

Victim supporters providing psycho-social support services to survivors of gender-based violence in Victim Friendly Rooms

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Abstract: Gender-based violence (GBV) has been declared by the President of the Republic of South Africa as the second pandemic and since Covid-19 is now under control and managed, GBV is number one on the list. Despite the human rights emphasis by the South African Constitution, the gruesome killing of women and children continue unabated. In trying to deal with this scourge, the department of Social Development is mandated to provide care and support to the survivors and this service is rendered by professional social workers with the support of social auxiliary workers. Accordingly, any survivor of GBV who enters a victim friendly room (VFR) in Police Station, should be seen by professional social workers for psychosocial support services. These personnel are recognised by the South African Council for Social Service Professions (SACSSP) to provide structured and short-term intervention. Moreover, civil society organisations (CSOs) support survivors in the VFR through victim supporters/ volunteers to contain them as they come to report/ open cases. After the survivors are socially and emotionally contained, they are referred to the social workers for the psychosocial support services going forward. Subsequently, the victim supporters/ volunteers end up providing psychosocial support services to the survivors of GBV in the VFR, which creates role confusion and overlap on their roles. Unfortunately, this creates ethical dilemma and reliance on ill-equipped lay counsellors to manage emotional severity and psychosocial needs presented by the survivors of GBV. Therefore, this study seeks to report on the qualitative desktop research conducted to highlight the eligibility of the provision of psychosocial support services to the survivors of GBV. Empowerment theory underpinned the study. Purposive sampling was used to specifically sample social work-related documents (electronic and printed) for review to gather sufficient data. Data was interpreted through document analysis. Ethically, psychosocial support services must be rendered by professional social workers.

Key words: ethics, psychosocial support services, survivors of GBV, victim supporters

Introduction

GBV is a global pandemic and South Africa is not immune from this social ill. In response to the national march initiated by the CSOs, which presented the memorandum consisting of twenty-four demands to the South African president requesting for the immediate intervention on how to deal with this scourge of violence and the Presidential Summit was arranged. The summit resulted in the formulation of the National Strategic Plan for Gender-Based Violence and Femicide (NSP GBVF) (2020-2030). Despite these efforts, GBV is still increasing, particularly among young women and children who are being killed continuously. In fighting the scourge, the President urged every organisation to contribute towards eliminating GBV with every possible resource at their disposal. These include unused buildings and other material donations. The Department of Social Development has received more unused buildings from the Department of Public Works and Infrastructure (DPWI) to increase available facilities for the survivors to receive psychosocial support services. Those facilities include shelters, Khuseleka One Stop Centres, Green and White Doors and others. Khuseleka One Stop Centre refers to centre where different integrated services are rendered under one roof for the survivors of GBV (Mathebula, 2021). Those services are rendered by the Department of Social Development (DSD), Health, Justice and Constitutional Development, National

Prosecuting Authority (NPA), Correctional Services, South African Police Services (SAPS), and CSOs. The purpose of these services is to ensure that survivors of GBV receive comprehensive services under one roof to minimise secondary victimisation when dealing with their cases inclusive of psycho-social support (Roberts, 2020).

Materials

This research was conducted in two month's period taking into consideration that it was a desk top review. The researchers took into cognisance that this study was desk top review and have ensured that the two University libraries were used intensively to gather sufficient data. The internet services also complemented the library services and as a result enough data was collected.

Theoretical framework

Empowerment theory has been associated with the social scientist Julian Rappaport in 1981. According to Willig and Rogers (2017), the concept empowerment originates from the American community psychology, and it refers to the applied study of the relationship between social systems and individual wellbeing in the community context. Rappaport (1981) proposes that empowerment should be a primary focus of Community Psychology. He believed that empowerment is about helping those with less than their fair share of power to understand their own situation and gain more power.

Cox et al, (2016) define an empowerment as a set of ideas that social workers use to increase change possibilities. It also provides people with the means to attain their goals either directly or indirectly, through the help of social workers (Cox et al, 2016). Empowerment theory in social work uses intervention methods to help guide people toward building autonomy and control in their lives (Martinez, 2022). This theory recognises that oppression is a primary contributor to disempowerment, which is experienced across a number of marginalised groups (Martinez, 2022).

