ANNUAL REPORT
2017/2018

Changing the eyes with which we view reality
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Cowley House
126 Chapel Street
Woodstock
7925
Telephone: 021 4657373
Email: info@trauma.org.za
www.traumacentre.org.za
1. Thank You

DONORS:

The organisation is thankful to the funders who funded it during the 2017/2018 financial year to render services to the key populations above thereby supporting us to work towards reaching our mission.
2. Vision and Mission

PLEDGE TO LIVE A NON-VIOLENT LIFE

I believe that peace and trust must first exist within me
I share equal responsibility to create and sustain a
community safe from violence
I will start by showing love towards my family
I will not condone violence in any form
I will not commit acts of verbal, physical, psychological
and financial abuse
I will not harm myself or others through myself
destructive behaviour
I will lead by example
I will seek support from others who are committed to
non-violence
I will take action to ensure peace in my home, our
schools and communities
I will encourage others to strive for peaceful ways of
dealing with conflict
I pledge to contribute towards a community that cares
for each other 365 days a year.
Vision:

A non-violent society in South Africa who respects human rights and is committed to addressing trauma through inclusive healing processes.

Mission:

To provide inclusive evidence-based healing processes that addresses the psychosocial needs of our multiple-wounded society through:

1. restoring the mental health of survivors of violence and torture by means of inclusive evidence-based healing practices
2. capacity-building for laypersons, frontline workers and community in trauma healing both preventative and curative in nature
3. local and global strategic partnerships that strengthen interventions, enhances collaboration and shares resources and skills
4. advocacy amongst diverse stakeholders through education and research.

Our Values:

<table>
<thead>
<tr>
<th>Respect</th>
<th>Quality care</th>
<th>Transformation</th>
<th>Accountability</th>
</tr>
</thead>
<tbody>
<tr>
<td>We believe in respecting and protecting all people’s human rights</td>
<td>We are committed to providing quality trauma-focused mental health care to all our clients</td>
<td>We support the transformation of our society through harnessing people’s skills and capabilities.</td>
<td>We believe in honesty, integrity and open communication with all stakeholders</td>
</tr>
</tbody>
</table>
3. Our Reach in 2017/2018

Most clients were seen at least on two occasions and referred for further psychosocial support. The majority of clients were gender-base violence survivors. More men received services than in previous years. In addition to trauma counselling, clients receiving paralegal support, health services, particularly HIV/AIDS pre and post counselling, STI and TB screening and referral for adherence and other medical procedures. The number of transgender and LGBTQI persons accessing Trauma Centre increased. One of the challenges in this regard is the reluctance to indicate their sexual orientation in Intake forms.

Youth and young adults are our main beneficiaries. Most clients are from the age category 13-18 and 19-30 are experiencing multiple forms of violence. Learners registered with the Departments of Basic Education and Higher Education (specifically TVET colleges) gained from numerous interventions aimed at disrupting repetitive cycles of violence. This year, the organisation began targeting out of school youth as a key population. The age category of 50 and above increased this year highlighting the need for trauma-focused interventions for elder persons.

Older persons were more likely to complete their counselling than younger beneficiaries. At schools, ongoing gang violence coupled to high rate of absenteeism often prevented learners from completing their counselling.

The organisation targeted the 26 most vulnerable communities which the South African Police has identified in the Western Cape. These communities are situated in geographical areas with high levels of crime. To this end, most clients from these areas are Black Coloured and African. Despite the closing of a number of organisations working with migrants, fewer refugees and asylum seekers sought trauma counselling and support in this financial year than previously. Although the number of White beneficiaries is far less than any other racial group, the organisation supported more White clients than previously. Trauma as a consequence of violence impacts on all of us regardless of race, class, gender or cultural and religious contexts.

The Trauma Centre provides psychosocial services for survivors of five broad categories of violence: organised crime (gang violence, syndicates), gender-based violence (domestic and intimate partner violence), torture, social crime and sexual violence. Trauma Bereavement (linked to murders) counselling has peaked this year in the wake of the gang-related murders and the child murders.
4. Patrons & Board of Trustees

Sadly, we mourn the passing of Ahmed Kathrada, a patron of the Organisation for many years. The Most Reverend Njongonkulu Ndugane retired. We wish him well during his retirement and thank him for the years of service as a patron.

