# Volunteer Support Services to Victims at Crime Scenes: Exploring Victims' Perceptions

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## Abstract

More than one million people in South Africa are victims of individual crime annually. To deal with the trauma that many victims experience, victim support centres have been established. Volunteer supporters usually form the backbone of these centres and sometimes they are called upon to render victim support at the crime scene. This type of early intervention has been criticised because it can lead to secondary victimisation if not rendered appropriately. To gain important insight regarding this problem scenario, the researcher adopted a qualitative approach to explore the perceptions of two categories of key role player, namely, the victims of individual crime and the volunteer supporters. A case study design was implemented by purposively selecting participants from two victim support centres located in Johannesburg. The data were gathered by conducting personal interviews with each participant using a semi-structured interview guide. The data were analysed using a structured, step-by-step framework of thematic analysis that adopts a qualitative paradigm. Trustworthiness of the study was enhanced through sample triangulation. This article focuses on the findings related to the 10 victim participants. The findings revealed that the victims were offered psychological first-aid services at the crime scene and perceived the services as valuable. This is because their rights and needs were adequately met by well-trained volunteer supporters who implemented the principles of the victim empowerment programme. These findings should be taken into consideration by the Department of Social Development and other key role players when the Victim Support Services Bill of 2019 is enacted.

**Keywords:** victims, victim supporters, psychological first aid, victim support centres, victim empowerment programme

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## Introduction

Evidence indicates that South Africa has one of the highest levels of crime in the world (OSAC 2020). On 1 December 2020, Statistics South Africa published the latest victims-of-crime statistics extracted from the Governance, Public Safety, and Justice Survey 2019/20. The levels of crime for individuals aged 16 years and older are disturbing. For example, between March 2019 and April 2020, 902 000 individuals experienced theft of personal property, 45 100 experienced street robbery (which usually involved the use of knives or guns), 225 000 experienced assault and 85 000 experienced motor vehicle hijacking (Stats SA 2020). South Africa is also known to have alarming levels of sexual offences and gender-based violence (GBV). The Crime Situation Report 2019/2020 of the South African Police Service (SAPS) records that that there were 53 293 reported cases of sexual offences (SAPS 2019).

Victims of individual crime respond in different ways directly after a criminal incident, depending on various factors such as the nature and severity of the crime type, and personal coping mechanisms (Edwards, Sakasa, and Van Wyk 2005; Ten Boom and Kuijpers 2012). Emotional and psychological symptoms are frequently manifested by victims, especially in cases involving violence (Dinisman and Moroz 2017). Victims commonly feel shocked and numb at the crime scene. Sometimes they are unable to make rational decisions and feel angry, guilty, unsafe, vulnerable, lonely and confused (Derksen 2009; Dinisman and Moroz 2017; Hill 2015). It therefore stands to reason that providing support for victims as soon as possible after the incident would be in their best interests. Over 25 years ago, Young (1993, 14) emphasised that "there is a conviction among many practitioners that on-scene intervention, when the victim is in the early stages of distress, may prove to prevent or greatly reduce crisis symptoms that might otherwise afflict the victim".

On 17 July 2020, the Minister of Social Development published the Victim Support Services Bill in the Government Gazette. One of the main purposes of this Bill is to provide a framework within which victim support services may be provided to victims of crime. It also seeks to protect the rights of victims and to ensure that all service providers rendering services to victims should treat them with dignity and respect regardless of their citizenship, race, gender, culture, religion and personal circumstances.

Three important concepts are clearly defined in this Bill: "victim", "victim support services" and "secondary victimisation". A "victim" is defined as any person who has suffered physical, emotional, spiritual, or psychological harm because of a violent crime, committed either against them or against their family members, irrespective of whether any perpetrator is identified, apprehended, and prosecuted or convicted. "Victim support services" refers to the emotional and practical support, management and referral to professional or other support services where necessary. "Secondary victimisation" refers to victimisation that occurs, not as a direct result of the criminal

act, but through the response of officials, service providers, the community, and other individuals.

