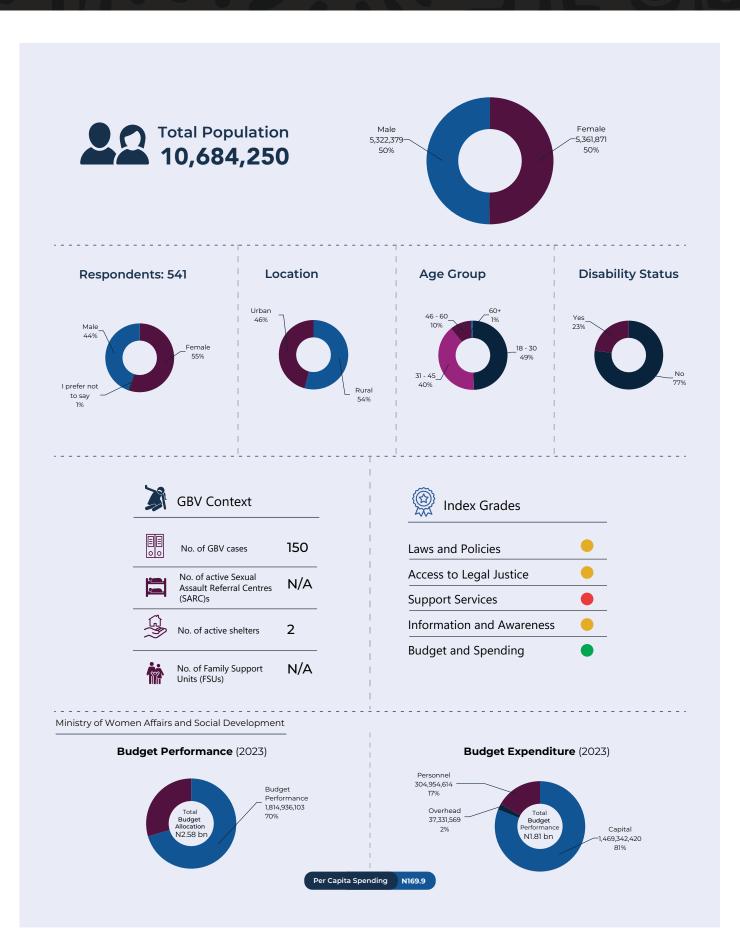




# Katsina State





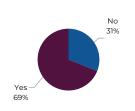
## **Katsina State**

### Have you or anyone you know experienced any form of gender-based violence (GBV) in the last five years? No Yes 39% What form of GBV did you or the person experience? Domestic violence or intimate partner violence 47% Physical violence 32% Sexual violence Economic violence 17% Mental or emotional violence Harmful traditional or cultural practices Where did you or the person experience the GBV? 62% Home Public Place (market, party, etc) School (nursery, primary, secondary, tertiary) Workplace 13% Religious institution Where did you or the person first seek help? Police/law enforcement authority Family/relatives 29% Employer/Work colleague/Labour group 8% Friends/neighbors 6% Traditional/community leader or group 6% Religious leader 5% I did not seek help 5% Lawyer 3% Why did you or the person choose where to seek help? Proximity or Financial constraint accessibility 8% 15% Perception that they 12% Services **30**% could help 35% Trust



#### Laws and Policies

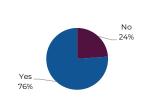
Are you aware of existing laws and/or policies that address gender-based violence (GBV) in the state?



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

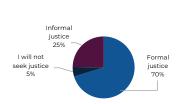


Do you know of anyone who has been convicted for GBV-related offenses?

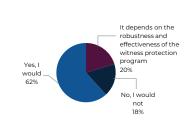


#### **Access to Legal Justice**

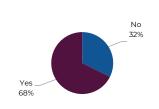
Where would you seek justice if you, or anyone you know, experience GBV?



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

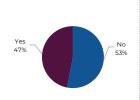


Are you aware of legal assistance and services provided by the State to GBV victims/survivors?

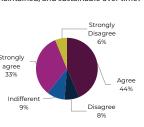


### **Support Services**

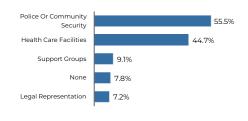
Do you know of, or have you visited, any active shelters and/or Sexual Assault Referral Centres (SARCs) for GBV victims/survivors in the state?



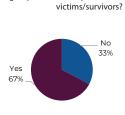
Do you believe that these shelters and/or SARCs are effectively functional, adequately equipped, properly maintained, and sustainable over time?