Patrons

Judge Goldstone

The Most Reverend Archbishop Desmond Tutu

Fred Phaswana

Graça Machel

Professor Lesley London

Board of Trustees

In 2017, four new board members joined the team: Sarah Henkeman, Geraldin Wanelisa Xabe, Lindiwe Dlamini-Dlakya and Roslyn Nyman. Gwynne Philander resigned from the Board. We thank Gwynne Philander for his support during his tenure.

Jerusha Rangasami
Chairperson

Prof. Ashraf Kagee
Deputy Chairperson

Duncan Albertyn
Treasurer
5.

Chairperson’s Address

Jerushah Rangsami

As we move towards our 25th anniversary later in 2018, I want to acknowledge the work of our predecessors (both board and staff members) as well as our funders who ploughed into the organisation and laid the foundation for the work we continue to do in our country.

Undoubtedly, the organisation has evolved since its sapling years when we moved from being an underground network of mental health workers supporting survivors of political violence to the array forms of violence that we address today. Former political prisoner and ex Robben Islander, Cecyl Esau who docked at Cowley House after his release from the island in the 1990’s always said that after the race struggle in South Africa, we would experience a class struggle.

Cecyl’s view is affirmed by the violence prevention interventions undertaken by Trauma Centre over the past decades. The Board has engaged with staff to strengthen the strategic direction is taking in this regard. During this financial year, the intensity of systemic and structural violence has certainly forced us to go back to the drawing board in our quest to contribute to violence reduction and the building of a safer society for all.

“... we have unpacked the highly contested construct called ‘violence’ which has indeed changed our perceptions of how best to engage in violence prevention work.”

To this end, through a partnership with one of the board members, Dr Sarah Henkeman, ourselves and the broader civil society, we have unpacked the highly contested construct called ‘violence’ which has indeed changed our perceptions of how best to engage in violence prevention work. Similarly, other board members have supported the organisation by given particular expertise in finance, research,
human resources to enhance the strategic direction we have taken.

I am pleased that good governance has improved the efficacy of the organisation in this regard. From a financial point of view, the organisation has managed to gain sufficient funds to implement this year’s workplan. Financial procedures were followed resulting in a positive annual financial statement. The organisation is moving ahead to secure greater sustainability given the uncertainty of gaining donor funds.

The programmes have reached targets set in funding proposals enabling clients to receive holistic psychosocial support. In this regard, I have received the second external evaluation report undertaken by the renown, Henley School of Business in London on the relationship between Trauma Centre and its stakeholders. I am pleased that stakeholders have a high regard for the quality of trauma counselling services and advocacy interventions.

No organisation is perfect. There are areas that the staff need to improve upon which we will address in the coming months. Both the Henley Report and organisational reports reveal the need to address human resource, logistics and administrative matters such as punctuality, transport demands, market-related salaries and performance management. The necessary policies have been amended to address gaps and secure better labour relations understanding.

I have supported the Executive Director and senior management in executing the workplan of the organisation. I am pleased at the commitment of the organisation to critically reflect on the efficacy of violence prevention interventions within the organisation and externally. In particular, our ongoing lobbying for a Commission of Inquiry into Child Safety in the Western Cape. This is our contribution to assuming collective responsibility for preventing violence in the province.
6. Executive Director’s Report

Valdi Van Reenen-le Roux

In recent years, an upsurge in violence across the country has led to an even greater need for the services of the Trauma Centre. This financial year signals the end of a three-year Strategic and Operational Plan. Together, board and staff members have reflected the organisation’s achievements with the view of chartering the organisation next three years ahead.

“Indeed, the impact of invisible violence on physical forms of violence is understated and overlooked limiting the efficacy of violence prevention interventions.”

Disrupting the repetitive cycles of visible violence requires a deeper understanding of the connection between visible (physical) violence and invisible violence (systemic, structural, cultural, religious and psychological). Indeed, the impact of invisible violence on physical forms of violence is understated and overlooked limiting the efficacy of violence prevention interventions. Although torture and political violence remains a focal area of our work, violence has become for more endemic in all of its forms Monitoring and evaluation processes have highlighted the need for critical reflection on what interventions are likely to be effective.