Empowerment can be done either through case, group and community work as the methods used in the social work practice (Sithole, 2018). It links strengths and potentials of the individuals, systems and behaviours to social action and societal change. Cox et al (2016) further emphasise that social workers are not just providing resources because people need them, but they help people to access these resources on their own. Through empowerment process, survivors are transformed to regain their power and take their control back. Empowerment also enhances change for the victims to become survivors (Martinez, 2022). Empowerment theory is relevant in this study because psychosocial support service is done to the survivors in order to empower them to see their world differently, to take ownership of their lives back, to become aware of their potentials and capabilities through professional social work competencies, skills and knowledge. This service can only be done by the professional social workers through their learnt skills and expertise.

Methods

This study seeks to report on the findings of a qualitative desktop research conducted to highlight the eligibility of the provision of psychosocial support services for survivors of gender-based violence in South Africa. Purposive sampling was employed to sample the social work-related documents to gather sufficient data. Both printed and online documents were analysed and interpreted to get the meaning. Themes and sub-themes emerged from the collected data.

Results and Discussion

Psycho-social support services

Psychosocial support is defined as the continuing support and care provided to an individual to meet the appropriate emotional, cognitive, spiritual, social and physical needs through the interaction with people and the environment (Molebatsi, Musindo, Ntlatlana & Wambua, 2021; Mooney, Tarrant, Paton, Johnston & Johal, 2021; Ubels, Kinsbergen, Tolsma & Koch, 2022).

Nortje and Pillay (2022) argue that psychosocial comprises both psychological and social experiences which include personal thoughts, emotions and behaviour, while the social experiences encompass relationships, social support, tradition and culture. Psycho-social support is observed to be an important tool used to rebuild and strengthen the well-being of the individual who has been victimised in different ways and facilitating resilience (Kirst-Ashman, 2016; Mooney et al, 2021). Psycho-social services seeks to support individuals, and communities by building upon strengths, viewing people as being in charge of their own lives rather than as victims (Mooney et al, 2021). Therefore, the provision of psycho-social support services seeks to ensure that survivors of gender-based violence are supported to develop resilience. Resilience is defined by Kirst-Ashman (2016), Thompson (2020) including Hoeg and Hartmann

(2020) as the ability of an individual, family, group, community or organisation to recover from adversity and resume functioning even when suffering serious trouble, confusion, or hardships. Hoeg and Hartmann (2020: 457) further emphasise that resilience is the “positive adaptation within the context of significant adversity.” The emphasis here is not about how to avoid setbacks, but about what to do after being exposed to the tragic event. Resilience promotes an opportunity for development and growth, whereby individuals, teams, or larger collectives emerge stronger and more capable than before (Hoeg & Hartmann, 2020: 458). Through the provision of psychosocial support services by social workers, survivors are developing resilience.

Eligibility to render psychosocial support services.

The findings from the literature are that social workers are eligible to render psychosocial support services to the survivors in the VFR and beyond. The primary goal of any social work services is to contribute to the capacity of individuals to achieve the highest possible levels of self-determination (Pervova, Grigoreva, Kelasev & Smirnova, 2016: 147). Kirst-Ashman (2016) refers to the social work profession as the practical application of knowledge, skills and values to enhance the well-being of individuals, families, groups, organisations and communities. Kirst-Ashman (2016); Cox et al, (2016) further highlight the areas which makes social work a unique skill. They range from being able to work with any problem, targeting environments encompassing clients, advocacy, professional values, and partnership with clients. Being able to pursue the abovementioned areas, is a demonstration of acquired competencies to practice effective social work practice. Provision of psycho-social support services is done by a professional specialist such as social worker, psychologist, psychiatrist and others applying their competence. Professional competence is the ability to apply, transfer and combine knowledge and skills necessary to perform activities at work, at a quality level specified in an occupational standard (Drobot, 2022). Basically, social workers serve as change agents and promote development, social cohesion, empowerment, and liberation of people (Sithole, 2018; Coulshed & Orme, 2018).

