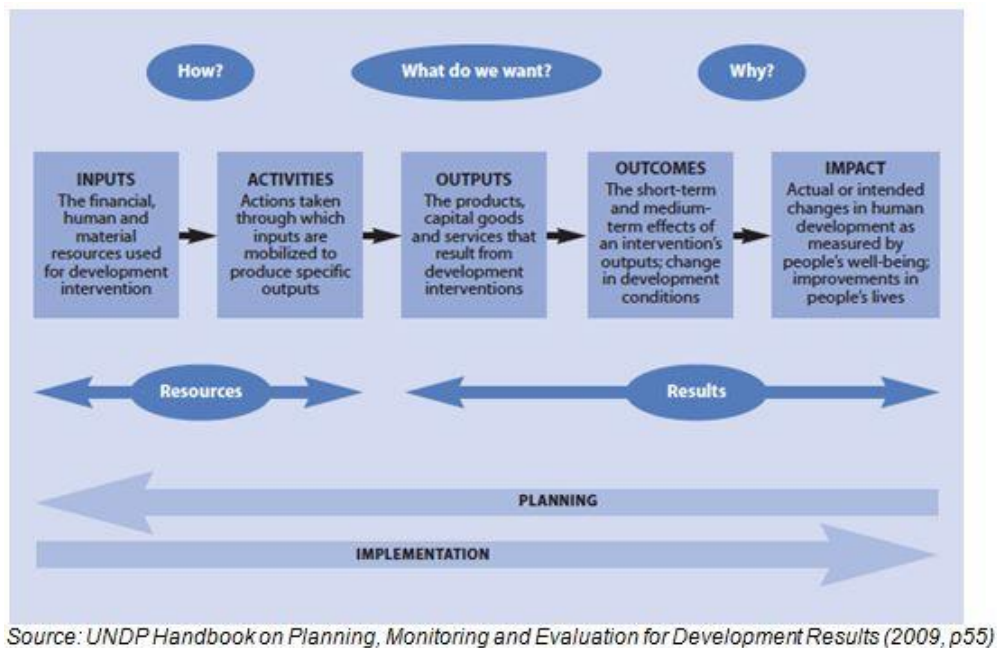
⁶¹ Langa, 'Appendix E: Women Empowerment: A Case Study of a Refugee Women's Group at the Centre for the Study of Violence and Reconciliation'.

Intervention planning

Once PPP group members have been selected, the next step would be to work together with group members to develop their group identity, vision and mission. The vision and mission are crucial in the formation of the group. The group's vision provides insight in to what they hope to achieve in their community whereas their mission details how they hope to achieve this vision – thereby helping to chart the direction and focus of the group's intervention.

The results of the situational analysis can be utilised when working with a group to establish its vision and mission. The situational analysis may assist both CSVr and the PPP group in identifying the most important factors that need to be addressed in order to bring about systemic prevention or healing. In some instances, the results of the situational analysis may bring about a vision and mission that does not focus solely on the type of violence targeted within a community. For example, a situational analysis may identify that the women within a community who have experienced or reported GBV are more likely to be aware of GBV but that their difficulty finding employment made them more financially dependent and vulnerable to being victims of GBV. In this instance, a group's vision and mission may refer more to improving women's financial independence rather than preventing GBV through awareness-raising and workshops focusing on how gender identity may contribute to the expression or maintenance of one's masculinity through violence.

Working to establish a group's vision and mission also assists in the process of developing or refining its logic model or process of change. CSVr has previously attempted to adopt a highly participatory approach in the development of PPP groups' logic models and monitoring and evaluation frameworks. As suggested in the figure below, this involved working with group members to define their desired impact and then planning backwards to outcomes and activities. In other instances, this involved trying to define impact and then working with group members to consider what activities they plan to implement and then considering the short to long-term changes that they expect to follow from these activities.



Based on its experiences, CSVr has found that while a highly participatory approach can greatly develop group members' critical thinking, it can also be highly anxiety-provoking and defeating if its staff take on a solely reflective role. Subsequently, it is suggested that CSVr CPs take on a more active, democratic role in this process where a refined theory of change, based on findings from a situational analysis, can provide a template or foundation for group members' efforts. This can also greatly assist in reducing the time that it might take to complete this process, especially when a highly participatory approach is utilised.

Whilst making this statement, it is important for the entire group to be involved in the development of the intervention logic. The community facilitator should assist the group in reaching greater clarity on the resources and people (inputs) that would be needed to implement activities. Outputs are useful in terms of monitoring and evaluating immediate outcomes. The group should consider what outputs should be for different activities (e.g. number of people attending a community dialogue or number of pamphlets distributed) and what they will use as evidence of outputs (e.g. attendance registers, photographs, number of pamphlets handed out, number of pamphlets remaining). The group should also consider how to measure outcomes as well as impact. The group's logic model should provide both the group and CSVr with the opportunity to develop an annual plan that outlines the trainings that will be required in order to develop the group's capacity, timelines for project implementation, expected outputs as well as the means of evaluating outcomes.

At this stage, it is also important to start thinking about the group and project's sustainability and how the vision and mission can support it. The definition of the organisational structure and operating mechanisms should be developed by the group itself, to reflect their own norms and values. This should also foster a sense of ownership in the intervention among group members, as they are generating solutions that fit their own context.

PPP group capacitation

Capacity development includes any training or workshop that CSVr and group members identify as necessary to develop their ability to plan and implement their interventions efficiently, effectively and ethically. While there might be core trainings that would be common across interventions aimed at different forms of violence, there are those that may be unique – these are highlighted in the theory of change, monitoring and evaluation guidelines. The following list provides an indication of the areas of training that CSVr has previously provided to PPP groups:

- History of violence in South Africa
- Gender-based violence (causes, types, effects and possible community projects that may be implemented to address it)
- Youth violence (causes, types, effects and possible community projects that may be implemented to address it)
- Xenophobic violence (causes, types, effects and possible community projects that may be implemented to address it)
- Collective violence (causes, types, effects and possible community projects that may be implemented to address it)
- Torture (causes, types, effects and possible community projects that may be implemented to address it)
- Self-awareness training and care (Psychosocial wellness workshops)
- What is community work and theories of community work
- Community awareness raising strategies and the theory of conscientisation
- Community mobilisation strategies to address various forms of violence in communities
- Advocacy and lobbying strategies to address various forms of violence in communities
- Primary, secondary and tertiary interventions to address various forms of violence in communities
- Conflict resolution
- Diversity training
- Basic counselling and psychological first aid skills
- Basic research skills
- Monitoring and evaluation

- Project planning
- Administrative processes
- Project management
- Report writing skills
- Facilitation skills
- Entrepreneurship
- Computer literacy skills
- Key principles and ethics of community work

While CSVR has created training manuals for many of these areas of training, there is a need for the organisation to ensure that there is a standardised format for training manuals and that all areas of training have been manualised. Participant notes, preferably in different languages, is also an area that the organisation would like to improve.