Drawing on our experiences, we note the need to change the lens from which we view our reality. In 2017, at the height of the child murders in the Western Cape, we realised that deeper introspection is required to deal with the high levels of violence against children from both government and civil society. We spent the year lobbying for a judicial Commission of Inquiry into Child Safety in the Western Cape. After protracted consultations between government and ourselves, cabinet rejected the call prompting further action from civil society. We questioned our approach to intimate partner violence and the current emergency and residential shelter interventions. Our critical reflection has informed our Strategic and Operational Plan for 2018 -2021 as we end the current strategic plan.
We are pleased that the recommendation made in our 2015 research report on intersectoral collaboration has yielded fruits. During this year, we have strengthened partnerships with government and civil society especially at a grassroots level. We are pleased that the Western Cape Department of Social Development and the South African Police Services have affirmed our expertise by engaging us regarding capacity building of police officers and volunteers working in the victim-friendly rooms. To date, we have trained 100 police officers and volunteers to provide trauma support in communities where mental health services are limited. Furthermore, we have made oral and written submissions on policy development. Most notably is the draft Western Cape Child Commissioner Bill. Our participation with like-minded civil society organisations in the South African Coalition for Transitional Justice (SACTJ) remains pivotal in the process of addressed the unfinished business of the South African Truth and Reconciliation Commission. Trauma-focused capacity building of mental health practitioners has become a key intervention. In this regard, we are pleased that we have received funding for the development of a Trauma Bereavement Guidebook for Mental Health Practitioners for 2018. We are gaining momentum in training community workers in psychological first aid to provide prompt evidence-based trauma support in communities. The Trauma Centre has offered 10 social work and counselling interns’ opportunities to complete their internship at the organisation. This year, intern psychologists joined the team.

Trauma counselling is certainly a strength at the organisation as the numbers of client requiring mental health services grows. We are grateful for the ongoing research undertaken by researchers like Deborah Kaminer regarding treatment frameworks when dealing with continuous trauma. It much needed and will improve our efficacy. Lastly, I want to thank staff and the board for the ongoing support and commitment to the organisation.
7. Programme Overview

Violence Prevention Programme

This programme focuses on lobbying and advocacy, capacity building, materials development, training and research. Staff compromise of mental health practitioners, adult educators and trauma support workers. The programme works in four target advocacy areas: Torture Prevention, Gender-based Violence, Public Safety and Child Safety.

Community-based Psychosocial Programme

This programme provides psychosocial support to victims/survivors of violence and torture. It works with a multidisciplinary team comprising of social worker, social auxiliary workers, counsellors, psychologists, trauma support workers, interns and volunteers.

Community reparations, the unfinished business of the Truth and Reconciliation Commission

The unfinished business of the South African Truth and Reconciliation Commission continues to haunt the country. Through a coalition called SACTJ (South African Coalition (2 per province) would receive R30 million. Some communities were consulted regarding how the money would be spent. Most wanted libraries, community halls, roads and other infrastructure necessities. The draft regulations were never ratified due to the objections from the Coalition.

During this financial year, the Coalition continued to object to a closed list of torture victims. It lobbies for an open list because many victims were not ready to appear before the TRC just as many perpetrators did not apply for amnesty. In addition, the coalition argues against using community reparation for the building of infrastructure in communities since government has the responsibility to provide such amenities. Between 2016 and part of 2017, consultations came to an abrupt end. Fortunately, in the latter part of 2017 and this year, the consultations are back on track with the Department of Justice and Constitutional Development.
Participation in a global campaign to document torture atrocities to fight impunity

Five years ago, the United Nations Committee against Torture recommended states to collect data regarding torture victims. In the data required was the nationality, birth country, employment status, gender and age of the victim. In addition, the need to document whether torture victims were receiving reparation became apparent in analysing whether torture survivors are receiving services as stipulated in the General Comment 3. The Trauma Centre joined a worldwide programme aimed at collecting this data in 2016. Through the International Rehabilitation Council for Torture Victims (IRCT), the organisation participated in the global project to collect data in South Africa. The project, Data for Fighting Impunity (DFI) provided on online database to record data of torture survivors. This year, the organisation used the data to report to the state of torture in the Western Cape through information sessions, presentations and reports. With the help of a paralegal staff member, the organisation audio visually recorded testimonies of torture survivors who consented to the recording. Staff members participating in training in Uganda and later Kenya to use the database efficiently. Towards, the end of the financial year, a lack of funding from global partners prevented the organisation from continuing to use the database. The organisation merged the DFI database with the existing database prior to DFI into one. Merging the databases has helped to decrease human resources needed to capture information as well as supporting the organisation to develop one system to collect all data of survivor of violence and torture.

