Letter of corrections/additions, based on examiners comments for MSc Research Report entitled:

*An Examination of the benefit of the sexual assault care and practice (SACP) Programme in Gauteng, South Africa*

March 18 2011

Dear Professor Dhai,

Kindly receive the list of corrections I have made to my research report following the comments/suggestions of examiners.

Yours sincerely,

Ms. Claire Mooideen
Student number: **W0454770**

Examiner 1 said this:

**EXAMINER’S COMMENTS : MSc RESEARCH REPORT**

Student : C MOOIDEEN   Ref no. 0516245N

*Title: “An examination of the benefit of a Sexual Assault Care and Practice (SACP) Programme in Gauteng, South Africa on service provision for sexual assault clients.”*

The candidate presents a good review well presented of the subject studied. There is adequate background information and a literature review. The report provides narrative and research findings to illustrate the conclusions and findings. The candidate’s involvement and participation over an extended period of time provides valuable input into an interesting approach to the research topic.

Thus there are no corrections required by this examiner.

However examiner 2 requested corrections. See:
Comments on the research report entitled: *An examination of the benefit of the sexual assault care and practice (SACP) programme in Gauteng, South Africa*

The report presents both a reflection of health care practice following sexual assault and the results from a survey of participants on the SACP programme in Gauteng province.

**Overall comments:** The reflective component of the report is well-written. The topic is interesting and relevant.

Some areas of the report need to be revised or amended. The discussion section needs to integrate the first four chapters of the report. There should be a discussion based on the reflective part of the report and the empirical part. The linkages between the sections of the report are not very clear.

The concepts of forensic nursing and sexual assault care provision are used interchangeably. While these are overlapping disciplines, they are not the same thing. For example, chapter 1 may be more usefully framed as a brief history of sexual assault care nursing – this can link to Virgin Lynch’s initiative and also include discussion of the SANE (sexual assault nurse examiner) initiatives in the US and Canada. There is quite a bit of data on this and conceptually it will keep the report more focused on sexual assault care by nurses rather than on forensic nursing which is a much bigger discipline. If the framing of forensic training is retained for Chapter 3 it would require presentation of the University of Free State post-graduate forensic nurse training and the training for doctors through the College of Medicine. These additions would not be necessary if the heading of Chapter 3 was changed to Sexual Assault Care Training for Nurses in South Africa. The link to forensic nursing can still be made but the focus should be specifically on sexual assault care training.

Clear links between the reflective and empirical components need to be made. One link between the reflective component and the empirical component would be to discuss the fact that the Deputy Director who initiated the training was one of the first cohorts of nurses trained by Dr. Els in Kimberley.

**Chapter 2:**
There are many references that need to be drawn on for this chapter. For example, there is a need to refer to the report Vettor, L., Jewkes, R., Sigsworth, R., Christofides, N., Loots, L. and Dunseith, O. 2008. *Tracking Justice: The Attrition of Rape Cases Through the Criminal Justice System in Gauteng.* Johannesburg: Tshwane Legal Advocacy Centre, the South African Medical Research Council and the Centre for the Study of Violence and Reconciliation. This report is available online and was available at the time of compiling the MSc Med report. There is also a peer-reviewed article based on the Tracking Justice report. The Tracking Justice report provides a recent and more accurate account of what happens to cases of rape reported to the police after they enter the criminal justice sector. It is important to present the existing data on the prevalence of rape in South Africa – in addition to police statistics. There is data from Jewkes et al. 2001 (Social Science and Medicine).

And continued:
Chapter 4:
Section 4.2 needs to give a description of who the training was aimed at, and how often trainings were held up to that point. I think it was twice a year.

Objectives:
Results have not been presented for objective 2, 4 or 5. These objectives need to be dropped or results need to be presented. Without these objectives, the empirical component of the study is very limited.

Results:
The format of the results section needs to be improved. Table headings should be placed above tables and the headings for figures should be placed below the figure. The number of respondents per row needs to be added to the tables in addition to the percentages. This is particularly important since the N=17. Where percentages are used in the text, number can be added in brackets. The response rate needs to be presented at the beginning of the results section. This was not much lower than would be anticipated from self-administered questionnaires (this can be discussed in the limitation section). Given the small sample size, it is adequate to present merely descriptive findings.

