

THE PAS MODEL

HOLISTIC RESPONSE TO GENDER-BASED VIOLENCE
(Nigeria)



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AFRICA

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About The PAS Model:
The PAS Model is a holistic framework for preventing and responding to gender-based violence (GBV). The model is built on three components of prevention, accountability, and support with each having specific actions and strategies to be adopted in ending the scourge of GBV.

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Three thematic pillars encapsulate response actions being taken by duty bearers, stakeholders, and actors. These are prevention, accountability, and support. A conceptual framing of the three pillars points to the imperativeness of a robust GBV response model, with component parts that are inextricably linked and should be simultaneously resourced and operationalized.



HOLISTIC GBV RESPONSE

THE PAS MODEL



PREVENTION

Age-appropriate sex-education, sensitization and awareness creation, development of GBV prevention curriculum, narrative shaping and counternarrative, community mobilization, etc.



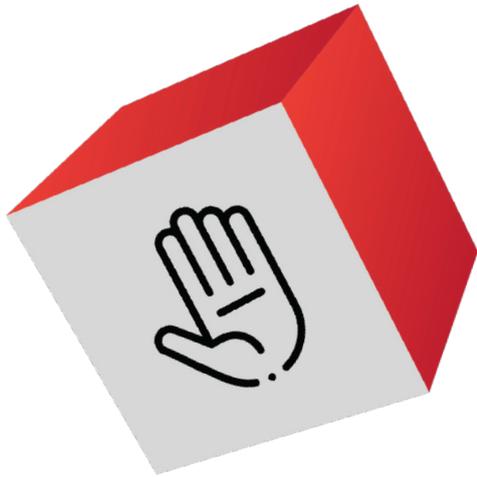
ACCOUNTABILITY

Strengthening and implementation of laws at national and sub-national levels (e.g., adoption of the Violence Against Persons Prohibition Act, and the Child Rights Act), development and adoption of relevant policies (e.g., Sexual Harassment Policy) in public and private institutions and businesses, strengthening of formal and informal justice systems; development and utilization of **Standard Operating Procedures (SoPs)** and guiding principles in responding to GBV cases, proper use of the Sex Offenders Register, availability of disaggregated and analyzed data at all levels, etc.



SUPPORT

Social support: establishment of accessible social support groups and systems at family, community, and local government levels (e.g., community based GBV groups, family support teams, associations/interest groups, support networks, etc.). **Statutory support:** Sexual Assault Referral Centres (SARCs), hospitals, courts, shelters, counselling centres, legal aid, law enforcement – arrest, investigation, prosecution). **CSO support:** that augments statutory supports and includes assistance with basic necessities, livelihood supports, economic empowerment (e.g., skills acquisition, job placement, cash disbursement, etc).



The concept of prevention, in line with GBV, is concerned with measures taken to stall (physical, sexual, psychological, economic) violence against persons of concerns, especially women and girls. GBV prevention strategies are intricately connected to efforts to increase gender equality more generally. This pillar, therefore, focuses on all strategies and actions aimed at preventing the occurrence of GBV. UN women, in a report,¹ states that the best way to end violence against women and girls is to prevent it from happening in the first place by addressing its root and structural causes.

Prevention entails ensuring that from early stages boys and girls are taught how to engage, tolerate, and relate with each other in respectful ways, while teaching them the meaning and importance of gender equality. The formative stage of children's lives is critical in shaping their values, norms, beliefs, and overall mindset. Such orientation starts from places children learn from – homes, schools, places of worship, social gatherings, etc. With knowledge comes their ability to not only promote healthy relationships, but to also challenge deeply-rooted inequalities and unfavourable social norms.

It should be noted, however, that while focusing on children is important in shaping a future where the next generations are conscious of gender equality, adults are not left out in prevention efforts.

PREVENTION

¹UN Women, 'Focusing on prevention to stop violence', <https://www.unwomen.org/en/what-we-do/ending-violence-against-women/prevention>
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This is more so as many adults, especially men, were raised in societies where GBV is not considered an aberration but one that positions real men as those who have mastered the art of exerting power, control, and authority. This pervasive culture is one that normalizes GBV, as backed by skewed religious norms that are used to justify these bad behaviours. Without coordinated counter narratives and counteractions, this will go unchallenged and passed down to generations, thus breeding a society where GBV continues to be accepted, tolerated, normalized, and passed on.

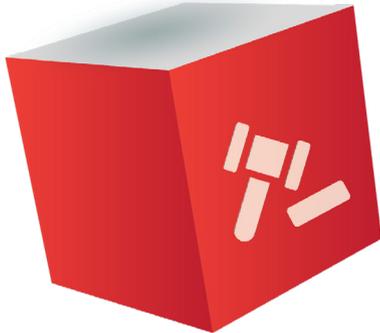
An effective prevention strategy will focus on a robust analysis of current GBV trends with a view to understanding drivers and enablers of GBV, such as **customs, culture, religion, socialization, education, ignorance, etc**, while ensuring adequate measures are in place to directly counter them. Hence, the prevention plan will also entail assessing the preventive values of existing laws and policies to ascertain their sufficiency and how well they address current GBV realities and trends. We also need to pay attention to informal approaches at the grassroots level, which in a bid to achieve harmony

in their communities or promote their culture perpetrate acts in the form of traditional practices that amount to GBV. **The prevention strategy, therefore, should highlight ways that duty bearers, actors, and stakeholders can provide and enforce counternarratives to these drivers.** The GBV prevention plan should also include elements like community mobilization, awareness-raising and sensitization through traditional and social media, schools campaigns, gender relations and gender equality education especially for boys and men, among others. Overall, in ensuring that expertise is matched with prevention goals, it is important that relevant, influential, trustworthy, and well-resourced individuals and institutions (such as schools, media, worship centres, religious leaders, parents, community influencers, traditional leaders, age grade, political associations, etc) are in the forefront of consistently driving the messaging, programming, and implementation of actions.