The trainings need to be undertaken in ways that are aligned with the overall programme methodology – it should be participatory and it should utilise critical and liberatory pedagogic strategies. The capacity development should also be done with the next phase in mind – training activities should be aimed at streamlining the planning and implementation processes.

Phase 3: Act

This third phase of the model focuses on the implementation and support of the group's planned activities. It includes the following steps:

- Group launch
- Intervention praxis

Group launch

This step involves making an attempt to introduce the PPP group to various stakeholders within the community. This step is taken in order to raise further awareness around the group's vision, mission and proposed activities. Through CSVR's experience, it is important that group members take a lead in facilitating this meeting. As previous stakeholder meetings focused more on CSVR building relationships, this meeting represents an opportunity for PPP group members to further

develop their horizontal and vertical social capital, both of which will be needed to mobilise resources and support for their intervention.

Intervention praxis

Borrowing from Freire⁶², intervention praxis involves both implementing as well as reflecting on the activities that contribute to an overall intervention. While Phase 2 of the model may have assisted in developing an implementation plan, the actual implementation of activities requires CPs to offer support to group members as they implement their activities. This may involve support in event setup, including tasks such as refining the event outline and content, securing a venue, inviting participants, providing logistical and administrative support (costs associated with an event) as well as in situ support with venue setup, evaluation and technical support. Aligned with the goals of empowerment and project sustainability, CPs aim to gradually reduce the level of support offered to the group, taking note of the strides and challenges that the group may face in managing these events more autonomously.

The reflection aspect of intervention praxis is one that can often seem tedious, though such reflexivity is critical to the group's ability to create more relevant and effective activities. Reflection sessions should encourage group members to think about the key learnings from the event setup, the event itself and how these learnings could be used to improve their activities in future. This reflexive process should take place on the day of the event, if levels of fatigue are not an issue, or shortly after an event.

Phase 4: Assess

This fourth phase of the integrated model includes the following steps:

- Intervention monitoring and evaluation
- Summative or impact evaluation

Intervention monitoring and evaluation

⁶² Freire, *The Pedagogy of the Oppressed*.

While Phase 4 is dedicated to evaluation, it is important to note that monitoring and evaluation are processes that take place throughout the various phases of the model. Monitoring is a continuous process that aims to determine a project's progress in relation to a baseline measure (e.g. project plan) as well as identify and find solutions to challenges that may negatively influence a project.

Evaluation take place at specific points of the project. In this model, evaluation may start with community profiling, stakeholder mapping and a situational analysis. In Phase 3, it would continue with attempts to evaluate the outcomes of activities that have been implemented. These outcomes may include changes in group members', community members' and stakeholders' attitudes, knowledge, behaviour and relationships – as outlined in the theory of change, monitoring and evaluation guidelines. A high number of activities may make it more difficult to manage data collection, capturing, analysis and reporting. Consequently, it is important establish an evaluation framework, in the planning phase, which clearly outlines timelines and responsibilities for these aspects of project evaluation – see theory of change, monitoring and evaluation guidelines for an example of a table that can be utilised to manage this evaluation process. This process can be managed by capacitating group members in the area of monitoring and evaluation and then assigning activities and responsibilities to each group member. However, CSVr has recognised that group members' enthusiasm for reflective and evaluative tasks may vary but that such enthusiasm can be bolstered by conveying the potential importance of such processes in sustaining the group's work (e.g. its ability to receive funding and operate more autonomously).

Summative or impact evaluation

While data on project outcomes may be collected at different points during Phase 3, a summative or impact evaluation occurs towards the end of an intervention. This step would involve attempting to synthesis quantitative and qualitative data, collected throughout Phase 3, to determine whether desired project outcomes have been achieved. Furthermore, this step would involve re-administering aspects of the situational analysis as a means of attempting to identify the systemic changes that may have taken place between the onset of a project and its completion.

In cases where an organisation has received sufficient funding, a larger scale situational analysis may allow for a randomised control trial (RCT) design. This design may make it possible for an organisation to determine how the changes in those reached through its intervention (intervention group) compare to the changes that may have occurred in those not reached through its intervention (control group). This RCT design would allow CSVr to be more confident in stating that the changes observed at an individual, familial or communal level may be attributed to its intervention.

Both the outcomes from activities and situational analyses are then combined with key learnings to form a comprehensive impact evaluation report. While many aspects of this report can be completed by CSVr, it is also suggested that external evaluators could be recruited as a means of enhancing the report's credibility or trustworthiness.

Phase 5: Expand

The final phase is concerned with the sustainability of the project as well as the community model:

- Ensuring sustainability
- Scaling up to deepen impact
- Refining model for working with communities

Ensuring sustainability

The ultimate aim of this phase and one of the most important aims of this model is for communities to take ownership of this intervention or ensure that the intervention comes to represent an important asset within a community. With this in mind, it is important to recognise that sustainability needs to be prioritised from Phase 1 through to Phase 5.

In Phase 1, it is important to be open or transparent with the community and other stakeholders about the fact that CSVr will exit or hand over the intervention to the PPP group and broader community. In Phases 2 and 3, PPP groups are capacitated with skills which may assist them in registering and then effectively running a sustainable organisation or NGO. While this may be deemed a lofty ideal, it is hoped that group capacitation and evidence of intervention

effectiveness may assist in overcoming some of the main challenges faced by many NGOs in South Africa – namely funding, governance and a difficulty in measuring impact^{63,64,65}.

In working towards sustainability, it may also be important to ensure that the tasks and events that the group carry out are kept as cost effective as possible. Being transparent about the money available for project activities may assist though may also pose a challenge – as suggested in the ethical considerations section.

Scaling up to deepen impact

Once the group's goals have been met, the group may decide to continue with the project, to terminate, or to expand the scale of the intervention to deepen its impact and/or to broaden its reach – in which case the intervention cycle starts over again.

Continued transparency and the empowerment of the group in terms of project planning, implementation and evaluation will ensure the sustainability of the project beyond CSV's involvement. If the group is active in every phase of the intervention, they should feel a sense of collective ownership of it. It will also demystify processes that may seem foreign or imposing to group members, such as fundraising and financial management. To this end, the group should also be encouraged to generate their own solutions to difficulties or challenges. This should facilitate a sense of agency among group members.

Refining CSV's model for working with communities

Whilst the first two steps of this phase focused on attempting to ensure the sustainability of a project within a community, this step focuses on the efforts that CSV must take to learn from its experiences, within communities, in order to evaluate and refine the utility of its model for working with communities. Whilst previous revisions of this model have been limited to more qualitative methods, it is hoped that future revisions of the model can be based on qualitative (CP, PPP, stakeholder reflections, literature and learnings from similar projects) as well as

⁶³ Adam, 'The South African Nonprofit Sector'.

