

Addressing SGBV and Improving Response, Care and Support Services for Survivors

What can State Governments
do differently?



Legislation and Judiciary



Domesticate
VAPP & CRA



Fund VAPP Act &
Child Rights Act



Train Medical
Personnel



Service Provider
Register

1. Introduce the Violence Against Persons (Prohibitions) Act (VAPP), 2015 and the Child Rights Act, 2003 as Executive Bills in States where they have not been domesticated.
2. Fund the implementation of the Violence Against Persons Prohibition Act 2015 and the Child Rights Act, 2003 and empower state institutions and service providers to implement.
3. Pressure state ministries of Health, Justice, Women Affairs / gender / Social Development to budget for and fund the implementation of priority provisions of the Violence Against Persons Prohibition Act 2015 which include but are not limited to:
 - Section 38 (1). Maintain a pool of professional medical and social workers who are adequately trained to provide medical, counseling social welfare response (including shelter) to victims of sexual and gender-based violence.
 - Section 40(2a). Maintain a register of active and accredited, capitated and accredited service providers (including disability inclusive service providers) and protection officers, circulate same to citizens and all stakeholders.
4. Pass legislation similar to Victims of Gunshot Wounds Act 2017 which mandates hospitals to provide emergency medical care and treatment to victims of sexual violence.
5. Provide and deploy a clear budget for the establishment and operation of sexual offences courts, in the context of the Violence Against Persons Prohibition Act 2015.
6. Mandate the judiciary to develop a pool of legal professionals, judges and magistrates who have been adequately trained in handling survivors of trauma, in critical elements of effective investigation and prosecution of SGBV cases and the facilitation of social welfare support services for survivors, in the context of the Violence Against Persons Prohibition Act 2015.
7. Mandate the courts to maintain a register of active, capitated and accredited service providers (including disability inclusive service providers) and protection officers and circulate this register to all stakeholders

Improve Medical Response



Establish & Fund SARCs



Fund Emergency SGBV Response



Train Medical Personnel



Service Provider Register

1. Provide and deploy clear state budgets to strengthen, emergency medical response to SGBV, toward facilitating the best justice outcomes for survivors, in the context of the Violence Against Persons Prohibition Act 2015.
2. Train medical and counselling personnel of all state funded hospitals in head-to-toe medical examination, injury documentation and medical reporting that will support the presentation of admissible evidence for the effective prosecution of sexual assault cases in court.
3. Fund existing and new Sexual Assault Referral Centres (SARCs). Fund a budget line to ensure sustainability of existing Sexual Assault Referral Centres (SARCs) and the establishment of new SARCs - at least one in each state – to provide services to the public free of charge.
4. Establish and fund free Sexual Assault Referral Centres (SARCs) in primary healthcare centres in every local government area, to serve citizens at grassroots level.
5. Require that state ministries of health develop and adopt uniform protocols for administering rape kits, forensic medical examination, injury documentation, diagnostic testing and medical reporting in cases of sexual assault.
6. Mandate emergency medical care and treatment for victims of sexual violence by all state-funded hospitals.
7. Eliminate the practice of hospitals requiring a police report before provide care and treatment to victims of sexual violence
8. Mandate that medical reports from any state funded hospital be admissible as evidence to support the prosecute of sexual assault cases in court.
9. Mandate every state funded hospital to maintain a register of active, capacitated and accredited service providers (including disability inclusive service providers) and protection officers and make this available to citizens and other stakeholders.
10. Commit to new budget lines to fund medical response to sexual and gender-based violence across all state -funded hospitals.

Strengthen Civil Society as first responders



Empower Local NGOs



Encourage Partnership



Monitor Justice Services

1. Identify local NGOs who are active as GBV first responders in the state and designate them as essential service providers who can freely travel intra-state to rescue and secure victims. This means providing them with official passes / ID cards for use during curfew hours.
2. Encourage state government partnership with local NGOs to enhance reach of services and expand the number of channels available for citizens to report GBV and get help.
3. Encourage state government partnership with local NGOs to quality assure and monitor responsiveness of justice services and well as monitor GBV case proceedings in court

Social Welfare Response



Establish & Fund SARCs



Deploy Counsellors

1. Establish and fund state-funded shelters for survivors of sexual assault.
2. Deploy professional social workers, social welfare and protection officers who have been adequately trained in trauma counseling and the facilitation of social welfare support services to be seconded to police gender desks/units, state funded hospitals and Sexual Assault Referral Centres (SARCs). Support their capacity to track the progress of sexual violence cases as they pass through the state's justice process and ensure speedy prosecution and justice for the survivor.

Accountability



**Monitor
SGBV Cases**



**Public Dialogue
with Survivors**



**Police & Other
Stakeholders Report**



**SGBV
Curriculum**

1. Deliberately track the progress of sexual violence cases as they pass through the state's justice process and ensure speedy prosecution.
2. Hold town halls and support platforms of public dialogue between survivors, SGBV front line responders and justice service providers to obtain and act on feedback about their experience with justice service channels in relation to SGBV.
3. Mandate Commissioners of Police to provide a detailed report on the actions taken to strengthen their response to sexual and gender-based violence through the Family Support Units and Force Gender Units at State and Local Government levels.
4. Mandate State Commissioners for Women Affairs / Gender/ Social Development to provide detailed reports of progress and impact of social welfare and social support services (e.g. shelters) provided for survivors of sexual and gender-based violence.
5. Mandate State Commissioners for Justice to provide regular detailed reports and actions taken toward speedy prosecution of sexual assault cases in court, and toward victim and witness protection, in the context of the VAPPA Act 2015.
6. Secure commitment of the National Universities Commission (NUC) and the Medical and Dental Council of Nigeria (MDCN) for postgraduate medical training colleges to establish clear curricula and pathways for specializations in SGBV emergency treatment, trauma management and GBV documentation and data reporting.

Campaign against Sexual
and Gender-Based Violence
Guidelines for Institutional Reform

About the RoLAC Programme

The Rule of Law and Anti-Corruption (RoLAC) is a 4-year (2017 – 2021) European Union-funded programme that is implemented by the British Council. The programme aims to enhance good governance in Nigeria by contributing to the strengthening of the rule of law and curbing corruption, as well as supporting reform initiatives that are led by the Federal and State criminal justice institutions, anti-corruption agencies, civil society, citizens, and the media. RoLAC's interventions are implemented in 5 states – Adamawa, Anambra, Edo, Kano, Lagos – and at the Federal level.

RoLAC has supported initiatives that have resulted in the adoption of laws and practices that facilitate access to justice for women, children, and persons with disabilities; and is now focused on supporting state governments and civil society in the implementation and embedding of these laws and practices.

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