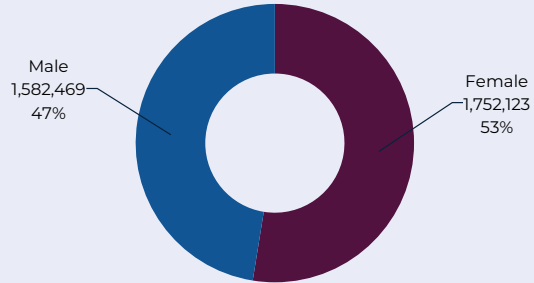


Ebonyi State

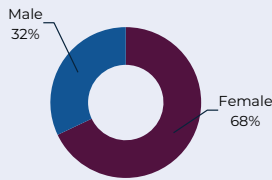




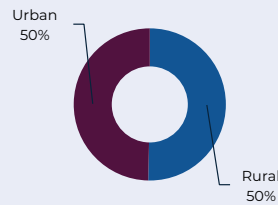
Total Population
3,334,592



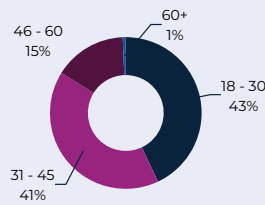
Respondents: 465



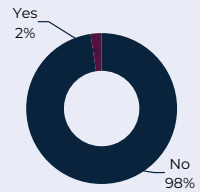
Location



Age Group



Disability Status



GBV Context



No. of GBV cases **5,575**



No. of active Sexual Assault Referral Centres (SARCs) **1**



No. of active shelters **N/A**



No. of Family Support Units (FSUs) **N/A**

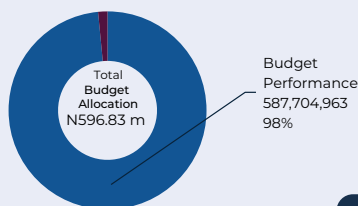


Index Grades

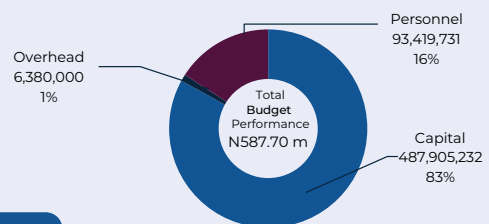
Laws and Policies	●
Access to Legal Justice	●
Support Services	●
Information and Awareness	●
Budget and Spending	●

Ministry of Women Affairs and Social Development

Budget Performance (2023)

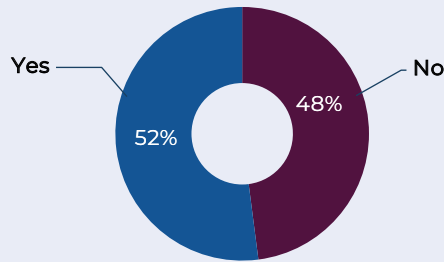


Budget Expenditure (2023)



Per Capita Spending **NT176.2**

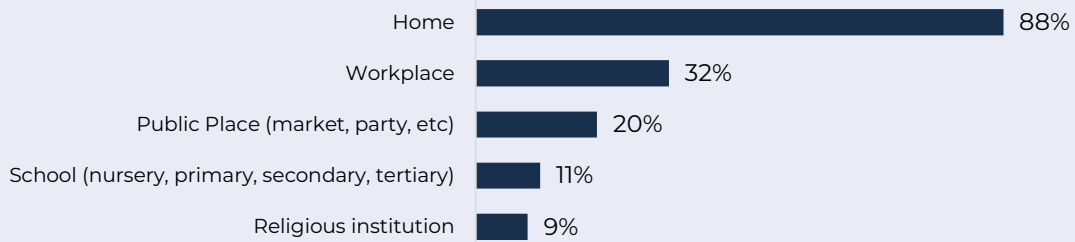
Have you or anyone you know experienced any form of gender-based violence (GBV) in the last five years?