⁶⁴ Hendrickse, 'Governance and Financial Sustainability of NGOs in South Africa'.

⁶⁵ The Research and Development Directorate (NDA), 'Funding Constraints and Challenges Faced by Civil Society in South Africa'.

quantitative findings (e.g. results developing from baseline and summative evaluations within communities). It is hoped that such evaluations can further CSVr's work at local, national, regional and international levels.

Ethical considerations

In addition to the outcomes-oriented training discussed above, it is also imperative for PPP group members to agree on a number of ethical boundaries within which to do community work. This will ensure that their work benefits the community, and upholds the community's dignity and autonomy. Bantjes⁶⁶ provides a useful overview of the ethical guidelines that should guide community work, and group members should be able to apply these principles to their work prior to the implementation of any activities:

- Ethical principles for interacting with the community
 - CSVr, community practitioners and PPP group members should gain informed consent from community members for their participation in interventions and research.
 - Discuss confidentiality and its limitations at the outset.
 - Be transparent - community members should have a clear explanation of the project in relation to funds, methods to be used, and other relevant issues.
 - Respect participants' rights including dignity.
 - Be conscious of equality and respect diversity.
 - Be aware of differences in power and how such differences in power may manifest in relationships or interactions at different levels. Through such reflection and supervision, consider ways of reducing abuses of power that contribute to violence.
 - Consider how differences in race, gender, nationality, language, socioeconomic status and so forth, may affect relationships between CSVr, community practitioners, PPP group members, and stakeholders. Lower levels of trust may make it difficult for community members or other groups to raise such issues but it may be important to find opportunities to discuss any issues that may arise from such differences.
 - Take a stand against torture and violence.

⁶⁶ Bantjes, 'Appendix A: Theories of Community Intervention – Implications for the Centre for the Study of Violence and Reconciliation Torture Project'.

- Ethical principles for conduct when doing the work
 - Integrity which includes truthfulness, maintaining boundaries, ensuring competence, avoiding conflict of interests.
 - Professional responsibility to society which means engaging in activities that build knowledge and benefit society.
 - Group members should strive to work within their areas of training and where possible, should provide community members with the details of organisations or professionals who are perhaps better placed to assist with concerns outside of their scope. Efforts should be taken to follow-up with individuals who are referred to other organisations to better understand individuals' experiences with such organisations.
 - Self-awareness and reflexivity including consulting with colleagues, attending supervision and documenting work in process notes.
 - Healthy boundaries form an important part of professionalism and self-care. Community practitioners and PPP group members need to consider the boundaries of their relationships within and outside of the project. Furthermore, they should also consider what forms of support they can offer to community members and other stakeholders.
 - Related to this point, it is important for CSVr to be clear about its relationship with steering committee and group members. As suggested in the phases of this model, this includes conditions for reimbursing expenses. When stipends are provided to group members, it is also important that contracts clearly outline the nature and duration of the contract (e.g. part-time position, 12-month duration, roles and responsibilities, notice periods for termination of the contract...).

- Ethical principles for doing research in or with communities
 - The primary purpose of community research should be to meet community needs.
 - Research should be conducted on the issues and problems that are stimulated by the community.
 - Use research as a tool for social action.
 - Yield products that are useful to the community.
 - Evaluate the effects of change on the individual or group.
 - Researchers should select methods that meet the needs of communities.

- Reporting and publication - acknowledge the community members' contribution in all reports and publications. Acknowledge that knowledge is co-produced. It is also important to create an opportunity for those who participated in research and others to have the opportunity to receive feedback on the outcomes and potential utility of the research findings.

Conclusion

Community interventions has been one of CSVR's key areas of focus for a number of years. As an organisation geared towards learning, CSVR has attempted to constantly learn from and share its learnings in this area of focus. The latest revisions to its integrated model for working within communities reflect this desire, integrating learnings from its work as well as the best practices put forward by practitioners from across the globe.

This proposed model has attempted to convey the importance of working with communities to create effective and sustainable violence prevention and healing interventions. It is hoped that the key principles and phases, outlined in this model, can assist CSVR and other organisations in moving closer towards the vision of societies that are peaceful, equal and free of violence.

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Appendix A: Theory of change, monitoring and evaluation guidelines

SYSTEMIC HEALING FROM AUTHORITY-BASED VIOLENCE OR TORTURE

Situational analysis assists in developing a deeper understanding how the assumed effects of torture/ barriers to healing manifest in a perceivably unique context

What can we do (Activity)	Effects or barriers addressed	Areas of focus	Outcomes	MoV
Awareness-raising through workshops, street corner and community walks	- Lack of awareness around the psychological, social, occupational and communal effects of torture - Potential <i>stigmatisation</i> linked lack of awareness around symptoms - Collective silence around torture that occurred (repression) - Normalisation of violence and torture as a means of maintaining 'social order'? - Difficulty managing or preventing triggers and symptomatology at individual or communal level (e.g. xenophobic attitudes)	- Defining torture - Torture: Past and present - Recognising torture - Effects of torture at different levels (individual, familial, communal) - Organisations that offer help - Reducing xenophobic attitudes through AR and dialogues	1) Greater understanding of what constitutes torture 2) Greater understanding of prevalence and nature of torture 3) Greater understanding of the effects of torture at individual, familial and communal levels 4) Greater recognition of services available 5) # of confirmed referrals 6) Reduced xenophobic attitudes amongst community members and members of various institutions	1-4) Workshops pre and post (immediate) evaluations 5) Build stronger relationships with stakeholders to try track or monitor referrals (also record and follow-up referrals) 6) Quasi; large representative baseline assessment as part of or <u>immediately after</u> situational analysis (e.g. N= 500 with natural intervention and control formed through intervention)
Workshops	- Unresolved trauma, decreased ability to regulate emotions, increased interpersonal conflict	- How trauma may affect relationships - Psychosocial-wellness, emotional regulation, communication and	Those who attend workshops: 1) Greater understanding of how trauma may affect relationships 2) Spiritual leaders have a greater understanding of torture, how it may	1-2) Pre and post (brief, immediate & 3month) 3-4) 3 month refresher course, support

