

### State Context



Population Size  
**9,032,181**

Female % of population  
**50.72%**



Male % of population  
**49.28%**



Teenage pregnancy rate (adolescent birth rate)

**24.7%**



Fertility Rate

**5%**



Life Expectancy Female (years)

**56**



Life Expectancy Male (years)

**50**



Unemployment Rate

**44.35%**

### Access to Legal Justice



Number of Specialized Family support units



**NA**

Number of Dedicated GBV Judges in Courts.



**NA**

Number of GBV Pro Bono units and legal units per population



**NA**

### Support Services



Number of active shelters in the state



**2**

Number of sexual assaults referral center in the state



**5**

Number of documented GBV cases, victims, and survivors



**NA**

### GBV Cases



Reported Cases



**628**

Closed Cases



**27**

Open Cases



**804**

### Index Ranking (out of 36 States)



2022

Laws and Policies



Access to Legal Justice



Support Services



Information and Awareness



Budget and Spending



### Year on Year Growth 2022



Budget Allocation to Women Affairs

**143.83%**

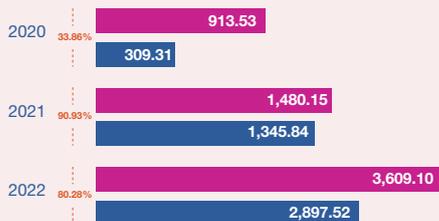
Actual Spending on Women Affairs

**115.29%**

Capital Expenditure

**130.34%**

### Total Allocation to Women Affairs (NGN'm)



Budget Expenditure Actual Expenditure

### Per Capita Analysis (NGN)



2020

**67.5**

2021

**293.8**

2022

**632.4**

S/N	Indicators	Key Findings	Recommendations
1	 <p>Laws and Policies</p>	<p>Low awareness and limited understanding of GBV laws and policies among citizens and stakeholders responsible for their enforcement.</p> <p>Insufficient structures in place for the implementation of laws and policies.</p> <p>Multiplicity of GBV laws creates loopholes for wrongdoers to evade stricter penalties.</p>	<p>The government should collaborate with organizations like FIDA and other relevant NGOs to translate and distribute simplified versions of the GBV laws in indigenous languages to raise awareness across urban and rural areas and among diverse age groups.</p> <p>Increased budgetary allocation for infrastructure and systems that facilitate the enforcement of GBV-related laws and policies</p> <p>Empower stakeholders, particularly law enforcement, through ongoing capacity building on the VAPP Law to ensure its adoption in prosecuting GBV cases.</p>
2	 <p>Access to Legal Justice</p>	<p>Lack of awareness about state-sponsored legal assistance and other free legal aid services.</p> <p>Low awareness of successful convictions, discouraging victims from seeking justice.</p> <p>No dedicated GBV judges and the existence of knowledge gaps in Gender and Family Units in law enforcement agencies due to transfer of earlier-trained officers, thus impacting GBV response.</p>	<p>Regularly train grassroots leaders and key stakeholders on GBV laws and reporting pathways while widely promoting hotlines for easy reporting.</p> <p>Media and government agencies should collaborate to raise awareness about GBV laws, policies, and convictions secured.</p> <p>Government to make provision for dedicated GBV judges to promote speedy dispensation of justice and establish GBV knowledge management systems within law enforcement agencies.</p>
3	 <p>Support Services</p>	<p>Insufficient GBV support facilities and non-uniform distribution of existing ones.</p> <p>High dependence on CSOs and NGOs for GBV support service provision, which is concentrated in urban areas and skewed toward counselling services.</p>	<p>Government to establish and equip SARCs in each Local Government Area, and mobile service clinics in rural areas, promoting accessibility for GBV victims/survivors.</p> <p>The Ministry of Human Services and Social Development should enhance a service provider mapping tool to avoid unnecessary duplication of services and better allocate scarce resources; create a service directory; and translate the directory into indigenous languages.</p>
4	 <p>Information and Awareness</p>	<p>IEC initiatives championed by CBOs and NGOs, overreliance by government on development partners for GBV IEC resulting in sporadic donor-dependent initiatives.</p> <p>No formal mechanisms are in place to track the coverage of GBV-related programs and interventions and their impact on citizens' awareness of GBV.</p> <p>Significant opposition from key stakeholders to integrating sex education into primary, secondary, and tertiary school curricula.</p>	<p>Government should make annual budgetary allocations for implementing comprehensive GBV awareness campaigns and programs in the state.</p> <p>The proposed GBV intervention database should track program coverage and its impact on public awareness, among other impacts.</p> <p>Educating key stakeholders on the significance of sex education and conducting consultative sessions with them to gather input on an acceptable sex education curriculum.</p>