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

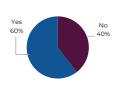


Do you think informal support systems such as family, friends, religious centres, community groups, etc., are helpful to GBV

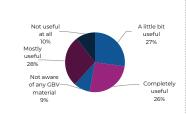


#### Information and Awareness

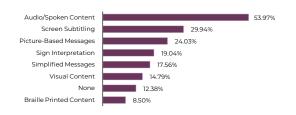
Do you know of any GBV information and/or education programs or materials in the state?



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

Katsina State's recent domestication of the Violence Against Persons (VAPP) Law in December 2023 follows the 2023 Womanity Index Report highlighting the state's previous non-compliance. This development, alongside existing laws like the Child Protection Law, Penal Code, Disability Law, Administration of Criminal Justice Law, and Sharia law, demonstrates a legal framework for GBV prevention and response. While a significant portion of respondents (74.41%) are aware of these laws and perceive them as effective (71.36%), enforcement remains a major challenge. Of the 150 reported cases in the past year, only 60 were prosecuted, with no convictions. This highlights critical gaps in human resources, capacity, and law enforcement integrity.

The recent adoption of the VAPP Law suggests a positive step towards strengthening the legal framework for GBV prevention and response by the state. However, more systematic reviews are necessary to ensure future laws align with evolving needs and international standards. Sharia law, as the prevailing religious law, prescribes severe penalties for rape and promotes gender equality in some areas. This aligns with certain aspects of formal law, but regular assessments are crucial to strengthen both systems and ensure their complementary roles in addressing GBV. A significant proportion of respondents (74.9%) view customary and religious laws as effective, emphasizing the need to consider their potential in GBV prevention and response.



## $lue{\mathbb{L}}$ Access to Legal Justice

The state has a robust GBV reporting system involving NGOs, law enforcement agencies, and local government representatives. Cases are typically routed through the police regardless of the initial reporting channel, ensuring centralized management. The state response team cooperates with GBV desk offices across agencies like the National Human Rights Commission and SARCs. Survey results show that 70.2% of respondents would pursue formal justice if they or someone they knew experienced GBV. Legal aid services include pro bono lawyers from the International Federation of Female Lawyers (FIDA) and public defenders. While there is no formal witness protection program, witnesses are assured of safety and anonymity to encourage participation. There are also delays in prosecution due to limited resources. Informal justice systems operate under Shariah law, applying retributive justice or fines based on the harm caused. 77% of respondents find these systems effective. Specialized units include family support units, GBV desks in the police force, and social workers in LGAs from the Ministry of Women Affairs. While dedicated GBV judges or courts are not yet operational, a project to establish GBV courts to streamline the prosecution process is underway.



### Support Services

Katsina has no SARCs and two active shelters. Shelters include facilities by NAPTIP and NDLEA, with Hisbah and JIBWIS Islamic groups offering temporary safe spaces for GBV survivors. These SARCs provide medical and psychosocial support, legal assistance, and food. FIDA offers pro bono legal aid, while the state covers all medical expenses for survivors, exemplified by the case of a victim who received comprehensive treatment for severe injuries at the Nasiha SARC and a Federal Teaching Hospital. The reporting and referral pathways operate through synergy between MDAs, law enforcement, hospitals, NGOs, and the Ministry of Education. Cases are routed to the police regardless of the reporting channel. Local government representatives escalate cases to the state capital if needed. Survey data shows that 74.4% of respondents value informal support systems such as family, religious centres, and community groups over formal systems, highlighting their vital role in GBV survivor recovery and justice.



### Information and Awareness

The state primarily uses verbal methods, such as lectures, public address systems, and radio programs like Mugyara Akidan Mu ("Let's Fix Our Belief System"), for GBV sensitization. Printed IEC materials are scarce, appearing only through NGO or UNICEF sponsorship. The AGILE project in senior secondary schools

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is a notable exception, consistently implementing the Safe Space Life Skills curriculum twice weekly in 247 pilot schools, covering gender equality, life skills, and vocational studies. However, these efforts lack specific IEC materials tailored for persons with disabilities (PWD). The general population benefits sporadically from sensitization programs through town criers, mosques, and churches. While 67.14% of the surveyed population knows GBV awareness initiatives, materials remain insufficient and inconsistent, with limited accessibility for PWDs. The AGILE project serves as the state's most structured GBV education intervention. However, broader inclusive IEC efforts and scheduled programs are needed to effectively enhance public awareness and engagement.

