



# SOPHIATOWN

COMMUNITY PSYCHOLOGICAL SERVICES

NPO 028-326 PBO 18/11/13/1278

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## ANNUAL REPORT 2018

### Chairperson's Report

Once again, the board and staff of Sophiatown Community Psychological Services invite our friends and supporters to join us in reflecting on the achievements of the organisation in 2018. We are very grateful to our funders whose generous support has allowed us to continue to reach out and offer services which give those in desperate need or distress the hope that transformation is possible.

As we enter into South Africa's 25<sup>th</sup> year of democracy, it is disappointing that so little has changed for the most vulnerable in our society. This has been our refrain for too many years. The end of the Zuma era in February 2018 brought hope that with the promise of a "new dawn," resources that have previously been stolen and squandered in corrupt dealings might be better distributed to those most in need. As 2018 drew to a close, while there were glimmers of hope that something might change, we were still in waiting for the "new dawn." The Sophiatown team has had to dig deep to continue doing the work they do when what they have had to confront in serving their clients seems to become heavier each year. To a large extent this has meant reconceptualising what they do. Johanna and the team looked at their work in 2018 as "Standing in for the Village." This was born out of the idea that communities are so broken that they no longer have the networks to care for each other. Parents and grandparents charged with raising the next generation are struggling with the effects of trauma brought on by war, illness and living with a lack of even the most basic resources.

Never afraid of a challenge, the Sophiatown team has indeed stood in for the village. As always I am inspired by their stories. People who were unable to care for themselves or leave their homes to receive much needed treatment are now feeling supported and cared for and have experienced improvements in their health. Parents and grandparents, struggling with their own trauma, have been able to confront their pasts and then deal with the task of parenting the next generation with hope and energy. Victims of war have found a safe space to share horrific and unthinkable stories.

Sophiatown has also always believed in the power of supporting other organisations as this creates a positive ripple effect in terms of strengthening the whole community of practice. The Siyabanakela programme has reached many healthcare workers whose lives have been

dramatically transformed. The Community of Practice Project has also continued to support other organisations and a highlight has been the introduction of Ethics Management into our own community and into the wider network of service providers. With the employment of a Legal and Advocacy officer in 2018, Sophiatown has been able to assist many clients in attending to overwhelming legal issues that allow them access to basic human rights and provide a basic sense of security to their everyday lives.

Thank you again to our funders, you have made so much possible. To Johanna and Mpumi, yet again, you have taken excellent care of the organisation's resources and the Sophiatown team. Thank you for your dedication and commitment. This year has not been an easy one as the team has also had their own personal struggles but, as always, you have taken this in your stride and navigated the storms. To the incredible Sophiatown team, you have continued to be beacons of hope to your clients. Thank you also to my fellow board members for your ongoing support and commitment to the organisation in so many ways.

Cathy Mollink  
Chairperson

Draft

# Director's Report

## *The Bigger Picture: A new dawn?*

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*The year's story will go down as one of hope that was hard-won,  
only to wane under the harsh reality of a New Dawn's burning  
sunlight<sup>1</sup>*

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A year ago, we spoke rather hopefully of “the winds of change” rising with the resignation of then President Jacob Zuma, and the appointment of Cyril Ramaphosa as the new leader in the run up to the much awaited 2019 election.

For many South Africans the change of president brought new glimmers of hope. Although the new presidency has been handed what many call a “poisoned chalice”; although the political leadership remains characterized by deep fractures and infighting; and although the country has entered an economic recession with rising rates of unemployment, the initial euphoria, dimmed as it may be, has not been completely extinguished.

In 2018 four commissions of inquiry were set up to probe in detail into the darkest shadows of the post-apartheid era. The evidence of systemic looting of the country's resources continues to shock as it emerges day after day, and many are holding their breath in anticipation of justice following the truths that are for the first time seeing the light of day. While it is unlikely at this stage that there will be judicial prosecutions on the scale called for, it can be argued that the truth, once it has been uncovered can never be buried again.