	- Changes in 'personality' or relationships (and perhaps a difficulty understanding what may have triggered such changes) - Increased risk of secondary victimisation - Loss of faith - Unresolved trauma or history of the use of violence within the police - Chronic fear and mistrust - Breakdown of relationships or social fabric of community	conflict resolution with VoT, CP, CPS - Risk reduction - Provide training to religious leaders to raise awareness around torture and how VoT may be supported with the spiritual aspect of their lives - Basic diversity training	affect spiritual aspect of VoT's lives and different ways of offering support in this regard 3) Participants have an increased understanding of the factors that may contribute to secondary victimisation 4) Find it easier/ have a greater ability in recognising how (unresolved) trauma may be affecting their relationships (link support groups) 5) Self and significant other (SO) report improvements in emotional regulation, communication and conflict resolution 6) SAPS officials have a greater understanding of the extent and consequences (self and other) of apartheid and current torture 7) Those who attend diversity training are more 'culturally intelligent' or more respectful or sensitive to such differences and how they can develop or hinder relationships?	groups, or home visits to offer <i>support</i> and assess reported changes
What can we do (Activity)	Effects or barriers addressed	Areas of focus	Outcomes	MoV
Support groups Clinical → CP → CPS (e.g. 12 step, self-help)	- Trauma: Affects functioning in different areas of life - Difficulties with mental health (PTSD, panic attacks, paranoia), depression, anger	1) Containment and support with emotional regulation, decision-making, communication and conflict management which provides	1) Individuals and families, attending support groups, report improved satisfaction with emotional regulation, communication and problem-solving in their relationships (could be self-reported but also be dyadic or SNA)	1-3) Perhaps quasi-experimental design, comparing those who attend support groups versus those who do not? Challenge of sample size

[How would the groups be arranged? Homogenous versus heterogeneous; victims and spouses separate?]	- Disempowerment, helplessness, hopelessness - Apathy, hopelessness and dependence - Unresolved trauma, decreased ability to regulate emotions, increased interpersonal conflict - Increased levels of conflict associated with trauma and symptomatology - Breakdown of trust in self, family as well as communal relationships - Influence on <i>roles and responsibilities</i> (father, mother, husband, wife) - Potential guilt around inability or difficulty in fulfilling certain needs - Physical, psychological factors may make it more difficult to find or maintain position of employment - Work with families to work through the trauma of separations or negotiate such changes in family structure	benefits in different spheres (family, work relationships) 2) Support in managing triggers 3) Through clinical to community process, SoT are supported through testimonial therapy as a means of creating a more <i>coherent narrative</i> and potentially using their testimonials to raise awareness and help others in their journeys of healing 4) Offering continued support, related to family functioning, to those affected by torture	2) Families, attending support groups, report lower levels of conflict 3) Those who attend support groups report lower levels or lower recurrence of symptoms 4) Those who have been supported through testimonial therapy report feeling that this was an empowering process (perhaps feeling that have story is one of victory, pride, peace and healing versus one of despair, anger and shame?) 5) Individuals (corroborated by family) and family members report greater confidence, stability, satisfaction with or equality in distribution of roles and responsibilities (e.g. less parentification of children, less spousal confusion...) See workshops for outcomes linked to unresolved trauma	1-3) Case management (baseline, quarterly assess; descriptives) 4) Post testimonial therapy debriefings immediately after and perhaps also 3 months subsequent. Clinical and/or CP to also write about observed changes 5) Baseline at clinical or support group, biannual assessments [may also need to conduct such b.a assessments with those not attending support groups to be able to compare]
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	- Difficulty adjusting and integrating			
What can we do (Activity)	Effects or barriers addressed	Areas of focus	Outcomes	MoV
Conflict mediation (community level)	- Managing and preventing symptomatology (PTSD): Reducing factors, at a community level, that may cause <i>relapse</i> or increased symptomatology (e.g. collective violence, xenophobic violence) - Chronic fear and mistrust - Breakdown of relationships or social fabric of community	- Conflict analysis - Conflict mediation through a series of dialogues or meetings - Working with different groups to find more constructive ways of addressing needs/ grievances - Breaking down divisions; building strong, trusting, collaborative relationships	- Increased willingness to meet with 'rival groups' in order to address issue - Increased sense of understanding between different 'rival groups' - Different 'groups' have considered each other's concerns; noted through action which may have been taken to address these concerns - (Based on conflict analysis), groups utilise more peaceful ways of addressing conflict - Groups report increased levels or prolonged periods of peace - Divided groups are interacting with each other more harmoniously, in more diverse manners, working together for mutual benefit	- Conduct conflict analysis as baseline - Meetings to include assessment phases (guideline questions) - CP detailed reflection and reporting
What can we do (Activity)	Effects or barriers addressed	Areas of focus	Outcomes	MoV
Social club	- Increased withdrawal - Loss of social support (isolation) - Breakdown of relationships or social fabric of community	- CP and CPS to create safe spaces (<i>social clubs</i>) and opportunities for VoT, their families and other individuals to socialise, build new relationships - Space where divided groups can perhaps come together, in	- Those attending group report more frequent levels of social interaction - Those attending groups report greater number of social relationships - Greater number of relationships which are perceived to meet diverse needs [e.g. emotional support, psychological (positive coping – stress management), spiritual, occupational (e.g. advice)...]	- Baseline (3 month retro), quarterly assess - Baseline and quarterly (individual or SNA) **How do we manage 'membership'? Would not want to limit to VoT but also could be issues if food is available? Won't

		different context, form new types of relationships	- Social group attracts individuals or families from diverse backgrounds (gender, race, nationality, ethnicity, religion, culture), which contributes to reduced stigmatisation and increased sense of togetherness (solidarity, social cohesion)	be provided but communal contribution? What would happen/ structure of sessions? A&C followed by free socialising? How food does bring people together
Skills development	- Disempowerment, helplessness, hopelessness - Apathy, hopelessness and dependence - Poverty and unemployment (barrier)	- Create awareness and improve access to different platforms used to find work opportunities - Assist with CV writing and interview skills - Provide training on entrepreneurship and small business development - Provide information and basic support in the process of developing business plans and applying for support from government departments, business or citizens	1) Greater awareness and access to platforms that could assist SoT in accessing work opportunities 2) Improved quality of CVs 3) Improved interview skills a. 2,3, 5 challenge for non-nats 4) Increased knowledge of core entrepreneurial and small business development skills 5) 15 % of those supported with interview skills have developed business proposals 6) 10% of attendees have started enterprises 7) These attendees have been supported in being able to generate a profit within 3 months	1) Awareness can be linked to pre-post 2) Access can also be measured by pre and quarterly assess of access to internet or other platforms 3) Initial role play with rating; training and subsequent assessment 4) Pre and post-assess 5) Contact and follow-ups with attendees 6) Contact and follow-ups with attendees
What can we do (Activity)	Effects or barriers addressed	Areas of focus	Outcomes	MoV
Community level healing events such as testimonials, photovoice,	- Collective, unresolved trauma related to violence and torture - Chronic fear and mistrust	- Situational analysis to gather a history of violence and torture within community	- Community members develop a greater understanding of the history and nature of violence and torture in their community	- Brief pre and post-evaluation ques at events