Ethical and professional behaviour

It is a fact that the empowerment of survivors through psychosocial support services by social worker in the VFR and beyond is guided by the professional identity, which is shaped by its methods of practice, values, ethics, training and a growing body of scientific knowledge (Rautenbach, Maistry & Shokane, 2022). Social workers are functioning under the SASSP which hold them accountable in terms of ethics. According to Kirst-Ashman (2016) ethics involves principles that specify what is good and bad. The implied message is that ethics are guiding what must be done and what must not.

Social work as a profession is very much different from other professions as they (social workers) are legally accountable (Thompson, 2020). This means that they are accountable for their own actions. At the same time, they are also morally and professionally representing the organisations they are working for. Part of their statutory responsibility is that they investigate cases related to children, abuse of the elderly people, people with disabilities and others. Social workers also provide care and control services which entails protecting the wellbeing of the individuals including the community (Thompson, 2020). This responsibility is more about providing protection and psychosocial support services to the survivors of gender-based violence. Victims’ supporters are not capacitated to provide these services and therefore cannot be accountable for their behaviour (secondary victimisation) in the VFR.

Engage diversity and difference in practice

It has been found that social workers are working and respecting human diversity as they are guided by the South African Constitution. Engaging diversity in social work practice involves acknowledging, respecting, and valuing differences in race, ethnicity, culture, language, gender identity, sexual orientation, age, ability, socioeconomic status, religion, and spirituality (Kirst-Ashman, 2016; Beaumont, Kelly & Smith, 2021). It requires social workers to be aware of their own biases and assumptions, seek out education on cultural humility, and be willing to adapt their practice to meet the unique needs of each client. Engaging diversity is an ethical imperative and has been shown to lead to better outcomes for clients, including increased trust, improved communication, and greater client engagement in the helping process. Ultimately, social workers who engage diversity promote social justice and advance the well-being of all members of society.

Advancing human rights, social, economic, and environmental justice

Promoting social justice and challenging oppression is the role of a social worker (Sithole, 2018; Thompson, 2020). Sithole (2018: 05) further emphasises that the principles of social justice, human rights, collective responsibility, and respect for diversities are central to social work. Patel (2015); Cox et al., (2016) and Rautenbach et al., (2022) argue

that the services which social workers are rendering should be guided by the human rights approach which is embedded in the Chapter two (Bill of Rights) of the South African Constitution. The implied message is that the right-based approach is concerned with the human rights of all citizens and inclusive of meeting the needs of people, particularly those who are vulnerable and disadvantaged. In addition to the abovementioned function, Coulshed and Orme (2018) emphasise that people who are in crisis and struggling to cope with their challenges, are supported to see their way out and identify their strengths and successes out of their negative experiences. Victims of GBV are of course disadvantaged and therefore victimised, hence social workers are empowering them to be resilient in VFR and beyond. Victims' supporters are not able to advocate for the social justice of the oppressed and therefore cannot provide empowerment to the survivors of GBV.

Engagement in research informed practice and practice-informed research

One of the key areas of expertise in the helping professions, particularly in social work, is the engagement in practice-informed research. Kirst-Ashman (2016) and Pawar (2019) argue that social workers should acquire proficiency in research techniques to enhance the effectiveness of their practice. Moreover, social workers are expected to employ critical thinking to improve practice, policy, and service delivery, thereby rendering psychosocial support services to victims of GBV. It is crucial for social work practitioners to engage in both practice-informed research and research-informed practices, as these elements are integral to the profession. The literature supports the importance of developing research skills, staying updated with relevant academic literature, and employing critical thinking to ensure efficient policymaking, effective service delivery, and successful outcomes for clients. To develop the abovementioned services, it is essential for social work practitioners to develop masterful techniques in research inquiry (Kimball & Pendell, 2022). The body of academic literature relevant to social work has significantly expanded in recent years (Kirst-Ashman, 2016; Long, 2018; Prince, Ager, Weller & Bannister, 2019). Therefore, practitioners must remain abreast of cutting-edge advancements in the field to provide high-quality services (Long, 2018). In order to effectively achieve desired outcomes from both practice-informed research and research-informed practices, critical thinking is necessary to thoroughly scrutinize these approaches (Prince et al., 2019). Additionally, Pawar (2019) suggests that incorporating feedback from service users enhances user-centric processes, leading to overall benefits. Evidence-based practices have gained popularity as decision-making processes that integrate the best available methods supported by evidence-based treatments, while considering client preferences and prioritising professional expertise derived from relevant cases (Kimball & Pendell, 2022). This approach ensures that interventions and services are grounded in research findings and tailored to individual survivors needs.