Discussion:
Currently the discussion merely addresses the limitations of the study. While this is important, the actual results need to be discussed. I also believe that the Discussion should be a separate chapter that integrates some of the empirical study findings together with the reflective components presented in Chapters 1-3. A critique of the training is warranted – although given the low response rate this critique should not be overly based on the study results. For example the training was very didactic in nature and did not draw on adult education methods. Having multiple facilitators who were not part of the conceptualization of the training could impact on how systematically concepts are addressed. Selection of participants to attend the course and post-training deployment could have an influence on whether training is implemented. Future directions or recommendations would be a useful addition to this report.

Following from a close reading of this report the corrections have duly been inserted in the text on the pages numbers as noted below.

Thank you for your kind assistance

Yours sincerely,

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Claire Mooideen
18 March 2011
## Detailed Candidate Report

### Overall

**Examiner’s comment:** The discussion section needs to integrate the first four chapters. There should be a discussion based on the reflective part of the report and the empirical part. The linkages between the sections of the report are not very clear.

**Thank you for your comment. I have reworked the discussion section to link both the reflective and empirical sections of the research report. See pages 55 to 57.**

### Throughout—especially chap 1 and 2

**Examiner’s comment:** The concepts of forensic nursing and sexual assault care provision are used interchangeably. While these are overlapping disciplines, they are not the same thing. For example Chapter I may be more usefully framed as a brief history of sexual assault care nursing- this can link to Virginia Lynch’s initiatives and also include discussion on the Sexual Assault Nurse Examiner (SANE) initiatives in the US & Canada. There is quite a bit of data on this and conceptually it will keep the report more focused on sexual assault care by nurses rather than forensic nursing which is a much bigger discipline.

**Thank you for your comment. I have made the recommended changes concerning chapter title changes, the link to sexual assault nursing and to the work of Prof. Lynch. Please see changes made on pages 14, 14-16, and 29.**

### Chapter 3

**Examiner’s comment:** If the framing of forensic nursing for Chapter 3 if retained it would require presentation of the University of the Free State post graduate forensic nurse training and the training of doctors through the College of Medicine

These additions would not be necessary if the heading of Chapter 3 was changed to Sexual Assault Care Training for Nurse’s in South Africa.

The link to forensic nursing can still be made but the focus should be specifically on Sexual Assault Care Training.

**Thank you for your comment. I have made the recommended changes on pages 14-17, 22, 26, 27, 28 and 38-57.**

### Throughout

**Examiner’s comment:** Clear links between the reflective and empirical components need to be made. One link between the reflective and empirical components would be to discuss the fact that the Deputy Director who initiated the training was one of the first cohorts of nurses trained by Dr Els in Kimberley.

**Thank you for your suggestion. Whilst I had included a discussion of the role of Dr Els, I have expanded this as reflected in my changes on pages 29-36.**
### Chapters 1 and 2

**Examiner’s comment:**

There are many references that need to be drawn on for this chapter. For example, there is a need to refer to the report Vetten, L., Jewkes, R., Sigsworth, R., Christofides, N., Loots, L. and Dunseith, O. 2008. *Tracking Justice: The Attrition of Rape Cases Through the Criminal Justice System in Gauteng*. Johannesburg: Tshwaranang Legal Advocacy Centre, the South African Medical Research Council and the Centre for the Study of Violence and Reconciliation. This report is available online and was available at the time of compiling the MSc Med report. There is also a peer-reviewed article based on the Tracking Justice report. The Tracking Justice report provides a recent and more accurate account of what happens to cases of rape reported to the police after they enter the criminal justice sector. It is important to present the existing data on the prevalence of rape in South Africa – in addition to police statistics. There is data from Jewkes et al. 2001 (*Social Science and Medicine*)

Thank you for your suggestion. I have included the work of Vetten, et al and Jewkes & Jewkes, et al. on pages 17 to 22.

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### Chapter 4: 4.2

**Examiner’s comment** -- 4.2: needs a description of who the training was aimed at and how often.

Thank you for your comment. I have expanded the section on training to include the participants and the timing of the training. See page 39 and 4.5.6 page 44.

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### Chap 4 Objectives

**Examiner’s comment:** format of results needs to be presented for 2, 4 and 5 or dropped altogether—addressed by interweaving.

Thank you for your comment. This has been addressed by interweaving and by 4.5.3 page 42.

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### Chap 4: Results section

**Examiner’s comment:** Tale headings re formatted; number per row clarified and numbers of respondents added to percentages.

Thank you for your comment. I have reformatted the table headings as suggested. See pages 50-56.

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### Discussion

**Examiner’s comment:** Actual results need more discussion; didactic training critique needs to be reflected upon; a series of suggestions made for the future—

Thank you for your comment. I have re-worked the discussion section incorporating a new sub section with some points made in earlier sections and included current findings from the Tracking Justice report. See page 57.