What can we do (Activity)	Effects or barriers addressed	Areas of focus	Outcomes	MoV
Stakeholder engagement	- Managing and preventing symptomatology (PTSD): Reducing factors, at a community level, that may cause <i>relapse</i> or increased symptomatology (e.g. collective violence, xenophobic violence)	- Situational analysis; stakeholder evaluation - Gauging levels of crime and violence in community and relationship between SAPS, CPF and community members - Referrals to partner organisations for support with physical, psychological, financial, spiritual, legal and other challenges	- Develop a greater understanding of the size, diversity, frequency of communication, collaboration and achievements of local-national stakeholders (community members, CBOs, FBOs, civil society, levels corporate, government) - Increased diversity, frequency contact, collaboration between stakeholders (include government) - Increased use of <i>monitoring system</i> between stakeholders (e.g. an app or whatsapp) to facilitate communication and referrals - Stakeholders work together to develop joint action plans that may support healing from torture (e.g. reducing crime or xenophobia as a part of reducing triggers, secondary victimisation) - Increased number of referrals between partner organisations	- Situational analysis (also trying to determine issues of greatest concern) - Baseline, biannual ques using SNA graphs and metrics
What can we do (Activity)	Effects or barriers addressed	Areas of focus	Outcomes	MoV
Advocacy	- Difficulty with documentation makes it difficult for non-nationals to find employment - Lack of awareness around the psychological, social, occupational and	- Work with DHA and other stakeholders to identify and remove barriers to documentation process - Awareness-raising and commentary on current issues related to issues	- Steps taken to reduce barriers in issuing of documentation (realistic? MOU, funding towards issues such as IT?) - Increased public awareness of torture, its effects, factors that support or hinder healing - Greater awareness amongst members of public and officials around mental health	- Advocacy recording steps via M&E system - Targeting listeners of radio stations via social media, USSD surveys? Situational analysis can also identify various platforms that

	communal effects of torture - Collective silence around torture that occurred (repression) - Dehumanisation of self and victims (emotional blunting) - Unresolved trauma or history of the use of violence within the police - Normalisation of violence and torture as a means of maintaining 'social order' - Lack of prosecutions - Lack of enforcement and accountability	that may hinder or support healing from torture - Advocating for counselling services for public officials who have experienced, been exposed to or implicated in torture - Approaching and setting up MOU with DP or DCoSa to conduct workshops or dialogues around SAPS officials mental health and interventions in area of torture - Working with partners and legal organisations to support private prosecutions?	needs of SAPS officials and the effects thereof (relate torture) - Increased support and funding available for prosecutions - o # Successful prosecutions of those implicated in torture	community members use to access news and can be targeted via these platforms (challenge user costs)
KLM&E	- Lack of reflection and capturing key learnings	- Reflection sessions - Developing knowledge products (training manuals, pamphlets, reports, articles, policy briefs...)	- Clinical, CPs, CPS, Advocacy and Research follow M & E plan in a way which assists CSVr in developing knowledge products that further its ability to support individuals, families and communities in healing from torture - One policy brief endorsed by a national government department such as DP	- KLM&E team; monitoring compliance

SYSTEMIC PREVENTION OF AUTHORITY-BASED VIOLENCE OR TORTURE

Situational analysis assists in developing a deeper understanding of the assumed factors that may protect or increase risk of experiencing torture (listed below and those not recognised) and how they play out in the selected community

What can we do (Activity)	Effects or barriers addressed	Areas of focus	Outcomes	MoV
Awareness-raising through workshops, street corner and community walks	- Lack of awareness around the psychological, social, occupational and communal effects of torture - Normalisation of violence and torture as a means of maintaining 'social order'? - Xenophobic attitudes that dehumanise and condone CIDT and torture of non-nationals - Pathologisation of those who are addicted to substances - Lack of advocacy and support at local level	- Defining torture - Torture: Past and present - Recognising torture - Effects of torture at different levels (individual, familial, communal) - What to do if experience torture - Organisations that offer help - Raise awareness and set up CP and CPS as a resource for those who may have experienced CIDT or torture (start process of evidence collection) - Reducing xenophobic attitudes through AR and dialogues - Substance abuse and treatment or trying to change attitude towards young people who use (e.g.	7) Greater understanding of what constitutes torture 8) Greater understanding of prevalence and nature of torture 9) Greater understanding of the effects of torture at individual, familial and communal levels 10) Greater recognition of services available 11) # of confirmed referrals 12) Increased reporting and collection of evidence of cases of torture 13) # of people that have approached CP and CPS to report suspected torture; # probable cases sent partner organisations for further assistance; # confirmed cases 14) Reduced xenophobic attitudes amongst community members and members of various institutions 15) Increased recognition of the external factors that increase risk of a young person turning to drugs 16) Increased non-violent means of attempting to address issue of substance	17) Quasi; large representative baseline assessment as part of situational analysis (e.g. N= 500 with natural intervention and control formed through intervention) 18) Workshops pre and post (immediate) evaluations 19) Build stronger relationships with stakeholders to try track or monitor referrals (also record and follow-up referrals) 20) Situational analysis and annual follow-ups 21) AR and biannual follow-ups

		<i>reframing or balancing blame)</i>	abuse (e.g. through community stakeholder events – including government, calls for skills development, counselling services)	
Workshops	- Lack of awareness around what torture is - Difficulty understanding factors that increase risk of experiencing torture - Lack of local advocacy for human rights - Corruption and bribery	- Risk reduction - What to do when asked for a bribe - Try debunk myths around non-nationals and criminality, stealing jobs... (AfricaCheck?) - Collect statistics to get better sense of nationality of perpetrators? - Creating a humans rights culture within communities	- Those who attend workshops have an increased understanding of the factors that can prevent or increase risk of experiencing torture - Greater recognition of the fact that crimes are not only committed by non-nationals - Decreased stigmatisation of non-nationals - Increased understanding of how to manage situations where you may be asked for a bribe (e.g. national, non-national, documented versus undocumented)	- Pre-workshop, immediate, and 6 month follow-ups - Situational and annual follow-up
Workshops SAPS	- Burnout and dehumanisation of self and others (include PTSD) - Xenophobic attitudes (not just in public but these attitudes within institutions) - Use of violence when officials feel that their authority is being challenged - Interrogation methods (training) and a pressure to reduce crime and	- Establish MOU in an attempt to increase counselling services to officials in targeted communities - Decrease relational distance - Create greater opportunities for marginalised groups to interact with SAPS - Conflict mediation skills (how to deal with difficult 'suspects')	- Increased efforts by SAPS to attend or create forums/ events that promote dialogue and collaboration between the diverse groups within community - Officials have greater sense of the various ways in which they can deal with 'difficult' suspects or offenders	Baseline (past 12 months); attendance registers; attend to observe dialogue Pre and post; role plays, scenarios?

