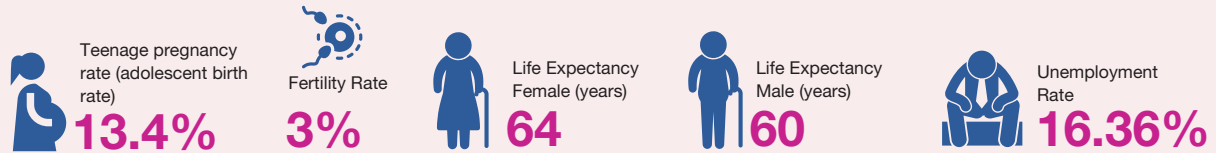
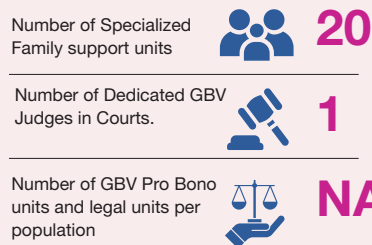


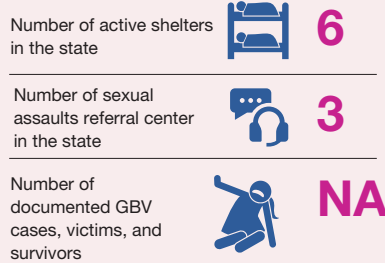
State Context



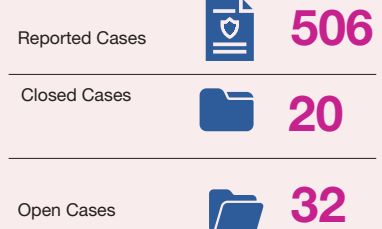
Access to Legal Justice



Support Services



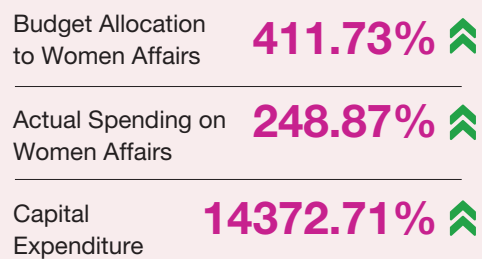
GBV Cases



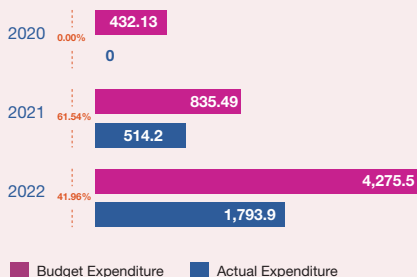
Index Ranking (out of 36 States)



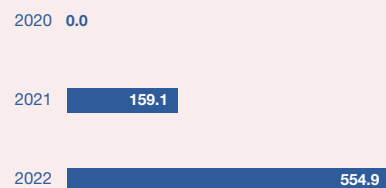
Year on Year Growth 2022







Total Allocation to Women Affairs (NGN'm)



Per Capita Analysis (NGN)



S/N	Indicators	Key Findings	Recommendations
1	 Laws and Policies	Lack of funding, no proper governance structures, and a lack of will for the implementation of the existing laws and policies that criminalize GBV.	Increased engagements to secure more funding allocation for the implementation of these laws, as well as collaboration with NGOs and international organizations to mobilize resources.
		Limited capacity of government personnel tasked with the implementation of the laws.	Advocate for funding of training programs as well as collaborate with academic institutions, CSOs, and training centres to provide capacity strengthening for relevant duty bearers - government personnel.
		Low awareness of the existing laws and policy across the state.	Implement comprehensive awareness campaigns to educate the public about existing GBV laws and policies.
2	 Access to Legal Justice	Delay in prosecuting cases, which limits implementation of the laws and discourages survivors from accessing justice.	Establish clear timelines for the prosecution of GBV cases as well as streamline the legal process to reduce delays.
		Specialized police units, prosecution departments, Courts and/or alternative tribunals hold promise but their effectiveness depends on many factors, including quality of staff, amount of funding, and relationship to other legal institutions.	Provide adequate funding and training for these specialized units to improve their capacity, resultantly, their effectiveness.
		The state lacks the presence of dedicated GBV judges and courts for the prosecution of GBV cases, hence the delay in judgment.	Provide training for judges and legal professionals on handling GBV cases and then create positions and offices for these trained personnel to serve in that capacity.
3	 Support Services	The capacity of the existing SARCs and shelters to serve the current population is relatively low, as they do not have adequate number of staff, bedding, or space.	Advocate for increased funding to enhance the capacity of the SARCs and shelters to serve the population of Ogun State.
		Poor funding of government agencies tasked with responding and lack of funding for CSOs who often are the first to respond and provide care and support for the survivors.	Enhance advocacy efforts to secure improved and adequate funding for state actors to effectively serve in this capacity.
		Weak service support and referrals for victims/survivors, limiting their access to quality services.	Encourage partnerships between government agencies, NGOs, and healthcare institutions to establish and strengthen more robust referral systems to ensure victims have access to quality services.
4	 Information and Awareness	Low awareness of the existing GBV IEC information and materials	Explore various channels, including social media, to disseminate GBV Information, Education, and Communication (IEC) materials.
		Complete dependence on traditional medium of sharing IEC despite the public shift towards social media.	Collaborate with influencers and online platforms to reach a wider audience.
		Inadequate provision of IEC material for PwDs, especially the visually impaired, and a lack of IEC material in local languages.	Collaborate with organizations specializing in accessibility to ensure inclusivity for PwDs, particularly the visually impaired. Also, translate and produce IEC materials in local languages to cater to the linguistic diversity of the population.