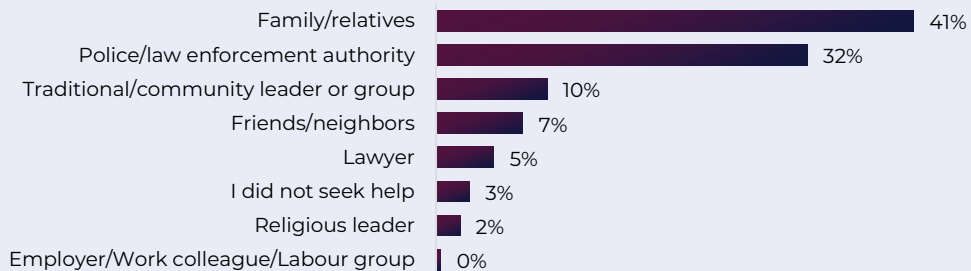
What form of GBV did you or the person experience?



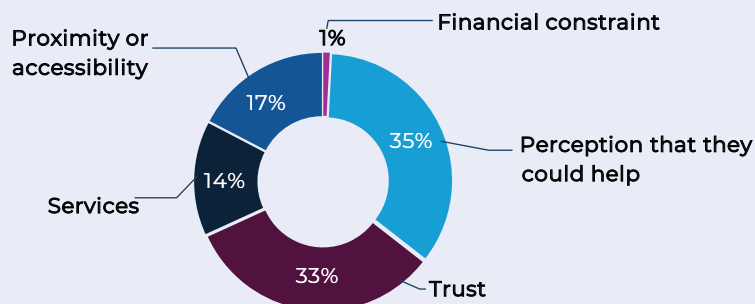
Where did you or the person experience the GBV?



Where did you or the person first seek help?

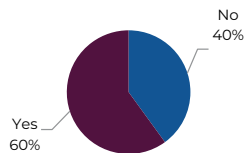


Why did you or the person choose where to seek help?

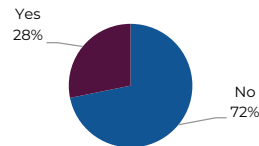


Laws and Policies

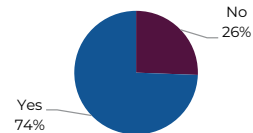
Are you aware of existing laws and/or policies that address gender-based violence (GBV) in the state?



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

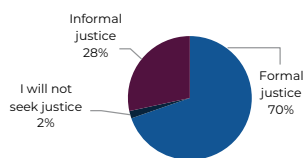


Do you know of anyone who has been convicted for GBV-related offenses?

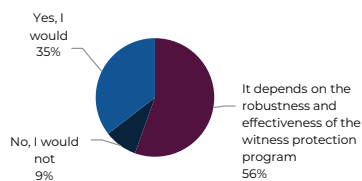


Access to Legal Justice

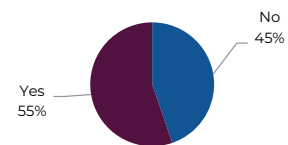
Where would you seek justice if you, or anyone you know, experience GBV?



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

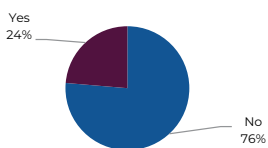


Are you aware of legal assistance and services provided by the State to GBV victims/survivors?

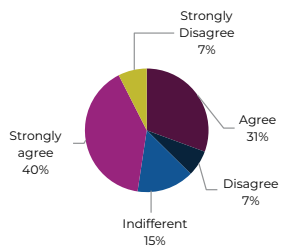


Support Services

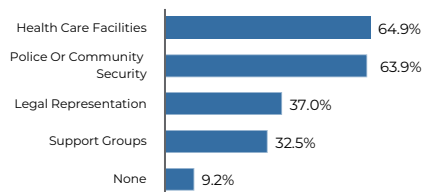
Do you know of, or have you visited, any active shelters and/or Sexual Assault Referral Centres (SARCs) for GBV victims/survivors in the state?



