

BINDURA UNIVERSITY OF SCIENCE EDUCATION.
FACULTY OF SOCIAL SCIENCES AND HUMANITIES
DEPARTMENT OF SOCIAL WORK.



DESSERTATION REPORT
A PERSPECTIVE ON THE ACCESSIBILITY OF IMMEDIATE
RESPONSE SERVICES FOR SEXUAL ABUSE IN MANGA, BINDURA
RURAL.

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A DISSERTATION SUBMITTED TO THE DEPARTMENT OF SOCIAL
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BACHELOR OF SCIENCE HONOURS DEGREE IN SOCIAL WORK.

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DECLARATION STATEMENT

I Vimbainashe Runyaho B210758B, declare that this research project titled “A perspective on the accessibility of immediate response services for sexual abuse in Manga, Bindura rural” is my original work. This research has been conducted under the guidance and supervision of Dr Chikono, in partial fulfilment of the requirements for the award of A Bachelor of Science Honours Degree in Social Work at Bindura University of Science Education (BUSE).

This research has not been submitted previously, in whole or in part, for any academic award or publication. All sources consulted and quoted have been duly acknowledged.

Signature.....

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RELEASE FORM

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A perspective on the accessibility of immediate response services for sexual abuse in Manga, Bindura rural.

PROGRAMME: Bachelor of Science Honours Degree in Social Work

YEAR GRANTED: 2025

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APPROVAL FORM

I certify that I supervised Vimbainashe Runyaho (B210758B) in carrying out this research titled: A PERSPECTIVE ON THE ACCESSIBILITY OF IMMEDIATE RESPONSE SERVICES ON SEXUAL ABUSE IN MANGA, BINDURA RURAL in partial fulfilment of the requirements of the Bachelor of Science, Honours Degree in Social Work and recommend that it proceeds for examination.

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Name Dr. G. Chikono..... Signature Date 20/06/2025.....

Chairperson of the Department Board of Examiners

The departmental board of examiners is satisfied that this dissertation report meets the examination requirements and therefore I recommend to Bindura University of Science Education to accept this research project by Vimbainashe Runyaho titled: A PERSPECTIVE ON THE ACCESSIBILITY OF IMMEDIATE RESPONSE SERVICES ON SEXUAL ABUSE IN MANGA, BINDURA RURAL in partial fulfilment of the Bachelor of Science,

Honours Degree in Social work.

Chairperson

Name..... Signature..... Date.....

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DEDICATION

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ACRONYMS

AU- African Union

CSPRP- Child Safeguarding Practice Review Panel

ISVA's- Independent Sexual Violence Advisors

MoHCC- Ministry of Health and Child Care

PSTD- Post Traumatic Stress Disorder

SANE- Sexual Assault Nurse Examiner

SARC- Sexual Assault Referral Centres

SDG- Sustainable Development Goals

SGBV- Sexual and Gender Based Violence

VFS- Victim Friendly System

VFU- Victim Friendly Unit

WHO- World Health Organization

ZGC- Zimbabwe Gender Commission

ZIMSTAT- Zimbabwe National Statistics Agency

ABSTRACT

Various female children in underdeveloped rural areas are facing challenges in accessing immediate response services for sexual abuse such that many of them end up not even accessing those services, which is causing long term negative issues on those children. This study aims at examining the challenges faced by Manga, Bindura rural community in accessing immediate response services for sexual abuse, guided by the Ecological Systems Theory constituting of the microsystem, mesosystem, ecosystem macrosystem, as well as the chronosystem. The objectives of this study involves to identify the factors that hinder access to immediate response services for sexual abuse in Manga, Bindura rural, to examine the availability, accessibility, and responsiveness of existing sexual abuse response services in Bindura rural, as well as to propose copying strategies that can be adopted to enhance the accessibility and effectiveness of sexual abuse response services for underserved communities in Bindura rural. The study was conducted constituting of 21 participants in which 7 of them were key informants. The researcher used qualitative research methodology as well as the purposive sampling technique in selection of participants. During data collection the researcher managed to use the in-depth-interviews in obtaining information from participants as well as key informants. Thematic analysis was used as a method of presenting and analyzing data. Upon identifying factors that hinder access to immediate response services in Manga community, the research identified factors such as poor road network, poor cellular network connectivity, fear of labelling and victimization as well as the lack of support from family and community. The researcher also upon examining managed to notice that in Manga community there is access difficulty to services, lack of engagement and poor feedback, negative caregiver influence, unreliable support networks, limited facilities for service provision, shortage of trained professionals, conscientisation and awareness programs, unreliable law enforcement, in sensitive treatment as well as less or no long term case follow ups. Copying strategies were also identified in the research and they involved training and recruiting local volunteers, initiating mobile response, implementing conscientisation and awareness programs, organising support groups, scheduling monthly visits by social workers and also mobilizing resources as well as case conferencing. The researcher also organized an intervention framework for the study which is called Collaborative Integrated Access Framework for Immediate Response To Sexual Abuse In Rural Zimbabwe (CIAFIR-SARZ).

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CHAPTER ONE

1.1. Introduction

The chapter presents the background of sexual abuse interventions and their effectiveness to vulnerable populations and survivors of such abuse. The aim, objectives, assumptions and significance of the study will be discussed in this chapter. In order to have a clear understanding of the study, the statement of the problem and key definitions shall be discussed as well in this chapter. In a way to allow maximum participation of participants and key informants, research questions will be drafted in this chapter.

1.2. Background of the study

Sexual abuse remains a critical global public health and human rights issue, affecting individuals regardless of age, gender, or location. Globally, the World Health Organization (WHO, 2021) estimates that 1 in 3 women have experienced either physical and/or sexual violence in their lifetime, with the vast majority perpetrated by intimate partners. Immediate response services—including medical care, psychosocial support, legal assistance, and emergency shelter—are essential for survivors to heal, pursue justice, and regain autonomy. However, the accessibility of these services remains unequal, particularly in rural and low-resource settings. In many parts of the world, survivors of sexual abuse face structural and systemic barriers to accessing help. According to Jewkes et al. (2015), these barriers include social stigma, lack of survivor-centered services, and institutional inefficiencies in law enforcement and healthcare systems. Moreover, rural communities often experience a chronic shortage of qualified personnel, limited infrastructure, and poor coordination among service providers (Walker et al., 2013).

In high-income countries, models like the UK's Sexual Assault Referral Centres (SARCs) exemplify integrated approaches. These centers provide coordinated medical, forensic, and psychological services under one roof, significantly improving survivor outcomes. Specialist roles like Independent Sexual Violence Advisors (ISVAs) offer crucial support navigation, with evidence showing ISVA-supported survivors are 49% more likely to remain engaged with legal processes. Similarly, the Scandinavian "Barnahus" (Child House) model demonstrates the effectiveness of child-centered multi-sectoral services, reducing re-traumatization by consolidating forensic interviews, medical exams, and therapy in a single, welcoming

environment . Despite these advances, rural areas even in developed nations face geographic disparities in service access due to distance, provider shortages, and infrastructure limitations .

In Sub-Saharan Africa, the situation is compounded by deeply entrenched cultural norms, gender inequality, and under-resourced public service sectors. Africa continues to report some of the highest rates of sexual and gender-based violence (SGBV). For instance, a study by Abramsky et al. (2011) found that over 45% of women in certain African countries report having experienced intimate partner violence. Despite regional frameworks such as the Maputo Protocol (African Union, 2003), which mandates state parties to protect women from violence and ensure access to justice, implementation has been inconsistent, especially in rural and marginalized communities. Koenig et al. (2003) argue that rural African settings experience significant service gaps due to patriarchal structures, fear of reprisal, and poor training among police and healthcare personnel in handling SGBV cases. This creates an environment where victims are less likely to report abuse or seek help, reinforcing cycles of silence and impunity.

Regional prevalence data reveals alarming patterns one in three women experiences intimate partner violence, while adolescent girls face particularly high risks of forced sexual initiation. Zimbabwe mirrors these trends, with 33.7% of women experiencing child marriage and 19.9% subjected to recent intimate partner violence . The help-seeking paradox is stark despite high incidence, formal service utilization remains critically low due to multi-layered barriers.

Ghanaian studies using the Barriers Model elucidate these obstacles through concentric circles. Environmental/Structural Barriers such as Poverty, transportation shortages, and service scarcity trap survivors. In Eastern Ghana, unemployed women faced impossible choices between subsistence and reporting violence . On socio-cultural Barriers there is normalization of marital rape (conjugal rights), bride price traditions enforcing male sexual entitlement, and silencing stigma. Pertaining Psychological barriers, trauma-induced paralysis, fear of retaliation, and internalized shame are experienced. Also on childhood Socialization, early exposure to abuse normalises violence, thereby reducing future help-seeking attitudes .

Zimbabwe is no exception to these challenges. Although the country has laws such as the Domestic Violence Act (Chapter 5:16) and has ratified international conventions, enforcement and service

delivery remain weak, particularly in rural areas like Manga in Bindura Rural District. According to Musasa Project (2022), cases of sexual abuse often go unreported due to fear, stigma, and lack of trust in institutional response mechanisms. The Zimbabwe Gender Commission (ZGC, 2020) notes that rural areas lack dedicated one-stop centers that offer comprehensive response services for survivors. Most facilities are concentrated in urban centers, leaving rural populations with limited options. Furthermore, poverty, poor transport systems, and limited knowledge of available services contribute to inaccessibility. Chiroro et al. (2004) emphasize that socio-cultural factors in rural Zimbabwe, including victim-blaming and the normalization of violence, deter survivors from speaking out or seeking help. Recent field studies by Mawere and Ncube (2017) indicate that in districts such as Uzumba Maramba Pfungwe, victims may need to travel over 20 kilometers to access basic services such as a clinic or police station equipped to handle SGBV. This distance, combined with economic hardship, discourages timely reporting and access to care, thus prolonging trauma and impeding justice.

Zimbabwe's legal-policy landscape is characterized by progressive aspirations undermined by implementation gaps. The 2013 Constitution guarantees gender equality, but the Criminal Law (Codification and Reform) Act retains problematic provisions such as narrow rape definitions requiring penile penetration, excluding other forms of assault, indecent assault categorisations that trivialize violations of bodily autonomy, inadequate child protections and failure to recognize adolescent sexual autonomy. The Multi-Sectoral Protocol on Sexual Abuse (promoted by Together for Girls) envisions coordinated responses but suffers from operational disconnects between policies and frontline realities. Academics like Gorejena (2020) noted that sexual offenses remain largely viewed as private matters where silence is enforced, enabling impunity. Healthcare system barriers are particularly acute. Geographic disparities in rural clinics lack trained providers, forensic kits, and private consultation spaces. Economic constraints enables user fees and medication costs deter impoverished survivors. Transportation failures imposes long distances to services combines with unreliable transport to prevent timely care.

Research by Moore et al, (2023) highlights how such multi-layered exclusion creates a "nightmare merry-go-round" for survivors navigating broken systems. In rural areas where traditional power structures dominate, these challenges are intensified by gendered disempowerment and institutional neglect.

1.3. Statement of the problem

Sexual abuse is not only a violation of an individual's rights but also has long lasting physical, emotional and psychological effects. Rural communities often face significant challenges in accessing immediate response services for cases of sexual abuse. These are primarily driven by socio-economic, geographical and institutional barriers. Delays in responding to sexual abuse cases often leave victims vulnerable to further harm, limited access to healthcare, legal and social services worsens their trauma and reduces their chances of receiving timely care and justice. Despite national efforts to strengthen protection systems for survivors of sexual abuse, rural areas like Manga, Bindura continue to lag behind due to inadequate resources, poor transportation and cellular networks and insufficient awareness campaigns. Compounding this issue is the stigma associated with reporting sexual abuse, which then deters many victims from seeking help. Supporting this claim, the Zimbabwe National Statistics Agency (ZIMSTAT, 2021) and the Ministry of Health and Child Care (MoHCC) indicates that the rate of reported sexual abuse cases in rural areas is lower than in urban areas despite having several cases of sexual abuse in rural communities. In a 2019 survey in Mashonaland central 456% of women experienced gender base violence yet less than 20% of victims in rural areas received immediate response. According to a 2020 report by the Zimbabwe republic police (VFU), only 30% of sexual abuse cases in Mashonaland rural were reported to authorities compared to 65% in urban areas.

1.4. Aim of the Study

To examine the challenges faced by Manga, Bindura rural community in accessing immediate response services for sexual abuse.

1.5. Objectives

1. To identify the factors that hinder access to immediate response services for sexual abuse in Manga, Bindura rural.
2. To examine the availability, accessibility, and responsiveness of existing sexual abuse response services in Bindura rural.
3. To propose coping strategies that can be adopted to enhance the accessibility and effectiveness of sexual abuse response services for underserved communities in Bindura rural.

1.6. Research questions

1. What factors affect the ability of Manga in Bindura rural to access immediate response services for sexual abuse?
2. How accessible, available and effective are the existing sexual abuse response services in Manga, Bindura rural?
3. Which strategies can be proposed to improve the availability, accessibility and responsiveness of sexual abuse response services in Manga, Bindura rural?

1.7. Justification or significance of the study

The study provides significant values for various stakeholders including policy makers, healthcare providers, legal institutions, child protection agencies, social services departments, the government as well as community organizations. The study is significant for informing policy development and resource allocation contributing to improved healthcare, social justice and legal systems which will enhance community awareness and empowerment that addresses gender inequalities, empowering women as well as supporting Sustainable Development Goals (SDG's) so as to provide a framework for future research. As Campbell (2008) notes that more research is needed in order to understand the intersection of rural and sexual violence, particularly in low resource settings like Bindura rural. By shedding light on these issues, the research aims to provide a comprehensive understanding of the gaps in response services and propose actionable solutions to improve accessibility and effectiveness. The findings will contribute to the broader discourse on sexual abuse intervention strategies and inform policy decisions and program designs tailored to the needs of rural communities.