Laws and Policies

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

54.1% **Yes** 45.9% **No** -- **Not Sure**

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

51.9% **Strongly Agree** 41.4% **Agree** 1.5% **Indifferent**
4.5% **Disagree** 0.8% **Strongly Disagree**

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

31.6% **Yes** 51.1% **No** 17.3% **Not Sure**

In Ogun State, a combination of both state and customary laws exists to address GBV. Laws that address GBV comprise the Child Rights Law 2007 (amended in 2015), the VAPP Act 2017, the Female Genital Mutilation Law, the Criminal Code of Ogun State 2006 (amended in 2011), and the Persons with Disabilities Law 2017, amongst many others. These laws are reviewed periodically, as indicated by the eight-year review of the Child Right law and the review of the VAPP law, which, however, needs further review to provide for an annual reporting on the implementation of the law.

There are efforts in place, particularly by NGOs, to build awareness of the existing laws and policies. Some notable gaps in the implementation of the existing laws and policies include a lack of effective coordination to collect GBV data, discarding of evidence due to forensic technicalities, and slow case processes. However, to support the implementation of the state's VAPP Law, plans are underway to launch a Referral Pathway and Standard Operating Procedure (SOP) for GBV, carry out a validation of a Costed Action Plan for the VAPP Law, and open a transit home for GBV survivors in Asero, Abeokuta.

Ogun State boasts a structural system for reporting, prosecuting, and enforcing GBV cases. The Ministry of Women Affairs promptly responds to sexual and GBV instances, ensuring fair case referrals. The existence of GBV Desk Officers across all 20 LGAs embraces the citizens' input and directives for addressing these cases. NGO/CBOs registered as service providers with the Ministry also report GBV cases; institutions like SARC Centers and the Ministry of Health and Justice also receive reported cases, which are then channelled to the Ministry of Women Affairs (MoWA) for a proper referral pathway. The Police and Civil Defense also get reported cases, directly. GBV prosecution is undertaken by Family Courts at the magistrate level in

LGAs. Ministry of Justice, under the Office of the Director of Public Prosecution (DPP), prosecutes cases of GBV at the state level with the collaboration of Police, Civil Defense, and MoWA that bring cases to the court.

The state does not have a known witness program, nor does it provide legal aid services or pro-bono lawyers. However, there are certain inefficiencies in the referral pathway for GBV cases, resulting in a need for improved coordination. Survivors are not adequately accommodated during court proceedings, leading to a slow, traumatising process with minimal victories. Although it's unclear whether the state meets the VAPP Act's timeframes from case mention to judgement issuance, a push for specialised units is evident. Efforts for the creation of specialised and exclusive judges for SGBV Cases, as well as specialised police units is of utmost priority in Ogun State.

In terms of shelter and SARCs' provisions, the composition shows that there are six active and functional shelters - two owned by the government and four owned by NGOs. There are three active SARCs - two owned by the government and one by an NGO. These SARCs and Shelters are accessible to the population, although access for PwDs is very low without sign language staff or special needs experts. There is also a low awareness (19%) among the public of the existence of these support structures.