Kirst-Ashman (2016); Long (2018) as well as Kimball and Pendell (2022) view engagement in research-informed practice and practice-informed research as vital for social work practitioners. By developing research skills, staying informed with current literature, and employing critical thinking, social workers can contribute to efficient policymaking, effective service delivery, and successful outcomes for clients. Therefore, it is crucial for social workers in VFR and beyond to remain up to date with advancements in the field and embrace evidence-based practices, to ensure that their interventions are evidence-informed, user-centric, and align with the expertise of the profession.

Engaging in policy practice

Policy practice plays a vital role in guiding social work professionals in their service delivery and decision-making processes. Kirst-Ashman (2016) as well as McNutt and Hoefler (2020) argue that a thorough understanding of social welfare policies, their historical context, and their impact on the helping professions is essential for social workers to be effective in their roles. Moreover, social workers are uniquely positioned to advocate for and influence policy changes to ensure social and economic justice for victims (Kirst-Ashman, 2016; McNutt & Hoefler, 2020). However, despite its significance, policy practice has been somewhat overlooked in social work curricula and practice, as noted by Hall and Hiteva (2020). This paper aims to emphasise the importance of policy practice, explore the challenges hindering its engagement, and underscore the need for greater attention to this area within social work education and practice.

Policy practice encompasses the guidance and procedures that inform the actions and decisions of social workers. It serves as a roadmap for effective service delivery and decision-making processes. While policy practice has gained some attention in recent social work debates, it remains relatively under-theorized (Becker, Bryman, & Ferguson, 2012; Kirst-Ashman, 2016; Hall & Hiteva, 2020; McNutt & Hoefler, 2020). The role of social work academics in the policy process has been examined in various countries, such as South Africa (Becker, Bryman, & Ferguson, 2012; Dlamini & Sewpaul, 2015; Finn, 2020). However, Finn (2020) argues that the actual participation of social workers in policy practice appears to be limited. Various factors contribute to this low engagement, including the lack of policy

practice competencies and specialised training, institutional or organisational influence, insufficient resources, and fear (Finn, 2020).

Social workers bear the responsibility of actively engaging with the political process, acting as advocates for marginalised populations, and empowering the powerless in society (Dlamini & Sewpaul, 2015). Advocacy for social justice is a central aspect of policy advocacy practice, aligning well with social policy and social welfare courses, where theoretical knowledge converges with practical skills development (McNutt & Hoefler, 2020). Recognising this, policy practice should be given increased attention within social work curricula and practice. It has been well established that from the literature, that policy practice is an integral component of social work practice, providing guidance for effective service delivery and decision-making. Nevertheless, policy has received limited attention in social work curricula and practice, as highlighted by Hall and Hiteva (2020). The literature further emphasises the importance of understanding social welfare policies, their historical context, and their impact on the helping professions for social workers to be effective in their roles. To address these issues, greater emphasis must be placed on policy practice within social work education and practice to empower social workers to advocate for social and economic justice. There is nowhere in the literature where victim supporters are linked with policy practice.

Engagement, assessment and intervention with individuals, families, groups, organisations, and communities.