This sets the foundation for an in-depth analysis of the systemic and contextual factors affecting service accessibility in Bindura rural and highlights the urgency of addressing these challenges to ensure justice and support for survivors

1.8. Assumptions of the study

The study on the challenges faced by underserved communities in accessing immediate response services on sexual abuse in Bindura rural operates on the assumptions such as an existence of underreporting as many cases of sexual abuse go unreported due to barriers in accessing services

such as lack of reliable response networks such as poor transportation and road networks as well as poor cellular networks.

1.9. Definition of key terms

“Underserved communities” refer to populations that experience significant barriers to accessing essential services, including healthcare, education, and legal support. According to Wilson et al. (2019), these communities are often characterized by economic hardship, geographic isolation, and systemic inequities, which limit their access to resources and opportunities. “Sexual abuse” is defined as any form of unwanted sexual activity, including coercion, harassment, or exploitation, perpetrated against an individual without their consent. World Health Organization (WHO, 2020) defines sexual abuse as a violation of an individual’s physical integrity and human rights, often resulting in significant physical, psychological, and social harm. The term “immediate response services”, refers to critical interventions provided promptly after an incident of sexual abuse. These services include medical care, forensic examinations, psychological counseling, and legal assistance. According to Davies and Lyon (2018), effective immediate response services are characterized by timely access, sensitivity to victims' needs, and coordination among service providers. “Access to services” is defined as the ability of individuals to obtain and utilize available resources to address their needs. Penchansky and Thomas (1981) conceptualize access as a multidimensional concept involving affordability, availability, acceptability, and geographic proximity

1.10. Dissertation outline

This research is going to comprise of five chapters. The first chapter involving the introduction, background of the study, statement of the problem, Aim of the study, objectives, justification of the study as well as definition of key terms. The second chapter will involve theoretical framework that will be used during the study as well as literature review is in the same chapter. Third chapter is going to involve research methodology which will consist of research philosophy, research approach, research design, study setting, target population, sampling techniques and sample size, data collection techniques and tools, research procedure, validity and reliability or trustworthiness of the research, Data analysis as well as limitations of the study. Chapter four is comprised of

presentation, interpretation, analysis and discussion of findings from the research. Lastly chapter five will involve summary of the study, conclusions as well as the recommendations of the study including the framework.

1.11. Chapter summary

The chapter has introduced the study as well as indicating the background of the study from a global, regional as well as local perspective. Under this study, the problem statement, aim, objectives of the study and research questions were also indicated. The chapter also justified the necessity of the study. Study assumptions we also covered in this chapter. The next chapter will discuss the theoretical framework and literature review of the study.

CHAPTER TWO: LITERATURE REVIEW

2.0. Introduction

This chapter contains the theoretical framework in which this research has utilized which is particularly the Ecological systems theory. This chapter also presents reviews of various literatures on barriers to access for immediate response services for sexual abuse as well as the strategies that were put in place in order to overcome these barriers. These literatures provides global, regional as well as local Zimbabwean stance pertaining the issue in question about immediate response to sexual abuse in rural areas. The chapter also involves the research gaps in these literature reviews. These shall be further explained as the Chapter unfolds

2.1. Theoretical framework

Ecological Systems Theory

The study was guided by the Ecological Systems Theory that was developed by Urie Bronfenbrenner (1979). This theory offers a comprehensive framework for understanding how various environmental layers influence the individual's development and behavior, this involves personal, community as well as systemic factors. This theory was useful in examining factors that affects access to immediate response services for sexual abuse survivors as it considers the complex interplay between individuals and their surrounding systems. The theory was also useful in determining the availability as well as how accessible and reliable are the existing emergency response services for sexual abuse in the community of Manga, Bindura rural for the theory posits that individuals do not develop in isolation but within a complex system of relationships that are affected by multiple levels of their surroundings.

The ecological systems theory provides emphasis on the importance of considering environmental as well as societal factors in understanding of human development. This theory is based upon examining how different layers may contribute to or even hinder survivor's access to services.

This involves the microsystem, mesosystem, exosystem, macrosystem as well as the chronosystem. In this case access to immediate response services for sexual abuse may be affected by these environmental layers. Hence as the theory portrays, if these environmental layers are enhanced or improved, emergency response services will be addressed. The necessity of this theory in dealing with emergency response services for sexual abuse shall be further discussed as the unfolding of environmental layers will be portrayed.

2.1.1. Microsystem

This is the immediate environment where the individual directly interacts such as the school, peers, family, healthcare providers as well as immediate community settings. Hence there is direct influence on the individual's development. In this context, survivors of sexual abuse within the microsystem may face stigma or Trauma related distress that may as a result prevent them from seeking help, thereby these survivors may not even report sexual abuse cases, affecting emergency response services in the process. Family and friends may also discourage reporting of sexual abuse cases due to their cultural beliefs or even fear of facing social backlash from their communities. On the same aspect, healthcare providers may also lack proper training on trauma-informed care such that they may end up portraying insensitive responses to survivors of sexual abuse. For the survivors of sexual abuse, interactions within the microsystem such as the quality of support received from close contacts or initial encounters with service providers directly affects whether they feel safe and empowered to access immediate response services. Positive experiences at this level can facilitate quicker and more effective service engagement, while negative encounters may hinder help seeking behavior (Jones, 2022).

2.1.2. Mesosystem

The mesosystem refers to the interconnections between support systems. This theory institutes that poor coordination between service providers such as child care workers, hospitals, police as well as institutions for shelters can delay responsiveness. Inadequate referral networks may as a result end up leaving survivors confused on where exactly to seek help. Smith (2021) portrays that collaboration between healthcare facilities, law enforcement entities such as the police as well as service providers for counselling, plays a critical role in ensuring a coordinated response, thereby effective communication and partnerships among these entities, and enhances the responsiveness of services. Conversely, lacking in coordination may result in Fragmented care, delaying of service

provision, or even re-traumatization of survivors of sexual abuse. On this aspect, the effectiveness of inter-agency determines how easily survivors of sexual abuse may navigate and access the services offered.

2.1.3. Exosystem

These are community and institutional factors. This involves broader social systems and structures that indirectly affects individuals, these factors are community infrastructure, funding for social services and local policies that determine the overall availability of emergency response services. This environmental layer portrays that limited services in rural or underserved areas restrict survivor's options. Legal and policy gaps may also result in survivors facing long waiting periods for forensic examinations or even legal support. Limitations in resource allocations or policy shortcomings at the exosystem level can restrict service accessibility, such that a community with inadequate funding for sexual abuse services may not have sufficient services may not have sufficient facilities or trained professionals, thereby as a result limiting survivors' access regardless of their personal circumstances (Davies, 2023). This then reflects that the allocation of resources and funding determines the availability of services.

2.1.4. Macrosystem

This refers to the societal and cultural influences. The macrosystem encompasses the broader cultural, societal and ideological contexts. It reflects the impact of cultural norms, societal attitudes, and economic conditions on service provision as well as legal frameworks. According to this environmental layer, societal rape myths as well as victim blaming attitudes discourages reporting of sexual abuse cases. Also economic disparities may mean survivors cannot afford legal or medical assistance in some instances. In this case societal stigma surrounding sexual abuse, for instance can restrict survivors from seeking help and this may even influence the design or funding of immediate response services. Moreover national policies and legislation can either facilitate a supportive environment for immediate response services or create systemic barriers that reduce their overall availability and responsiveness of those services. The macrosystem's influence through national policies and cultural norms can either support or even hinder the establishment of such services.

2.1.5. Chronosystem

This final layer accounts for the dimension of time. Changes over time such as evolving social attitudes, legislative reforms or improvement in service delivery models has an effect on all the other layers. Taking for instance, legislative changes can either improve or limit survivor access to justice and care. A recent policy change that mandates integrated support services for sexual abuse survivors may improve coordination which is mesosystem and resource allocation (exosystem) thereby as a result enhancing both accessibility and responsiveness of immediate response services (smith, 2021). The chronosystem ensures the responsiveness of services. That is the interplay between all systems ensures that services not only exist but are also timely and appropriate to survivors needs, for instance trauma informed approach in service delivery for survivors of sexual abuse that is influenced by both microsystem experiences and macrosystem cultural expectations ensures that survivors receives sensitive, immediate care without additional harm to survivors.

2.2. Strengths of the Ecological Systems Theory

The Ecological systems theory is important in this study due to its comprehensive, dynamic and practical approach to understanding human behavior as well as interactions within different environmental systems. The theory's strengths involves its holistic perspective in that it considers multiple levels of influence (individual, family, community, societal, and historical), offering a broad and interconnected view of human experiences. It also prevents oversimplification by acknowledging that no single factor determines behavior or access to services. The theory also provides practical application in policy and social services used in healthcare, social work, and education to create policies that address barriers at multiple levels thereby contributing in designing interventions that consider family support, community awareness, institutional readiness, and policy gaps. Another strength of this theory is that it puts emphasis on environmental and contextual factors unlike theories that focus only on individual behavior, ecological systems theory highlights how external factors shape opportunities and limitations. This is crucial in understanding systemic barriers, such as stigma, discrimination, legal gaps, as well as economic disparities.

In addition another strength of this theory is that, this theory can be adaptable and flexible in the sense that it can be applied across diverse fields, including psychology, public health, education,

and gender-based violence research as it also allows for modifications and integrations with other theories such as Intersectionality Theory or Trauma-Informed Care. It is also dynamic and evolving over time for it recognizes that people and systems change over time (Chronosystem), allowing for the study of historical and policy shifts in response services. This makes it useful for tracking progress in social justice movements and legislative improvements. The theory encourages multi-sector collaboration for it promotes interdisciplinary approaches by linking healthcare, legal, educational, and social services, thereby supports cross-sector partnerships to improve accessibility and responsiveness of essential services.

2.3. Weaknesses of the Ecological Systems Theory

While Ecological Systems Theory by Bronfenbrenner, 1979 is widely used for understanding human development and social interactions, it has several limitations such as complexity and lack of specificity for the theory provides a broad, multi-level framework, but it does not offer specific guidance on how different systems interact or influence outcomes. It lacks clear mechanisms for measuring the impact of each system, making it harder to apply in empirical research. The theory also has limited focus on individual agency as it overemphasizes environmental influences while downplaying personal choices, resilience, and cognitive factors in shaping behavior. It also does not fully address how individuals actively adapt to or resist environmental pressures. The Ecological Systems Theory also exerts difficulties in research and measurement as studying multiple levels of influence requires extensive data collection, which can be time-consuming and costly in some instances. Measuring interactions between systems is also challenging, as these influences are often indirect and are subject to change over time.

The ecological systems theory underestimates immediate and internal psychological processes unlike psychological theories such as Cognitive-Behavioral Theory, Ecological Systems Theory does not deeply explore cognitive, emotional, or neurological aspects of behavior. This limits its ability to explain trauma responses, decision-making, and mental health conditions on an individual level. Another weakness is that the theory assumes that all systems have equal impact hence it does not prioritize which system whether microsystem or macrosystem has the most influence in a given situation. It does not fully address situations where one system dominates or overrides the effects of others taking for instance when cultural norms completely restrict access

to response services. It also has limited consideration of power dynamics, while the theory acknowledges institutional and societal influences, it does not deeply analyze power imbalances, oppression, and systemic discrimination. On the same note it also does not fully explain why certain groups face more barriers than others in accessing services.

2.4. Main literature

2.4.1. Barriers to immediate response services for sexual abuse

2.4.1. (i) Geographical isolation entails limited healthcare access

According to (Treat, et al. 2022), much of the literature on sexual assault focuses on national or urban data, resulting in limited availability of research centered on the issues unique to post-sexual-assault service providers in rural areas. Subsequently, a good deal of what is known regarding sexual assault in rural communities is based on the anecdotal experience of providers. By partnering with a network of existing service providers, sexual assault nurse examiner (SANE) programs can identify and address the unique set of challenges rural populations face such as geographic isolation, mistrust of community service providers, reluctance to accept services, and enduring cultural misconceptions surrounding sexual assault. Collaboration and communication are instrumental in building a successful rural SANE program and improving service response when working with patient populations struggling with poverty and a lack of both formal and informal systems of support. Due to the remote locations of rural areas, they often face significant challenges, taking for instance a study that was held in Northeast Tennessee in USA, survivors of sexual abuse have to travel up to 125 miles round trip in order to reach the nearest Sexual Assault Nurse Examiner (facility) of which this distance makes timely medical care difficult and potentially hazardous. On the same note economic hardships that are prevalent in rural areas further impede access to services, in the same region of Northeast Tennessee, poverty rates ranges from 15.1% up to 26.3%, which surpasses both state and national averages. As a result of such financial constraints, many survivors of sexual abuse lack necessary resources for transportation to distant healthcare facilities.

2.4.1. (ii) cultural stigma affecting timely reporting

(Mutanana and Gasva, 2015) entails that Cultural dynamics in rural areas may discourage survivors from seeking help. According to the study in Hurungwe district, Zimbabwe, it was discovered that there are several factors that affects the reporting of rape, these includes a misunderstanding on the definition of rape, also many people fear victimization, there is also the issues of inadequate response from law enforcement in rural areas that affects timely response to sexual abuse cases in rural areas. In some instances especially where the perpetrator is a respectable person or the bread winner in the family, there is usually a desire to protect the perpetrator and as a result there is less reporting of sexual abuse cases, thereby affecting immediate response services.