However, the truth is also that while the new presidency seems committed to exposing the truth of nine looted years, ordinary citizens continue to confront the impact of stolen resources and opportunities in their daily struggles- and none more than the poor and marginalized families and communities the Sophiatown team work with. These are some of the examples:

- The expanded unemployment rate stands at 37% with the associated quality of life score being lowest for the Black population group.<sup>2</sup>
- The education system continues to fail young people. According to a 2017 report, 40.5% of learners drop out of school before Grade 12 in Gauteng<sup>3</sup>, while another found that 51% of young people between the ages of 20 and 24 are unemployed and not in any education or training.<sup>4</sup>

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<sup>1</sup> <https://www.thesouthafrican.com/news/south-africa-politics-2018-review/>

<sup>2</sup> Free Facts: SAIRR No8/2018

<sup>3</sup> <https://businesstech.co.za/news/general/149291/shocking-drop-out-rates-where-in-south-africa-the-fewest-kids-make-it-to-matric/>

<sup>4</sup> <http://theconversation.com/how-corruption-is-fraying-south-africas-social-and-economic-fabric-80690>

- Although the prevalence of substance abuse is disputed among researchers, there is no doubt that drug abuse thrives in communities deprived of resources and opportunities. In 2018, the community of Westbury, adjacent to our centre in Sophiatown, made headlines when community protests against police collusion with drug lords turned violent. It has been argued that solutions to this problems are being hampered by pervasive corruption and the lack of political will.
- Poverty and the absence of meaningful opportunities makes young girls especially vulnerable to sexual exploitation (with all its attendant risks) by older men; while boys tend to be drawn to criminal activities, often related to gangs.
- The health system is failing with many people in desperate need of treatment having to wait long periods of time for life saving interventions, because equipment such as radiation machines are either not available or have become defunct because of lack of maintenance. Perhaps even more seriously, a shortage of second and third line anti-retrovirals in the country led to HIV+ patients being turned away from local clinics, a crisis which has been firmly placed at the door of the provincial and national departments of health.<sup>5</sup>
- Despite decades of civil society activism aimed at improving women's and children's access to protection from abuse, sexual violence and discrimination, their rights continue to be violated at every level- from the first report at the police station to the indifference of social workers tasked with the protection of children, to the secondary traumatization at the courts.
- For many ordinary citizens, and even more so for foreign nationals, the only way to access services is through bribery. Like their leaders in the top echelons of government, small public servants in schools, police stations, health care facilities, and home affairs offices have become gate keepers controlling access to constitutionally mandated free services through the demand for money.
- Whenever a population is dissatisfied with the actions of its ruling class, its anger tends to get directed not at the top but at the bottom. It should therefore not surprise us that there is a strong anti-migrant sentiment in the country (further fuelled by the global emergence of nationalism) and that foreigners are accused of stealing jobs, resources and opportunities from South Africans who have fought long and hard for their political rights but have not yet been accorded economic rights. Anti-migrant discourse is firmly entrenched on the streets and in public institutions, often giving rise to violent attacks and denying those who have fled war, poverty, torture or persecution in their own countries, not only their human rights, but their human status.

In January 2019 the Sophiatown team came together for its annual meeting to review the year 2018 and to plan for the year ahead. The achievements of the year, its disappointments, its joys, its sadnesses, its celebrations and its failures all found their way in paint and markers onto a huge piece of paper spread on the floor. And when we stood back to look at what we have collectively done with whatever the year had presented us with, we saw that the failures, the frustrations and the disappointments were largely rooted in the macro economic and political systems, over which neither we nor the people we serve have

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<sup>5</sup> <https://www.health24.com/News/nationwide-arv-shortages-is-south-africa-heading-for-disaster-20181012>

any control. The global anti-migrant sentiment expressed so crudely in Trump's Wall, the political turmoil in Zimbabwe and the DRC, and our own looted economy ultimately find their way into the very intimate realities of families, trailing in their wake an accumulation of trauma and distress which gets carried from one generation into the next.

The achievements, the joys, and the celebrations on the other hand were clearly rooted in the resilience of the human spirit and the power of authentic and caring relationships. We hope that this report will give credit not only to the work done by the Sophiatown team, but also to the deep need within each individual, each family and each community to have their stories heard, their suffering witnessed and their dignity and humanity affirmed.