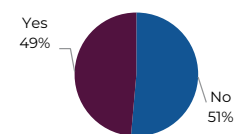
Do you believe that these shelters and/or SARCs are effectively functional, adequately equipped, properly maintained, and sustainable over time?



Which of these processes and procedures for reporting GBV-related incidents are you aware of? (Referral Pathways)

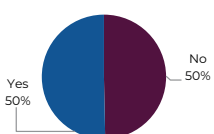


Do you think informal support systems such as family, friends, religious centres, community groups, etc., are helpful to GBV victims/survivors?

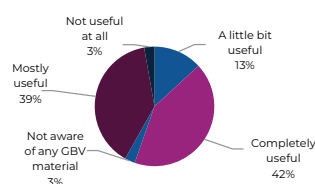


Information and Awareness

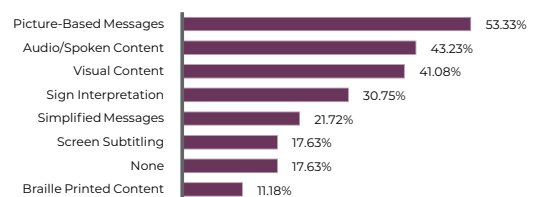
Do you know of any GBV information and/or education programs or materials in the state?



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



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



Key Insights

Laws and Policies

Ebonyi State has enacted key GBV-related laws, including the VAPP Law (2018, amended in 2022), Child Rights Law (2010), and Criminal Code Law, used in prosecuting GBV-related cases. While GBV prosecutors widely use the VAPP Law, survey data shows that 60% of respondents know its existence, with 70% believing the laws are effective. However, knowledge gaps persist, with no printed copies of the VAPP Law available for public or institutional use, limiting awareness and implementation. The Child Rights Law also addresses violence against children, including abuse, trafficking, and early marriage, but requires updates to reflect current realities. The laws face gaps, such as inadequate punishment for offences like FGM, lack of provisions for survivors' compensation, and absence of laws addressing persons with disabilities. 280 GBV cases were reported in the past year, 63 were prosecuted, and 15 judgments were delivered. Customary laws in Ebonyi are informal and vary across communities. Some bylaws outlaw practices like FGM, but GBV remains normalized in cultural contexts. Survey results show that 74% believe customary or religious practices help prevent GBV. However, reviewing and integrating these informal practices into state laws could strengthen the GBV response.

Access to Legal Justice

Ebonyi State has a cross-cutting GBV reporting and prosecution system. Cases are often reported through various channels, including police GBV desks, the Ministry of Women Affairs, and FIDA. Survivors are referred to specialized facilities like NDURU SARC and NOFIC for medical and psychological care before cases proceed to the Ministry of Justice and the GBV courts. Survey findings reveal that 70% of respondents prefer formal justice channels such as courts and police for GBV cases. However, effective protection for survivors and witnesses is lacking as there are inadequacies in the witness protection offered by the state and delays in police investigations that often hinder justice. Legal aid is accessible through MoJ, MoWA, and NGOs like FIDA, which provide pro bono services for criminal GBV cases. However, no robust witness protection program exists, leaving survivors vulnerable. Cases rarely adhere to the VAPP Act's prescribed timeframes; delays in judgments and certified copies remain significant challenges. The informal justice system, comprised of traditional rulers and kinsmen, mediates in civil GBV cases but lacks enforcement authority. 63% of respondents find it effective in ensuring justice, although it perpetuates harmful cultural norms like victim-blaming.

Support Services

Ebonyi has six GBV courts and trained GBV judges, though judges handle non-GBV cases. Human Rights desks exist in police commands, but specialized Family Support Units are absent. Ebonyi State has limited support services for GBV victims/survivors. The state owns one shelter, established by Momentum Country and Global Leadership (MCGL), but it is non-functional due to its isolated location, lack of fencing, and absence of security. One Sexual Assault Referral Center (SARC) is operational: Nduru SARC at Alex Ekwueme Federal University Teaching Hospital. This SARC offers medical services and psychological care, but limited resources and manpower affect their reach. The state's reporting and referral system involves hospitals, police, civil defence, MoWA, and NGOs. Survivors access treatment or legal aid based on their initial point of contact, ensuring an integrated response. Survey results show that 49% of respondents consider informal support systems of family, friends, religious centers, and community groups as better than formal systems, although such support lacks sustainability. Medical units and forensic labs at SARCs have played crucial roles in prosecuting GBV cases by preserving evidence for court proceedings. However, inadequate budgetary allocation hinders service effectiveness.