2.4.1. (iii) Lack of adequate training and efficient resources among professionals

As propounded by The Guardian News (2024), Healthcare and law enforcement professionals especially in rural areas, may lack training as well as resources necessary to effectively support sexual abuse survivors. "I wanted them all to notice." This is the title of a new report on protecting children from sexual abuse within the family, taken from an interview with a child who was sexually abused and failed by the agencies that should have protected them. The report by the Child Safeguarding Practice Review Panel (CSPRP) reviewed 136 cases of serious child sexual abuse from between 2018 and 2023, including the way in which children's services responded. It sets out the horrific extent to which children are so often abandoned by the system and denied the safeguarding and support they desperately need. The CSPRP report shows that the training that social workers and other professionals typically receive on child sexual abuse – despite the sensitivities and difficulties in this area of practice – is completely inadequate; it describes a “worrying evaporation” of skills and knowledge, and “a culture of fear and silence”. Assessing the risks that adults pose to children is too often left to badly under-resourced probation services. In more than a third of the cases the panel reviewed, the abusers were known to pose a risk of sexual harm"(The Guardian 2024).

2.4.1. (iv) Distrust in legal and healthcare systems influence underreporting of cases

Survivors' perceptions of safety and trustworthiness within legal and healthcare systems significantly influence their willingness to seek assistance. Concerns about potential risks from legal or child protection interventions, as well as doubts about achieving justice, often deter survivors from disclosing abuse (Fitzgerald et al., 2017). The provision of social work services in

response to sexual assault is vital. Social workers are often the first professionals with whom victims of sexual assault come into contact (McClennen et al., 2016). Many such social work interventions occur in acute settings, such as a hospital emergency departments (ED) or crisis centers. In such contexts, it is the responsibility of the social worker to respond to the needs of the individual in many ways, including through information provision, support, counselling, referral and advocacy (McClennen et al., 2016). It is important for victims of sexual assault to obtain adequate and timely support in these settings. They may be at risk of psychological, emotional and social crises, as well as needing attention for physical injuries, genital injuries, gynecological complications, unwanted pregnancy and sexually transmitted infections (McClennen et al., 2016). When victims do not access support, not only is their physical health jeopardized, but the consequences on their everyday life can also be devastating (Australian Centre for Posttraumatic Mental Health, 2011). Survivors often report feelings such as shame, terror, and guilt and self-blame. Victims who fail to engage in follow-up support are at increased risk of suffering negative mental health outcomes such as depression, anxiety, posttraumatic stress, relationship issues and substance addiction (KPMG, 2009). More broad understanding and identification of support barriers are key to the promotion of service engagement (Fitzgerald et al., 2017), especially for those who feel that support may be beneficial.

2.4.1. (v) delays in forensic examinations influences underreporting that affects timely interventions

Timely forensic examinations are crucial for evidence collection and subsequent legal proceedings. However, in rural areas, survivors often face extended wait times. For example, in some cases, victims have experienced delays of over two days for forensic exams, exacerbating trauma and potentially compromising evidence integrity, taking for instance as propounded in the courier mail there is a story of a teen who was a survivor of assault who was forced to wait for two days for forensic exams. The under-reporting of sexual abuse reduces the chances of winning the battle against sexual abuse of women and children in Zimbabwe. It leaves girl children powerless and vulnerable, despite the country's determination to put an end to injustice and gender discrimination in line with the Sustainable Development Goals (SDGs), in particular, SDG 5, which focuses on gender and equality, and SDG 16, which is concerned with justice and peace. The aim of this study was to explore the barriers to reporting sexual abuse in Ruwa. Informed by the human rights-based approach, the study adopted a quantitative research design. Survey data

were solicited from 51 randomly selected female respondents. Results revealed that 69% of the respondents were abused, yet only 2% of the total respondents reported the abuse to authorities, while 67% did not report incidences of abuse. About 98% of respondents believed that most sexual abuse cases in Ruwa went unreported. Results also showed that barriers to reporting sexual abuses comprised cultural and economic factors, most of which were characterized by shame, embarrassment, and fear, as well as the desire to protect male breadwinners. The results are consistent with existing literature generalizations on sexual abuse, particularly in terms of the prevalence of sexual abuse and under-reporting. It is also argued that culture is the determinant factor for most of the barriers to reporting sexual abuse, as well as the effects of reporting. Based on the results and in view of promoting and protecting human rights associated with sexuality, the study recommends that local authorities and social institutions implement awareness programs and campaigns on reporting sexual abuse in the community (Chibango and Chibango, 2022).

2.5. Strategies put in place to respond to sexual abuse

2.5.1. Multisectoral collaboration

Implementing a multisectoral and coordinated approach is vital , for instance the Victim friendly system in Zimbabwe (VFS) exemplifies this strategy through integrating professionals from social work, healthcare, law enforcement and the justice system so as to provide comprehensive support to child sexual abuse survivors. This collaboration enhances service delivery efficiency and improves outcomes for victims (Muridzo and Chikadzi, 2020).

2.5.2. Mobile and remote service provision

In order to address geographical barriers as well as deploying mobile units and remote services has proven effective. The spotlight initiative has introduced mobile service provision through specially designed trucks and established transport links for survivors in hard to reach areas, thereby facilitating access to essential services (spotlight initiative, n.d.).

2.5.4. Community based education and training

Empowering local communities through education and training programs enhances the responsiveness of sexual abuse response services, In Canada, Participatory Action Research

involving rural communities has led to the development of tailored interventions including multidisciplinary advisory teams and educational sessions for service providers. These efforts resulted in increased collaboration, improved service quality and heightened provider knowledge and comfort in delivering care (Snell et al., 2020)

2.5.5. Integration of technology

Leveraging technology can bridge gaps in service accessibility. In South Sudan, The introduction of a Whatsapp chatbot by and support for rape survivors. Despite challenges like low connectivity and high illiteracy rates, this innovation has facilitated the reporting of numerous cases, demonstrating technology's potential in resource limited settings (AP News, 2023). This can also be achieved through provision of distance counselling whereby counselling is provided via telephone or online platforms. This will then overcome barriers related to distance and mobility (Leroux et al., 2022).

2.5.6. Enhancing alternative therapeutic options

Expanding therapeutic options beyond traditional counselling can cater to diverse survivor needs. In Victoria, Australia programs incorporating activities such as boxing or even animal therapy have shown promise in reducing PTSD symptoms and enhancing personal agency among sexual abuse survivors (Sun, 2024).

2.6. Research Gap

Although we appreciate the researches that were done by various scholars and individuals there is still a research gap in which this study will try to fulfill. One of the gaps is the fact that many researches focus on urban areas as well as developed rural areas and in the process there is just little consideration for underdeveloped rural areas. There is also a notable gap concerning the issue of what coping strategies can be used to address the challenges to immediate response services in the event where resources are not available as more literature is assuming instances where resources are available. Scholarly evidence did not also focus much on addressing telecommunication barriers which are key in this modern world in addressing accessibility challenges. Hence the need for this research. The existing literature emphasises on state and international actors overlooking on indigenous knowledge and local resource mobilisation. Research also puts more focus on Legal frameworks and health outcomes, neglecting the first 72 hour critical window where service access proves more vital. There is also no specific

studies that examine the Manga-specific ecosystem of service access, despite its unique socio-geographic profile, hence the need for the study.

2.7. Chapter summary

The chapter has covered the theoretical framework that guided the whole study that is the Ecological systems theory in which the researcher made use of. This chapter also reviewed previous researches from different researchers that have been used as a baseline information through the entire study. The next chapter is going to focus on the research methodology of this study.

CHAPTER THREE: RESEARCH METHODOLOGY

3.0. Introduction

This chapter focuses on providing a clear overview on how the research has been conducted. This involves the research philosophy, approach, design, study setting, target population, sampling techniques as well as sample size. The chapter will also include data collection tools and techniques, research procedure, validity, reliability and trustworthiness of the research, Data analysis as well as the limitations of the study. All these are clearly outlined in this chapter.

3.1. Research philosophy

The study utilized the interpretivism research philosophical perspective, which is based on the belief that reality is socially constructed and influenced by human experiences and perceptions (Saunders, Lewis and Thornhill, 2019). This is an important nature of reality for the research used the qualitative research methodology, for there is a belief that perception is key in shaping an understanding of reality (Qiong, 2017). Interpretivism focuses on understanding the lived experiences of individuals within their social and cultural contexts (Cresswell, 2013), which is meaning driven knowledge, thereby making interpretivism research philosophical perspective a necessity in this study. This approach is most relevant for the study on access to immediate response services for sexual abuse cases in underserved communities due to the fact that the research focuses on understanding human experiences as well as systemic barriers, including societal factors which shape access to emergency services. It acknowledges that these challenges requires engagement with the perspectives of those who are directly affected.

Through the adoption of the interpretivist stance, this study uses the qualitative research methods which are interviews as well as focus groups in order to capture the subjective meanings and social realities of survivors, emergency responders and community stakeholders. This approach ensures that the findings reflect the complexity of human interactions as well as institutional dynamics in emergency response systems. Hence interpretivism provides the epistemological foundation for this research, through guiding of data collection, including analysis, so as to ensure a rich and contextual grounded understating of barriers to emergency services for survivors of sexual abuse in underserved communities.

3.2. Research approach

According to Gounder (2012) methodology refers to the procedures that researchers consider when handling their work of describing, explaining as well as predicting phenomena. Hence a qualitative research approach has been utilized in this study.

In this study, the researcher utilized the qualitative research approach. Qualitative research is a systematic method of inquiry that focuses on understanding social phenomena within natural settings. This approach seeks to explore the meanings, interpretations, and experiences of individuals, emphasizing the richness and depth of human behavior (Denzin & Lincoln, 2011). The study utilized this approach to explore the challenges faced by underserved communities in Manga, Bindura in accessing immediate response services for sexual abuse .The study utilized this approach due to the sensitive nature of sexual abuse, thereby it allowed for a comprehensive understanding and in-depth analysis of the personal narratives, emotions as well as lived experiences of sexual abuse survivors, including those who were directly or indirectly affected by the socioeconomic, cultural as well as institutional barriers affecting access to emergency response services for sexual abuse in Manga, Bindura rural. The researcher prioritized the views of sexual abuse survivors so as to have a better understanding on how effective were the response services in helping them to survive those tragic incidents. It also helped the researcher to understand the perceptions of people in the area under study concerning issues pertaining sexual abuse. The researcher managed to understand that participants have different perceptions and experiences towards sexual abuse initiatives. The researcher also gave first priority to victims of sexual abuse to discuss interventions that can be implemented as a way to enhance emergency response services, this was done based on the assumption that they are able to understand their situation more than

anyone else. Chivanga and Monyai (2021) supported the idea that “a qualitative research methodology enables the researcher to obtain a comprehensive understanding of the meanings, which the participants ascribe to the phenomena upon which the research topic is centered, in a natural setting”p13.

3.3. Research design

As defined by Tashakkori and Teddlie (2010), a research design is a procedure that is used in gathering as well as analyzing data from relevant information that has been acquired from the sources that individual researchers has identified as satisfying the requirements of their proposed studies. In this study, the researcher managed to use a case study as a research design.

Case study

The study employed a case study research design in order to analyses how different stakeholders respond to cases of sexual abuse as well as where inefficiencies arise. This provides a holistic view of systemic failures and potential areas where improvement is a necessity. The researcher used this design in understanding the accessibility of emergency response services in Manga, Bindura rural indicating how best services can be accessible to victims of sexual abuse from a case perspective. In this regard, a case study managed to give the researcher an understanding of how cases are being handled by responsible stakeholders, thus indicating the gaps within the systems that need to be addressed and adjusted. The case study also reviewed that in some cases are not even being reported due to the inaccessibility of services in most parts of Manga, Bindura rural, though cultural barriers also contribute to underreporting of sexual abuse cases in some instances, thereby becoming a challenge to the accessibility of emergency response services to cases of sexual abuse in Manga, Bindura rural.

3.4. Study setting

Manga, Bindura rural is rural community that is identified as underserved due to its characteristics. The place is geographically isolated with a vast and open landscape. Most houses in the area are made of wood and grass with a few made of bricks and aluminum roofs. The road infrastructure there is unpaved and difficult to navigate to an extent that transportation is scarce for public

transport is scarce there, thereby walking is the primary mode of transport there, people in Manga walk long distances to access services such as shops as well as health facilities. Schools are limited to an extent that children travel long distances with an average of 10km to attend schools. The area is characterized by poor cellular network connectivity, thereby making access to technology and internet difficult. The clinics in Manga are miles away with just a few doctors and nurses available such that it's difficult for people in Manga community to access. In most instances residents mainly rely on traditional medicines other than travelling long distances for treatment. In this case emergency medical services are often delayed. The area is characterized by low rainfall and as farming is the main activity there, malnutrition and food insecurity are common issues in the area, affecting mainly children and the elderly for they are the most vulnerable populations. In this case the girl child is most vulnerable and most exposed to sexual violence as parents spend most of their time trying to find ways of providing for the family and neglecting protecting the family in the process. Due to economic hardships and lack of opportunities in the area, there is high crime rate, sexual violence being the main domain. Thus the researcher chose the area to be the area of focus.

3.5. Target population

The target population for this study includes sexual abuse survivors within the community including those who reported the cases as well as those who did not report the cases so as to have a better understanding on what they went through after the experience of sexual abuse. Key informants included healthcare providers that is a nurse and a doctor, law enforcement officers, community leaders, and a social development officer from the department of social development. This diverse group provided a comprehensive understanding of the challenges faced in responding to sexual abuse cases.

3.6. Sampling techniques and sample size

3.6.1. Sample size

As indicated by (Chivanga and Monyai, 2021) a research sample is comprised of a small representative portion of a target population. This research used a small percentage of the target population since their struggles and challenges are almost similar due to the fact that they share the same geographical location. The sample consisted of fourteen sexual abuse survivors, two healthcare providers, one law enforcement officer, two community leaders and two social

development officer from the department of social development. (Shetty, 2023) articulated that a sample of 20 to 30 respondents may be ideal in qualitative researches, thereby in this research, the sample size consisted of fourteen sexual abuse survivors as well as seven key informants, making them twenty one in total.