The Ogun State GBV Referral Pathway has five entry points. Survivors or community complainants can use any services that are convenient and accessible to them. Most reported cases of rape at tertiary institutions use the GBV tete-a-tete application developed by CEHWIN as an entry point. The Ministry of Women Affairs supports GBV victims with microcredit for small businesses called "Okowo Dapo" in all 20 LGAs across the state. The Director of Women Empowerment Services



Access to Legal Justice

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

79.7% **Formal justice system** 14.3% **Informal justice system** 6.0% **I will not seek justice**

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

54.1% **Yes** 12.0% **No** 15.0% **Not Sure**
18.8% **It Depends**

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

33.8% **Yes** 42.9% **No** 23.3% **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?

19.5% Yes
80.5% No

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

18.8% Specialized medical healthcare pathway
13.5% Psychosocial/mental health pathway

64.7% Police/security pathway
30.8% Legal pathway
18.0% 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?

48.9% Yes
36.1% No
15.0% Not Sure

confirmed the distribution of tear gas canisters as a protection and defence mechanism against rapists to 200 female students in tertiary institutions.

While formal GBV service structures are evident, there is the presence of some informal support systems—such as family, friends, religious centres, women groups, or community groups—and their involvement or contribution to supporting GBV victims or survivors. They are, however, not as effective due to structural barriers like poverty, patriarchy, and cultural/religious norms.

The state actively utilises various mediums in its GBV-related awareness programs. Notable efforts include those of the Ministry of Women Affairs in sponsoring quarterly GBV awareness advertisements, and several NGOs are contributing to the cause with educational materials, seminars, and media interventions. The Ministry demonstrates remarkable initiative, making an impact in over 90 schools and carrying out a taskforce to reduce school-hour street loitering.

The education system within the state lacks comprehensive sex education. A decade ago, the Ministry of Education's Family Life Education was used in secondary schools in Ogun State, but currently, only subjects like Biology, Basic Science, and Home Economics briefly touch upon sex education.

The existence of PwD-friendly IEC sensitization materials for GBV in the state is present and has been in existence for more than eight years. An initiative called "Vision Spring" just ended a one-year project on a GBV awareness program for adolescent female PwDs in Ogun State. However, work is still required in the state for the visually impaired. The survey results regarding the populace's awareness of GBV programs or materials within the state show that 37% affirm knowledge of

GBV information, materials, and educational programs.

Ogun State leads the Southwest in per capita spending by its Ministry of Women Affairs and Social Development, reaching N554.9 in 2022, 217% higher than the national average of N256.1. The substantial rise in allocated funds, totaling 2.3 billion between 2021 and 2022 for Ogun's ministry, drove this impressive increase. However, the ministry's budget performance dipped to 41.96% implementation in 2022 from 62% in 2021, indicating a need for improvement. While the ministry's in per capita spending was fairly okay, attention to budget execution is crucial to ensure effective utilization of funds for women's welfare initiatives.



Human Angle Story

The heart-wrenching tale of Fausat (not her real name) brings attention to the harrowing instances of GBV in the state. Living with her father due to a broken home, she was subjected to unspeakable abuse when he began trading her body for money. Sharing her plight with a friend eventually led to a report being raped to a local NGO. This action spurred a two-year-long legal battle, during which her father was arrested and convicted. Throughout this entire ordeal, Fausat, who was only 14, had no shelter in her senatorial district and was discriminated against and ostracised in her community. This real-life case underscores the failure of protective services and highlights multi-dimensional issues faced by GBV survivors in the state.



Information and Awareness

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


37.6% Yes
48.9% No
13.5% Not Sure

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

26.3% Not at all useful
36.1% A little bit useful
30.1% Mostly useful
7.5% Completely useful

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

35.0% Audio/spoken content
17.5% Braille printed content
22.5% Visual content
5.0% Screen subtiting
28.3% Sign interpretation
25.8% Picture-based messages
15.8% Simplified messages
52.5% None of the above

Index	Indicators	Result Justification
 Laws and Policies	Existence of State laws that criminalize the GBV	1.0
	Quality of State VAPP Laws	1.0
	Existence and usage of customary and religious laws and policies that criminalizes GBV	0.5
	Consistent, result-producing efforts at reforming and strengthening laws, policies, and customs on GBV prevention and response within an eight-year period	1.0
 Access to Legal Justice	Available system of GBV reporting, prosecution, and enforcement	1.0
	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
 Support Services	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	1.0
	Existence and usage of holistic informal support systems	0.5
 Information and Awareness	Availability and widely disseminated GBV IECs materials	1.0
	Existence and usage of comprehensive sex education curriculum in secondary schools	0.5
	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
 Budget and Spending	Women Affairs Ministry budget allocations and spending (85% and above execution rate)	0.0
	Women Affairs Ministry spending per capita	1.0