Kirst-Ashman (2016) as well as Berg-Weger and Murugan (2022) are of the view that engagement is the initial period when social workers orientate themselves to the problem at hand and begin to establish communication and relationships with others also addressing the problem. At the same time, assessment is seen as the investigation of and determination of variables affecting an identified problem including the client system's needs and strengths (Kirst-Ashman, 2016; Berg-Weger, 2022). Berg-Weger (2022) emphasises that after the completion of assessment process, the social worker and the survivor start with the process of planning and carrying out the chosen intervention. According to Rautenbach et al., (2022), social workers use specific relevant theories to engage with, assess and plan specific treatment programmes, and render appropriate intervention services for empowerment purposes. To make empowerment process more comprehensive, strengths perspective can be used. Cox et al., (2016) as well as White (2021) support the abovementioned issue that as much as survivors are victimised, but they do have strengths which should be identified and used.

Gqgabi and Smith (2019) as well as McGovern et al., (2021) argue that psycho-social support services can take many forms- individual, couple or family counselling. It is well emphasised by Cox et al., (2016) as well as Aluh and Onu (2020) that psychosocial support is done at micro, mezzo and macro level even though in this instance the focus is on micro. Rautenbach et al., (2022) mention that when assessing the client to understand their situations/ challenges, multidimensional aspects that make up the client are critical. These multidimensional aspects can be broken down to ecological, spiritual, social, psychological, and biological dimensions (Rautenbach et al, 2022). As already highlighted, a survivor cannot be seen and treated as an individual, but their environments are also important. At the end of the service, the social worker must be able to evaluate the effectiveness and the accountability of the work done on the client (Rautenbach et al., 2022). The effectiveness of empowerment in this regard will be confirmed by the resiliency.

Evaluating practice with individuals, families, groups, organisations and communities.

The rendering of psychosocial services will not be complete without being evaluated. It is clearly indicated by Cox et al, (2016) and Payne (2020) that evaluation marks progress, provides insight into the success of intervention and inform future plans as well as aftercare activities. Evaluation also highlights what has or has not been accomplished (Cox et al., 2016: Dudley, 2020). Psychosocial services encompass the evaluation and treatment of individuals, families, groups, organizations, and communities. Evaluating the effectiveness of these services is vital to ensure that they adequately address the needs of those seeking assistance. Evaluations can cover various aspects, ranging from assessing the service's structure to evaluating the quality of life for service users and their families (Payne, 2020). Enhancing the evidence base for specific psychosocial interventions is an important goal, and this can be achieved by focusing on areas such as improved family functioning, addressing social, emotional, and appearance concerns, facilitating treatment decision-making, and screening for psychosocial and developmental issues (Payne, 2020).

Evaluating the effectiveness of psychosocial interventions in cases involving abused children and their families holds significant value as per (Kahan, Lamanna, Rajakulendran, Noble, & Stergiopoulos, 2020). Psychosocial support services present an opportunity for social workers to take the lead in implementing standardised assessments and interventions, fostering interdisciplinary collaboration, and providing follow-up care. These efforts contribute to the enhancement of holistic psychosocial services for survivors of GBV and their families (Bani-Fatemi, Malta, Noble,

Wang, Rajakulendran, Kahan, & Stergiopoulos, 2020). Interventions within psychosocial services can encompass various approaches, including behaviour analysis and therapy, individual psychotherapy or counselling, case management and care coordination, educational initiatives, supervision, working with couples, families, or small groups, advocacy, community practice, organizational management, and social policy evaluation (Kahan et al., 2020).

Initial assessments play a crucial role in gaining a comprehensive understanding of a client's circumstances, challenges, and strengths. These assessments inform subsequent actions and intervention plans (Saksvik, Faergestad, Fossum, Olaniyan, Indergård, & Karanika-Murray, 2018). Evaluating the impact of psychosocial work environment interventions is another important aspect, as it can lead to improved outcomes for employees and the organisation (Berg-Weger, 2022). Furthermore, Saksvik et al., (2018) argue that evaluating the effectiveness of psychosocial interventions is designed to enhance health outcomes in stroke survivors and their caregivers is of utmost importance.