3.6.2. Sampling technique

Purposive sampling technique

Purposive sampling technique is a non-probability sampling technique where researchers intentionally select participants based on specific characteristics or criteria that align with the research objectives (Etikan, Musa and Alkassim, 2016). In this study the researcher employed the purposive sampling technique for it provided meaningful insights on the availability as well as the accessibility and responsiveness of the entire emergency response services for sexual abuse cases in Manga, Bindura. This technique was used in the selection of key informants based on their expertise in the area of study, specifically those who had five years' experience or more working in Bindura district.

3.7. Data collection techniques and tools

In-depth interviews

In-depth interviews were used in this study. Two in-depth interview guides were used in this research, one being for key informants whilst the other was for the survivors of sexual abuse. These interviews were conducted with community members especially those involved in child care work such as the foster parents. Interviews were also conducted with service providers who are in the response teams for sexual abuse. Upon conducting these interviews, the researcher would firstly greet the participants and introduced herself as well as seeking their consent to conduct the interview with them. Since the topic is sensitive in nature, participants would allow the researcher consent after she had given them assurance that the research was only for academic purposes. After the consent, the researcher then went on to ask about the brief background of the client, this was done also as a way to make participants feel comfortable, then after that the researcher then went on to ask questions in line with the objectives of this study that are in the interview guide that is attached at the end of this research. Interviews would take 20 to 25 minutes and somewhere also done using phone calls whenever necessary. Whenever the participant would be comfortable and has given consent, the researcher would record the session in a notepad. During interviews, the

researcher paid attention to both verbal and nonverbal expressions such as tears and outbursts, noting them down so as to have a clear understanding of the extent to which the participants have been affected. At the end of each interview session, the researcher would express her gratitude to the participants for the information they had granted her. The researcher opted for interviews as they permitted her to record personal observations as well as the opportunity to access the credibility of the data that was provided by the respondents.

3.8. Research procedure

The researcher started by compiling a research proposal that outlines what the problem was and the purpose of research as well as where the research was to be conducted. After the proposal was approved by the university in the department of Social Work that it is relevant for the purposes of understanding social work, the researcher was then given a letter from the university seeking for permission to conduct a research in Manga, Bindura rural where the study setting is relevant for the research, that letter was then produced to the Department of Social Development so they can permit her to conduct a research as well as seeking permission to the ministry of Health and Child Care so the researcher can have all the necessary information for the research. After that, the researcher then conducted the research in Manga, Bindura rural with the help of stakeholders or key informants that have been already mentioned. The researcher was guided by the objectives of the study so that she knows what exactly she has to focus on. Ethical considerations were also a key aspect in this research in order to ensure the safety of the target population as well as protecting the researcher from emotional harm. The researcher upon conducting the research used the data collection tools and methods that have been already mentioned so as to obtain all the relevant and necessary information. Thus how the research has been composed.

3.9. Validity and reliability/trustworthiness

Validity refers to the degree to which the research study accurately measures what it intends to measure. It ensures that the findings truly represent the concept or phenomenon under investigation (Creswell, 2018). In this case the findings of this study truly represented what the research aimed to achieve. According to (Bryman, 2028), reliability is the consistency and stability of research findings over time, in this case this study can be considered reliable as it provided the same results under consistent conditions, as a result of this the results of the research will still

remain consistent if implemented in another area with the same conditions . (Lincoln and Guba 1985) defines trustworthiness as a term that is commonly used in qualitative research to assess the rigor of the study, that is credibility, transferability, dependability and conformability which is objectivity. This criteria was important so as to help establish confidence in the findings of this study.

3.10. Data analysis

Qualitative Data Analysis

Thematic analysis has been used in this study to analyze data from in-depth interviews that were portrayed. Thematic analysis is a qualitative research method that is used to identify, analyse as well as report patterns within data, emphasizing its flexibility in qualitative research (Braun and Clarke 2006). The interviews were transcribed, and key themes related to the challenges of accessing sexual abuse response services were identified. These themes have been categorized and analyzed to understand the factors affecting access. Descriptive analysis has been generated from the interview responses so as to qualify the availability, accessibility as well as responsiveness to service access, including transportation issues, healthcare availability, law enforcement capacity, and awareness levels.

3.11. Limitations

3.11.1. Sensitive Nature of the Topic

The topic of sexual abuse is highly sensitive, and some survivors were not unwilling to participate in the study. This limited the amount of primary data available but however to address this issue the researcher managed to explain the reason for the research to participants which is for academic purposes, thereby making participants comfortable to share information.

3.11.2. Underreporting

Due to the stigma associated with sexual abuse, there was underreporting of cases, making it difficult to get a true picture of the prevalence of this issue in Manga Bindura rural, making this a reason for the research to be conducted on this so that this issue be addressed in the future.

3.11.3. Accessibility of Participants

Given the rural setting, logistical challenges such as transportation affected the researcher's ability to access participants, especially those living in remote areas of Manga, Bindura rural. Thus the need for this research to address these issues in that community.

3.12. Ethical considerations

Given the sensitive nature of the research topic, the ethical considerations have been strictly adhered to during the research that was portrayed in Manga, Bindura rural.

1. Informed Consent

All participants were provided with detailed information about the purpose of the study, their rights, and the confidentiality of their responses. Informed consent was obtained from all participants before data collection begins. This was done in a way to ensure trust and confidence between the researcher and the participants.

2. Confidentiality

The identities of sexual abuse survivors were strictly kept confidential, and any identifying information has been removed from the data. Anonymity has been maintained throughout the study to protect participants from any potential harm or retribution.

3. Non-maleficence

Extra Care was taken to ensure that participants, especially survivors of sexual abuse, are not exposed to any harm or distress during data collection. Counseling services was made available during the interviews by the researcher to the participants who may have experienced emotional discomfort during interviews.

4. Approval from Ethics Committees

The study sought approval from the relevant ethics boards, including the Medical Research Council of Zimbabwe (MRCZ), Bindura District Health Office as well as the Department of Social Development (DSD), to ensure compliance with national and international ethical guidelines.

3.13. Chapter summary

The chapter has proven justice to the methodology that was used in data collection through the identification as well as the explanation of the research design that was used, including justifying it. The chapter has also indicated why the researcher has chosen that methodology in the research. Ethical considerations were also mentioned in the Chapter. This chapter has paved a way for the next chapter which is going to focus on the presentation, discussion and analysis of the data that has been collected.

CHAPTER FOUR

DATA PRESENTATION, DISCUSSION AND ANALYSIS OF FINDINGS

4.1 Introduction

This chapter is placing its area of focus on the presentation, discussion as well as the analysis of the data collected on the access, availability as well as responsiveness of immediate response services for sexual abuse in Manga. This chapter also involves proposed strategies that can be employed so as to enhance the accessibility of reliable response services. Thematic analysis has been used in analyzing data that has been gathered through in-depth interviews.

Table 4.1. Participants Response Rate.

RESPONDENTS	RESPONSE RATE	PERCENTAGE
Sexual abuse survivors	14 out of 14	100%
Key informants	7 out of 7	100%
Total	21 out of 21	100%

N=21

Table 4.1 shows that the research was highly successful as all participants responded to the interview. The main reason why the research was a success was because the interviewer had to physically visit the interviewees as per the requirements of the in-depth interview guide, and this

gave participants a room to express themselves in which most of the participants regarded as a way of relief from their experiences, this even improved the response rate. The research was also a success for the researcher followed the ethical considerations indicated above and this made the respondents to feel free to provide such sensitive information to the researcher.

4.2 Demographic data

Table 4.2 Distribution of participants by sex, age, educational level, religion

DISTRIBUTION OF PARTICIPANTS BY SEX.				
SEX.	FREQUENCY.		PERCENTAGE.	
FEMALE	18		86	
MALE	3		14	
TOTAL	21		100	
DISTRIBUTION OF PARTICIPANTS BY AGE.				
0-9	10-19	20-29	30-39	40+
6	8	1	3	3
DISTRIBUTION OF PARTICIPANTS BY EDUCATIONAL LEVEL.				
PRIMARY EDUCATION.	SECONARY EDUCATION.	TEARTIARY EDUCATION.		
		DIPLOMA.	DEGREE.	MASTERS.
9	5	2	4	1
DISTRIBUTION OF PARTICIPANTS BY RELIGION				

CHRISTIANITY	INDIGENOUS RELIGION	ATHEIST	ISLAM
17	2	1	1

N=21

Table 4.2 shows the distribution of participants by sex. The table indicates that the research was mainly dominated by female respondents, reason being the fact they are the most vulnerable to sexual abuse. Hence the need to give them an opportunity to articulate their concerns. The research also informs a gender balance for 14% (3) of the participants are male participants. These males are only key informants with a vast knowledge in issues of dealing with survivors of sexual abuse.

Table 4.2 also presents a distribution of participants according to age. Participants between the age of 10 to 19 years (8) constitutes the highest percentage, followed by those between the age of 0 to 9 years (6) reason being that children below the age of 18 years are more vulnerable to sexual abuse for they are prone to be taken advantage of due the fact that they are minors and in most cases they do not have an ability to make important decisions about their lives. The other reason also is that the research is mainly focused on child welfare, thereby the target population mainly constitutes children below the age of 18 years. The population from the ages of 20 years upwards is mainly dominated by key informants and they have been chosen due to their vast experiences in dealing with issues of sexual abuse, these are mainly professionals who deals with issues of child protection as well as those in health and legal sectors. These were chosen to provide information according to their experiences.

Table 4.2 also indicates the distribution of participants according to their educational levels. The population that constitutes the highest number in this research is the primary school going children indicating they are the most group that is vulnerable to sexual abuse, followed by the secondary school children who are also the second group that is affected by sexual abuse. Also as the research is mainly focused on child protection, hence the reason for selecting them. Key informants with degrees constitutes the third highest population in this research and the reason for their selection was their vast experiences in child protection as well as in dealing with cases of sexual abuse. Those with diplomas also constitutes a significant population in the research as they were also

selected for their experience in handling cases to do with sexual abuse. The least population in this research was master's degree holder which is only one person and was chosen using the same criteria as other key informants indicated above.

Table 4.2 also indicates the distribution of participants according to their religious backgrounds as religion also influences an understanding of sexual abuse. The highest dominating population in the research was Christianity, followed by the indigenous religion. The least population are the atheist as well as the Islamic religion. This was indicated during data collection as religious beliefs have different perspectives concerning ways of handling sexual abuse cases and as a result it influences results in the research.

4.3 THEME 1: FACTORS THAT HINDER ACCESS TO IMMEDIATE RESPONSE SERVICES FOR SEXUAL ABUSE IN MANGA, BINDURA RURAL.

4.3.1. Poor road network

The issue of poor road network was highlighted by all participants in this research as the main obstacle that is affecting them to have access to immediate response services for sexual abuse as their environment is geographically isolated with an unfavorable road network such that there is limited road transport and the main transport they have access to are motor bikes which are expensive to them and in most cases due to poverty residence there mainly travel long distances by foot. Participants indicated that the issue of poor road network is one of the factors that delays them to access immediate response services for sexual abuse to an extent that some may not even be able to report such cases. Key informants also indicated that it's hard to access survivors of sexual abuse in that area due to that issue of poor road network.

Participant D, F (9) articulated that,

“ndakanonoka kuwana rubatsiro pandakabatwa chibharo nekuti vabereki vangu vanga vasina mari yekuti ndibhadhare chimudhudhudhu chekuti ndiyende kuchipatara nekunomhan'ara nyaya yangu zvekuti ndakazonobatsirwa patopera masvondo maviri”. (I delayed to get health assistance as well as reporting my case when I was sexually abused because my parents had no money for the motorbike, hence I managed to get assistance after 2 weeks)

Participant N, F (11) added that,

“nyaya yangu ndakatozoiendeserwa kumapurisa namadam vangu vekuchikoro patopera mwedzi pavanga vaenda kuBindura kutown mushure mekunge vatoona kuti mari yekuenda kutown kunomhan’ara handaimboiwana sezvo ndiri nherera”(my teacher from school reported my case after one month when she had managed to go to Bindura town because she knew I couldn’t afford transport fare since I am an orphan).

Key informant Z, F (38) indicated that,

“Cases in Manga, Bindura rural are difficult to handle since the place is hard to reach due to its poor road network system and due to that fact sometimes we fail to attend to those cases or even delay service provision”.

The responses indicate that poor road infrastructure is a barrier to immediate service provision in cases sexual abuse in Manga. This is supported by the ecological systems theory where Davies (2023) portrays that community infrastructure may indirectly affect individual’s access to resources. This is also in accordance with Treat et al (2022) who portrays that as a result of Geographical isolation poverty increases in that environment and for instance many survivors of sexual abuse end up lacking necessary resources for transportation to distant healthcare facilities. Moreover on the Exosystem supported by the Ecological systems theory, It emphasises that limited resources in rural areas and underserved communities restricts survivors options to access resources which is true as it was indicated by the survivors responses that in most instances the option that would only be left to them is not to report.

4.3.2. Poor cellular network connectivity.

Respondents indicated that network connectivity in Manga is very poor such that in most cases service providers fail to reach survivors of sexual abuse, delaying assistance in the process. In many instances people have to get to high places in order to get access to network which is not even guaranteed that they will access it there. The researcher also noticed it during carrying out the research as she failed to get hold of participants on cellphone to an extent that she ended up physically visiting the place.

Key informant M, M (33) articulated that,

“In most cases when sexual abuse cases from Manga are reported, we then try to contact the survivors so that we can work on providing assistance but unfortunately in most cases we fail to reach them due to poor network connectivity in their area”.

Key informant D, F (52) added that,

“Manga has serious network challenges, in most cases during my experience in working in this place I usually fail to get hold of people in Manga when I try to do case follow ups, the network there is very poor such that even if you are lucky to reach them, the network connectivity might act up and as a result in most cases we ended up failing to hear each other”.

Participant A, F (10) portrayed that,

“Pandakaudza teacher vangu vekuchikoro nyaya yekubatwa kwangu chibharo, vakaita 5 days vachiti vari kuedza kufonera mapurisa asi network ichiramba”.(when I told my teacher that I was raped, it took her 5 days to be able to reach the police due to network challenges).