Lobbying for a Commission of Inquiry into the lack of Child Safety in the Western Cape

In response to the growing number of parents and caregivers coming for trauma bereavement counselling following the murder of their children, the organisation began documenting confirmed child murders in the Western Cape. In April 2017, the list stood close to 40 prompting the organisation to call for a Commission of Inquiry. Nearly 20 organisations supported the campaign with more than 3,000 signatures collected through online petitioning. Trauma Centre
became one of the founders of the Child Protection Collaborative (CPC), a coalition of grassroots organisations. Through CPC, the Trauma Centre presented the petition for a Commission of Inquiry. On two occasions, the Trauma Centre together with peers organisations met with the Premier of the Province. Premier Helen Zille opposed the call indicating that commissions were expensive instead she mooted for a research report that could be used as the basis for a term of reference should the research reveal the need for a Commission. At the same time, the organisation lodged a petition with the Western Cape Legislature’s Petition Standing Committee. The organisation appeared on three occasions before the Standing Committee that agreed with civil society that child protection must be prioritised. We together with the Western Cape government lead agent, Department of Social Development were instructed by the Petitions Standing Committee to consult with each other regarding joint public hearings.

The organisation met with the Western Cape government but refused to partner with government regarding the public hearings given the Western Cape Cabinet decision to reject the call for a Commission of Inquiry. Instead, civil society argued that political interference may compromise the outcome and announced that it will host a People’s Commission of Inquiry. In meetings with the Western Cape Human Rights Commissioner, Chris Nissen, an agreement was reached that in principle the South African Human Rights Commission will support the People’s Commission of Inquiry. By the close of the financial year, child murders continued to rise with the list growing steadily from month to month. The organisation is now planning the People’s Commission of Inquiry to Child Safety in the province.

Written submissions for a Child Commissioner

More than a decade ago, the Western Cape government drafted the Child Commissioner Bill. When the Democratic Alliance won the Western Cape during the general elections, Premier Helen Zille promised in her inaugural speech to pass the draft Bill. However, the draft Bill was never passed in Parliament. After lobbying within the Western Cape Legislature, the draft Bill was revised and opened for public comment in 2017. The organisation participated in the public comment submission process regarding the Draft Child Commissioner Bill which was released in mid-2017 for the first round of comments. The draft Bill was published at a time when child murders in the province prompted protests across the Western Cape. Undoubtedly, the negative media coverage and civil society’s outcry played a pivotal role in mustering the political will of politicians to reignite calls for the dormant Bill to be passed.

After receiving more than 500 submissions, the Western Cape government revised the draft Bill. Opposition to the draft
Bill was based on a lack of neutrality of the Child Commissioner who would be located within the Office of the Premier. We argued that even though the Child Commissioner will not be regarded as a Chapter 9 institution, it should have greater decision powers to hold perpetrators accountable. In our understanding of a ‘perpetrator’, we include systemic failure since often the lack of child safety is as a result of systemic challenges. Secondly, the Child Commissioner will have no decision-making powers after conducted an investigation since the incumbent will only make findings and recommendations. In our written submission, we argued for a more child friendly Bill that includes children’s participation. We joined civil society by signing joint submissions as well as.

**International Nelson Mandela Day Annual Youth Dialogue**

This year the dialogue brought 100 learners together to discuss the child murders and their experiences with political leaders. The ANC, DA and the ACDP met with the children vowing to prioritise child safety in the province. The Nelson Mandela Boulevard Tsogo Sun Hotel and Community Chest contributed towards the costs of the annual dialogue. The spokespersons of the Premier’s office and the Department of Social Development attended. Unfortunately, the Premier became ill the evening before and could not attend. Learners spoke about their fears of walking in their communities but were resolute about finding solutions. One learner recounted how the playground is not for playing but watching the movements of gangsters. He indicated that the school playground is like a prison yard where gangs congregate in four corners. It was heart breaking to hear the lived experiences of learners. The dialogue was one of the few opportunities that learners had to speak to their lived experiences.

**Promoting violence prevention through public safety advocacy**

Trauma Centre joined its peers in forming the United Public Safety Front (UPSF), a platform aimed at uniting communities to lobby for greater public safety. The executive director is the deputy chairperson of the UPSF. The Front hosts its meeting at the Centre and the first intervention of the coalition will be to convene a summit regarding public safety in the Western Cape. Although members can be individuals, membership includes community police forums, community-based organisations, movements and non-governmental organisations.