## Rationale for Conducting the Study

The researcher completed her social work field instruction at a non-governmental organisation (NGO) based in Johannesburg, South Africa, which runs a leading victim empowerment programme (VEP). The VEP currently includes 68 trained victim support volunteers who render services at 17 police stations over a large area including Soweto, the Inner City of Johannesburg and the suburbs of Lenasia, Norwood and Fairland. Most of the police stations have victim support centres, which include victim-friendly rooms where supportive services are provided to victims of crime.

During her placement at the NGO, the researcher personally observed informal support services being rendered to crime victims by trained volunteer victim supporters at the crime scene, soon after the criminal incident had occurred. She noted that the victim supporters worked in partnership with members of the police force and only enter the crime scene when they had been advised that their assistance is needed and it is safe for them to enter the crime scene.

The Victim Support Services Bill of 2019 discusses the implementation of support services rather broadly; it does not stipulate whether trained volunteer victim supporters can render services at the crime scene. However, it does emphasise that secondary victimisation should be avoided.

A vigorous academic literature review reflected that over the past decade the topic of "victim support" has been well researched. However, the general focus of victimological research in recent years regarding victim support has been on the following topics: restorative justice, the way in which crime victims' rights are being served within the criminal justice system, the effects of crime on victims, reparation and restitution by offenders, and crime prevention for victims (Giannini 2016; Hester and Lilley 2017; Kirchengast, Iliadis, and O'Connell 2019). Unfortunately, there is a gap of evidence related to the early intervention victim support offered by non-professional volunteers at the crime scene. The researcher therefore decided to research the perceptions of volunteer victim supporters and victims of individual crime to determine if victim support services rendered by volunteers at the crime scene are regarded as valuable. In this article, the authors focus on the findings related to the perceptions of victims in this regard.

## Overview of Victim Support Services Rendered around the World

Jorge (2021) points out that the need for victim support is recognised worldwide, but it was only during the 1960s that countries started acknowledging the importance of

providing protection and support for victims of crime. Rather than just focusing on controlling crime and punishing the offender, victims' need for rehabilitation and emotional and psychological support was recognised.

Holder (2016) highlights that in 1985, the United Nations (UN) issued its (non-binding) Declaration of Basic Principles of Justice for Victims of Crime and Abuse of Power. The declaration stresses that it is the responsibility of each member state to ensure that victims of crime receive help. This includes material, medical, and psychological support.

The focus of research studies across the world on victim support services varies. For example, findings in England and Wales indicate that the level of victim engagement with support services is generally low and as a result, victims are exposed to trauma symptomology (Bryce et al. 2016). Research in Australia revealed that they had far fewer on-scene victim assistance units based at police stations than did Canada and the United States of America (USA).

Unfortunately, other than in South Africa and Ghana, there is very limited research in Africa that focuses on the phenomenon of victim support services. Researchers in Ghana have mainly focused on the issue of domestic violence and the nature of support services provided to victims (Ajayi and Soyinka-Airewele 2018).

An issue currently receiving attention is the fact that one should be able to verify the quality of assistance being provided to victims of crime. Victim Support Europe (VSE) is promoting efforts aimed at improving the situation for crime victims all over the world. They promote the development of regulations which would define the standards of conduct towards victims of crime. For example, based on VSE support, Serbia has proposed eight standards for victim services: (1) provide services without discrimination; (2) respect the dignity, rights, needs and feelings of the victim; (3) ensure the confidentiality and privacy of the victim; (4) ensure the safety and security of victims and service providers; (5) provide a variety of support options; (6) provide quality control through the monitoring and evaluation of service provision; (7) provide adequate and appropriate training for all staff and volunteers who work with victims; and (8) ensure that services are provided by staff and volunteers (VSE 2018).

The South African Minimum Standards on Services for Victims of Crime is a document which outlines what is expected from service providers when delivering services to victims (Schoeman 2019). This document can also be used as a standard to evaluate the effectiveness of victim services (Schoeman 2019).

## The Victim Empowerment Programme and Development of Victim Support Services

To resolve crime problems in South Africa, the National Crime Prevention Strategy (NCPS) was launched in South Africa on 22 May 1996. It is described as a long-term, interdepartmental strategy involving various state departments and civil society (Naude 2000). One of the main aims of the NCPS was to develop national crime prevention programmes. One such programme is the VEP, which was initiated in 1998.