Partnership in the provision of victim empowerment services in the VFR

GBV is a global phenomenon, which is also ranked as the second pandemic in South Africa by the President, but the literature is silent about who should render the containment role in the VFR in the Police Stations. It is articulated that victim empowerment services cannot be rendered by an individual's only, hence the promotion of partnerships in this field (Nel & van Wyk, 2013; Nkukwana, 2016). The partnership in this situation is formed by the DSD, which is the lead in the social issues, Health, South African Police Services, Justice and Constitutional Services, Basic Education, NPA, Correctional Services and CSOs. The DSD has been tasked with the mandate to coordinate these services. At the same time, since DSD is responsible for the social workers, it becomes clear that psycho-social support services to the survivors of GBV is rendered by the professional social workers. Due to the partnership in this field, CSOs also participate by providing the volunteers/ victim supporters to contain the survivors in the VFR, unfortunately they end up providing psychosocial support services.

Conclusion

In conclusion, GBV continues to be a significant problem in South Africa, and the provision of psycho-social support services to survivors is critical. The DSD has a critical role to play in this regard as it provides psychosocial support services to the survivors of GBV through professional social workers, with the support of social auxiliary workers. However, the involvement of victim supporters/volunteers in providing psycho-social support services has created confusion and ethical dilemma. It is essential that psycho-social support services are rendered by qualified professionals (social workers) to ensure that survivors of GBV receive the appropriate care and support that they need. The study highlights the need for the government to invest in training and capacity building for social workers to address the challenges of GBV. The findings of this study have significant implications for the provision of psycho-social support services to survivors of GBV in South Africa, and it is hoped that the social workers will contribute to the effective interventions and policies to address this critical social issue.

Recommendations

The following recommendations are made:

- ❖ The government should invest in training and capacity building for professional social workers to enhance their ability to provide psycho-social support services to survivors of GBV.
- ❖ The DSD should establish clear guidelines and protocols for the provision of psycho-social support services to GBV survivors to ensure that services are delivered by qualified professionals.
- ❖ CSOs should work in partnership with the DSD to ensure that psycho-social support services are provided by qualified professionals and to avoid role confusion and overlap.
- ❖ The SACSSP should develop and enforce ethical standards for the provision of psycho-social support services to GBV survivors to ensure that services are delivered in an ethical and responsible manner.
- ❖ The government should allocate adequate resources to address the problem of GBV, including funding for the provision of psycho-social support services, research and data collection, as well as the development of effective policies and interventions.
- ❖ Finally, it is essential to raise public awareness of the problem of GBV and the importance of providing psycho-social support services to survivors. This can be done through campaigns and educational programmes aimed at changing attitudes and behaviours towards GBV and promoting the importance of seeking help and support for the survivors.