**Tackling Gender-based violence**

The Trauma Centre joined its peers to consult with the National Department of Social Development regarding the National Plan of Action for Women and Children. The current plan ends in 2018. We
have proposed projects that would focus on perpetrators of gender-based violence. Family restoration interventions were also suggested as key interventions to prevent recidivism.

The Learning Centre developed advocacy material aimed at children and youth as part of an advocacy campaign. Information-sharing presentations were held across the province to address gender-based violence amongst children. Another aspect that is emerging from the work we are doing to eliminate gender-based violence is the growing incidents of femicide in South Africa. Through trauma bereavement counselling, it is becoming apparent that advocacy is needed in this regard.

**Building capacity in communities where mental health resources are scarce**

Community workers and police officers from several precincts were trained in trauma support and psychological first aid. Lavender Hill community workers used their training to inform the Rene Roman Search and Rescue group that looks for missing children. The group who are now trained to offer trauma support to grieving families have been successful in finding missing children.

Police stations in the George, the West Coast and on the Cape Flats were targeted for capacity building in trauma to strengthen service delivery in the areas. The police officers have indicated that the training has helped them to understand the challenges they have when taking statements from victims of crime. In particular the course focused on understanding how trauma responses can affect functioning. For example, memory lapses can be a trauma response to a heinous sexual attack.

Senior staff has participated in dialogues with Dr Sarah Malotane Henkeman focusing on the contested nature of violence. The discussions focused on visible and invisible forms of violence and disrupting the denial which occurs both consciously and unconsciously. These dialogues were useful in critically reflecting on the efficacy of the Strategic and Operational Plan, especially the implications for psychosocial interventions and advocacy campaigns. There is undoubtedly a need to consider how systemic and structural violence which are often the drivers of physical and psychological violence is addressed in preventative interventions. We took these reflections to the Strategic planning weekend in September for further discussions.

**The genesis of the Women’s Economic Empowerment Platform**

Trauma Support Workers held a series of life skills programmes with women living in shelters of former shelter residents. The programme focussed on strengthening intimate partner violence survivors’ resilience to deal with abuse. One of the reasons, abused women return to
home is that the perpetrator is often the bread winner. The programme therefore highlights the need for women to take control of their lives. It works from an asset-based perspective focusing on the capabilities of each woman in the group. Women are supported to reflect on their strengths to regain self-worth. Problem-solving activities enables the women to reflect on weakness, risks and opportunities that exist with the view of help the women to make changes in their lives. Sewing, crafting, baking and cooking are skills that are enhanced while finance education helps the women to market their products to earning an income.

After several groups were successfully facilitated, the women have become members of economic platform called WEEP (Women’s Economic Empowerment Platform). They make soap, bath salts and reusable pome pads which is sold and the proceeds given to them. The Platform has changed their perceptions about gaining employment. It has reinforced a sense of hope and willingness to change their lives by taking greater control within relations as well their own personal lives.

**Violence prevention programmes for youth**

Utilizing the evidence-based Stepping Stones and Creating Sustainable Futures preventative programme developed by the South Africa Medical Research Council, facilitators have worked with youth to highlight the connection between gender-based and sexual violence. Through sexual reproductive education, youth’s views of gender stereotyping are unpacked. The youth are able to receive HIV/AIDS testing and counselling. More than 100 youth attended these sessions with many indicating that they are gender-based violence survivors. Unsurprisingly, we found during the screening process that many experienced multiple forms of violence. In these sessions, the youth discuss their relationships, views on sex before marriage and the need for contraception. The culture of ‘blessers’ are also discussed as learners openly speak about economic challenges and ways in which they combat hunger, lack of clothes and transport.

**Providing psychosocial support to schools**

A large proportion of children have accessed trauma counselling and support services at their schools which disrupts their schooling minimally. Both individual and group counselling can be accessed on a weekly basis at targeted schools. Trauma bereavement, sexual violence, child abuse and neglect, gang violence, bullying and domestic violence are popular forms of violence experienced by the learners.