The National Policy Guidelines for Victim Empowerment were developed to ensure that all programmes are well coordinated and managed at all governmental levels to effectively deal with the needs of victims and to empower them. The guidelines also identify the roles and responsibilities of the of the various state departments involved (Naidoo 2019). In these guidelines, the Department of Social Development is identified as the lead department and coordinator. The state departments also involved include the Departments of Health, Justice and Constitutional Development, Correctional Services, and the SAPS. Other key role players in the VEP include non-profit organisations, NGOs and community-based organisations.

The Department of Social Development specifies seven guiding principles of the VEP in its National Policy Guidelines. These principles are empowerment, human rights, participation and self-determination, a family-centred approach, accountability, effectiveness and efficiency, and a restorative justice and multidisciplinary approach (Department of Social Development 2007).

The endorsed model of victim empowerment services is the five-level model of integrated trauma service delivery (Higson-Smith as cited in Department of Community Safety 2009). This model (see Figure 1) is based on the varying responses a victim may have to the trauma of violence and crime. It offers guidelines to service providers as to which level of service a victim may require based on their individual trauma reaction. The basic premise of the model is that service providers will assist victims within their scope and boundaries and then refer them to the next appropriate level if required.

**Figure 1:** The five-level model of integrated service delivery
(Department of Community Safety 2009, 7)

## Victim Support Centres Based at Police Stations

In response to the VEP, victim support centres which are usually based at police stations were established. Victim support services are rendered by both professionals and non-professionals (who are usually volunteers). They are overseen and coordinated by the Department of Social Development and the Department of Community Safety. Each victim support centre is run by its own management committee which is made up of the following representatives: the SAPS VEP officer (usually the station commissioner), a representative of the Community Policing Forum, a regional coordinator representing the Department of Community Safety and the volunteer coordinator (Department of Social Development 2007).

As depicted in Figure 1, the services offered by the volunteers at victim support centres fall within the victim support level's "reception, assessment or screening and referral function" (Department of Community Safety 2009, 6). This level of service is aimed at psychologically healthy individuals who are experiencing trauma-induced distress.

Volunteers form the backbone of the victim support centres that are based at police stations. They are recruited from the community being serviced by the police station and undergo a standard screening process (Department of Community Safety 2009). The Department of Community Safety (2009) states that volunteers must be over the age of 18 years and must have basic literacy. They may not have a criminal record or a history of substance abuse. In addition, should they have been a victim of crime themselves, they must have received counselling in this regard. All volunteers working at the NGO at which the researcher did her field instruction, receive the requisite screening, training, and supervision from a trained victim support unit coordinator.

## Approaches to Early Intervention for Victims of Crime

The different models of psychological debriefing (PD), psychological first aid (PFA) and critical incident stress management (CISM) are three of the most widely practised approaches for early psychological intervention (Shultz and Forbes 2014; Twigg 2020). However, PFA is currently broadly endorsed by expert consensus that it is an effective early intervention strategy for people experiencing distress because of emergency, disaster or a traumatic event.

The World Health Organization (WHO 2011, 20) defines PFA as "humane, supportive and practical assistance to fellow human beings who recently suffered exposure to serious stressors". It is also important to note that interventions such as PD and CISM are only suitable for professional helpers (Kelly, Jorm, and Kitchener 2010), making the

models unsuitable for implementation by victim support volunteers. There are various forms of PFA, virtually all of which have been empirically tested, that can be rendered by non-professional, trained volunteers (Levy et al. 2019).