Participant H, F (14) articulated that,

“Poor network connectivity restricts us to have access to emergency helpline services such as child line”.

The findings reflect that poor network connectivity can be an obstacle in accessing immediate response services for sexual abuse as it is indicated from the responses by key informants and participants. These responses indicate a challenge to what was portrayed by Leroux et al (2022) that initiating technology can bridge gaps in accessibility of services through introduction of telephone or online counselling sessions for it overcomes barriers related to distance and mobility, as this may be difficult to implement in the case of Manga, Bindura rural, since network connectivity in the area is a poor. Hence the Chronosystem portrays that dimensions over time which is sometimes improvement in service delivery has an impact on how services are delivered which is a disadvantage to the Manga community as it is still backward in terms of technology.

The researcher observed that the issue of cellular network connectivity in Manga being poor is a serious issue for she even failed to reach participants whom were intended to be interviewed through phone calls to an extent that the researcher had to physically visit the place in order to conduct those interviews.

4.3.3. Fear of victimization and labelling.

One of the reasons behind the issue of underreporting of cases in Manga is the fear that participants have concerning being victimized and labelled. This usually takes place at family level as well as at community level according to the ecological systems theory on microsystem which emphasizes the direct influence or contribution of the family or community on stigma and trauma related distress that might affect an individual's ability to report cases of sexual abuse, thereby having an effect on immediate response services.

Participant E, F (12) posits that,

“Pekutanga ndaitya kuenda kunobatsirwa nenyaya yekutya kuzopihwa mazita ndichinzi ndiri munhu akabatwa chibharo” (at first I hesitated to report with the fear of being labelled and given names that I am a victim of rape).

Participant K, F (8) added on to say that,

“Ndaitombonzwawo vamwe vachivyeiwa nekutukiwa kunzi vakarepewa nemyaya yekuti vanoda varume ndikoswaka ini pazvakazondiwirawo zvakanditorera nguva kuti ndizviburitse pachena kuvabereki vangu nekuzoenda kunomhan'ara” (I used to hear others being gossiped about that they are into men that is why they were raped, that is the reason why when I experienced sexual abuse, I hesitated to seek assistance with the fear of being labelled).

Key informant B, M (54) concurred that,

“Victim blaming is a serious issue among community members and families, such that many cases of underreporting as well as delayed reporting is as a result of the fear that they would be lobbed and given names pertaining their experience”.

Key informant K, F (27) added that,

“Those myths surrounding sexual abuse in communities are affecting immediate response services because it increases underreporting or delayed reporting of cases, so we cannot attend to cases that we do not know. The only way we can offer service provision is when clients report their cases”

The above responses are in line with what was portrayed by Mutana and Gasva (2015) who concurred that the fear of victimization as well as the misunderstanding pertaining the definition

of rape is the reason that discourages survivors of sexual abuse from reporting as well as seeking assistance. In the context of societal and cultural influences, according to the macrosystem of the Ecological systems theory societal rape myths as well as victim blaming attitudes discourages reporting of sexual abuse cases. This then is a clear evidence that in most instances communities are lacking on conscientisation pertaining issues of sexual abuse and how such cases need to be handled.

4.3.4. Lack of support from families and surrounding community.

In many cases family as well as community norms and practices may be designed in a way that discourages participants from seeking help. In some cases families or community systems may either directly or indirectly threaten the decision of survivors of sexual abuse pertaining seeking assistance. Responses from key informants and participants are in support of this.

Participant G.F (12) mentioned that,

"Amai vangu vakanditi kana ndikamhan'ara kuti sekuru vakandiraper isu tichichengetwa pamba pavo tikadzingwa tinoendepi uye tochengetwa naani ivo vakaremara makumbo saka vakanditi ndingoshingirira kuti ndipedze chikoro ndozobva ndakuzvishandira, ndikosaka ndisina kumhan'ara". (The reason why I did not report that my uncle was sexually abusing me is because my mother said that if I report him and we are chased out from their house who will take care of us and where will we go and live since she cannot afford to take care of us since she has a disability, she then encouraged me to continue persevering until I finish school and I'm able to take care of myself then I move out from their house).

Participant B, F (14) added on to say that,

"Ndaisatozviziva kuti kubatwa chibharo kwandaiita nekuti kuchurch kwedu vamwe vezera rangu vakatoroorwa saka ndaitoti ndizvo zvinofanirwa kuitwa uye vabereki vangu vakanditi kana ndichiri mwana wavo ndinoterera zvinodiwa kuchurch, ndikosaka ndisina kumhan'ara". (I did not know that it was sexual abuse since it's the norm at our church because other woman my age at church are married so I thought it was a right thing to be done, also my parents told me that if I still wanted to be their child I should follow our church's beliefs).

Key informant D, M (47) indicated that,

During my years of experience I have noticed that family systems and community norms and values are the key obstacle in seeking assistance in terms of sexual abuse because since we are dealing with children here, it's obvious they would be under their parental or guardians influence, so if the parent is against them seeking assistance for sexual abuse then in most cases assistance will be delayed or it will not even be sought.

According to the responses indicated above, as reflected in the ecological systems theory on microsystem Jones (2022) supports the above responses portraying that survivors of sexual abuse in the microsystem can face stigma or trauma informed distress that may end up preventing them from seeking help, family and friends may also discourage reporting of sexual abuse cases due to their cultural beliefs or even fear of facing social backlash from their communities. As a result of this Manga is among the affected communities, hence this then becomes a factor that is affecting their community in accessing immediate response services for sexual abuse.

4.4. THEME TWO: AVAILABILITY, ACCESSIBILITY AND RESPONSIVENESS OF EXISTING SEXUAL ABUSE RESPONSE SERVICES IN MANGA, BINDURA RURAL.

The research also managed to examine the availability, accessibility as well as the effectiveness of the available response services for sexual abuse in Manga, Bindura rural. Key informants as well as participants managed to provide information on how available are the immediate response services for sexual abuse as well as to what extent are they accessible and effective to the community of Manga.

4.4.1. Difficulty in accessing.

Participants and key informants managed to outline that though services for response to sexual abuse are available, most of the population find it difficult to access due to various reasons they explained.

Key informant V, F (39) claimed that,

“Response services are there but they are difficult to access since they are only found in Bindura town and those coming from Manga find it hard to access. Taking for example services like healthcare, justice as well as psychosocial support may be difficult to access for people in Manga since hospitals, police stations and social services are all located in Bindura town, local clinics

may not offer such services since in most cases they may not have equipment as well as trained personals that can provide such services, hence immediate response services becomes difficult to access.”

Participant J, F (6) articulated that,

“Pane musu watisina kukwanisa kuenda kucourt paitongwa nyaya yangu mama vachicti vainga vasina mari yetransport unyazve kuSocial Welfare kwatakanzi tizodzoke kucounselling takatadza kuenda zvekare nekuti tanga tisina mari yetransport”.(there was another day that we failed to report for court session when my case was still under trial because my mother had no transport fare, also we did not manage to return back to social welfare for Psychosocial support since my parents had no money for transport).

Participant H, F (7) added on saying that,

“Patakaenda kuclinic yepedyo nesu takanzi tiende kubindura hospital kunopihwa PEP nekuti ivo vakange vasina paclinic uye ndiko zvekare kwataifanirwa kunotestiwa HIV nemamwe maSTI’s, KuBindura hospital takatonzi tiitwe two maHIV tests, yeshort term yaibuda ipapo neyelong term yaizobuda maresults after 3 months asi hatina hedu kuzoenda kunocollecter maresults acho pakapera mwedzi yacho mitatu nekuti kari dzacho dzetransport tinenge tisina”.(when we went to the clinic that is nearby we were referred to Bindura hospital so we can get PEP since they did not have that medication at the clinic. I was also tested for HIV and other STI’s at Bindura hospital though I did not manage to collect my long term results after 3 months since I had no funds for transport fare).

These findings according to responses from participants and key informants indicate that the inaccessibility of resources or difficulty in accessing resources is an obstacle to immediate response for sexual abuse cases. This is supported by Davies (2023) who portrays that limitations in resource allocation at Exosystem level according to the ecological systems theory can restrict service accessibility. In this case Manga has inadequate funding for sexual abuse services, hence resulting in inefficiency or less efficiency. (Leroux et al., 2022) accounts that the introduction of technology such as making use of whatsapp chatbot to help sexual abuse survivors may be vital as it may overcome barriers related to distance, but this is contrary to the situation in Manga as it has

less access to network connectivity, hence not applicable to the community as it does not solve their access problem.

4.4.2. Lack of engagement or poor feedback

In terms of healthcare, justice and social wellbeing for survivors of sexual abuse, Manga is still struggling on these aspects. Research findings are key indication that effectiveness of these aspects in Manga is very poor such that those who have to benefit are benefiting less, hence affecting immediate response services.

Participant S, F (16) articulated that,

“Inini ndakaabuswa ndichiri mwana mudiki, nenyaya yekuti zvakaitika kakawanda ndichinonoka kuwana rubatsiro nekuti paclinic zvimwe nguva panenge pasina mishonga, ndakazoita dambudziko rekuti bladder rangu rakabva raruza zvekuti chero nanhasi ndichiri kuita weti munagumbeze”. (I was sexually abused when I was still very young, due to the fact that it did not happen only one but multiple times and I was not getting enough medical assistance from the clinic since sometimes they did not have medication. I then developed a problem of having a loose bladder such that I cannot control my urine, hence I always wet my blankets).

Participant C, F (9) mentioned that,

“MaChild Care Workers nemanighbourhood watch emuno muManga handimboone kunyatsoshanda kwawo”. (I do not really notice the purpose of child care workers here in Manga for they are less effective).

Key informant D, M (47) indicated that,

“The main reason behind our inefficiency in service provision is that we are incapacitated to do that”.

According to these findings from the responses of participants and key informants, this is a clear indication that incapacitation or resource constraints affects timely response. These was also indicated by Child Safeguarding Practice Review Panel (CSPRP) in the Guardian news 2024 which states that a lack of adequate training and efficient resources among professionals affects timely response for sexual abuse and this is mainly found especially in Rural areas. This irrelevance of professionals in response to sexual abuse instills distrust of survivors in legal and

healthcare systems, hence influencing underreporting of cases. This is supported by Fitzgerald et al (2017) who posits that Survivors' perceptions of safety and trustworthiness within legal and healthcare systems significantly influence their willingness to seek assistance. As portrayed on the Mesosystem, (Smith, 2021) identifies that inadequate referral networks may confuse survivors such that they would not even know where exactly to seek help and as a result delaying immediate response.

4.4.3. Caregiver influence

In most cases, caregivers are the ones who influence immediate response for they are the ones who assist minors in reporting of cases, thus if they are against reporting of cases of sexual abuse, it then influences minors not to report or in some rare cases to report cases later, which then becomes a barrier to immediate response. According to the responses from participants as well as from key informants, it was noted that many unreported cases of sexual abuse in Manga, Bindura rural are a result of caregiver ignorance. Also many reported cases in the same community are as well a result of caregiver influence. Since the research is dealing with children, caregiver involvement of ignorance is a key element to immediate response services.

Participant L, F (7) articulated that,

“Chakaita ndinonoke kureporter case yangu yekubatwa chibharo inyaya yekuti pandakaudza tete vangu vandinogara navo vakaratidza kushaiwa hany’a nazvo, ndakatozomhan’ara mushure mekunge Nyaya yangu ndaiudza techer kuchikoro ndivo vakazondibatsira kunoreporter”. (when I told my aunt my case that I had been sexually abused, she showed me that she did not care, that is why I delayed to report, I then reported when I told my teacher at school who then helped me to report my case).

Participant S, F (13) added on saying that,

“Chitendero chekumba kwedu hachitendere kuenda kuchipatara, vabereki vangu vakandirambidza kuenda kuchipatara kwandanga ndanzi ndinobatsirwa, ndizvo zvakaite kuti ndinonoke kunobatsirwa zvekuti pandakatozonobatsirwa ndainge ndatobatira hutachiwana hweHIV”. (Our religion does not allow us to be treated at hospitals, so my parents denied me to get assistance from the hospital, so I ended up delaying treatment so when I then went to the hospital, I had been already infected with HIV).

Key informant B, M (54) clarified the issue saying,

“Since we are dealing with children here, it’s obvious that we have to seek assistance from their parents, hence if the parent is not interested or convinced that there is need for assistance, there are high chances that assistance will not be sought or it will be delayed, thereby affecting the issue of immediate response”.

These responses are in support of what was portrayed by Jones (2022) in the Macrosystem of the Ecological systems theory, suggesting that family influence can either encourage or discourage timely response. In this case the researcher managed to notice that most of the cases that were unreported to that were delayed to be reported is a result of family discouragement through caregiver ignorance. Scholars did not directly address this issue though (Mutana and Gasva, 2015) mentions about cultural influence to underreporting which is indirectly linked to family and societal influence as their practices are guided by societal norms and values, hence caregiver influences are influenced by cultural practices. In this case cultural stigma influences caregiver ignorance to reporting cases of sexual abuse.

4.4.4. Unreliable support networks

The issue of unreliable support networks is a trending issue in Manga as it was indicated by key informants and participants.

Participant J, F (17) indicated that,

“Handina masupport groups andakambonzwa munzvimbo ino anobatsira vanhu vanenge vakambosangana nedambudziko rekubatwa chibharo”. (I never heard of any support group in this place that help people who once experienced sexual abuse).

Participant M, F (15) also added on to say,

“KuBindura kutown ndiko kwega kunowanikwa masupport groups asi chinonditadzisa kuenda inyaya yekushaiwa mafunds etransport”(support groups are found in Bindura town of which what makes me not to attend is that I do not have funds for transport).