**Manenberg:**
1. Downville Primary
2. Phoenix High
3. Silverstream High
4. Voorbrug High
5. Gardenia Primary
6. Excelsior High
7. Perserverance High
   Kraaifontein
8. Bloemkombos High
9. Hector Pietsen High School
10. Prince George Primary (Lavender Hill)

**Working in Higher Education Institutions**

In partnership with HEAIDS, the Trauma Centre has worked in TVET colleges across the City of Cape Town. Screening for gender-based violence and HIV/AIDS were the main services offered followed by counselling if requested. More males participated in the intervention than at any other entry points. Male survivors of domestic violence acknowledge their experiences to a greater extent within this sector. One of the challenges experienced is following up with clients who were HIV positive to ensure adherence.

**Contributing to the 90-90-90 target for reducing HIV/AIDS prevention**

The global campaign to end the AIDS pandemic has highlighted three targets:

- By 2020, 90% of all people living with HIV will know their HIV status.
- By 2020, 90% of all people with diagnosed HIV infection will receive sustained antiretroviral therapy.
- By 2020, 90% of all people receiving antiretroviral therapy will have viral suppression.

The link between gender-based violence and HIV/AIDS is well-researched. In efforts to provide survivors with holistic services, the Trauma Centre through NACOSA trained its staff as HTS counsellors accredited to provide testing and counselling services to survivors. In 2017-2018, the organisation tested 1200 clients who consented to the service.

**Working with high profile cases**

An indicator of the organisation’s quality of work can be measured by its reputation at different levels of society. This year, the organisation received referrals from diverse partners including government agencies who called upon Trauma Centre to debrief and provide further trauma support to high profile cases. Ethical principle does not allow the organisation to mention the names of the individuals or families. We are pleased though that our work is affirmed in the province.

One of the challenges however has been the protection of mental health practitioners and community workers. Of particular concern is community workers who protect human rights in their communities but become the target of criminals. We dealt with cases where community workers needed to be taken to places of safety because they had witnessed gang-related murders. Our experience taught us that safety and protection for mental health practitioners and community workers is a major gap in civil society.

The Trauma Centre for Survivors of Violence & Torture Trust
(Registration number IT2560/1998)

Annual Financial Statements for the year ended 28 February 2018

Trustees Report

The Trustees submit their report for the year 28 February 2018

1. Review of activities

Main business and operations

The trust is engaged in counselling trauma and torture victims and operates principally in South Africa.

The operating results and state of affairs of the trust is fully set out in the attached annual financial statement and do not in our opinion require further comment.

The Trauma Centre for Survivors of Violence and Torture Trust has been approved as a public benefit organisation in terms of section 30 of the Income Tax Act and its receipts and accruals are exempt from income tax in terms of Section 10(1)(Cn).

Net deficit of the trust was R 186,795 (2017: loss R355,970).

2. Going concern

The annual financial statements have been prepared on the basis of accounting principles applicable to a going concern. This basis presumes that funds will be available to finance future operations and that the realisation of assets and settlement of liabilities, contingent obligations and commitments will occur the ordinary course of business.

3. Events after the reporting period

The trustees are not aware of any matter or circumstance arising since the end of the financial year that would have a material effect on the financial statements for the year ended 28 February 2018.

4. Accounting policies

There are no changes to the accounting policies of the company.

5. Non-current assets

There were no major changes in the nature of the non-current assets of the trust during the year.

6. Trustees

The trustees of the trust during the year and to the date of this report are as follows:
7. Auditors

Grant Thornton Cape Inc. will continue in office for the next financial period.

8. Non-Profit Company registration

The Trauma Centre for Survivors of Violence and Torture is registered as a Non-Profit Organisation (NPO), in terms of the NPO Act of South Africa No 71 of 1971, governed under the auspices of the Department of Social Development in South Africa.

9. Secretary

The secretary of the trust is VC Van Reenen-Le Roux.
The Trauma Centre for Survivors of Violence and Torture Trust

Registration number IT2560/1998
Annual Financial Statement for the year ended 28 February 2018

