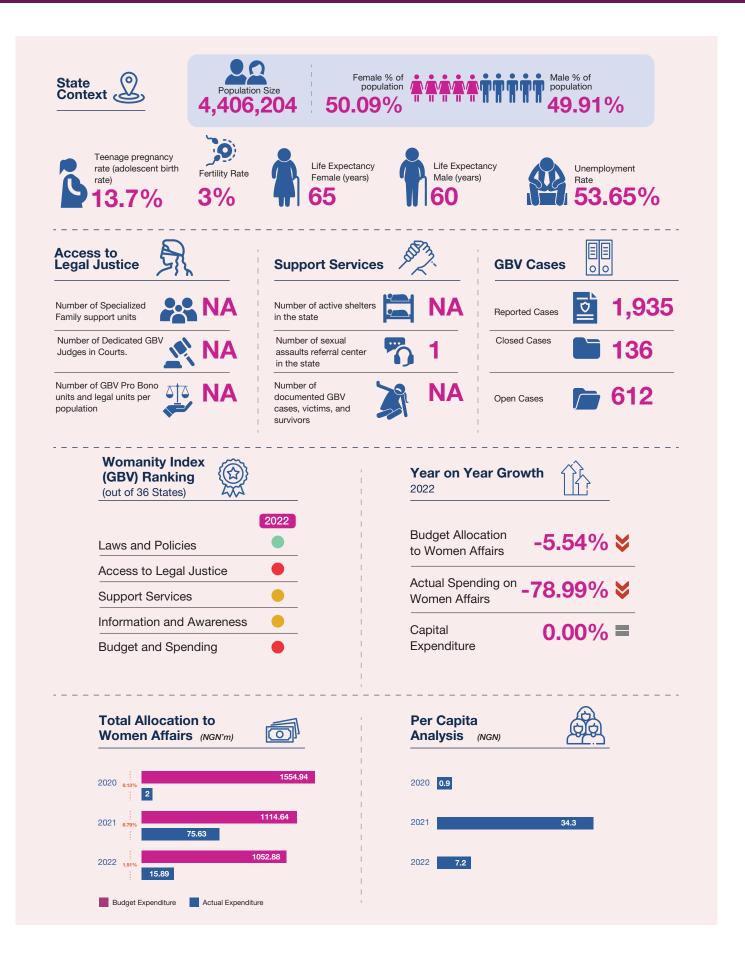
Cross River State

Womanity Index (GBV) Ranking





S/N	Indicators	Key Findings	Recommendations
1	Laws and Policies	The state VAPP law exist to prevent and respond to GBV, although it is fraught with some gaps.	The VAPP Law, and other GBV-related laws should be amended in line with societal changes.
		The male-dominated House of Assembly posit that rape cannot happen in marriage and have refused to legislate on it.	The government should re-orientate the legislators and push for legislation on rape cases that happen between spouses.
		There is the perception that some politically exposed persons seem to be above the law.	The state needs to prosecute high-profile offenders to demonstrate that no one is above the law.
		Money marriages ² still exists in some communities in the state.	The state needs to criminalise and outlaw money marriages in communities where they still exist and establish stiffer sanctions for perpetrators.
2	Access to Legal Justice	There is no known witness protection program although legal assistance is provided by the state for survivors of GBV.	The state should establish an effective witness protection program.
		There are no dedicated judges for GBV in the state.	The state should appoint dedicated GBV judges and regularly train them.
		There is an existence of GBV desks in all the police stations in the state.	Funding should be made available for seamless performance of the GBV desks.
3	Support Services	The support services are effective to the extent where the funding permits.	Support services should be prioritized for adequate funding.
		There is just one government-owned SARC in the state. Recently, UNFPA established a new SARC in the state.	The government should establish more SARCs, at least one in every Local Government Area.
		The state has a documented reporting and referral pathway but little accessibility due to lack of awareness.	The government should increase awareness on the reporting and referral pathway.
4	Information and Awareness	IEC materials are infrequently disseminated through the women development centres in all the local government areas.	Sensitisation and awareness on GBV prevention and response should be done on a more frequent basis.
		There is an informal injection of sex education in the secondary school curriculum.	Sex education should be formally included in the secondary school curriculum.
		In the local communities, there is the use of announcers and plays to disseminate GBV information.	Sensitization should be regularly created through various mediums. There should be more sensitivity and
			inclusion of the needs of PwD in sensitization programs.