## ***The Sophiatown West Counselling Programme: Breaking the Cycle of Brokenness***

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*We are working with broken parents, who have had broken childhoods, and are raising broken children (Helga Tshabalala)*

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The theme of intergenerational brokenness pervades the work of the counselling team based in the Westdene centre and reaching out to the surrounding communities, including the impoverished townships of Noordgesig and Mzimhlophe. 374 clients were seen in 2018, of which 109 were children and adolescents. The most common reasons for adults (70% of these women and mothers) seeking help were, as in previous years, the symptoms of this brokenness: domestic and intimate partner violence; sexual abuse; conflicts around the "family house"; and the premature loss of loved ones due to violence, HIV/AIDS, and/or poverty-related illness. Underlying these problems were almost inevitably stories of childhood trauma in the form of abuse, neglect, and the absence or loss of consistent and nurturing primary caregivers. Most of the children seen, presented with behavioural problems related again to poor, absent, or abusive parenting and the general lack of social support in their immediate environment. Anger and grief, the twins of depression and despair filled the counselling space, and having finally found expression in words, images, and metaphors, gave rise to hope and the courage to start again.

Whether in group or individual sessions, the most powerful tool at the disposal of counsellors is that of listening. Being fully present and attentive to people's narratives of suffering, and affirming resilience and agency helps them to reclaim their dignity and agency. Often the more deprived clients have been of the opportunities to be heard throughout their lives, the more dramatic their healing journey.

Lindiwe's story

*Lindiwe is 41 year old mother of two teenage daughters. When she first arrived she was suicidal, complaining mainly of conflict within the family and a difficult and tense relationship with her daughters. Lindiwe is HIV+ and on anti-retroviral treatment. In the course of the six sessions it emerged that she herself had a lot of unprocessed childhood trauma related to an abusive father and a divided family. Her own partner has a long history of infidelity and she seemed to have little or no control over the behaviour of her daughters, both of whom had dropped out of school. Things came to a head when she found out that her younger daughter was pregnant and also HIV+. This led to Lindiwe taking an overdose of ARVs in an apparent suicide attempt.*

*Although Lindiwe was only seen for six sessions, there were such remarkable changes that she felt ready to terminate counselling and get on with her life. While she initially cried uncontrollably, being listened to helped her to move away from the role of victim and take more active responsibility for her life. She reclaimed her will to live and took action to move into a shack of her own. She saved up some money for stock and started a small business. Moreover, Lindiwe took action to get support for her pregnant daughter. She reported that she was able to talk more openly to her children and that this was gradually bringing them closer together.*

While individual counselling can be very helpful in helping people uncover their deepest wounds within the safety of a warm and trusting relationship, groups provide another very powerful channel for healing, especially for people who feel isolated and stigmatized in their own families and communities. In 2018, the following groups met regularly throughout the year, most on a weekly basis:

- The Sivuyile group for children who have lost their parents
- The Boys Lekgotla for teenage boys struggling with conflicted messages about masculinity and adulthood in the absence of positive male role models
- The Girls Lekgotla for teenage girls confronted with persistent gender stereotypes, and the ever present threat of gender violence
- The Leseding group for adults living with HIV in communities in which the disease remains highly stigmatizing
- The Thandanani group for grandmothers caring for grandchildren whose own parents have either died or are physically or emotionally absent
- The Parenting Programme which encourages parents to confront their own childhood wounds and to become more present for their children

*In this group I learnt that it is not my fault that my father died... and to always speak to someone when something is bothering me (Sivuyile child)*

## *Siyalalela: Listening to Save Lives*

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*This woman is very frail and very weak and very scared and very lonely. Scared of illness and dying alone, though she has a large family and kids somewhere (Valerie van Wyk)*

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The Siyalalela programme offers emotional homebased care to people living with HIV in extremely impoverished communities. The figures that have emerged from the reports of the community workers who regularly visit people living with HIV in their homes speak volumes of the state of HIV in the country.

90% of the clients who allow the community workers into their intimate spaces are middle-aged and older women (the average age being 47 years). All these clients are living under conditions of extreme poverty, mostly in informal shack settlements. 95% of the clients experienced social exclusion and stigmatization which they attributed to their HIV status. 65% of the clients revealed childhood histories of abuse and neglect, the trauma of which still pursued them into adulthood. 38% of clients had little or no contact with extended family support systems and almost all were consumed by the fear of illness or death, not surprising as 65% had recently witnessed the deaths of close loved ones. The vast majority of the clients did not have disability grants or were still struggling with the process of applying for them.