Key informant V, F (39) articulated that,

“Muno munzvimbo hamuna kana NGO kana imwe, maNGO’s angori kuBindura town ndiko kwaanowanikwa saka tinotongotemba nerubatsiro rwehurumende chete zvekutiwo hurumende

kana ikasatipa zvekushandisa zvakaitsa sematest kits nemaPEP hatina kumwe kwekuawana”(In this place we do not have any NGO, NGO’s are only found in Bindura town of which they are hard to access, so we only rely on government funding such that if the government does not provide test kits for HIV and AIDS we do not have any other option to obtain them).

This is an indication that support networks are an important aspect and their availability and accessibility is a crucial aspect for immediate response to sexual abuse. This is in line with Fitzgerald (2017) who posits that more broad and understanding of support barriers are key to the promotion of service engagement, especially for the ones who feels support may be of benefit to them. This is also evidenced on the Chronosystem which posits that changes over time such as evolving social attitudes may influence accessibility and in this case its the attitude of people in communities that has changed where everyone is now concerned about themselves and no longer interested in other peoples affairs such that people nowadays are too busy to establish support groups for people experiencing abuse, hence availability of response services is now unreliable.

4.4.5. limited facilities for service provision

Manga has limited facilities that provide services to survivors of sexual abuse. Respondents indicated that in some instances they have to travel long distances seeking for services , which is not feasible to survivors of sexual abuse in some instances those distances even require finance which some may not even afford.

Participant N.F. (11) articulated that,

“Maclinics ekuManga haashande 2/7 zvekuti pakaiika emergency haukwanise kuvabata” (Clinics in Manga do not operate 24/7 off which survivors of sexual abuse may fail to access them in emergency cases).

Participant C.F (9) added that,

“Kuno hakuna police station, kabase kemapurisa karikuno nguva zhinji kanenge kasina mapurisa zvekuti pamwe pachu ukabhinyiwa husiku unogona kushaiwa kwekuenda kunoreporter” (Here there is no police station there is only a police base that does not even operate 24/7 such that when you are raped in the evening you might fail to find where to report because most of the time there will be no one in the base).

Participant S.F (13) also mentioned that,

“Social services department inongowanikwa kuBindura town chete zvekuti kana uchitoda counselling kutotsvage Mari yetransport yekuendako” (The department that provides social services is only found in Bindura town such that if you may need counselling you will have to seek for transport money to go there).

Key informant K.F (27) articulated that,

“Most service providers, taking for instance the government itself, have centralized services such that in many cases those services may not be distributed equally to other communities such that geographically isolated places like Manga are at the most disadvantage being left out”

The researcher noticed that the issue of limited facilities entails delays in forensic examinations for there will be a competition of resources, as a result this will then affect timely response for sexual abuse. Chibango and chibango (2022) commented on this aspect indicating that timely forensic examinations are critical for evidence collection, since delaying them may cause trauma or compromise evidence integrity. This is also indicated on the Exosystem where it entails that community infrastructures and funding for social services accounts for the availability of, in this case as indicated by the respondents infrastructure in Manga is limited and social services are being underfunded such that services are not being adequately provided in the area. (Davies, 2023) also supports the idea mentioning that limitations in resource allocations at the Exosystem level can restrict service accessibility such that a community with inadequate funding for sexual abuse services may not have sufficient services or facilities and as a result limiting survivors access to services regardless of their personal circumstances.

4.4.6. Shortage of trained professionals

The issue of shortage of trained professionals in rural areas is an issue that is often overlooked on, yet it is an aspect that is affecting timely response for sexual abuse.

Key informant M.M (33) indicated that,

“In Manga rural clinic there are only just a few nurses who operate there”.

Key informant D.F (52) added that,

“At DSD we train volunteers to be child care workers since as social development officers we cannot manage to be everywhere every time due to the fact that we are also just a few, but those volunteers that we train will be just a few since its voluntary work which is unpaid”.

Key informant V.F (39) articulated that,

“At police we also train volunteers to work in diverse communities but the fact still remains that an unpaid job has less motivation”.

It is the researcher's sentiment that shortage of trained professionals affects immediate response for sexual abuse, previous researches had overlooked on this issue yet it's one of the driving factors affecting timely response because if professionals are few then their workload will be unbearable such that they end up neglecting other duties, as a result the clients are the ones who will be affected, in this case those clients are the survivors of sexual abuse. On the Macrosystem level of the Ecological systems theory this was indirectly mentioned on the assertion that economic disparities may restrict survivors from accessing services such that some may not afford legal or medical assistance, for instance in this case if trained professionals are few then the competition increases such that they will end up demanding payments of which some individuals cannot afford, hence accessibility constrain increases. This will then as a result delay timely interventions thereby going against the SDG 16 which is concerned about peace and justice.

4.4.7. Conscientisation and awareness issues

Due to the Geographical isolation of Manga, Bindura rural, it is often neglected on conscientisation programs and awareness campaigns. According to the responses from participants and key informants it was indicated that their community in most cases is disadvantaged on awareness pertaining sexual abuse.

Participant K.F (8) articulated that,

“Zemaawareness campaigns tongozvinzwirawo kunzvimbo dzevamwe kuno hazvisati zvakamboitwa” (We only hear about awareness campaigns being conducted in other places because in this place we never heard or do any awareness campaign)

Participant J.F (17) added that,

“Pachikoro pedu chaipo, teacher weguidance and counselling angori mumwechete zvekuti term yese inogona kutopera vasina kana kuomosvika kuclass kwedu nekuda kwekuwandirwa nekuti vanotodzidzisa zvekare mamwe masubjects, saka kunyasodzidza chaiko maererano nekudziviririka panhau dzekubatwa chibharo kushoma”(At our school we only have one teacher for guidance and counselling such that we might even spend the whole year without doing a lesson on guidance and counselling because the teacher we have will be having other subjects to attend to).

Key informant D.F (52) propounded that,

“In Manga some people do not even know the services that exist and are offered to survivors of sexual abuse due to the lack of conscientisation and awareness, some do not even know where to report to and what assistance are they supposed to receive such as healthcare or even social justice”.

Responses from key informants and participants are an indication that conscientisation and awareness issues in Manga are restricting the community from immediate response services for sexual abuse. Hence Snell et al (2020) propounded that empowering communities through education and training programs enhances responsiveness of sexual abuse response services. This is indirectly supported by (Jones, 2022) on the Microsystem level of the Ecological systems theory where the family and community has direct influence on survivors attitude towards reporting of sexual abuse, hence if they are kept aware and educated on sexual abuse and the reparkations of not reporting as well as benefits of reporting, then conscientisation and awareness issue in Manga will be addressed.

4.4.8. Unreliable law enforcement

Law enforcement in Manga is so unreliable such that residence of Manga community no longer have full trust in it. This was noted from the responses of participants.

Participant H.F (14) mentioned that,

“Chero ukaenda kunomhan’ara kwacho mapurisa acho anogona kusatosunga munhu wacho kunyanya kana ari munhu anemari dzake hake” (even I you go and report to the police they might not even take action especially if the perpetrator is rich)

Participant E.F (12) added on saying,

“Maneighbourhood ekuno handimboone kana basa rawo because pandakabatwa chibharo vakaita weak rese vasati vabata munhu wacho kusvikira ndatozoenda ndega kuBindura police station kunomhan’ara”. (The neighborhood watch in this place is not relevant enough such that when I reported my case to them they did not take action until I went to the police station to report the case on my own).

Key informant K.F (27) articulated that,

“Sometimes is the lack of adequate resources that restricts us from adequately implementing law enforcement for example here we do not even have a transportation vehicle”

This is in line with what was portrayed by Fitzgerald et al (2017) survivor’s perceptions of safety and trustworthiness within legal and healthcare systems significantly influences their willingness to seek assistance. Thereby in Manga survivors are being discouraged by how the services are being provided to them, hence the rate of underreporting of cases of sexual abuse is increasing in their community. This is also mentioned at the Chronosystem level of the Ecological systems theory where legislative reforms and their extent of enforcement can either improve or restrict service availability and in this case it is limiting service accessibility in Manga, Bindura rural and instituting unreliability of such services in the area.

4.4.9. Insensitive treatment

The respondents especially the participants were complaining about the insensitive treatment they receive from the service providers such as the nurses and even the police itself.

Participant S.F (16) articulated that,

“Handina kufarira interrogation yandakaitwa kumapurisa nekuti mabvunzirwo acho aitotyisa kutoita sekuti ndini ndainge ndapara mhosva”. (I did not like the treatment I received at police because the way they interrogated me it was as if I was the one who had committed a crime).

Participant A.F (10) Mentioned that,

“Treatment yaunopihwa nemanurse emazuvaano inototyisa zvekuti unototyia kuenda kunobatsirwa nekuti vazhinji vavo vanobata vanhu nekuseri kweruoko”. (The treatment that you receive from the

nurses these days is so scary to an extent that you end up fearing to seek assistance because most of them do not treat patients very well).

Key informant

Participant's responses indicate that they are much worried about the treatment they are receiving from service providers. Hence they end up delaying to seek assistance or even in some instances some may not even seek that assistance. This then calls for the involvement of social workers in every aspect so they can ensure survivors receive proper treatment as well as social justice. It is the responsibility of the social worker to respond to the needs of the individual in many ways, including through information provision, support, counselling, referral and advocacy (McClennen et al., 2016). It is important for victims of sexual assault to obtain adequate and timely support in these settings. The Mesosystem level also supports this issue claiming that poor coordination between service providers or institutions can either influence or restrict service provision may result in insensitive treatment and also lack of proper training of professionals which is evidenced at the Chronosystem level on the improvement of service delivery model. If these are not properly implemented then there is risk of insensitive treatment towards survivors of sexual abuse. As a result affecting responsiveness of services.

4.4.10. less/no long term case follow up

In Manga community, the issue of case follow ups is a serious issue since the environment is difficult to reach due to its Geographical isolation as well as network problems. This was an issue that was indicated according to the responses from participants and key informants.

Key informant E.F (12) portrayed that,

“It is a difficult task to conduct case follow ups in Manga since the place is hard to reach, so with limited funds that we will be working with, sometimes we end up not being able to conduct those case follow ups”.

Participant M.F (15) Indicated that,

“Inini pakangoitika case yangu ndakangwana counselling kamwe chete bedzi mazuva andaienda kuBindura kucourt paitongwa nyaya yangu, kuzobva ipapo ndakangonzi tichakufonera nekukuvisitira asi kusvika nanhasi hapana kana ati afona kana kuuya asi nyaya yangu yatove

nemakore yaitika”(when my case was being done, I only received counselling once when I had gone to Bindura for my case trial, after that they said they would call me or visit, but up until now, no one called me or visited, yet it’s now years since my case took place).

Participant N.F (11) added that,

“Kuti unyatsowana total healing zvinenge zvichitoda kuti urambe uchiwana support necounselling chaiyo” (for one to have total healing there is need to get continuous support and counselling)

According to the findings of the research immediate response services in Manga are being affected by long term case follow ups which are not being adequately held. This was also propounded by the Australian Center for Post Traumatic Mental Health, mentioning that, when victims do not access continuous support, it’s not only their Physical health that is affected but they also may suffer problems related to mental and emotional harm in long term. (Smith, 2021) on the Chronosystem level of the Ecological systems theory accounts that the interplay between all levels of the Ecological systems theory ensures that services not only exist but are also timely and appropriate to survivors needs, which is exactly what is not being done to Manga community as follow ups of cases are not being portrayed adequately in a way that ensures timely continuous service delivery.

4.5. THEME THREE: PROPOSED COPYING STRATEGIES THAT CAN BE ADOPTED TO ENHANCE AVAILABILITY, ACCESSIBILITY AND EFFECTIVENESS OF SEXUAL ABUSE RESPONSE SERVICES FOR UNDERSERVED COMMUNITIES IN BINDURA RURAL.

4.5.1. Recruit and train local volunteers.

The issue of recruiting and training more local volunteers is an issue that was raised by all participants, propounding that if more volunteers are thoroughly trained and continuously motivated, they then do their work putting more effort.

Participant J.F (6) articulated that,

“Zvakakosha kusarudza, kudzidzisa nekutraina vanhu vanenge vazvipira munharaunda kuti vabatsire vanhu vanenge vasangana dedambudziko rekubatwa chibharo, izvi zvakakosha kunyanya kuvasikana naanamai nekuti munhu anonyanyisa kusununguka kubatsirwa

nemukadzi”(it is important to recruit, teach and train people who volunteer in the community to help people who have been sexually abused, this is important especially to girls and women since survivors may be more comfortable to share their experience with women other than men).

Participant H.F (7) added that,

“Mavolunteers acho kuti anyatsoita basa rawo nemazvo vanodawo kana twumainsentives, ingave Kamari kana kadiki hako kana kagrocery kaanopihwa mushure mekunge amhan’ara case, izvi zvinovamotivheta kushanda basa ravo nemazvo uyezve kuti vaite serious kana vaona kana kunza panenge paitika case yesexual abuse”.(for the volunteers to do their work properly, they need to be given incentives weather in small amounts of money or even grocery whenever they report cases, this then will encourage them to do their work seriously, as a result this will encourage them to effectively handle cases when they see or hear about them).

Key informant G.F (12) indicated that,

“It is important to train local volunteers so that they can be equipped on providing services such as basic first aid as well as basic psychology, so that even in the absence of higher authorities, they will be able to assist survivors of sexual abuse and even conduct case follow ups as well as referrals”.

As indicated in the responses by the key informants as well as the participants, involvement of local volunteers is an important aspect. This is so due to the fact that community members understand each other’s problems and concerns more than anyone can do. Hence, upon the researcher’s sentiments it then encourages developmental social work, where the community is involved in developing their own community other than remedial social work where the social worker or the service provider had to do everything themselves in solving community’s problems. Thus moving from the previous researches that were mainly focusing on problem solving other than addressing the root cause of the problem. Since according to the Microsystem as propounded by (Smith, 2021) the family and the community are the ones who directly influence an individual on reporting of cases, they need to be given first priority to be recruited and trained as local volunteers

4.5.2. Mobile response

Participants as well as key informants managed to come up with a solution on mobile response, since network challenge is an immerging issue in Manga. They indicated on alternative ways that can be utilized so as to ensure an effective access to immediate response services in the community.