	make arrests/ convictions?			
Increase levels active citizenship and of participatory governance	- Apathy regarding police services and accountability	- If we can create spaces, avenues or forums that facilitate interaction between community members, stakeholders and government departments (e.g. SAPS, Metro Police), then we might see more concerted efforts to build greater collaboration and accountability	- Increased participation in forums that allow for interactions between SAPS and diverse community members on issues related to policing (including CPF, communal involvement; feedback) - Increased understanding of various groups' concerns - Increased understanding of the factors that inhibit or promote service delivery related to policing - Increased sense of satisfaction with these forums as means of resolving issues related to crime, policing - Increased sense of cohesion (or observed SC?)	- Attendance registers (include brief baseline SNA for frequency interaction in past?) - Reflection sessions at end of forums or quarterly - (Ques) open-ended pre and post (biannual) or brief random individual interviews and follow-ups - Reflection sessions and brief rating scale (for each forum held? (average biannually) - (SC) Baseline and follow-ups or observations of SC?
Increase access to or functionality of services that can reduce risk of experiencing torture	- Difficulty receiving documentation - Difficulty accessing in and out-patient rehabs - Difficulty accessing legal services - Corruption and bribery	- Offer support or recommendations to DHA in rectifying difficulties with documentation - Work with DSD to advocate for improved substance abuse services or youth projects	- Working with DHA, deeper understanding of factors that inhibit or make it easier to process requests - Multiple stakeholders have drafted an action plan to address substance abuse in community which includes plans for treatment, skills development and timelines - Action plan signed by various stakeholders (including government)	

		- Address challenges at <i>policy level</i> (which may then allow for) - o Work with legal providers to find ways of increasing support to those who have experienced torture (increased prosecutions or pressure can perhaps dissuade officials from committing such acts) - o Improve paralegal services in targeted communities through training? - o Employ lawyer in advocacy team who can assist with cases of torture (or secondment to enhance capacity in other organisations who provide such services) - Work with IPID, SAPS, Corruption Watch and others to bolster independent, anonymous reporting of corruption and bribery in targeted communities - Link above, may need greater oversight over IPID or cases must open civil cases if IPID does not have teeth	- (Identify barriers; improve screenings and then) increased access to legal services aimed at prosecuting cases of torture - # cases employed or seconded lawyer has assisted in getting cases to court - Increased # of civil prosecutions for cases of torture (sexual, physical?)	
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		- Civil society and other interested groups to take case of failure of institutions to ConCourt		
Social/ support groups	- Difficulty integrating (marginalisation) - Social fragmentation and divisions - Narrow types of social interaction between different groups	- Create a safe space for isolated or at risk groups to develop new relationships and receive information - Create a space that allow for more diverse interactions between individuals from different background (e.g. nationality)	- Those attending group report more frequent levels of social interaction - Those attending groups report greater number of social relationships - Social group attracts individuals or families from diverse backgrounds (gender, race, nationality, ethnicity, religion, culture), which contributes to - Reduced stigmatisation and - Increased sense of togetherness (solidarity, social cohesion)	- Baseline (3 month retro), quarterly assess - Baseline and quarterly (individual or SNA) - Attendance register and demographics - Biannual individual interviews (interview schedule)
Skills development	- Unemployment - Substance abuse - Lower levels education - Competition for resources - Opportunism and criminality	- Referrals and assistance in getting treatment for substance abuse - Advocating for improved access to facilities (substance, legal) - Out-patient (re)habilitation services (link Kagiso group) - ABET and support - Reduce barriers and discussions on income generation, VFET, small business development, entrepreneurship - Cash/ funding or support in accessing funding for	8) # Referrals and follow-ups to determine assistance provided 9) Greater awareness and access to platforms that could assist at risk groups in accessing work opportunities 10) Improved quality of CVs 11) Improved interview skills a. 2,3, 5 challenge for non-nats 12) Increased knowledge of core entrepreneurial and small business development skills 13) (IF N= 150) 15 % (n=22) of those who have attended entrepreneur and SMME skills have developed business proposals	7) Establish referral networks and reporting system; one month follow-ups 8) Awareness can be linked to pre-post 9) Access can also be measured by pre and quarterly assess of access to internet or other platforms 10) Initial role play with rating; training and subsequent assessment 11) Pre and post-assess

		projects (e.g. DSBD, local municipality)	14) 10% (n= 15) of attendees have applied for funding (support) 15) 25% of these attendees (n=4) have been supported in being able to generate a profit within 3 months (equivalent 3% of N)	12) Contact and follow-ups with attendees 13) Contact and follow-ups with attendees
Establishing stronger working relationships with relevant stakeholders (incl government) through committees, panels...	- Non-nationals, who are undocumented are at greater risk of being asked for bribes, detained illegally or assaulted - Non-nationals as walking ATM's (carrying cash) - A lack of monitoring or oversight over places of detention - Corruption and bribery - Poor pay - Burnout and dehumanisation of self and others (include PTSD) - Interrogation methods (training) and a pressure to reduce crime and make arrests/ convictions? - Militarisation of the SAPS (& use of force) - A lack of accountability (e.g. SAPS, IPID)	- Situational analysis to find out which organisations are still monitoring places of detention and the extent of their oversight (does it include targeted communities?) - Establishing MOUs to provide oversight of detention centres [Includes task team] - Make non-nationals aware of DHA processed and documents - Try provide support in this process - Poor pay contributes to increased risk bribery; work with MP, CSPS and others to evaluate performance management and provide suggestions that would	- Deeper understanding of government and non-governmental organisation monitoring places of detention and the strengths and challenges that they might have in doing so - [Where it does not exist] (output level): MOU established between CSV, MP, DoJ and other organisations that focus on torture - Task team meeting quarterly to discuss advances and challenges in implementing MOU - Increased understanding of DHA documentation, processes, timelines	- Situational analysis - Signed MOU (hard and soft copies) -

		require feedback from community - CSVr to attempt to increase capacity of mental health services offered to SAPS officials in targeted communities - CSVr to comment on policies to ensure the mental health of SAPS officials		
Advocacy	- Lack of public awareness around what torture is, the factors that may prevent or increase risk - Condoning the <i>use of force</i> to deal with criminals - Xenophobic attitudes and stereotypes (& dehumanisation) - Policy of non-encampment - Interrogation methods (training) and a pressure to reduce crime and make arrests/convictions? - Militarisation of the SAPS (& use of force)	- Use insights from work to continuously raise awareness via different platforms (e.g. social media, television, radio, print, events) - Challenge public perceptions around the need for and effectiveness of the use of force in dealing with crime - Move from blaming the victim to understanding the need for broader structural change (e.g. attempt to shift attitudes that primarily place blame within the individual to one that more greatly recognising the effects of broader structural		

	- A lack of accountability (e.g. SAPS, IPID)	and historical factors on crime); and how a reduction in crime requires a holistic approach (not just government) - Conduct research which may help to challenge stereotypes of non-nationals or which may help the broader population identify with the challenges that non-nationals have faced and continue to face - Monitor, make efforts and inputs to ensure that South Africa and other regional bodies are working to improve political stability (reduce violence) across Africa [learn from ECOWAS] - Advocacy to offer recommendations on Refugees Amendment Bill and Border Management Authority Bill		
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PREVENTION OF COLLECTIVE VIOLENCE (including xenophobic violence)

Situational analysis assists in developing a deeper understanding of expected and unexpected factors that increase risk of collective violence and xenophobia. Tools for situational analysis can draw on areas of focus and outcomes. Situational analysis can also represent baseline assessment. Can form intervention and control groups if sample is large enough.