The victim support services rendered by the NGO concerned base their services on the PFA model described by Ruzek et al. (2007). The said authors point out that PFA can be constructed around eight core actions:

- Contact and engagement: The service providers quickly connect with victims and develop a positive relationship with them.
- Safety and comfort: The service providers ensure immediate safety, provide physical comfort, and enhance a psychological sense of safety.
- Stabilisation: The service providers calm survivors of trauma and ease their distress.
- Information gathering: The service providers identify the victims' immediate concerns and needs and gather information on matters such as substance use, previous mental health treatment and pre-existing social support networks.
- Practical assistance: The service providers ascertain the immediate needs of the victims and helps them to resolve problems.
- Connection with social supports: The service providers connect the victims to their support networks.
- Information on coping support: The service providers give brief information to the victims on the incidents, the effects of trauma, stress reactions and coping, and self- and family-care.
- Linkage with collaborative services: Service providers identify victims who will need additional assistance and the PFA contact helps to link them with the appropriate services.

## Theoretical Framework

The principles and practice of trauma-informed care (TIC) underpinned this study. Levenson (2017) emphasises that TIC is a particularly meaningful way of rendering services to clients who have been exposed to trauma (for example, victims of crime) and preventing re-traumatisation. It is based on the client-centred approach adopted by social workers. The key characteristics of the approach include safety, choice, collaboration, trustworthiness, and empowerment (Levenson 2017).

The trauma-informed approach to helping victims of trauma is popular in many fields, including psychology, psychiatry, developmental science, education, public health, criminal justice, and social work (Champine et al. 2019). However, no matter what fields implement the TIC approach, practitioners need to:

- realise the widespread impact of trauma;
- be able to recognise the signs of trauma. These signs may be gender, age or setting-specific and may be manifest by individuals seeking or providing services in these settings;
- respond by applying the principles of a trauma-informed approach to all areas of functioning and integrate an understanding that the experience of traumatic events has an impact on all people involved, whether directly or indirectly; and
- resist re-traumatisation of clients and staff.
  (SAMHSA 2014, 9–10)

The concept of empowerment is integral to TIC. In respect of victims of crime, the four common assumptions of empowerment are relevant. These are: individuals are assumed to understand their own needs better than anyone else and therefore should have the power both to define and act upon them, all people possess strengths upon which they can build, the process of empowerment is assumed to be a lifelong endeavour, and personal knowledge and experience are valid and useful in coping effectively (Whitmore as cited in Joseph 2020).

## Research Questions, Aim and Objectives

The fundamental research questions underlying this study were: "What services are rendered by volunteer supporters to victims of crime?" and "How do these victims perceive the services rendered to them at the crime scene?" The main research aim in respect of the victim participants was therefore to explore the nature of services victims received at the crime scene from the volunteer victim supporters and victims' personal experiences in this regard.

Objective 1 was to observe the nature of services rendered to crime victims by volunteer supporters at the crime scene. Objective 2 was to explore victims' perceptions of the support they received by volunteer supporters at the crime scene. Objective 3 entailed establishing what recommendations could be made regarding the rendering of volunteer support services at individual crime scenes, based on the meaningful input received from people who had personally experienced receiving such services.

## Methodology

The researcher selected the qualitative approach because little was known about the phenomenon to be researched. The goal of qualitative research is to understand the situation under investigation primarily from the participants' perspectives; which was the main aim of the study (Hancock and Algozzine 2017). Qualitative research is founded on the constructivist paradigm. Creswell and Creswell (2018, 7) explain that

constructivism is concerned with the development of subjective meanings and understandings of people's personal experiences of certain phenomena.

A qualitative case study design was implemented to achieve the main aim and objectives of the research. Yin (as cited in Merriam and Tisdell 2017, 37) pointed out that a case study "is as an empirical inquiry that investigates a contemporary phenomenon (the 'case') within its real-life context, especially when the boundaries between phenomenon and context may not be clearly evident". The "case" explored in this study was experiences of victims and volunteer victim supporters who had received and rendered support services at the crime scene, respectively. The "case" was bounded in the sense that the study involved two specific categories of research participant who were linked to PFA services rendered by two victim support centres located in Johannesburg, South Africa. The intended outcome of the qualitative research design selected was a thick description of the phenomenon in its context.

A non-probability sampling method known as purposive sampling was used in the study. Benefits involved in this sampling method are that it is low-cost, convenient, and ideal for an exploratory, qualitative research design. Of course, the weakness of this sampling strategy is that it is prone to researcher bias (Sharma 2017).