Information and Awareness

Information, education, and communication (IEC) materials are available for sensitization and awareness purposes. They include audio systems, fliers, radio, picture charts showing different forms of GBV, T-shirts, face caps, etc. They are occasionally distributed to the public during community outreaches, training, and road work in schools, markets, etc. However, they are limited in number and are often provided by NGOs and CSOs partnering with the state on GBV issues. Citizens' awareness of these materials and programs remains low, with 49% of respondents being aware of them. During moral instruction on Thursdays,

some personnel were trained to use pictorial charts to illustrate GBV to students. Gender health has been added to the school curriculum, and sex education is part of it. In the tertiary institutions, sex education is incorporated into some courses of study. 97% of the surveyed population supported the inclusion of sex education in educational curricula across all levels, emphasizing the need for consistent, inclusive efforts. Efforts to include persons with disabilities (PWDs) in awareness programs are evident in the use of audio and picture message materials and the engagement of sign interpreters. However, significant gaps remain in creating tailored resources for specific disabilities. The braille-developed content has been added to the budget for 2024 but has yet to be approved by the governor.

Budget and Spending

In 2023, the Ministry of Women Affairs and Social Development in Ebonyi State demonstrated significant budgetary performance, achieving a 98.47% execution rate of its N596.83 million final budget, with an actual expenditure of N587.7 million. The ministry prioritized capital projects, spending N487.91 million, reflecting a strong commitment to infrastructure development and program delivery. Personnel expenditure amounted to N93.42 million, while overhead expenditure was significantly lower at N6.38 million. With a per capita of N176.20, Ebonyi state performed below par. Key initiatives included N2 million for equipping GBV centers with furniture and sick beds, N5 million for reconstructing a one-stop shop for GBV survivors, and a N3 million budget commitment for its equipping. These efforts align with the state's focus on addressing gender-based violence and enhancing support services for survivors. However, like every other state, these allocations are insufficient if full disbursement and utilization of committed funds remain a major challenge.



Human Angle Story







A man physically assaulted his wife by burning her with a hot iron. The assault occurred after the woman sold a goat to fund their farmland, as her husband had refused to provide the necessary funds. When the woman became unconscious, she was rushed to a health center. Local authorities intervened, and the woman was transferred to a specialized facility for treatment. The police arrested the husband and detained him for two weeks. Following mediation efforts by family members and religious leaders, the case was resolved at the police station.