What can we do (Activity)	Effects or barriers addressed	Areas of focus	Outcomes	MoV
Awareness-raising through workshops, street corner and community walks	- Hegemonic masculinity (exacerbated by youth unemployment) - Conspicuous consumption and identity (definitions of success) - Perceived use of outsiders in official posts (<i>xenophobia</i>)	- How gender expectations influence our attitudes, identity and behaviour - Situational analysis and challenging assumptions regarding non-nationals in official posts	- Individuals reached through awareness-raising have an increased understanding of what the concept of gender means - Increased understanding of the socialisation of gender - Increased understanding of how gender expectation shape our attitudes, identity and behaviour - Increased understanding of capitalism, how media shapes ideas of success	- 3 and 6 month follow-ups with those reached through AR and perhaps conversations with a significant other
Workshops	- Hegemonic masculinity (exacerbated by youth unemployment) - Conspicuous consumption and identity (definitions of success) - Lack of understanding of levels of government and local government processes - Lack of participation in local government processes (e.g, IDP; <i>active citizenship</i>)	- How gender expectations influence our attitudes, identity and behaviour - Rights and responsibilities - Levels of government and local government processes (include IDPs, code of conduct, roles and responsibilities of ward councillors, ward committees, mayoral committees...)	- Increased understanding of what the concept of gender means - Increased understanding of the socialisation of gender - Increased understanding of how gender expectation shape our attitudes, identity and behaviour - Increased understanding of capitalism, how media shapes ideas of success - Individuals have a greater sense of their human and constitutional rights though also recognise their responsibilities in exercises and protecting these rights (e.g. active participation)	- Brief pre-workshop questionnaires, follow-up questionnaires (3 and 6 months)

		- Processes to raise concerns (ward councillors, municipal councils, mayor)	- Increased understanding of key features of different levels of government - Increased understanding of local government processes and opportunities for participation - Increased understanding of the processes that should be followed when reporting issues related to local governance (e.g. service delivery) - Increased understanding of the roles and responsibilities of ward councillors, committees and municipal committees - Increased average levels of participation in local government processes (e.g. councillor quarterly meetings, attending IDPs and updates, attending municipal meetings) - Increased recognition of processes that can be followed to raise concerns around service delivery and living conditions (e.g. ward councillors, municipal departments, municipal committees, contact numbers, twitter...)	
Community dialogue and healing events	- Collective trauma (linked to colonial or apartheid history, other more regional or communal traumas) - Use of violence to maintain and fight violent system of apartheid	- How collective trauma may influence our relationships at different levels - History of violence in SA	- Increased recognition of trauma experienced at a collective level (e.g. racial – apartheid, communal – forced removals, mass retrenchments...) and how this may influence behaviour, relationships, identity... (NB of situational analysis and preliminary research). - CSVR develops a greater understanding of the parallels and differences that the community may recognise in violence during different periods	- (Qual), debriefings - (Qual), follow-ups with those who attended these events

Conflict mediation (community level)	- Divisions within communities (exacerbated by economic situation) - Difficulties with communication and conflict resolution - Lack of interaction and trust (<i>bidirectional</i>) - Inter and intra-party violence - Failure of previous peaceful actions (e.g. meetings, petitions) - Dehumanisation and othering (linked competition and in-out groups)	- Conflict analysis - Conflict mediation through a series of dialogues or meetings - Working with different groups (including government) to find more constructive ways of addressing needs/ grievances - Breaking down divisions; building strong, trusting, collaborative relationships	- Increased willingness to meet with 'rival groups' in order to address issue - Increased sense of understanding between different 'rival groups' - Different 'groups' have considered each other's concerns; noted through action which may have been taken to address these concerns - (Based on conflict analysis), groups utilise more peaceful ways of addressing conflict - Groups report increased levels or prolonged periods of peace - Divided groups are interacting with each other more harmoniously, in more diverse manners, working together for mutual benefit	- Conduct conflict analysis as baseline - Meetings to include assessment phases (guideline questions) - CP detailed reflection and reporting
Nurturing active citizenship and supporting communication, collaboration and accountability	- Community members lack power in decision-making processes - Lack of basic services - Poor service delivery - Poor housing conditions - Overcrowding - Poor education - Lack of recreational facilities - High levels of crime - High levels of substance abuse	- (working with local government) to create or support forums for residents and other stakeholders to constructively raise their concerns (e.g. residents forum) - Find ways of improving communication between citizens, ward councillors and municipalities (e.g.	- Situational analysis to identify existing structures for engagement between citizens, stakeholders and local government. - All stakeholders' satisfaction with these structures to be identified - Changes to existing structures have been made which improve satisfaction or sense that these structures can resolve issues related to service delivery (work with PlanACT) Where structures do not exist:	- Situational analysis - Pre and post (sit baseline and bi-annual follow-ups). - Attendance registers to track #, frequency and diversity of attendance