The impact of emotional presence and listening is once again evident in the changes we observe in the individuals and families the community workers engage with in shacks, in dusty alleys and around communal taps: people who had given up all hope start taking pride in their appearance; resume the daily tasks of taking care of their homes and children as well as improved compliance with medication; adherence to clinic appointments; more openness to accept help from others; and active efforts to improve livelihood and to move away from abusive relationships.

*31 year old Norah is the mother of 4 children, aged 12, 8, 5, and 1. Her partner and her baby are positive. The child support grants for her children were stopped and she had lost the documents needed for them to be reinstated, which also meant that both she and the baby could not access treatment at the local clinic. After 5 home visits Norah has stopped drinking, found the missing documents, resumed treatment for herself and the baby, and is in the process of re-applying for child support grants for the other children.*

## *Children and Families on the Move: You are welcome*

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*Hope means knowing that things can get better (Umoja group member)*

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The counselling team based in Bertrams has continued to welcome children and families whose existence, not unlike those affected by HIV, continues to be highly stigmatized. A

total of 510 clients were seen in 2018, more than a third of these being children and adolescents. The Bertrams centre serves the impoverished communities of Bertrams, Yeoville, Hillbrow and surrounding neighbourhoods, all of whom accommodate high densities of migrants and asylum-seekers, as well as South Africans coming from rural areas in the hope of finding work in the big city. The majority of the clients seen by the team continue to come from the DRC, many carrying the heavy burdens of trauma related to war, rape, torture, and persecution, in addition to the ongoing poverty, harassment and social exclusion they have to contend with in South Africa, the country they were hoping would offer them much needed protection and refuge. Over 50% of the clients seen had lost a loved one in the recent past, 60% had been forcibly separated from loved ones, and over a third of the women seen had been abandoned by their partners and left to fend for themselves and their children on their own. It is therefore not surprising that traumatic stress and depression are the most prevalent symptoms paralyzing the ability of families to cope with the very severe daily stressors of securing food and accommodation, and accessing documentation as well as health, education, protection and other services. As can be expected, many of the clients have lost all sense of dignity and agency by the time they drift into the centre, most often on the advice of neighbours who have benefitted from the service before.

Hunger, homelessness and the never-ending quest for legal document remain the most pressing issues driving families to seek help at the Bertrams Centre. When asked about expectations of support the response is often: "Anything, anything you can do for me and my children." While some families turn away in frustration when they find out that this is a counselling and not a humanitarian aid service, most do in fact stay and take up counselling.

The employment in 2018 of a Legal and Advocacy Officer has made it possible for clients who take up counselling also to get their legal issues attended to, while short-term material assistance is available for extreme emergencies.

Given the many layers of problems facing families in these communities, the relevance of counselling may well be questioned. And yet in the absence of services addressing primary needs we continue to be amazed at the power of listening and emotional presence. Most obvious is the extent to which symptoms of anxiety, depression and traumatic stress diminish over time. This results in more energy being available to set up income-generating activities, to re-connect with loved ones, to build social networks, and for mothers and caregivers most importantly to be more present and responsive to the needs of their children.

Groups continue to be the most powerful tools through which women especially begin to connect with each other, often having to traverse emotional barriers related to ethnic and political conflicts which have caused great trauma in the past. Children too benefit from the opportunity to share experiences, and support each other through the daily harassment they face in schools, in shared residences and on the street. In 2018, the following groups were run:

- ❖ The Suitcase Group for migrant and refugee children who have recently arrived in the country
- ❖ The Born-to-Rise group for migrant and South African teenagers
- ❖ The Umoja group for traumatized migrant women
- ❖ The Parent Lekgotla for caregivers who have to raise children in contexts very different from their own childhood experiences

- ❖ Bertrams for Change for children who congregate in the local park once a week
- ❖ A story-telling holiday programme for primary school children
- ❖ A story-telling holiday programme for teenagers

*I love my mother and my father. When I was still with my father we had a good life.*

*My father had two companies and he was a rich man. We had houses and cars. My father used to give us everything we wanted. We went to a nice school. We used to go on outings as a family. Every time we went out he would tell us how much he loves us.*