Ebonyi State

Indicators	Key Findings	Recommendations
Laws and Policies. 	Laws like the Child Rights Law need revision, though the VAPP law under review addresses some gaps.	Most of the laws need to be reviewed to adequately address their shortcomings in the fight against GBV.
	Penalties for offences like female genital mutilation (FGM) are not commensurate with the severity of the crime.	Although reviewed two years ago, an ongoing review is needed to provide appropriate punishments for all offences and cater to the peculiar needs of certain vulnerable groups. The ongoing review should also ensure adequate compensation for the victims/survivors.
	There is no compensation for GBV survivors in the current legal framework.	
	The VAPP law lacks specific provisions addressing the unique needs of persons with disabilities (PWDs) and other vulnerable groups.	Effective fight against GBV demands that Ebonyi enact its own Disability Rights Law to protect the rights and privileges of PWDs specifically.
	Critical stakeholders like the police lack copies of the VAPP law, hindering awareness and implementation.	Printed copies of the VAPP and other laws should be made available to citizens to aid awareness and knowledge.
Access to Legal Justice 	Inadequate provisions for a robust witness protection program. Most of the witnesses and survivors go back to their homes, and communities where they experienced the violation without protection.	There is an urgent need for an effective and robust witness protection program in Ebonyi state. The ongoing effort to adopt the Lagos State model in this regard should be completed hastily.
	Insufficient pro bono and legal assistance in the state.	Provide more state funding for increased pro-bono legal services, which will ensure that more victims have access to legal services and perpetrators of GBV are promptly brought to book.
	Extremely slow litigation process. Slow investigations keep victims waiting for too long for justice.	Adequate funding for the police, the government's major investigative agency. More funding is also needed for the recruitment of more GBV judges and the creation of more GBV courts.
	Ebonyi State urgently needs functional family support units. While the GBV response team and desk officers in police divisions need to become more efficient.	Prioritize funding to ensure that each police division has a dedicated GBV desk, with well-equipped and trained officers.
Support Services 	Ebonyi State has only one active SARC but no shelter.	<p>The state needs more shelters and SARCs, while the existing ones need to be strengthened to offer the services they were created for.</p> <p>Greater sensitization is needed to reap the benefits of the collaborative interplay between the formal and informal justice systems. This will also ensure that communities, not just government or NGOs, help victims or survivors.</p>

Indicators	Key Findings	Recommendations
<p>Information and Awareness</p> 	<p>IEC materials are available but largely depend on donor funding and NGOs like UNFPA and FIDA. Outside commemorative events, no state-owned GBV programs exist.</p> <p>Low awareness of available GBV IEC materials and programs done in the state.</p> <p>IEC materials do not specifically target PWDs, leaving them vulnerable and underserved.</p>	<p>The state needs to take ownership of the Awareness and sensitization campaigns to improve reach to all nooks and crannies of the state as well as ensure sustainability of such programs. For this to be achieved, more funding is required.</p> <p>There is a need to produce IEC materials in quantum and to distribute them as often as possible. This calls for funding from the state government. Relevant state institutions should produce their materials for use.</p> <p>Disability-sensitive IEC materials are strongly solicited to ensure an inclusive campaign against GBV.</p>
<p>Budget and Spending</p> 	<p>Budgets for MoWA and GBV activities are insufficient, and the GBV task force has no specific allocations. Most IEC materials and GBV activities rely on donor funding, limiting consistency and scope.</p>	<p>A costed budget lines should be developed and implemented to fund GBV issues properly.</p>

WOMANITY INDEX IMPLEMENTATION TRACKER
2023 Policy Recommendations
Ebonyi State

S/No.	Recommendations	Implementation Status	Remarks
Laws and Policies			
1	 Review the VAPP Law in line the existing gaps in the law and current realities regarding GBV.	Partially Implemented	The VAPP Law is currently under review by concerned stakeholders
2		Partially Implemented	Ongoing process
3		Not Implemented	No copy is available in the state for both actors on GBV, and the populates
Access to Legal Justice			
4	 The government should empower the Ministry of Women Affairs with adequate budgetary allocation and disbursements to enable it seek justice for victims and survivors.	Partially Implemented	The current administration releases funds on request as stated by the HOD Planning, Research, and statistics MOWA
5		Partially Implemented	There are human rights desks in police commands, but no established FSUs
6		Not Implemented	There is an urgent need for more
Support Services			
7	 There should be a separate budget line for MOWASD, for GBV response and service provisions, especially as the ministry need to commence shelter service provisions and it should be captured in the state budget.	Not Implemented	There is no budget line for GBV activities
8		Not Implemented	None is in existence
9		Not Implemented	Available at the SARCs but limited
Information and Awareness			
10	 Government should ensure that the GBV sensitisation and awareness materials caters to PwDs as well as the public.	Fully Implemented	Pictorials and audio messages
11		Fully Implemented	Sex education has been incorporated into the curriculum as a topic in Gender Health
12		Partially Implemented	Trained personnels have been deployed to schools to educate students on GBV using pictorials during moral instructions



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