The following inclusion criteria were used to select the crime victim category of participants:

- The victims must have personally received PFA services from volunteers based at a victim support centre at one of the two police stations selected by the coordinator of the victim support centres.

  The coordinator stated that the researcher should only gather data at two police stations because of the research time constraints. She also did not want the researcher to attend crime scenes involving harsh domestic violence or rape, because of the sensitive nature of these crimes for all concerned. Existing literature indicates that post-traumatic stress disorder (PTSD) is usually more severe in victims of interpersonal or violent crime than survivors of other traumas. Fairly recent research in South Africa support findings that PTSD is a common mental health consequence of rape (Mgoqi-Mbalo, Zhang, and Ntuli 2017). For this reason, the researcher did not interview victims who had been experienced such crimes as sexual abuse.
- The victims must not be showing signs of PTSD.
- The victims must not have mental or physical disorders or impairments which could diminish their capacity to fully understand the purpose and procedures of the study.
- The victims had to be adults (18 years and older).

To recruit potential participants for this category of participants, the victim support centre coordinators telephonically contacted the crime victims who met the inclusion criteria. If they expressed interest in participating in the study and consented that their contact details be given to the researcher, the researcher made telephonic contact with them. Of the 12 victims contacted, 10 enthusiastically agreed to be interviewed and appointments were made for the interviews at a place and time that were convenient for them.

## Ethical Principles, Data Gathering and Analysis

The researcher received ethical clearance from the Human Research Ethics Council at the University of the Witwatersrand to conduct the study before beginning with the data gathering. The following ethical principles were adhered to in this study:

- Informed consent: this entailed making a potential participant fully aware of all the aspects and conditions of taking part in the research. Each participant was provided with a comprehensive participant information sheet, which outlined the purpose of the study and procedures involved.
- Voluntary participation: all participants were ensured that they had the right to decide whether to take part in the study and that their participation or non-participation would not lead to any unfavourable consequences. They were invited to sign the consent form granting permission to the researcher to interview them and to audio-record the interviews.
- The principle of non-maleficence: the researcher made every effort not to expose the victim participants to any emotional or psychological harm (Merriam and Tisdell 2016). The researcher tried to formulate her questions in a way that they did not create feelings of discomfort and psychological distress for the participants.
- Confidentiality: the researcher ensured that the participants' responses and identity were protected. The collected data were only disclosed to the researcher's supervisor. In addition, the recorded transcripts of the interviews were kept in a password-protected computer.

Face-to-face interviews were conducted with the victim participants. This method has the advantage of providing the participants with the flexibility of explaining issues based on how familiar they are with the phenomenon being explored (Adhabi and Anozie 2017).

The focus of the study was to gather rich and detailed data and therefore a small sample was regarded as sufficient to explore the phenomenon. Furthermore, in the case of qualitative studies, there is a reduced need for statistical accuracy and therefore representativeness and the sample size are not as vital. The research tool used for this study was a semi-structured interview guide.

Thematic analysis was regarded as appropriate to analyse the data gathered. The collected data were analysed using the six steps as suggested by Clarke and Braun (2013). These steps are as follows:

- Step 1: Familiarising with the data. The researcher familiarised herself with the collected data by transcribing the audio recordings and reading the transcriptions carefully.
- Step 2: Generating initial codes. The researcher organised the collected data into categories and generated appropriate labels for them.
- Step 3: Searching for themes. This phase involved sorting the codes into potential themes, which are broader than codes. The researcher identified common recurring patterns that come across different codes and grouped codes into potential themes that tell a meaningful story about the experiences of the participants.
- Step 4: Reviewing themes. The researcher refined identified themes so that they adequately captured the contours of the coded data. The identified themes were compared to generated codes and data to ensure they were the accurate representation of the collected data.
- Step 5: Defining and naming themes. During this phase, the identified themes were named and defined.
- Step 6: Producing the report. This phase involved the final analysis and write-up of the report which demonstrated evidence of the themes within data sets.

## Presentation and Discussion of Findings

The demographics of the victims of crime who participated in the study are as follows: ten participants; four men and six women. The race of the victims was the most important limitation of the study: nine White participants and one Indian participant from Norwood, Johannesburg, were interviewed.

