



Reg. No: 2006/023739/08

Addressing Sexual Violence in Prisons (SViP)

EHPISA Prisons Technical Forum

15-16 March 2016

Sonke's Work in SA Prisons

- Includes gender, health and human rights interventions, providing direct services for inmates, as well as conducting policy research and advocacy for prisons reform.
- Sonke primarily focuses on sexual violence (awareness raising, prevention, response and support for survivors, policy reform and implementation), HIV and TB (education, access to treatment and prevention, policy implementation), as well as the determinants of these such as poor material conditions in prisons (e.g. overcrowded & unsanitary cells, poor staffing), as well as oversight and accountability mechanisms for prisons.

EHPISA SViP Project

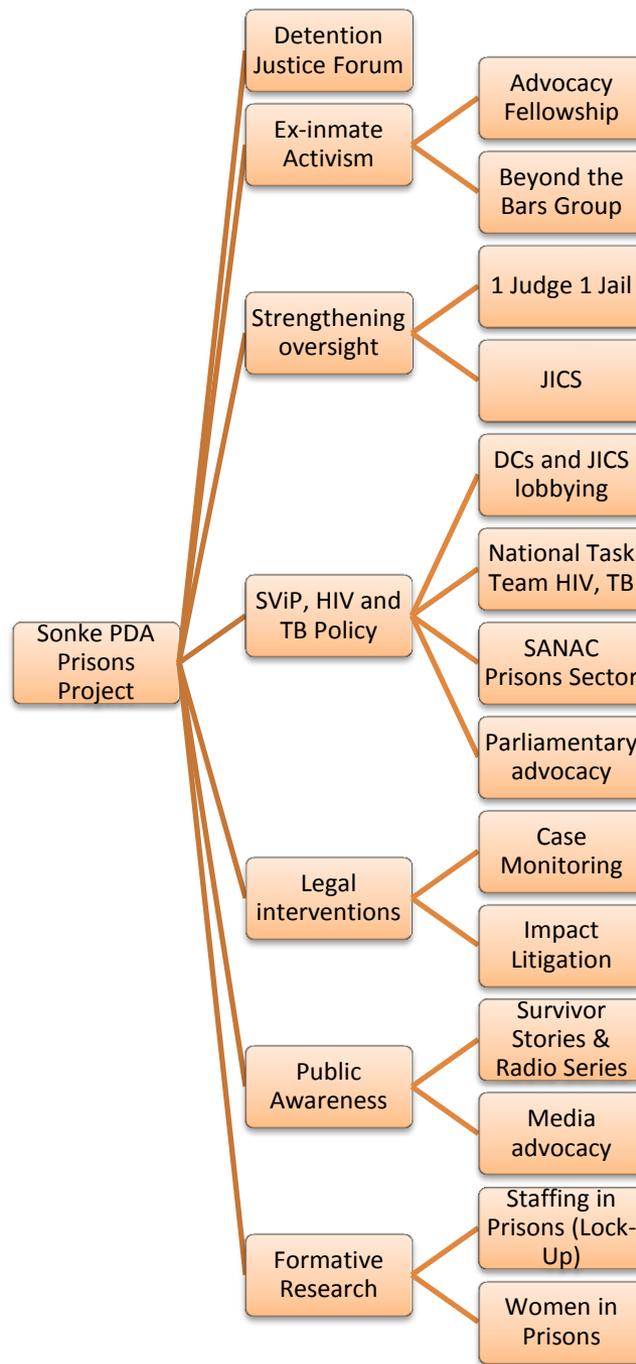
- **Implementing Partner:** Just Detention International – South Africa
- **Overall Outcome:**
 - Barriers to HIV prevention (political, legal and social) in prisons in southern Africa, particularly with regard to addressing the constraints to reducing sexual violence, are analysed and addressed through civil society interventions, drawing upon lessons learnt from the region and other evidence; leading to greater understanding of the potential contribution of civil society to appropriate policy and implementation for vulnerable groups.

Drivers of HIV through SViP

- Rape (coercive, violent and gang rape), particularly with more vulnerable prisoners such as juveniles, LGBTQI, mentally ill, women
- Prisoners predominate from high risk groups – men aged 19-35 – so high proportions of prisoners living with HIV on entry.
- Chronic and severe overcrowding of prisons, which have poor infrastructure.
- Over reliance on remand detention.
- No segregation of vulnerable and potentially abusive prisoners
- High turnover of prisoners, for example, due to short sentencing and frequent transfers.
- Predominance of impoverished people in prisons – less access to resources and rights

Barriers to Prevention of SViP

- **Weak criminal justice and judicial systems, premised on detention, leading to:**
 - Under-resourcing and overcrowding of prisons.
 - Poor provision of accommodation, staffing and supplies. Long, unsupervised lock-up hours
 - HR crises, including high vacancy rates, over-stretched staff, absenteeism.
 - Malpractice and dereliction of duty amongst overburdened prison staff, including poor confidentiality.
 - Lack of accountability.
 - Low levels of political support.
- **Antagonistic cultural and traditional views towards (1) anal sex, rape and (2) HIV leading to:**
 - Criminalisation of same sex relations.
 - High levels of denial and hiding reality that anal sex and rape is occurring in prisons.
 - Prison staff having poor knowledge of relevant health and rights issues, the difference between consensual sex and rape, and appropriate engagement with prisoners.
 - Strong stigma/discrimination concerning (1) HIV and (2) MSM, especially amongst prison staff.
 - Low levels of political support to address relevant issues.
 - Limited data on MSM and HIV situation in prisons and poor understanding of contribution to national HIV situation and appropriate responses.
 - Difficulties in access for service providers and advocates.



Impact of SViP work in South Africa

- Strengthening Collective Advocacy
- Policy and Legal Advocacy – SViP, HIV, TB
 - National Policy to Address Sexual Abuse of Prisoners
 - HIV, TB policies and forums
 - Conditions of detention
 - Holding Duty Bearers to Account (Magistrates, individual prisoner cases support, impact litigation)
- Strengthening Oversight and Accountability
 - Judicial Inspectorate – strengthening mandate
- Ex-Inmates Empowered to Lead
 - Fellowship, Beyond the Bars
- Increasing Public Awareness and Understanding of SViP
- Formative Research
 - Women, mentally ill
 - Staffing