Suffice to state that it is well established that childhood trauma affects adult behavior; hence besides the need for increased spending on child care for working moms, considering that most mothers in Nigeria work amidst sharp regional differences – for instance, Imo state has one of the highest rates of female-led households in the country – there is also need for parenting classes in order to groom people who are or serves as parents, guardians, caregivers, relatives, and those generally responsible for raising children, including single mothers, working mothers, and widows/widowers.

Accountability in GBV prevention and overall response is in consideration of the fact that duty bearers, stakeholders, and actors are bound to take positive steps in ensuring GBV prevention, prosecuting perpetrators, and providing support to survivors, while addressing the spate of SGBV as a whole. Every stakeholder has different duties to play in preventing and responding to GBV through broad-based, prompt, and mutually-responsible actions as guided by laws, policies, protocols, and best practices. There is therefore a need for a GBV Accountability Framework that captures the roles and responsibilities of all actors and responders in the lifecycle of GBV prevention and response.



An accountability structure in GBV strategic response focuses on legal and policy frameworks such as national legislations and international convention and protocols on human rights, broadly; and GBV, more specifically. There is therefore a need to identify, specify, and map the state and non-state actors who bear the duties of preventing and responding to GBV, while clarifying their specific, complementary, and intersecting roles. This way, knowing who to hold accountable for certain GBV prevention and response actions is unambiguous.

The criticality of data collection, disaggregation, analysis, publication, and

ACCOUNTABILITY



Furthermore, accountability actions include ensuring institutions – public, private, and civil society – have GBV and sexual harassment policies in place.

dissemination cannot be overemphasized being a component of the accountability structure, as this is important in ensuring evidence-based advocacy, programming, and actions while achieving gender-sensitive budgeting and investments. By extension, accountability entails ensuring relevant institutions comply with necessary laws, principles, and protocols that guide how they conduct and carry out their roles and responsibilities in GBV prevention and response.

Furthermore, accountability actions include ensuring institutions – public, private, and civil society – have GBV and sexual harassment policies in place. It also covers the need to develop and publish Standard Operating Procedures (SoPs), protocols, and guiding principles specific to the different actors. In addition,

accountability entails continuous monitoring and tracking response actions and processes in ascertaining their effectiveness, efficiency, and sustainability; and for the purposes of reviews and improvements. Accountability presupposes a collective societal indignation and intolerance for SGBV. Hence, a society that shames perpetrators should be created or shaped, while encouraging a mindset of zero tolerance that holds perpetrators as pariahs and the survivors as the society's collective responsibility. Some general examples of other accountability measures is the social accountability practice by

the public on social media through naming and shaming, public demands for accountability by duty bearers, public condemnation of GBV offenders, and publicizing of the **Sex Offenders Register**. It is imperative to note that there are rural communities that still use masquerades, dance, songs, and theatre to name and shame perpetrators of GBV in their localities; and this approach has been effective and may still be an alternative in such communities, especially in areas where internet use is low especially among women.

Accountability

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and intolerance for **SGBV**.

Evidentially, emplacing GBV preventive and accountability measures are not guarantee that GBV will not occur. Support programmes target individuals, whilst prevention programmes target populations. Thus, in the inevitable situations of GBV, effective support mechanisms – formal and informal – must exist in ensuring adequate assistance is provided to survivors of GBV. Support entails a system for survivors to get assistance, justice, and healing that is rights-based and survivor-centred. The support framework is aided by the availability of effective and evidence-based services to respond and prevent the recurrence of violence. Supports entails three systems:



SUPPORT

SOCIAL SUPPORT SYSTEM



This emanates from the social structures around a victim or survivor, such as family, friends, community groups (e.g., village associations, community-based organizations, interest groups, trade unions), worship centres and faith-based organizations, social gatherings – physical and virtual (e.g. social media), etc.

STATUTORY SUPPORT SYSTEM



This entails mandated duties of state actors (government), as enshrined in international and domestic laws, policies, and regulations, to provide infrastructure and services to aid recovery process of survivors of GBV. This includes: economic recovery (financial support like cash transfers, stimulus funds, skills acquisition and empowerment); medical facilities (hospitals, pharmacies, medical forensic centres, rehabilitation centres, shelters, sexual assault referral centres, mental health services, psychosocial and counselling services); legal services (legal advisory, legal aid); judicial services (courts, restraining orders); and enforcement systems (security/protection, investigation, arrest, and prosecution as carried out by the police or designated law enforcement agencies).

CSO SUPPORT SYSTEM



This covers multi-faceted and coordinated efforts of civil society organizations to augment and complement the work of state actors. CSOs include non-profit/non-governmental organizations, as well as international funders and partners. CSOs support system include relevant support under the above statutory support system as well as provision of general assistance to survivors of GBV, including basic necessities (food, clothing, and shelter), and livelihood support such as financial aids, skills acquisition, job placements, etc.

Support structure extends to CSO-led first-line/frontline responders and service providers who also need mental health counselling services, security/protection, technical support, and general assistance in carrying out their activities. On the whole, prevention and support services should also reach perpetrators of violence, as a secondary prevention approach, in order to decrease future perpetration.



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