Seven themes were identified related to the objectives regarding the victim participants and are discussed below.

### Theme 1: Volunteers Show Empathy and Care when Engaging with Victims

All 10 of the victims mentioned that they had felt the volunteer supporters' support and empathy. The general feedback was that the other people at the scene, such as the police and fingerprint teams, had been occupied with their jobs and the emotional state of the victims had not been their priority. The victims had therefore valued the support offered by the victim support volunteers who they felt had come to the scene especially to assist them. Several of the victims were moved to tears when sharing this information:

> They understand that your incident is the end of your world.

> She definitely was part of it. She felt it; it didn't affect her judgement, but she was real in the situation, she really understood, she cared.
>
> It was nice to know that someone actually cared because everyone else [the police] was asking questions and trying to catch the people [armed robbers], but kind of forgetting about us. This lady was there, not for anybody else but us; just to make the first bit a bit easier.

This study finding reinforces evidence forthcoming from an international study that explored the needs of crime victims. The investigators, Dworkin and Schumacher (2018), highlighted that victims of various crime types expressed the need to have a caring relationship with the supporter to help them cope with the impact of the crime. Baker, King and Wheeler (2016) also emphasise that victims have the need to feel comforted and actively listened to.

### Theme 2: Supporters Help with Physical Safety

Four victims mentioned that the volunteers had assisted them with security issues at their homes and taken steps to ensure their safety. The overall feedback was that at that time, and in that traumatised condition, they had not thought about these matters and if they had, they had been unaware of how to access the necessary services. A victim mentioned:

> She assisted us to get a locksmith out and someone to reset the remotes for the gate because they [the perpetrators] had driven off with all the keys. Its stuff you don't think of, and it was the middle of the night . . . I wouldn't even know where to find a locksmith at that time.

Dinisman and Moroz (2017), who conducted an in-depth study of victim support needs in the United Kingdom, pointed out that evidence indicated that victims involved in violent crimes (physical and sexual) have the need for safety after the criminal incident. The researcher's study findings suggest that it is not only in crimes involving physical and sexual violence that the victims feel the need for safety, but also in other incidents of crime.

### Theme 3: Supporters Facilitate Contact with Important Others

Four of the 10 victim participants mentioned that they had been unable to contact their friends and family and that the volunteers had done so on their behalf. This was a service which the interviewees had found valuable as either their cellular phones had been stolen or they had been so shocked that they had not thought to contact their loved ones. Statements such as the following indicate that the victims had received and appreciated the service of linkage with social support:

> She helped me to get hold of my extended family. Thank goodness!

> I just didn't think of phoning anybody. I sat with the phone in my hand dumbstruck; trying to figure out what's going on. So, she helped me reach my sister.
>
> They took my phone too, the bastards, so I used the volunteer's [cell phone] to call my family. I needed them with me so badly.

It stands to reason that it is usually very important for the victims to contact their loved ones as soon as possible after the criminal incident to allay their fears should they be anxious about the victim's whereabouts. Although criminal incidents can also have a negative impact on family members who were not direct victims, research has revealed that victims' resilience is built through internal and external strengths, such as having close family relationships (Hopper 2017). It was evident in the researcher's study that the victims perceived contact with their family as important, and that their need to do so was satisfied.

### Theme 4: Practical Support is Appreciated

Assistance with practical matters was mentioned by seven of the 10 victim participants as a service which they had welcomed. The victims' responses during the discussion of this theme indicated that they had felt so overwhelmed by their trauma that the smallest tasks had seemed almost impossible to achieve. The victim participants' verbal and non-verbal reactions showed that they had deeply appreciated the practical help they had received. The following responses from some victim interviewees encapsulate these perceptions:

> Practical things are a struggle you know; just to get that done. So just to have someone come in and calm things, to attend to you, you know, your needs . . . it was very valuable.
>
> She also organised a clean-up crew which was hugely important I think, for all of us. She waited for the clean-up crew to come while we took my mom back to the hospital to see my dad . . . just knowing there was somebody there who could let them in helped. So, actually most of that [cleaning up of the blood at the crime scene] happened when we weren't there which I think was also really a huge relief. We had already witnessed so much that being able to leave that in her hands felt very safe and very containing.
>
> She helped me contact places to cancel my credit cards and she organised someone to fetch me, so I didn't have to drive in that condition. You don't think of that! She was a person's second brain!