Participant S.F (13) suggested that,

“Nekuda kwekunetsa kwenetrwork uye pasina mari dzematransport panogona kuitwa zvekugadzirwa masuggestion boxes anoiswa munzvimbo dzakasiyana siyana dzinowanikwa vanhu vakawanda, anenge aine case yake yaanenge asangana nayo kana kunzwa obva angoinyora pasi okanda mubox imomo then vemutemo vopota vachitora every week”(since the issue of mobile network and transport network is a major issue in Manga, There can be an alternative of suggestion boxes that can be put in most places of influence so that if anyone can experience or hear any case of sexual abuse, they can just write it and put in those suggestion boxes that can be collected by responsible authorities at weekly bases).

Participant D.F (9) added that,

“Kana network ichinetsa panogona kuitwa even zve messages kana tsamba chaidzo kune vasina maphone, nekuti message kana tsamba zvinozongosvika”(there can be made use of messages [SMS] or even letters are also useful so that cases do not remain unattended due to network challenges).

Key informant D.M (47) proposed that,

“It is a better idea to make use of other alternatives instead of focusing on a single method that is not even functional such as the issue of focusing on phone calls that are not even functional, it is better to change to other methods that are responsive in that certain area”.

As indicated in the responses, participants and key informants suggested other alternatives that can be implemented instead of just focusing on an aspect that is not even functional which is not even ideal for a certain community. This then supports the fact that every community has its own problems that are unique from other communities and those have to be treated unique as well, which is one of the Social work value on ‘Individualization’ which suggests that clients are unique and have to be treated as such.

This shows there is need to establish an effective method of accessing people in Manga which is unique, that anyone in their community can afford. According to Leroux et al (2022), people in South Sudan also introduced a Whatsapp Chatboat in a way to immediately address sexual abuse survivor's needs and this became a success as it increased the rate of reporting for sexual abuse cases. (Spotlight initiative, n.d.) is also in support of this as it entails that mobile service provision through specially designed trucks and established transport links can be useful to survivors of sexual abuse in hard to reach communities. Since the Exosystem is more concerned about community structures and infrastructures influencing accessibility, hence mobile response can be useful.

4.5.3. Conscientisation and awareness programs.

It is of a notable importance to address the issue of conscientisation and awareness, since it is an issue that was raised by participants. They also suggested that those conscientisation and awareness programs should be regularly done in their community so that their society will be kept aware on what is sexual abuse and how best can it be addressed.

Key informant D.F (52) suggested that,

“In my work experience I have seen conscientisation and awareness programs changing the lifestyles and statuses of many environments and communities as it increases the knowledge base of people in the community”.

Participant J.F (17) also articulated that,

“Tinodawo maprograms anotidzidzisa kuti nyaya dzekubatwa chibharo dzinogadziriswa sei kuitira kuti secommunity tigare takazvichengetedza”(we also need programs that educates us on issues pertaining sexual abuse and how they can be handled so that as a community we will know how best can we keep our community safe).

Participant M.F (15) added that,

“Pakagara pachitwa maawareness campaigns vanhu tinogara tiri alert” (if awareness campaigns are held consistently as a community we will be kept alert).

Findings of the research portray that awareness campaigns are a critical aspect that can enhance immediate response services for Manga. This was noted by the researcher according to the Participants and key informants responses. This is also in support of what was portrayed by Snell

et al (2020) that empowering local communities through training and education programs increases the effectiveness of sexual abuse response services. This is supported by the Chronosystem which portrays that there is need for changes in line with time so that initiatives for service provision corresponds in line with time.

4.5.4. Support groups

Support groups are also an important aspect in emergency response as they are a place where survivors interact and share their experiences as well as solutions to their related problems. The researcher noted that as what is needed in Manga for the researcher could not even manage to do focus group discussions in Manga since the research constituted of sensitive information and there was no an already functional support group it would have been hard for the researcher to combine survivors into a group and share such sensitive information, hence there is need to conduct an effective support group that social workers would use to conduct other forms of therapy for sexual abuse survivors.

Participant S.F (16) articulated that,

“Support group rakanaka nekuti unonzwawo zvakasanganikwa nevamwe vako wotoona kuti hausiri iwe wega watanga kusangana nedambudziko”(support groups are good, you will get to know what others experience and see that you are not alone in your situation and not the first person to experience such a situation).

Participant C.F (9) added that,

“Masupport groups anounza relief nesense of belonging” (support groups brings relief and a sense of belonging).

Key informant K.F (27) proposed that,

“Support groups are a very important aspect for they impede positive response from survivors, they are also a form of better therapy and they allow community involvement in handling problems”.

Responses from the research indicates that, survivors of sexual abuse from Manga community are ready to welcome the idea of support groups as a strategy to overcome immediate response services for sexual abuse and what is left is only to implement the idea. This was also supported by Sun

(2024) who portrays that it is important to expand therapeutic options beyond traditional counselling in a way to cater for diverse survivor needs. Since on the Microsystem the community's direct influences encompass for accessibility of services there is need to organise support groups within the microsystem so they can positively influence survivors.

4.5.5. Schedule monthly visits by Social workers.

“Since social workers are the first to engage with survivors of sexual abuse, it is of a significant importance that they schedule visits in Manga community on monthly basis”.

Key informant V.F (39) posits that,

“It is of a paramount importance for social workers to continuously visit survivors of sexual abuse conducting case follow ups so that they continuously assess client’s progress and since manga is difficult to access due to poor road networks, those visits can be conducted even once a month”.

Participant G.F (12) articulates that,

“Masocial workers anofanirwa kuzadzisa zvavanenge vataura patinenge tasangana navo pekutanga kuti vachazoramba vachitifonera nekutishanyira vachinzwa kuti progress yakamira sei” (Social workers need to fulfill what they tell us on our first encounter with them that they are going to keep in touch with us and visit us doing case follow ups).

Participant M.F (15) indicated that,

“Kuvisitirwa nemasocial workers chero kungosenderwa chero tsamba zvayo zvinondiita kuti ndifeele kuti kunevanhu vachiri kutondidawo uye vane hanya neni” (being visited by social workers makes me feel that there are people who still love me and care for me).

During the research, the researcher noticed that participants were speaking the issue of being visited by social workers with enthusiasm and very eager to be visited by social workers as many claimed that it makes them feel loved and cared for after a tragic experience of being sexually abused. This issue has been previously overlooked by previous researches, yet it is an issue that holds a paramount importance. Since social workers work across all sectors in providing services and can easily penetrate through all institutions they can then advocate for the implementation of what is suggested by the Exosystem which is collaboration of institutions and service providers in service provision. They can also implement what was portrayed by (Sun, 2024) which is expanding

therapeutic options beyond just traditional counselling to other developmental options that can cater for diverse survivor needs.

4.5.6. Mobilization of resources and case conferencing

Case conferencing and mobilization of resources are key aspects on the provision of immediate response services for sexual abuse.

Participant S.F (16) proposed that,

“Chishuwo chedu kuti kana zvikwanisiro zvekuti tibatsirwe zvichishaikwa hataigona here kukumbirirwa kune mamwe maorganisation anobatsira vanhu vakaita sesu kuitira kuti tisashairwe zvikwanisiro zvekuti tibatsirwe” (our wish is that, if resources to help us do not permit, is it not okay that resources can be sought from other organisations that help people like us so that limitations of resources will not deny us to be effectively assisted.

Key informant M.M (33) posits that,

“Involving different sectors in problem solving is critical as it allows an individual to obtain assistance from diverse sectors. In this case, a survivor of sexual abuse has to obtain assistance from the police, healthcare as well as social justice from social workers”.

This was supported by Muridzo and Chikadzi (2020) articulating that Implementing a multispectral and coordinated approach is vital , for instance the Victim friendly system in Zimbabwe (VFS) exemplifies this strategy through integrating professionals from social work, healthcare, law enforcement and the justice system so as to provide comprehensive support to child sexual abuse survivors. This collaboration enhances service delivery efficiency and improves outcomes for victims. As also indicated by the responses from participants, if resources are not enough, social worker as a broker need to work tirelessly in order to mobilize resources for clients from different sources. This is also in line with what was portrayed by the Mesosystem in the Ecological systems theory, that if collaboration and coordination between service providers is effectively portrayed, service accessibility may increase.

4.6. CHAPTER SUMMARY

The chapter has fulfilled its purpose of presentation of data, discussion and analysis of findings from the research study. The chapter firstly provided demographic information of participants and

key informants. The main findings the researcher obtained were that of the factors affecting immediate response services pertaining sexual abuse in Manga, Bindura rural, these includes poor road network, unfavorable network connectivity, fear of labelling and victimization as well as lack of support from family and the surrounding community. The research also stretched to accessing the availability, accessibility as well as the responsiveness of immediate response services for sexual abuse in the Manga community in Bindura. The findings pertaining these involved access difficulty, lack of engagement or poor feedback, caregiver influence, unreliable support networks, limited facilities for service provision , shortage of trained professionals, conscientisation and awareness issues, unreliable law enforcement, insensitive treatment and less or no lone m case follow ups. Lastly, respondents identified strategies that can be implemented in order to enhance the availability, accessibility and effectiveness of immediate response services for sexual abuse in their community. These were the need to recruit and train local volunteers, mobile response, conscientisation and awareness programs, support groups, scheduled monthly visits by social workers, mobilization of resources as well as implementation of case conferencing. The next chapter will provide a summary of the findings, conclusions as well as recommendations for future study.

CHAPTER 5: SUMMARY, CONCLUSIONS, RECOMMENDATIONS AND FRAMEWORK

5.1.INTRODUCTION

This chapter constitutes a summary of this study. The chapter also serves to make conclusions on the main findings of this project. Recommendations are also part of this chapter as they serve the purpose of assisting the implementation of this program in future. The government and other non-governmental organizations who are into child protection can also benefit from the recommendations highlighted in this project, in their quest to assist children surviving sexual abuse, especially in places where resources are scarce to access.

5.2. SUMMARY

The aim of this study was to examine the challenges faced by underserved communities in Manga, Bindura rural in accessing immediate response services for sexual abuse. The study objectives included to identify the factors that hinder access to immediate response services for sexual abuse in Manga, Bindura rural, to examine the availability, accessibility, and responsiveness of existing sexual abuse response services in Bindura rural as well as to propose coping strategies that can be adopted to enhance the accessibility and effectiveness of sexual abuse response services for underserved communities in Bindura rural. The study utilised the Ecological systems theory by Bronfenbrenner. Case study research design was used in this research. Purposive sampling

technique was used to select the sample from a total population. The study was conducted with survivors of sexual abuse below the age of 18 years. 15 participants were selected to represent other survivors of sexual abuse in Manga, Bindura rural as the information they would provide was enough for the study since the information they would provide would be the same even if all survivors of sexual abuse in Manga were to be interviewed, due to time and resources 15 participants were enough. 6 key informants were selected from the Department of Social Development, ministry of health and child care, Victim friendly Unit (VFU) as well as Magistrate's court so they could provide more clarity pertaining issues of the study.

Key findings

The research managed to identify key elements that are hindering access to immediate response services for sexual abuse in Manga, Bindura rural.

These elements include:

- Poor road network
- Poor cellular network connectivity
- Fear of victimization and labeling
- Lack of support from families and surrounding community

These elements are influencing the underreporting of cases as well as delaying the reporting of cases for sexual abuse in Manga community as they also influence the availability, accessibility as well as responsiveness of services in Manga, Bindura rural as indicated in the objective 2 of this study.

The second objective identified the extent to which sexual abuse response services are available, accessible as well as responsive in Manga, Bindura rural community.

The issues that were identified by respondents involved:

- Access difficulty
- Lack of engagement or poor feedback
- Caregiver influence
- Unreliable support networks
- Limited facilities for service provision

- Shortage of trained professionals
- Conscientisation and awareness issues
- Unreliable law enforcement
- Insensitive treatment
- Less or no long term case follow ups

The issues that were identified by respondents indicated that availability, accessibility and responsiveness of services in Manga is a disaster that need to be addressed from a multisectoral aspect, hence the need to make use of the ecological systems theory when addressing those issues. This then paved way for the third objective in which respondents proposed copying strategies that can be adopted as a way to enhance availability, accessibility and effectiveness of sexual abuse response services for Manga, Bindura rural.

The respondents managed to come up with copying strategies that can be implemented to improve availability, accessibility as well as effectiveness of services for sexual abuse response in Manga, Bindura rural.

Some of the strategies identified by respondents involved:

- Recruit and train local volunteers
- Initiate mobile response
- Implement conscientisation and awareness programs
- Support groups
- Schedule regular visits by social workers
- Mobilization of resources and effective case conferencing

The strategies that have been recommended are multisectoral in nature though they mainly require community participation. Some of the strategies also require a lot of material resources for implementation. Hence the need for collaboration of multiple sectors such as the community, Government as well as other Non Governmental Organisations (NGO's).

5.3. CONCLUSIONS

5.3.1 factors affecting access

Manga is strongly disadvantaged in terms of access to services for sexual abuse due to a wide range of factors that mainly emanates from its geographical isolation.

The researcher then concluded that, factors surrounding the inaccessibility of sexual abuse response services in Manga is mainly influenced by its geographical isolation from services. According to the findings from respondents, Manga experiences a lot of dangers to minors due to the fact that services are inaccessible and this then leaves survivors of sexual abuse being vulnerable in most instances without proper care. According to the responses from participants and key informants, the researcher was convinced that systemic barriers and geographical isolation are the main factors that are affecting immediate response services for sexual abuse in Manga, Bindura rural and other factors then follow. These factors then influence availability, accessibility and effectiveness of services that was indicated in objective number 2 of this study.

5.3.2 availability, accessibility and responsiveness of services.