References

1. Aluh, D. O., & Onu, J. U. (2020). The need for psychosocial support amid COVID-19 crises in Nigeria. *Psychological Trauma: Theory, Research, Practice, and Policy*, 12(5), 557.
2. Badger, K., & Royse, D. (2010). Helping others heal: burn survivors and peer support. *Social work in health care*, 49(1), 1-18.
3. Bani-Fatemi, A., Malta, M., Noble, A., Wang, W., Rajakulendran, T., Kahan, D., & Stergiopoulos, V. (2020). Supporting female survivors of gender-based violence experiencing homelessness: outcomes of a health promotion Psychoeducation group intervention. *Frontiers in psychiatry*, 11, 601540.
4. Beaumont, S., Kelly, S., & Smith, L. (2021). Defining, teaching, and practising diversity: Another hegemonic discourse? *Aotearoa New Zealand Social Work*, 33(3), 61-73.
5. Becker, S., Bryman, A., & Ferguson, H. (Eds.). (2012). *Understanding research for social policy and social work: themes, methods, and approaches*. policy press.
6. Coulshed, V., & Orme, J. (2018). *Social work practice*. Bloomsbury Publishing.
7. Dlamini, T.T.L. and Sewpaul, V., 2015. Rhetoric versus reality in social work practice: political, neoliberal and new managerial influences. *Social Work*, 51(4), pp.467-481.
8. Drobot, I. A. (2022). Do Engineers Need Intercultural Competence? In *Multiculturalism and Interculturalism*. Intech Open.
9. Dudley, J. R. (2020). *Social work evaluation: Enhancing what we do*. Oxford University Press, USA.
10. Finn, J. L. (2020). *Just practice: A social justice approach to social work*. Oxford University Press.
11. Gqgabi, R. B., & Smit, E. I. (2019). Psycho-Social Effects of Father–Daughter Incest: Views of South African Social Workers. *Journal of child sexual abuse*, 28(7), 840-859.
12. Hall, S. H., & Hiteva, R. (2020). *Engaging with Policy, Practice and Publics* (p. 186). Policy Press.
13. Kahan, D., Lamanna, D., Rajakulendran, T., Noble, A., & Stergiopoulos, V. (2020). Implementing a trauma-informed intervention for homeless female survivors of gender-based violence: Lessons learned in a large Canadian urban centre. *Health & Social Care in the Community*, 28(3), 823-832.
14. Kimball, E., & Pendell, K. (2022). Social Work Scholars Perceptions of Practice-Informed Research and Research Informed Practice. *Journal of Social Service Research*, 48(1), 87-97.
15. Kirst-Ashman, K. K. (2016). *Empowerment Series: Introduction to Social Work & Social Welfare: Critical Thinking Perspectives*. Cengage Learning.
16. Long, D. D. (2018). Practice-informed research: contemporary challenges and ethical decision-making. *Journal of Social Work Values and Ethics*, 15(2).
17. McGovern, W., Addison, M., & McGovern, R. (2021). An exploration of the psycho-social benefits of providing sponsorship and supporting others in traditional 12 step, self-help groups. *International Journal of Environmental Research and Public Health*, 18(5), 2208.
18. McNutt, J. G., & Hoefler, R. (2020). *Social welfare policy: Responding to a changing world*. Oxford University Press.
19. Molebatsi, K., Musindo, O., Ntlantsana, V., & Wambua, G. N. (2021). Mental health and psychosocial support during COVID-19: a review of health guidelines in sub-Saharan Africa. *Frontiers in Psychiatry*, 12, 571342.
20. Mooney, M., Tarrant, R., Paton, D., Johnston, D., & Johal, S. (2021). The school community contributes to how children cope effectively with a disaster. *Pastoral Care in Education*, 39(1), 24-47.
21. Nel, J. A., & Van Wyk, H. (2013). Victim empowerment in South Africa. *Victimology in South Africa*, 77-95.
22. Nkukwana, Z. W. (2016). *The Rights of Victims of Crime in South Africa* (Doctoral dissertation, Nelson Mandela Metropolitan University).
23. Pawar, M. (2019). Social work and social policy practice: Imperatives for political engagement. *The International Journal of Community and Social Development*, 1(1), 15-27.
24. Payne, M. (2020). *Modern social work theory*. Bloomsbury Publishing.
25. Pervova, I. L., Grigoreva, I. A., Kelasev, V. N., & Smirnova, A. N. (2016). Eligibility for social services: social policy development in an international context. *Sociologia, Problemas e Práticas*, (80), 145-171.
26. Prince, H., Ager, J., Weller, A., & Bannister, R. (2019). Research informed practice or practice informed research? Reflections on master's dissertation student journeys.
27. Roberts, M. (2020). *Victim-centred Prosecutions: Lessons for South Africa*.
28. Saksvik, P. Ø., Faergestad, M., Fossum, S., Olaniyan, O. S., Indergård, Ø., & Karanika-

29. Murray, M. (2018). An effect evaluation of the psychosocial work environment of a university unit after a successfully implemented employeeship program. *International Journal of Workplace Health Management*.
30. Thompson, N. (2020). *Understanding social work: Preparing for practice*. Bloomsbury Publishing.
31. White, M. A. (2021). Positive Professional practice: a strength-based reflective practice teaching model. In *The Palgrave handbook of positive education* (pp. 165-204). Cham: Springer International Publishing.