The victims reported that they had felt overwhelmed at the time of the incident and had found it difficult to look after their family members who were also struggling after experiencing the criminal incident. The practical help of the volunteers with this duty therefore brought them much relief. This was indicated through statements made by the victims such as the following:

> They were there for everybody and I didn't have to be there for my daughter as well; they took some of that responsibility and it was a huge relief.
>
> What I felt was very helpful was being able to . . . [crying] to leave the scene and to leave my mother with the volunteer, and to be able to feel safe enough to do that . . . and then be able to go to the hospital . . . [crying] to be with my father . . . she allowed me to feel that I wasn't abandoning my mom.
>
> I had my grandchildren there . . . one is four and the other one is two and a half . . . and she sat with them and drew while we dealt with the police.

Victims' need for "practical support" is well covered in the Victim Support papers (Callanan et al. 2012). However, although the general term "practical support" is highlighted, no specific examples are described; something which this study does.

**Theme 5: Self-Determination Facilitates "Recovery"**

All 10 victims confirmed that they had received information and guidance from the volunteers. What stood out was that the victims felt that the guidance they had received was appropriate and that they had not felt, in any way, intruded upon. Decisions had been left to them and it was indicated that this had been very important at the time as they had felt hugely violated and disempowered by the perpetrators of the crime. Some comments made by the interviewees that indicated the above were:

> It was definitely not too much 'cause that would have irritated me. She kind of left it up to us and that was great; not 'you must do this, or you must do that'.
>
> She gave us the next couple of steps forward but not too much.
>
> You didn't want someone to take all of the options out of your hands, but you wanted someone, if you just couldn't decide, you wanted them to tell you your options, some recommendations and then you could decide after that . . . at least you had, when you were paralysed with all of this terror, you were given some sort of guideline as to where to go, that was a very important thing. But she didn't take over.

What is clear from these comments is that the volunteers offered victims free agency and self-determination. It is interesting to note that in the medical world, self-determination is regarded as an essential part of successful mental health recovery (Piltch 2016). In many respects, criminal incidents have a negative impact on a victim's mental well-being.

**Theme 6: Information Empowers**

All the victim participants indicated that they had received a leaflet on trauma and the possible effects they might experience because of the incident. It also contained information on how to cope with these effects and how to assist their family members. The participants reported that they had found this information very beneficial,

particularly later when they experienced the symptoms discussed with the volunteers and were able to recognise these as a normal part of their recovery. Examples of the above are evidenced in the following verbatim statements made by the participants:

> If it happens to you [the effects of trauma] you don't know how to cope with them, but to know that it's normal really helps.
>
> She just put everything in the right place, I think it [the information on the effects of trauma] allows you to know that whatever you're experiencing, that it's okay; that it's normal and this is part of your healing.
>
> So, when those things [the effects of trauma] happen, you go okay, I'm not losing my head, you know. So, it was nice to have that knowledge.

It is obvious from these responses that having information about common trauma symptoms helped empower the victims; they felt more capable of coping because the symptoms being experienced were normalised. This point is highlighted in the nursing profession; knowledge of what to expect empowers people (Jivraj et al. 2018).

### Theme 7: Victims Linked with Collaborative Service Providers

All 10 participants received information on supportive follow-up counselling services. They felt that this was an important service as several had not known how such facilities could be accessed. Others had known about counselling services and had chosen to see their own therapists. However, they too felt that it was useful for the volunteers to offer such connections to counselling services as they felt that other victims who cannot afford independent therapists can benefit from such information. Some of the verbatim statements indicating this are as follows:

> When we felt we were ready, with her prodding, we actually went for a counselling session. We probably wouldn't have otherwise . . . and it helped.
>
> She gave us her card and contacts for counselling, so she guided us along the right path.
>
> She guided us, she made herself available you know. She kind of said that if we aren't happy, if we need counselling, she'd make an appointment.
>
> It wasn't just that night. I got better because I went for counselling. I don't think I would have gone if she hadn't encouraged me to.
>
> I had two previous incidents, robbery and a hijacking [when no victim supporters were available] and you know honestly I felt very alone and that took me well over two years to get over. But now with their help this time, I think we got over our trauma much quicker than we would have.