	- High levels of youth unemployment - Lack of effective, working relationships (relational distance; functional interdependence) between community members, stakeholders and government - Normalisation of collective violence - Lack of accountability - Lack of communication and responsiveness - ** Lack of consultation in decision-making - Failure of previous peaceful actions (e.g. meetings, petitions) - Behaviour, standing or reputation of public officials in community (what they come to represent – e.g. perhaps inequality) - Gradual loss of collective motivations - Corruption and mismanagement - Inter and intra-party contestation in run up to	- apps, functional call centres...) - Create alternative means of expressing social cohesion - Ensuring that ward councillor holds at least quarterly meetings - Increasing attendance of councillor meetings - Formalised groups to follow processes in raising concerns (ward councillor, timelines, communication, speaker of municipal office, mayor) - Group members to attend ward council and municipal meetings - Pushing for the adoption of councillor pledge (as per R2K) or amendment to include referendums or processes for call backs - Utilising these forums as opportunities for greater transparency in local processes (including tenders) - Involvement of local media	- Various stakeholders consistently represented in spaces created for collaboration and joint-problem solving - Various stakeholders believe that such structures (spaces) have offered support in dealing with issues related to service delivery or quality of life. - Increased attendance of meetings held by ward councillors, ward committees, IDP meetings or mayoral meetings - Increased formalisation of processes to record and track progress of matters raised through formal structures (e.g. Meeting minutes signed, documentation) - Increased attendance of municipal processes that allow for participation (e.g. IDP, municipal meetings) - Increased understanding of the processes that should be followed when reporting issues related to local governance (e.g. service delivery) - Increased awareness of the ways in which ward councillors can be held accountable - (Pre-post) Increased satisfaction or sense that formal processes can be utilised to address concerns related to service delivery, unemployment... - Increased sense of satisfaction with ward councillors (esp amongst those who utilise forums)	- Quarterly reflection sessions amongst stakeholders (ward councillors, community members, others) - Group members to attend meetings and collect copies of attendance registers - Increased use of email, printed minutes...) - As above - (Tie workshops, pre and post; could also be compared to control group when situational/baseline utilised) - Tie to biannual reflection session or have brief questionnaire at end of each meeting – track longitudinally) - Reflection sessions (those attend forums;
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	local or national elections (greater political consciousness, active citizenship and accountability changes characteristics of ward councillors – also need to have police and legal capacity to deal with violence and intimidation) - Assessing and challenging the normalisation of violence		- Increased sense of agency or of having concerned recognised by government - Increased discussion around both strengths and challenges related to services delivery being reported by local radio and newspapers - If a formalised, non-partisan group represents the interests of the broader community, then service delivery protests and collective violence can be more readily attributed to political entrepreneurs or parties. - o If there is less acceptance of violence and greater acceptance of active citizenship, collaboration and formal processes (political consciousness?), then there will be greater condemnation of the use of violence in collective actions - o Increased collective action but reduced violence (would need strong leadership during action to prevent political interference and entrepreneurship)	broader comm through annual follow-ups tie situational analysis tools) - Establish relationships local media (collect, copy scan newspaper articles; meet radio newsreaders monthly?) - Forum (baseline, biannual); broader (situational, annual)
Skills development	- Psychological effects of deprivation and hopelessness - Relative deprivation (compared others, compared ideal self) - Competition for resources	- Create awareness and improve access to different platforms used to find work opportunities - Assist with CV writing and interview skills	- Greater awareness and access to platforms that could assist community members (especially youth) in finding out about work opportunities - Improved quality of CVs - Improved interview skills (*a)	- Awareness can be linked to pre-post (situational, workshop; annual follow-up) - Access can also be measured by pre and quarterly assess of

	- Youth unemployment - Inter and intra-party violence	- Provide training on entrepreneurship and small business development - Provide information and basic support in the process of developing business plans and applying for support from government departments, business or citizens - Increase access to ABET - Increase knowledge of bursary, FET, and SETA opportunities	- Increased knowledge, amongst youth, about opportunities for bursaries and further studies - Increased knowledge of core entrepreneurial and small business development skills - 15 % of those who attend trainings have been assisted in developed business proposals - 10% of these have been supported in identifying avenues for potential funding (e.g. DSBD, municipality...) - 10% of attendees have started enterprises - These attendees have been supported in being able to generate a profit within 3 months	- access to internet or other platforms - Initial role play with rating; training and subsequent assessment (*a) - Pre-post (situational, workshop; annual follow-up) - Contact and follow-ups with attendees - Contact and follow-ups with attendees
Social club	- Lack of interaction and trust (<i>bidirectional</i>) - Dehumanisation and othering (linked competition and in-out groups)	- Space where divided groups can perhaps come together, in different context, form new types of relationships	- Those attending groups report greater number of social relationships - Social group attracts individuals or families from diverse backgrounds (gender, race, nationality, ethnicity, religion, culture), which contributes to reduced stigmatisation and increased sense of togetherness (solidarity, social cohesion)	- Pre and quarterly - Attendance registers - Situational analysis (stigmatisation tool) - Biannual individual interviews with those who have attended more than two or more meetings in specific period
Serving in steering committees, reference groups...	- Use of violence by SAPS - Inequality - Unemployment - Policing and response to collective action	- Develop balanced approach to working with government - Conduct research and integrate learnings, from communities, that can	- CSVR has an increased presence in local, provincial and national committees or panels that focus on issues related to service delivery and collective violence - CSVR has increased its level of dialogue with stakeholders (civil society, levels of	

	- Issues related to foreign nationals - Constitution and rights	help shape policy and practices - CSV, multidisciplinary staff to provide inputs on economic policies	government) on issues related to foreign nationals (e.g. documentation, provision of services, employment) - CSV policy briefs on the prevention of collective violence and improvements in service delivery have been endorsed at local, provincial or national level - CSV has submitted policy to treasury, department agriculture, DRDLR, labour, DTI relating to local job creation	
Advocacy	- Public discourses and understandings around the use of violence in collective action (lack public empathy) - Media and framing of collective action (e.g, Marikana) - Intersections between SA legacy apartheid, socioeconomic issues and current political issues - Political issues that contribute to collective violence (e.g. local to national government, patronage politics)	- Develop balanced approach to working with government - CSV distributes statements and sets up media engagements and events to increase dialogue with media around collective violence - Highlighting factors that contribute to collective violence via different platforms - CSV, multidisciplinary staff to provide inputs on economic policies	- Public has an increased understanding around the nature of violence in collective action (e.g. protests and protestors are not inherently violent, that this can be a result of a process, that protests can be sabotaged by diverse leaders and interests) - Reduced pathologisation or views or protestors as inherently violent (increased assessment of context that precipitates events) - Increased understanding of the factors that contribute to collective violence	- Monitoring talk radio, social media?? - Could we develop agreements with media houses to set up or promote snap surveys that allow listeners/ viewers to provide their views? - o E.g. Facebook, USSD, Whatsapp voice notes... - o Try provide informed consent (how we would like to use this information)
Stakeholder engagement	- Diverse factors that can protect against or increase risk of collective violence	- Situational analysis; stakeholder evaluation to evaluate the presence of local, national ngos and government	- Develop a greater understanding of the size, diversity, frequency of communication, collaboration and achievements of local-national stakeholders (community members,	- Situational analysis (also trying to determine issues of greatest concern)

		initiatives in community and the areas of focus that may contribute to preventing collective violence - Gauging levels of crime and violence in community and relationship between SAPS, CPF and community members	CBOs, FBOs, civil society, levels corporate, government) - Increased diversity, frequency contact, collaboration between stakeholders (include government) - Increased use of <i>monitoring system</i> between stakeholders (e.g. an app or whatsapp) to facilitate communication and referrals - Stakeholders work together to develop joint action plans that may prevent collective or xenophobic violence - Increased number of referrals between partner organisations	- Baseline, biannual ques using SNA graphs and metrics
KLM&E	- Lack of reflection and capturing key learnings	- Reflection sessions - Developing knowledge products (training manuals, pamphlets, reports, articles, policy briefs...)	- Clinical, CPs, CPS, Advocacy and Research follow M & E plan in a way which assists CSVr in developing knowledge products that further its ability to prevent collective and xenophobic violence	- KLM&E team; monitoring compliance