*I will never forget that.*

*Before he died he called my mother and told her to fetch my older sister from school.*

*When my mom was trying to leave, she saw the soldiers in front of our door. She ran back into the house and took us, and some of our stuff (but not everything), and we ran away.*

*When the soldiers broke in, they found no one.*

*I will never forget this.*

## ***Khula Nathi: Grow with Us, Stay with Us***

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*There is always beer in the fridge, but never any bread (Khula Nathi teenager)*

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This project was started in 2015 as an educational enrichment programme for 13 children affected by HIV/AIDS. When the programme was reviewed at the end of 2017 it was clear that we had reached the limits of what could be done in this regard, given the lack of formal remedial or special educational facilities which most of the children needed. However, in the course of the three years more and more psycho-social problems had emerged from the team's interactions with the children and their families. In 2018 the focus of the interventions shifted to immediate and/or extended family systems and the multiple layers of distress and trauma which impact on families as a whole and the young people growing up within them.

This work has become much more intense as one home visit after the other the complexities of family narratives emerge. The culture of the "family house", a legacy of apartheid and the continued lack of income and housing forces adult children to live with their children and elderly parents in the confined spaces of the family home-bringing into the space all the other poverty and disempowerment related problems: alcoholism, drug abuse, multiple sexual partners and domestic violence; all posing additional risk to already very vulnerable children. In many cases, the homes are run by women but ruled by a patriarchal figure who due to a direct lineage to the original male owner of the house, can exercise absolute authority over them.

Interventions to date have included efforts to re-connect children with absent fathers; liaison with schools, and other service providers in the community to ensure that families can access as comprehensive a package of services as possible; and the integration of parents and children into existing therapeutic and/or counselling programmes. One success story has been that all the older children in the extended programme have attended a week long life skills camp run by a partner organization and most continue to participate in local weekly kids clubs. One boy with a serious drug problem has been referred into rehab and so far, has not relapsed. Support was also secured from several organizations and the school for a 15 year old girl who had fallen pregnant and dropped out of school.

In the inner city, the Khula Nathi focus remains on educational support for migrant and refugee children. They are the children of parents who are already in individual and/or group therapy, and most have also been integrated into the organization's other psycho-social support programmes, in particular the Suitcase and Born-to-Rise groups and the various holiday programmes. The Study Buddy homework support group on Saturdays was attended regularly by 26 children, while 7 children with cognitive and social barriers to learning were assisted by a remedial teacher once a week. Five of these children have been able to master the basics of numeracy and literacy and are coping with classroom demands, albeit at a much lower level than their peers. Two have been assessed and have been referred for special education.

## *Siyabanakekela: I am here-I matter-I know what I want*

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*Transformation is the face of a woman who did not know who she was and did not believe in her own worth and her purpose in life; who now stands firmly in the world with a sense of her own wholeness, with purpose and with determination (Mpumi Zondi)*

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Siyabanakekela (Strengthening the Wounded Carer) is a "training for transformation" programme which reaches out to community health workers, residential and community childcare workers, as well as community activists, most of whom work in the communities in which they live and carry huge burdens of care not only in their work contexts but also in their personal lives. The working conditions of these carers are extremely poor. Community health- and child-care workers rely on government stipends which are notoriously unreliable, and fall way beyond the minimum wage recently regulated by law. Carers working in residential care settings work in shifts which means that their own children are often left uncared for lengthy periods of time. There are few, if any spaces, for carers to debrief, to unpack and attend to their own emotional needs, to examine the impact of their own childhood and current traumas on their ability to care for others, and to look beyond the immediacy of the moment into a future they may desire for themselves and their children.

In 2018, the programme reached a total of 189 carers in various settings, and worked extensively and intensively with four organizations as well as community health workers loosely attached to a local clinic in the south of Johannesburg.