It is apparent from the responses that the victim supporters adopt a collaborative approach; for example, recognising that they cannot take on the role of professional

counsellor. Academic literature repeatedly emphasises the need for inter-agency collaboration to ensure that victims receive a holistic service to cover their needs (White and Sienkiewicz 2018; Zammit 2018).

## Summary of Findings

The findings clearly indicate that the participants experienced the support they received from volunteers at the crime scene as valuable. These findings reinforce study results in England and Wales. Although very few victims engaged with support services in England and Wales, those who did experienced significant benefits from the support they received (Bryce et al. 2016).

Available evidence in this study also suggests that volunteer services rendered are well aligned with the victims' needs. However, in other studies conducted in the USA, researchers identified that the needs of victims and the services rendered were incongruent (Vasquez and Houston-Kolnik 2017).

The PFA implemented by the supporters reinforces the perspective of trauma experts (Kaminer and Eagle 2010). Referring to the South African context, Kaminer and Eagle (2010, 87) point out that "frontline support can be useful to individuals immediately following a trauma because it provides some emotional containment and structure; any thorough processing of the event [referring to psychological debriefing or counselling] may be better introduced sometime after the event".

The fact that the supporters obviously upheld VEP principles, such as empowerment, human dignity, and self-determination, also seems to have contributed to the victims' positive experiences. These findings reinforce the importance of adopting a TIC approach when providing victims with services (Levenson 2017).

The findings revealed that secondary victimisation did not manifest itself. This was probably related to the fact that none of the participants had experienced violent sexual assault. Recent evidence suggests that victims who have experienced sexual assault are prone to secondary victimisation when reporting a case at a police station or when proceeding through the justice system (Franklin et al. 2020). This phenomenon definitely needs further attention because when members of the Committee on the Elimination of Discrimination against Women visited South Africa in 2019, they emphasised that South Africa is failing to successfully tackle domestic violence and thereby undermining the rights of women. In their report they emphasise that South Africa cannot absolve itself from its obligation to ensure protection and assistance to victims of domestic violence (Schermbrucker 2021).

Social work is one of the professions that has a pertinent role to play in providing services to victims and survivors of GBV. However, a recent study in South Africa concluded that because of "the complexity and the sensitivity of GBV . . . ongoing

education for social workers on GBV and VEP will go a long way in ensuring an appropriate response that will circumvent the replication of secondary victimization" (Leburu-Masigo, Maforah, and Mohlatloe 2019, 13451).

Social workers could also play an important role in the recruitment, screening and training of victim support volunteers. Van de Pol, Labardee and Gist (2006) emphasise that when it comes to screening, it is important that people who work with trauma and render immediate intervention services undergo a specialised screening process because they need to be able to withstand disturbing scenes. Social workers providing training in crisis intervention to prospective volunteers is achievable because social workers are usually familiar with the trauma-informed and person-centred approach (Levenson 2017).

Thomas, Rathmann and McGarty (2017) point out that understanding how to attract and maintain volunteers is essential. This is where the development of good social marketing skills that could be implemented in local communities could come into play.

## Conclusion and Recommendations

Obvious limitations in this study were that it was conducted in one urban area, the participants were recruited from only two victim support centres and the sample size of the victim participants was small. Also, the researcher did not focus on vulnerable groups of victims, such as victims exposed to domestic violence and rape. It is therefore recommended that further research be conducted. Studies should be carried out in other cities and provinces. They should focus on evaluating the quality of victim support services being rendered to people of different income groups, and if support services rendered to victims of violent crimes have exposed them to secondary victimisation.

It would also be interesting to explore the way in which victim support centres have adjusted when rendering support services to victims during the Covid-19 pandemic. The way in which these challenging circumstances have affected victims of crime should also be explored.

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