## Laws and Policies

Are you aware of existing laws and/or policies that address gender-based violence (GBV) in the state?

77.14% **Yes** 22.86% **No** -- **Not Sure**

Do you think customary or religious laws and/or practices are sufficient in preventing and responding to GBV in the state?

52.38% **Yes** 31.11% **No** 16.51% **Not Sure**

Do you agree that awareness of GBV laws and policies will prevent GBV?

37.46% **Strongly Agree** 52.70% **Agree** 0.63% **Indifference**  
2.54% **Disagree** 3.17% **Strongly Disagree**

Kaduna State's legal framework on GBV includes the VAPP Law 2018, the Child Welfare and Protection Law 2018, and the Kaduna State Penal Code Law 2017, with the Penal Code Law 2017 being the most applied. Kaduna State's Violence Against Persons (Prohibition) Law, 2018 needs to be updated, for instance, by making provision for the offence of rape and violence against persons committed by state actors. There is also a need to add grandfather and grandaunt among those who may commit incest (s.3); and it should specify its appropriate regulating body, as well as the "appropriate government Ministry" mentioned in s. 32(1). Customary laws remain largely uncodified, while the Shariah Penal Code Law is extensively applied at the Shariah courts. 59.5% of the surveyed population believe that customary or religious laws and practices are adequate for GBV prevention and response. It is noteworthy that with the exception of the Shariah law, which is static, efforts have been undertaken by the Law Review Committee to revisit laws such as the Penal Code Law 2017 which was amended in 2020 to accommodate the new provisions for the punishment of rape. Most of the surveyed population (77.14%) attest to being aware of GBV laws and policies and perceive them as effective. Nevertheless, a significant number of workplaces and educational institutions in the state lack well-articulated sexual harassment laws.

Kaduna State maintains various GBV reporting and referral channels, including government entities like the Ministry of Human Services and Social Development and the Ministry of Justice, law enforcement agencies, and CSOs/ NGOs. Most respondents prefer the formal

justice system. Notably, the Citizen's Rights Department, and Department of Prosecutions within the Ministry of Justice, the Legal Aid Council, and NGOs like FIDA provide free legal assistance to indigents. However, the concentration of service providers in urban areas limits rural and remote access. Despite the existence of Gender and Family Units within law enforcement agencies, the state lacks dedicated GBV judges and although there is the Witness Protection Program Law, 2015, witness protection is practically non-existent. The resultant delays in arraigning accused perpetrators discourage victims/survivors from pursuing prosecutions and enable offenders to evade justice. Traditional, community, and religious leaders, and local vigilante groups, play significant roles in the informal justice system. As certain informal systems still fail to recognize specific acts as GBV and inadvertently perpetuate it, a little less than half of the surveyed population believe them effective and sufficient in delivering justice to GBV victims and survivors.

