# NATIONAL ASSEMBLY

**FOR WRITTEN REPLY**

**QUESTION NO. 1281**

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**(INTERNAL QUESTION PAPER NO. 13)**

**Ms S J Graham (DA) to ask the Minister of Health:**

(1) With respect to the commitment of Government to address the scourge of gender-based violence, what (a) number of Thuthuzela Centres are located in each province, (b) number of hospitals do not have rape kits in each province and (c) are the reasons that the specified hospitals do not have rape kits;

(2) whether there is a prescribed number of rape kits required in each hospital; if not, what is the position in this regard; if so, what number is prescribed;

(3) whether hospital staff in emergency wards are trained in processing a rape victim; if not, why not; if so, what are the relevant details;

(4) whether hospitals are precluded from processing a rape victim if that person has not given a statement at a police station first; if not, what is the position in this regard; if so, what are the relevant details?

###### NW1474E

**REPLY:**

First and foremost, on the matter of handling of alleged rape cases, it must be borne in mind that the process of investigating the alleged rape must follow a specific and prescribed chain of evidence to ensure that medico-legally there is no compromise to the quality of evidence collected, thus protecting the victim when the evidence is before a court of law. Bearing this in mind, the response to this question is as follows:

1. (a) The total number of Thuthuzela care centres (TCCs) in the country is 55.

Eastern Cape: 9

Free State: 4

Gauteng: 7

KwaZulu Natal: 8

Limpopo: 7

Mpumalanga: 5

Northern Cape: 4

North West: 5

Western Cape: 6

1. Hospitals are not obligated to have rape kits as the Department of Health is not involved in the procurement and delivery of rape kits as procurement and delivery is the responsibility of the South African Police Service (SAPS). The SAPS brings these kits along to the Thuthuzela Care Centres (TCCs) as and when there is a sexual assault reported. Therefore the issue of keeping rape kits at health facilities only emanates where there is a discussion between the health facility and the SAPS station responsible.
2. Not applicable based on the response in 1(b).
3. There is no prescribed number of rape kits required in each hospital. The provision of rape kits is a competency of the SAPS. However as Department of Health we take Gender based violence very seriously and it is our duty to ensure that these rape kits are available at all times to execute evidence collection at our health facilities.

We are therefore working closely together with SAPS to ensure that rape kits are always available. These kits are then delivered to the health facilities by the SAPS, for collection of evidence by health professionals, during physical examination of the survivors of sexual violence. The evidence collected by health professional using these rape kits, is then taken by SAPS to the Police Forensic Laboratory for DNA analysis.

(3) Yes, hospital staff in emergency wards is trained in processing a rape victim.

The Department of health provides service at all hospitals to manage and process survivors of rape. This is done through:

* qualified clinical forensic nurses and doctors
* Ten (10) to more days training using the manual developed by the South African Medical Research Council, the content of which is highlighted below. if not, why not; if so, what are the relevant details;

Health professionals provide the following services to survivors of rape:

* physical examination,
* Collection of forensic evidence using J88 form. Medico-legal evidence comprises both documentation on the examination done and DNA evidence collected during the examination.
* in children, laboratory evidence of particular sexually transmitted infections can also be used as evidence.
* reporting child abuse, neglect and exploitation to Department of Social Development and SAPS where necessary.
* registration of women and children seen for sexual assaults at health facilities
* providing HIV testing and counselling, which includes providing post exposure prophylaxis
* provision of Prophylaxis (PEP) medication to survivors of rape; which should be available 24 hours a day and patients should be prioritised irrespective of the nature of physical injuries among others.
* provision of ccomfort packs for rape victims;
* referral of women and children to Department of Social Development in the instance their safety is at risk to ensure that they are provided a safe environment such as shelters.
* referral to Psychiatrists and Psychologist to manage emotional and psychological trauma.

(4) No, hospitals are not precluded from processing a rape survivor if that person has not given a statement at a police station first. Survivors of rape have a choice of which authority they wish to access first. We however have noted that majority of rape survivors access the health facility first before they report the matter to a police station and are not dismissed at all.

END.