The issue pertaining availability, accessibility and effectiveness or responsiveness of sexual abuse services in Manga, Bindura rural is a concerning issue as it is affecting survivors of sexual abuse. During the course of the study, The researcher came to light with the fact that resources are not always available to survivors, in some instances where they are available the researcher also noticed that in most cases they will be inaccessible and at times to the few that would have managed to access, the services are in most cases ineffective. That as a result brings us to a conclusion that survivors of sexual abuse in Manga are at a disadvantage of acquiring help from the helping agencies such as the social services, the justice system as well as the healthcare provision. This then in the process will impose a long term negative impact in survivors of sexual abuse. Hence the issue needs to be addressed. In trying to solve this issue, the researcher with assistance from the respondents came up with strategies that can be implemented in order to improve access to immediate response services for sexual abuse in Manga, Bindura rural.

5.3.3 proposed strategies to improve access to immediate response services for sexual abuse in Manga, Bindura rural.

The study managed to come up with strategies such as recruiting and training local volunteers that will assist in providing needed assistance to survivors of sexual abuse, this then will improve on the increase of trained professionals so that even in the absence of the responsible authorities, those volunteers will always be available for assistance, research also noticed that those volunteers need to be given incentives so that they are encouraged. This as a result will improve service provision for survivors of sexual abuse in Manga, Bindura rural.

The research also came up with strategies such as initiating mobile response that is suitable and vibrant in their community, conducting education and awareness programs was also proposed so that the community is kept aware on how to handle issues pertaining sexual abuse. The issue of support groups was also raised as it is beneficial to survivors of sexual abuse and also an effective way of providing therapy to those survivors. Regular visits by social workers is also another strategy that was proposed by respondents as an effective way, case conferencing and mobilization of resources is also another strategy that was proposed. By this the researcher came to a conclusion that if these strategies are implemented, then access to immediate response services for sexual abuse in Manga, Bindura rural will be improved.

5.3.4 The need for addressing vulnerability

As evidenced by the findings from the study, it can be concluded that services have to be ensured that they are always available to everyone despite their location so that every child nationwide is kept protected from any form of harm or danger. This was identified during the course of the study as it was indicated by the respondents that vulnerability in children is an issue that requires immediate attention before it impacts negative impacts in which some of them are long term impacts, taking for instance the spread of diseases such as HIV and AIDS or even an increase to unethical behavior in the community such as prostitution, hence the community urged service providers to address vulnerability in children. The community also urged the government and other service providers to ensure there is strict law enforcement on sexual abuse as well as implementation of policies such as the Sexual Offences Act in rural areas so that vulnerability in minors to sexual abuse will be addressed.

5.3.5 community engagement

Since the problem is emanating from the community, The researcher concluded that, the problem requires the community to be solved. As it was indicated from the responses from the community members, particularly the survivors of sexual abuse themselves, the community is of more importance in ensuring there is immediate response services for sexual abuse if they are well educated on how such issues have to be handled. This can be done through establishments of support groups from the community, or even finding volunteers from the community that assist in cases in cases where responsible authorities are absent to provide immediate response, This was also supported by the ecological systems theory where it mentions that on the microsystem, the

immediate environment where the individual directly interacts has an impact on their development, hence their engagement imposes positive change on one's development.

5.4 RECOMMENDATIONS.

5.4.1 collaboration and coordination

Collaboration and coordination brings out positive impact when handling issues that are sensitive and when dealing with vulnerable groups especially those living in disadvantaged situations or environments. When handling cases of sexual violence, there is need for collaboration of the DSD, VFU, Hospital, Women Affairs department, and other NGO's that deals with survivors of sexual violence. This collaboration is important such that survivors will get assistance from multiple sectors and this includes health assistance that they get from the hospital, social justice and social welfare assistance from the DSD, legal assistance from the VFU and many other forms of assistance that they get from various NGO's depending on what they offer, taking for instance the Msasa project that focuses on gender based violence issues, REPSSI that provides psychosocial support to children, to mention but just a few. The community is also key to collaborate with as they are more versed about the environment in which the survivor is coming from.

5.4.2 Community involvement

It is best to involve community when solving its problems since they know their problems and how best those problems can be addressed since they are the ones experiencing them. In this case of providing immediate response for sexual abuse, it is more ideal to consult the community first so that they tell how they want the issue to be solved, this will ensure effectiveness of services other than just imposing services to the community and risk providing unnecessary services to the community in the process. Thus the success behind each initiative lies behind its ability to recognize key stakeholders who can influence its success or even hinder its progress, in this case the community itself is the key stakeholder, yet is often neglected in most initiatives.

5.4.3 Social Worker's involvement

The core mandate for social work is child protection, hence social workers have proved for a long time to be experts of child protection. During their training they have modules such as child welfare which is crucial in understanding how to deal with children, moreover some of the social workers

have had experience in working with vulnerable children in institutions like the DSD among other child protection agencies and this itself enhanced their expertise in handling cases of child protection. Hence upon provision of immediate response services for sexual abuse in Manga, Bindura rural, it is critical to involve social workers in handling such issues.

5.4.4 Policy enforcement

Policies are there that protect children from sexual abuse, yet their implementation in Manga has been a questionable for years. Corruption has created an environment that is not suitable for vulnerable children in the Manga community, as the law enforcement agencies in the community are being paid at the expense of justice. It is critical to ensure the implementation of policies such as the Children's Act [Chapter 5:06] as well as the Criminal Law [Criminal Law (Miscellaneous Provisions) Amendment] Act [Chapter 9:23] and even the Sexual Offences Act, making sure they are being seriously taken into consideration in Manga so that children remain protected from sexual harm. This can be possible if the community and their community leaders liaise with the judicial system and ensure there are strict measures against perpetrators of sexual abuse, this in the process will improve the reporting of sexual abuse cases and even reduce the occurrence of such crimes in Manga, Bindura rural community. The government also have a role to partake in ensuring that policies are not just being formulated only but also implemented. Social workers also as the advocates of social justice need to ensure that they advocate for the implementation of such policies.

5.4.5 infrastructure development

As it was already indicated during the study that Manga is a geographically isolated community that is associated with poor infrastructure that even affects its proximity to road as well as cellular network, there is need for the government in collaboration with other service provider companies that deals with road construction and cellular network connectivity to work towards improvement of infrastructure development in Manga, Bindura rural community so that the community does not remain underserved but also develop just like other communities. This will also be in line with the country's vision 2030 which is leaving no one and no place behind, in the process of achieving an upper middle income economy by 2030.

5.4.6 child protection programs

It is a necessity to implement various child protection programs such that children will always be protected and not neglected. This requires the Government as well as other NGO's to take note of

programs that benefits children and protect them from sexual violence. This involves conducting of awareness programs in schools or in local communities so that children and the community will be kept aware on how to respond to sexual violence and get immediate response.

5.4.7 further studies on underserved communities

The researcher observed that there has been little research on issues pertaining access to services in rural underserved communities such as the Manga community of Bindura rural, especially on issues to do with access to immediate response services for sexual abuse as well As other key issues affecting the community. The researcher therefore recommends further studies on access to response services in various underserved communities, in this case when policies are being made and resources being allocated, such communities will also then be taken into consideration. In this case inclusive development will then be attained.

5.5 intervention framework: A Collaborative Integrated Access Framework for Immediate Response to Sexual Abuse in Rural Zimbabwe (CIAFIR-SARZ)



From the data collected and analysed, a five-phase process was identified and developed into a Collaborative Integrated Access Framework for Immediate Response to Sexual Abuse in Rural Zimbabwe (CIAFIR-SARZ). The framework was developed to answer the three problem questions in this project which are What factors affect access to immediate response services for sexual abuse?, How accessible, available and responsive are the existing sexual abuse response services? and which strategies can be proposed to improve the availability, accessibility and responsiveness of immediate response services?. The main Aim of the CIAFIR-SARZ was to ensure there is access to services in rural areas despite the challenges surrounding them, thereby obtaining evidence to factors affecting their access to services as well as the reliability of services they are in access to, as a result providing strategies that can be implemented to ensure there is service accessibility. Some of the strategies were suggested by the survivors of sexual abuse themselves which is important for ensuring there is provision of relevant services that are acceptable by the community especially the survivors,

The first step of the framework was to categorize barriers to service access. These barriers were categorized into four phases which are structural which involves poor road network as well as poor cellular network which is critical as geographical isolation is key to affecting service provision especially in rural areas in Zimbabwe, socio-cultural that includes issues to do with labelling, victimization, stigma as well as myths associated with rape cases which has a strong emotional impact on survivors pertaining the reporting of such cases, legal and institutional barriers which involves mistrust in institutions, slow legal processes as well as insensitive handling of cases and also emotional and psychological barriers involving fear of retaliation, trauma response and low self-esteem. These factors were categorized as such they all of them portray a negative impact on the accessibility, availability and effectiveness of services.

The second phase of the CIAFIR-SARZ framework was on the effects of access challenges to immediate response services for sexual abuse. These involve access difficulty, caregiver negative influence, lack of engagement and poor feedback, unreliable support networks, poor law enforcement, weak accountability, increased burden on health and social systems, underreporting as well as insensitive treatment. This then paves way for the third stage which is staged on strategies that can be implemented in a way to address the challenges. These strategies involved

recruitment and training of local volunteers so as to address the issue of shortage of trained professionals, mobilization of resources, conscientisation and awareness programmes, establishment of support groups, scheduling regular visits by social workers as well as initiating mobile response and case conferencing.

The fourth phase of the framework is on the intervention process which is guided by five aspects which are microsystem that is the direct influencers of an individual which are the family, peers and the community. Followed by the mesosystem that is coordination of service providers and institutions. Thirdly there is the Exosystem, which is characterized by community and institutional factors such as infrastructure and funding for social services. This is followed by the macrosystem which involves cultural, social and ideological contexts. Lastly there is the Chronosystem which is associated with changes over time, evolving social attitudes, legislative reforms as well as improving service delivery models.

The fifth and final phase is on the positive outcome which is what the study is intended to achieve and in this case it involves improved mental health and psychosocial adjustments, physical health development and the overall wellbeing of the child to mention some.

This framework is important as it improves service provision across the often neglected sectors and communities. This framework will also assist many sectors such as the families, communities, service providers and will also influence policy and decision making across various sectors of child protection on service provision initiatives. Since the children are vulnerable individuals and those in rural communities are often neglected, the researcher then aims to be the voice of the voiceless which is children experiencing sexual violence in rural areas and are facing hard times in accessing services, aiming for quicker interventions such that there will be reduction of continuous harm to such individuals.

5.6. CONCLUSION

This chapter covered the summary of the whole study providing conclusions informed by the findings from the study as well as bringing out a way forward and areas for future studies. Recommendations were also included in this Chapter such that it informs the social work profession as well as ensuring the objectives of the study are met. The chapter also provided the CIAFIR-SARZ intervention framework in a way to understand and achieve the purpose of the study.

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APPENDICES

Appendix A: Indepth Interview Guide for Participants and Key Informants

Informed concent statement

Title: perspective on the accessibility of immediate response services for sexual abuse in Manga, Bindura rural

Researcher: Vimbainashe Runyaho

Concent form and introduction letter to key informants and participants.

You are being invited to participate in a research being conducted by Vimbainashe Runyaho, a fourth year student at Bindura university of science education. Currently studying towards a Bachelor of Science Honours Degree in Social Work. Upon the process of attaining this degree, research is one of our requirements in completing a social work degree. Hense the need for carrying out a research on "a perspective on the accessibility of immediate response services for sexual abuse in Manga, Bindura rural. Your concent in participating in this research is greatly appreciated. If you agree to participate, you will be asked to engage in an in-depth interview with the researcher. The interviews will involve questions related to your experiences, challenges, and perceptions regarding immediateresponse services for sexual abuse in Manga. At any point you may feel uncomfortable in participating in this research, you are free to withdraw or choose not to answer some of the questions . The researcher is using interviews as a method of collecting data, this may require a physical dialogue with you as the key informant. The interview will not exceed 30mins. All information collected during this study will be kept confidential and stored securely.

Your personal identifying information and responses will be anonymised, and any identifying details will be removed from the final report to ensure your privacy.

Contact Information:

If you have any questions or concerns regarding this study, please feel free to contact 0716996587 or vrunyaho@gmail.com

Consent:

By signing below, you confirm that you have read and understood the information provided in this informed consent statement, voluntarily agree to participate in this research study and give your consent for the use of the data collected for research purposes.

Participant signature.....

Date.....

Key informant and participants indepth interview guide

Section A

Demographic information for key informants and participants

- 1.Age
- 2.Sex
- 3.marital status
- 4.designation
- 5.religion
- 6.experience
- 7.educational level
8. Religion

Section B: Factors affecting access to immediate response services for sexual abuse in Manga

What are the factors affecting manga to access immediate response services for sexual abuse?

Does the community have access to medical equipment for response to sexual abuse

Who is benefiting from emergency helplines for sexual abuse and how accessible are they in your community

Section C: accessibility, availability and effectiveness of emergency response services for sexual abuse in Manga.

What are the available emergency response services in your area and what are they.

Do you have access to emergency response services for sexual abuse in your community.

Are the available networks and services for sexual abuse responsive in cases of emergency.

Do you have sexual abuse survivor's support services in your area?

are your support systems functional?

Are the caregivers involved in responding to sexual abuse?

Section D: Strategies that can be proposed

What intervention strategies are currently being implemented in your community in order to enhance access to immediate response services for sexual abuse.

How effective are those strategies in your area, are there any loopholes, if there are there indicate them.

In your own view, what strategies can you propose so as to improve the availability, accessibility and responsiveness of sexual abuse services in Manga?

Are there new improvements in systems that you can propose to enhance availability, accessibility and responsiveness of sexual abuse services in Manga.

What role do you think the government, NGOs, and the community should play in improving access to immediate response services for sexual abuse in Manga among other remote areas.

Thank you for participating.

Apendix B: Approval letters

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