- A community-based organization situated in a densely populated southern suburb of Johannesburg, which provides homebased care services to elderly and chronically ill people
- A community-based organization offering a range of support services to children affected by HIV/AIDS in Orlando East
- A local children's home in Johannesburg which cares for a total of 60 children
- A local shelter caring for up to 48 migrant mothers and their children in the centre of Johannesburg
- 37 community healthcare workers linked to a clinic in an impoverished community south of Johannesburg

The work with carers in all these organizations is long-term and in most cases stretches over a period of three years, with monthly all day sessions. Wherever possible sessions are also offered to supervisors and managers, often ending with much needed mediation processes. While the stated aim of the project is to help carers to reflect on their own woundedness, and to develop a capacity for self-reflection and self-care, so that they can provide better quality services to their clients, the transformation we have witnessed has often been way beyond expectation. This is particularly the case with the 37 community healthcare workers who have met regularly for the past three years, have reached deeply into hurts and traumas and for the first time have made opened their hearts and souls to others.

When they first came into the programme, these carers had little, if any, vision for themselves or their lives beyond the constraints of their R2 500 stipend and the demands of their immediate environment. By the end of the three years, most of the younger ones have enrolled for degrees or diplomas, and are speaking a very different language about themselves, their past, their present and their future. The older participants too have made dramatic changes to their intimate relationships, and found additional income-generating activities which made it possible for them to make sure that their children are able to access tertiary education.

*I always thought I had all the time in the world to have fun. I wanted to enjoy myself, look nice and make sure my children look nice. I never thought about the future. I lived for the moment. These sessions bought back the dreams I used to have when I was younger. I reconnected with myself. I learnt to save money for a bigger purpose. The dream of studying law was rekindled. Things changed in my tripe-selling business and I started saving money for my education and investing in stokvels. I have since applied to study law through UNISA. I have learnt that I matter and that I should know what I want. I have also learnt to assert myself with my partner. I have told him that if he doesn't improve himself and step up, I am going to the next stage of my life without him.*

The highlight of the year was the launch of the book "Strengthening the Wounded Carer", authored by Mpumi Zondi, Sophiatown's Clinical Director who runs the Siyabanakekela programme. All carers currently in the programme were the first to receive the book and all attended the launch, celebrating the fact that their voices had finally been heard and amplified to the world.

*They could not stop speaking about the day. They felt good that they, and not the managers, were the guest of honour. They spoke about the kindness with which they were received, the tea, the programme. They felt loved. They have framed the invitations. They felt so special: "We are known."*

## ***Sustaining our Community of Practice: What is mine to lead?***

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*So we did not change the world.....Why then am I still here?  
(Conversation in the Directors' Circle)*

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Sustaining our Community of Practice is a programme which recognizes the interdependence of organizations rendering services to the most vulnerable sectors of our society and continues to evolve in response to the needs of NPO leaders who are having to navigate the terrain of visionary leadership and day-to-day management, in a very difficult political and economic climate.

The programme in 2018 spanned a range of activities aimed at supporting leaders and organizations. These include:

- ❖ The monthly Director's Circle which meets monthly and provides a space for directors and other organizational leaders to debrief and to reflect deeply on the leadership challenges of our time was attended by 21 leaders
- ❖ 14 coaching sessions for individual leaders
- ❖ 20 organizational debriefing sessions to help teams through difficult challenges
- ❖ 6 team processes to deal with difficult internal dynamics
- ❖ The annual three-day leadership in December in which 14 leaders participated

A new development in 2018 has been the introduction of Organizational Ethics into the discourse of the existing Community of Practice. The aim of this project is to promote ethics awareness, to advance mastery of skills related to ethics management, and to entrench the importance of ethics management as an organizational function.

Sophiatown Community Psychological Services was the first to submit itself to an ethics audit, conducted by an accredited Ethics Officer. In October 2018 Sophiatown convened the first ethics event on the occasion of International Ethics Day. This was attended by more than 50 leaders and representatives of local organizations and focused on three themes:

- ❖ Duty of Care: the cornerstone of NPO integrity
- ❖ Safe working spaces: Sexual harassment an absolute NO
- ❖ Funding Relationships with Integrity

This event was followed in November by the first Ethics Café for which 20 NPO practitioners came together to unpack and debate ethical issues around the theme of "The Randomness of Justice."