Cross River State possesses a very robust framework for ensuring GBV prevention and response. The GBV-related laws and policies that exist in the state are the Gender Policy Strategic and Implementation Framework (2019-2023), Violation Against Persons (Prohibition) Law 2021, Child Right Law 2004, Cross River State Female Persons Inheritance of Property Law 2007, Girl Child Marriage and Female Circumcision (Prohibition) Law 2000, Domestic Violence and Maltreatment of Widows (Prohibition) Law 2004, and the Cross River State Gender and Equal Opportunity Bill, 2015. The VAPP Law, however, needs to be reviewed, for instance, by increasing the years of imprisonment for convicted perpetrators of rape in alignment with the parent VAPP Act (2015), as well as the stiffening of the penalty for the offence of forced financial dependence from just N1m to both imprisonment and an adequate minimum fine in line with necessary considerations.

74% of the survey participants claim to be aware of the existence of the aforementioned laws, and 60% strongly agree that awareness prevents GBV. The state has no written customary or religious law but there are cultural practices that communities use to address GBV cases, one which is corporal punishment meted out on the perpetrator. Bye Laws were passed in some communities on how to report and respond/refer GBV cases. 48% of the survey participants are of the opinion that customary/religious laws are effective in preventing and responding to GBV in the state.

The reporting and referral pathways in the state include CSOs/CBOs and Ministry of Women Affairs, which are often the first point of contact in a lot of cases. After which, the cases get referred to the Gender Desk office in the police stations for investigation. Just as enforcement led by the NSCDC and the police, prosecution, which has been adjudged to be effective, is carried out by the judiciary. There is an existence of accessible legal assistance from the Ministry of Justice but there is no known witness protection program in the state. The informal justice systems in the state are championed by the religious bodies, Obong councils, and traditional rulers. Perpetrators are issued warnings, made to pay fines, undergo corporal punishment, etc.; hence, the informal system is not sufficient to provide justice for GBV victims and survivors. In addition, some cultural norms, like money marriages, perpetuate GBV. Based on the survey population's notion, 76% would seek formal justice and only 33% think the informal justice system is effective in providing justice for victims/survivors of GBV. There are Gender Officers in all police divisions in the state and a family court that addresses some GBV issues, but no dedicated GBV judges.

Cross River State has no state-owned shelter but is home to shelters managed by churches and NGOs. The Heartland Alliance SARC is the only comprehensive Centre recently launched, but it is insufficient for the population. The active shelters in the state are few but accessible to those who are aware or reach out to the appropriate CSOs. There are reporting and referral pathways. Depending on the form of GBV reported at the Gender Desks, cases are referred to the Ministry of Women Affairs, Citizen's Right, or Child Protection Desks. Due to referrals made, survivors can receive comprehensive services although its accessibility is low and mostly depends on the survivor's awareness of the availability of such services or if the survivor knows his/her rights. Based on the survey population's notion, 87% are of the opinion that informal support systems such as family, friends, religious centres, community groups, etc., are helpful in supporting GBV victims/ survivors.



Access to

Where would you seek justice if you or anyone you know, experience GBV? Legal Justice

> 76% 16% 8% Formal I will not Informal justice iustice system system iustice

If you witness GBV, would you feel safe serving as a witness during the investigation and trial?

8% 63% 13% No Not Sure Yes 16%

Do you think the informal justice systems in the state are effective and sufficient in providing iustice for victims/survivors of GBV?

33%

Yes

32% 35% No Not Sure

It Depends



Do you know of, or have you visited, any active shelters and/or Sexual Assault Referral Centres (SARCs) for GBV victims /survivors in the state?