Kaduna State has diverse reporting and referral pathways, with the police/security pathway being the most widely recognized. It operates five Sexual Assault Referral Centres (SARCs) across its three senatorial districts, with three in Kaduna Central and one each in Kaduna North and South districts. These centres provide victims/survivors of sexual assault with free medical services, psychosocial counselling, and legal services. The state also maintains a transit shelter, offering temporary housing and counselling services for up to 20 survivors of SGBV at a time. All primary healthcare centres and clinics in the state promote awareness about GBV and extend



## Access to Legal Justice

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

82.86% **Formal justice system** 16.51% **Informal justice system** 0.64% **I will not seek justice**

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

76.83% **Yes** 3.17% **No** 7.94% **Not Sure**  
12.06% **It Depends**

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

49.84% **Yes** 29.52% **No** 20.63% **Not Sure**



## Support Services

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?

**38.41%** Yes  
**61.59%** No

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

<b>26.98%</b> Specialized medical healthcare pathway	<b>50.79%</b> Police/security pathway
<b>6.03%</b> Psychosocial/mental health pathway	<b>6.35%</b> Legal pathway
	<b>9.84%</b> None of the above

Do you think informal support systems such as family, friends, religious centres, community groups, etc., are helpful to GBV victims/survivors?

**78.41%** Yes  
**9.84%** No  
**11.75%** Not Sure

initial support to GBV victims and survivors before referring cases to secondary or tertiary healthcare facilities. While efforts have been made to establish a forensic lab in the state, including training Nurses and lab technicians, the lab remains pending. Most of the surveyed population consider informal support systems beneficial for GBV victims/survivors.

Government entities, CSOs, and NGOs in Kaduna State implement a diverse range of GBV sensitization initiatives. These include radio dramas, social media campaigns, and donor-funded programs, aiming to reach a broad audience. Other sensitization methods include distributing printed materials, organizing community dialogues, training key stakeholders, establishing extracurricular clubs in schools, and engaging the public in various settings. Information and educational materials and programs in the state are somewhat accessible to individuals with disabilities, and a significant portion of the surveyed population confirms their availability. The local FIDA chapter is also simplifying GBV-related laws to improve minors' understanding of them. It is, however, important to note that although sexual and reproductive health education is taught in some schools, comprehensive sex education is generally absent from the curricula of secondary and tertiary institutions in the state.

The Ministry of Human Services and Social Development's budget allocation increased steadily between 2020 and 2022, going from N913.54 million to N1.48 billion and N3.61 billion. For 2020, 2021, and 2022, the budget performance are 33.86%, 90.93%, and 80.28%, respectively. The

Ministry of Human Services and Social Development's per capita figure for the state was N67.5 in 2020, N293.8 in 2021, and N632.4 in 2022. These figures outperformed the regional average, which was N46.2, N96.7, and N197.4 in 2020, 2021, and 2022, respectively, and were the highest in the region over the course of the three years.



## Human Angle Story

A distressing case involving an 18-year-old girl was presented to the Ministry of Justice. The girl's husband had denied her access to antenatal care, citing his mother's successful past without such care. Tragically, when she was eight months pregnant, while ironing his clothes, she suffered an episode of eclampsia, leaving her in agony on the floor with the scorching iron embedded in her lap until a compassionate neighbour intervened. During her hospitalization, the husband displayed a lack of responsibility, neglecting to pay any bills or provide essential supplies, except for a bag of sachet water. She eventually delivered a child who, unfortunately, did not survive. She had to endure temporary blindness for six months following the incident. Ultimately, the marriage was dissolved.



## Information and Awareness

Do you know of any GBV information and/or education programs or materials in the state?

**60.00%** Yes  
**29.52%** No  
**10.48%** Not Sure

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

<b>4.67%</b> Not at all useful	<b>31.43%</b> A little bit useful
<b>48.57%</b> Mostly useful	<b>15.24%</b> Completely useful

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

<b>40.76%</b> Audio/spoken content	<b>2.24%</b> Braille printed content	<b>6.36%</b> Visual content	<b>4.46%</b> Screen subtitling
<b>11.48%</b> Sign interpretation	<b>7.32%</b> Picture-based messages	<b>3.18%</b> Simplified messages	<b>24.20%</b> None of the above

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