Detailed Statement of Comprehensive Income

<table>
<thead>
<tr>
<th>FIGURES IN RAND</th>
<th>2018</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operating expenses</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Auditor’s Remuneration</td>
<td>(68,304)</td>
<td>(11,714)</td>
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<tr>
<td>Accounting fees</td>
<td>-</td>
<td>(27,000)</td>
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<tr>
<td>Advertising</td>
<td>(1,516)</td>
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<tr>
<td>Bad debts</td>
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<td>(9,500)</td>
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<tr>
<td>Bank charges</td>
<td>(28,375)</td>
<td>(26,833)</td>
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<tr>
<td>Depreciation, amortisation and impairments</td>
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<td>(74,045)</td>
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<td>Employee Costs</td>
<td>(3,000 068)</td>
<td>(2,483,195)</td>
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<td>Catering</td>
<td>(55,276)</td>
<td>(43,659)</td>
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<td>Clinical services and programmes</td>
<td>(452,323)</td>
<td>(141,067)</td>
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<tr>
<td>Stipends for field workers</td>
<td>-</td>
<td>(20,450)</td>
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<td>Staff welfare and development</td>
<td>(9,868)</td>
<td>(6,090)</td>
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<td>Supervision</td>
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<td>(3,610)</td>
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<td>Material Development</td>
<td>(25,679)</td>
<td>(10,222)</td>
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<td>IT expenses</td>
<td>(44,966)</td>
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<td>Insurance</td>
<td>(52,426)</td>
<td>(42,983)</td>
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<tr>
<td>Equipment Rental</td>
<td>(110,272)</td>
<td>(50,451)</td>
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<td>Motor Vehicle expenses</td>
<td>(15,050)</td>
<td>(3,983)</td>
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<td>Fundraising costs</td>
<td>67,164</td>
<td>-</td>
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<td>Postage</td>
<td>(504)</td>
<td>(659)</td>
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<tr>
<td>Printing, publications and stationery</td>
<td>(22,5690)</td>
<td>(6,367)</td>
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<tr>
<td>Repairs and maintenance</td>
<td>(25,675)</td>
<td>(160,459)</td>
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<tr>
<td>Security</td>
<td>(5,904)</td>
<td>(6,588)</td>
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<tr>
<td>Staff Welfare</td>
<td>(49,999)</td>
<td>(19,500)</td>
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<tr>
<td>Telephone and fax</td>
<td>(53,575)</td>
<td>(74,683)</td>
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<td>Travel -Local</td>
<td>(206,393)</td>
<td>(98,657)</td>
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<tr>
<td>Utilities</td>
<td>(27,185)</td>
<td>(38,031)</td>
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<tr>
<td><strong>Total Operating expenses</strong></td>
<td><strong>(4,398,975)</strong></td>
<td><strong>3,396,611</strong></td>
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</tbody>
</table>
## Staff

### Office of the Director

- Valdi Van Reenen-Le Roux  
  Executive Director
- Lindani Mzamo  
  Part-time Finance Manager
- Lulamile Mdudu  
  Finance Administrator
- Lucenia Van Der Meulen  
  Frontline Administrator/Trauma Support Worker
- Charlene Cornelissen  
  House Keeper
- Gavin Felix  
  Driver
- Desmond Kleinbooi  
  Gardener

### Violence Prevention Programme

- Sharon Vermaak  
  Senior Manager (Counsellor)
- Tasneem Akiemdien  
  Counsellor
- Fazlin Breda  
  Trauma Support Worker
- Jason Abrahamse  
  Trauma Support Worker
- Ursula Baajes  
  Trauma Support Worker
- Tyra Williams  
  Paralegal Worker

### Community Psychosocial Support Programme

- Vastrohiette Gilbert  
  Senior Manager (Counsellor)
- Yeukai Chideya  
  Senior Manager (Clinical Social Worker)
- Indira Moodley  
  Probono Psychologist
- Gertrude Bosman  
  Social Worker
- Zinzi Fuku  
  Social Worker
- Sharief Samsodien  
  Social Worker
<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
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</thead>
<tbody>
<tr>
<td>Laura Halford</td>
<td>HTS Manager</td>
</tr>
<tr>
<td>Jennifer Alexander</td>
<td>HTS Counsellor</td>
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<tr>
<td>Deborah Abrahams</td>
<td>HTS Counsellor</td>
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<tr>
<td>Babelwa Nyaba</td>
<td>Social Auxiliary Worker</td>
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<td>Nolubabalo Mtyotwya</td>
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<td>Chelsea Noble</td>
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<td>Wayne Williams</td>
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<td>Erica Coetzee</td>
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<tr>
<td>Yolande Mase</td>
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<td>Patricia Mahlungu</td>
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<td>Lauren Roman</td>
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**Interns and Volunteers**

<table>
<thead>
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<th>Name</th>
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<tbody>
<tr>
<td>Deborah Van Der Westhuizen</td>
<td>Administration</td>
</tr>
</tbody>
</table>
The Trauma Centre          Annual Report 2017/2018