32% 68% Yes No

Which GBV reporting and referral pathways are you aware of currently available in the state? 38.5% 18.8%

Specialized medical healthcare pathway Police/security pathway

15.6% Psychosocial/mental health pathway

19.8% 7.3% Legal pathway None of the above



4%

No

9%

Not Sure

GBV sensitization and awareness and intervention programs are mostly carried out during dedicated days such as International Women's Day and they are mostly supported by the NGO partners in the state. IEC materials, prints and electronic media, jingles, media houses, or billboards are mostly used. There is an informal injection of sex education in the secondary school curriculum by some teachers. Some NGOs liaise with the president of the PwDs group during the process of producing the IEC materials so that they can be inclusive. GBV messages are accessible to PwDs as it is to other people in the communities. Based on the survey population's response, 64% are aware of the availability of GBV information and/or education programs or materials in the state.

The allocation to the State Ministry of Women Affairs decreased by 32.29% over the previous three years, from N1.55 billion in 2020 to N1.05 billion in 2022. In contrast, the actual spending for the same period in 2020, 2021, and 2022 was N2 million, N75.6 million, and N15.9 million. The corresponding budget performance for 2020, 2022, and 2021 are 0.13%, 6.79%, and 1.51%, respectively. For 2020, 2021, and 2022, the state's per capita funding for the Ministry of Women Affairs was N0.9, N34.3, and N7.2, respectively, the lowest in the south-south region. .



A person with disability went to Afokang Health Centre for emergency treatment after an abuse but could not gain access due to the non-disability friendly environment. Her companion, who was a woman, was incapable of lifting her alone; hence, they reached out to few persons at the health centre who lifted her with a wheelchair up to the building. A GBV case that was taken to the Citizens' Right office was ruled unjustly against the victim due to the close relationship that existed between the defence lawyer and the perpetrator.

87%

Yes



	Do you know of any GBV				
information	information and/or education				
programs	programs or materials				
in the state	e?				
64%	25%				
Yes	No				
11%					

Not Sure

1.1	
	How useful is/was the content
- È	of the GBV awareness material
- i -	in educating you on GBV?

13% 17% A little bit useful Not at all useful 35% 35% Mostly useful Completely useful

Which GBV information and education materials	are you	awar
of for persons with disabilities?		

20.5% 6.2% Audio/spoken content Braille printed content 16.3% 15.9% Sign interpretation Picture-based messages

Whi

15.5% 6.2% Visual content Screen subtitling 8.9% 10.5 Simplified messages None of the above sage

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Indicators

Existence of State laws that criminalize the GBV

Result Justification



	Existence of State laws that criminalize the GBV	
_		1.0
	Quality of State VAPP Laws	1.0
Laws and	Existence and usage of customary and religious laws and policies that criminalizes GBV	0.0
Policies	Consistent, result-producing efforts at reforming and strengthening laws, policies, and customs on GBV prevention and response within an eight-year period	1.0
	Available system of GBV reporting, prosecution, and enforcement	0.5
	Availability and accessibility to legal aid services; with/or witness protection program	0.5
Access to Legal	Existence of functional specialized Family Support Units (FSUs), Human Rights Desks in Police Commands or Divisions, or dedicated GBV Judges	0.5
Justice	Existence of informal justice system, with processes and outcomes that does not perpetuate or advance GBV in the courts	0.0
<i>š</i>	Availability of at least one active shelter in each local government in a state in the courts	0.5
Support	Availability of accessible and user-friendly GBV Reporting and Referral Pathway	0.5
Services	Existence of and access to holistic support systems for GBV victims and survivors	0.5
	Existence and usage of holistic informal support systems	0.5
	Availability and widely disseminated GBV IECs materials	1.0
	Existence and usage of comprehensive sex education curriculum in secondary schools	0.5
Information and Awareness	Frequent sensitization and awareness programs on GBV across all local governments in the State	0.5
	Equally accessible GBV IEC materials especially for PWDs and those in remote or rural communities	0.5
	Women Affairs Ministry budget allocations and spending (85% and above execution rate)	0.0
Budget and Spending	Women Affairs Ministry spending per capita	0.0