*Our intentions for 2019 are to continue working at coordinating and creating opportunities within the wider Johannesburg NGO sector for leaders to be supported in their leadership journeys. We believe that a network of leaders - in which we encourage our own and one another's independence and need to belong, sense of agency to do our leadership work smartly, being present to our own and others' humanness - contributes to sustaining our community of practice.*

*This leadership support initiative is coordinated by Sophiatown Community Psychological Services. However, it belongs to all of us. Together, we are building a leadership community in which each leader's voice, need and contributions matter (Zelda Kruger)*

## **Advocacy: The right to dignity**

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*Advocacy is about active witnessing, listening beyond the content of the story and the feelings which restrict it to the realms of personal tragedy. Advocacy is about listening to the intent of the story-teller, who consciously or not, wants us to see the social injustice hiding behind individual distress, to raise our collective voice in outrage, and to mobilize collective action (Johanna Kistner)*

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Although Sophiatown is not an advocacy organization, we are witness to the profoundly distressing and traumatic effects of the human rights violations our clients experience on a daily basis. The stories of children who continue to be returned into the care of their abusers by indifferent social workers; of families ruthlessly exploited by illegal landlords; and of desperate asylum-seekers taunted and humiliated at Refugee Reception Offices, hospitals and schools all converge into the narrative of a country that is failing its constitutional mandate to serve, protect and care for "all who live in it."

In 2018 the organization was finally able to employ a Legal and Advocacy Officer to take on the task of working with other organizations around advocacy issues as they relate to the daily realities of the people we collectively serve. The main vehicle is the Psycho-Social Rights Forum which is convened and hosted by Sophiatown. Over the past year, this Forum has grown in the number of organizations (now a total of 10) actively contributing their ideas, experiences, and resources to various advocacy activities- including a health indaba convened in November to begin to address the problems both poor South Africans and foreign nationals experience in an increasingly under-resourced and dysfunctional health system. Task teams have been set up to deal with the specific problems related to health, education, documentation, and livelihood.

Various members of the Forum have made submissions to policy makers which other members endorsed - the most recent one being the submission on the Home Affairs White Paper which effectively proposes the establishment of camps and refugee reception offices at border points without making any reference to how families and children in these camps will be cared for. Sophiatown has also contributed to a range of community events, workshops and dialogues concerned with migrant and refugee issues.

Advocacy also takes place on a case by case basis through interventions when schools, clinics, hospitals, police stations, social service centres, or Home Affairs offices refuse to provide access to the basic services enshrined in the Constitution. 54 families were offered legal consultation and/or assisted with their rights to documentation and other basic services. In most cases these involve long-term legal and advocacy processes. Legal submissions the Refugee Status Determination Office, the Standing Committee for Refugee Affairs and the Refugee Appeal Board were made on behalf of 16 clients.

A monthly case conference was set up in 2018 to address the very practical problems of getting children in need of care and protection placed in alternative care. The case conference reviewed the cases of 30 children who were either placed in care during the course of the year, were in care but required legal and other services and/or were assessed for reunification with their families.

## *Thank you*

It has been another challenging, and at times difficult and traumatic year. Once again, we need to thank all our partners and friends for standing with us.

As we witness the resources diminishing in the sector, and the ever present indifference or even disdain of state departments tasked with ensuring that people have access to essential services, we are acutely aware of the emotional burdens leaders and their teams carry as they do the best they can to continue serving individuals, groups and communities in distress. We are deeply appreciative of the relationships of support and care that have been built in our Community of Practice, and regardless of what the “new dawn” may bring we know that most of us are here to stay.

Sophiatown’s own team has suffered profound personal grief and trauma in the past year. We continuously need to remind ourselves that we too are part of the community we serve, and that we are not immune to death, violence, or disease in our own lives. This means that caring for and supporting each other is as important as caring and supporting those who come to us for help. Each team member plays an important role in sustaining and enriching the fabric of the organization and its ability to be meaningfully present for others. This includes the members of our Board who not only continue to perform the much-needed oversight function, but are always ready to advise, assist and offer practical presence in times of crisis.

Finally, there are the partners beyond our borders, whose interest in the country, the city and the organization extend beyond budgets and financial accountability into real and meaningful dialogue and the shared commitment to sustain services in a very difficult global political and economic climate.

We are all wounded carers, in need of strengthening each other so that the world can become a better place.

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*Together we are here. Together we matter. Together we know what we want.*

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# Financial Report

Draft