# Budget and Spending

In 2023, the Katsina State Ministry of Women Affairs, responsible for GBV prevention and response, had a final budget of \(\frac{\text{\te

## **Human Angle Story**



Efforts to prevent and respond to GBV include partnerships between organizations like the Danuwa Foundation, UNICEF, and other NGOs, which aim to address the plight of victims in marginalized and insurgency-affected areas. The foundation actively engages in fieldwork to reach survivors, especially those victimized by banditry, offering critical support and hope for justice. Many survivors, including women, impregnated through sexual violence, reported their cases to the police and traditional or religious leaders without any meaningful action taken. However, the Danuwa Foundation has penetrated these communities, not only providing access to medical care and psychosocial services but also advocating tirelessly for justice for the victims. By challenging silence and systemic neglect, the foundation is shedding light on survivors' resilience and the urgent need for sustained GBV prevention and response strategies.

## **Katsina State**

Indexes	Key Findings	Recommendations		
Laws and Policies	Weak enforcement and limited mechanisms for implementing the VAPP law.	The state should allocate funds to stakeholder MDAs to support the implementation of the VAPP Law.		
		The Ministry of Women Affairs should leverage technical support from NGOs and CSOs to create awareness about the law and facilitate its adoption.		
		The Ministry of Women Affairs and its partners should provide targeted training for law enforcement officers, judicial personnel, and other stakeholders on the provisions and enforcement of the VAPP Law.		
Access to Legal Justice	Inefficient institutional mechanisms, insensitive handling of GBV cases and prolonged legal procedures.	The government should allocate funds for trauma-informed training of law enforcement and judiciary personnel and establish specialized courts with designated GBV judges to improve efficiency in handling cases.		
	Limited access to key stakeholders impedes the pursuit of legal remedies.	To bridge accessibility gaps, the Ministry of Women Affairs, in partnership with NGOs and CSOs, should facilitate the decentralization of legal and support services to underserved areas.		
	Societal stigmatization and religious and cultural barriers to justice exist.	The Ministry of Women Affairs should leverage community sensitization campaigns involving traditional and religious leaders to address stigma and challenge harmful cultural and religious practices, fostering a supportive environment for survivors to seek justice.		
Support Services	Shortage of GBV support facilities and services for victims and survivors.	The government should establish additional SARCs and shelters in different areas of Katsina State, particularly in underserved areas, to provide support services and improve their accessibility.		
	Lack of adequate GBV knowledge among those working in healthcare, law enforcement, and the judiciary.	The government should provide healthcare professionals, police officers, and judicial personnel with training and information sessions to improve their awareness and understanding of referral and reporting.		
	Low awareness of support services, including the existence of SARCs and shelters.	The government should establish mechanisms to enhance coordination and collaboration between formal support systems (SARCs, shelters) and informal support systems to provide comprehensive support to survivors.		
Information and Awareness	Divergent cultural and religious views hinder the acceptance and implementation of comprehensive sex education.	Ministry of Women Affairs should collaborate with community and religious leaders to develop culturally sensitive, ageappropriate sex education frameworks.		
	Information, Education, and Communication (IEC) materials are often insufficient and not sensitive to the culture and language of the target communities and PWDs.	The Ministry of Women Affairs should develop and disseminate culturally sensitive IEC materials, engaging with local stakeholders and PWDs to ensure their relevance and effectiveness.		
	Awareness efforts are often misunderstood as attempts to impose foreign ideologies or values, leading to resistance or rejection of gender-focused sensitization programs.	The Ministry of Women Affairs should use community-based GBV-sensitization approaches, engaging trusted leaders and groups to deliver tailored messages that align with local values and address misconceptions		
Budget and Spending	81% of the Ministry of Women Affair's budget was earmarked for capital expenditure	Government should maintain the prioritization of capital expenditure component of the Ministry's budget to empower it to fulfil its GBV prevention and response mandate.		
	The Ministry of Women Affair's Spending per capita was quite low at N169.9.	The government should increase the budget allocation and disbursement to the Ministry to aid it in catering adequately to the GBV prevention and response needs of the population.		

#### WOMANITY INDEX IMPLEMENTATION TRACKER 2023 Policy Recommendations Katsina State

S/No.	Recommendations	Implementation Status	Remarks	
Laws and Policies				
1	Adopt the VAPP Law.	Fully Implemented	The VAAP law was amended and signed by the governor and came into operation on 24th October, 2023	
2	Monitor and strengthen the implementation and impact of the Penal Code in preventing and responding to GBV.	Fully Implemented	Penal code laws are being implemented as they should be. When ingredients to crime is proved beyond reasonable doubt, the court imposes the prescribed puishment as stated in the penal code.	
Access to Legal Justice				
3	Invest in training for law enforcement officials, judicial personnel, and other stakeholders to ensure they are equipped to handle GBV cases sensitively and efficiently.	Partially Implemented	Trainings are conducted even though not routinely. If trainings are well invested in, this will assist in revamping the strenthening key stakeholders working on GBV.	
4	Establish partnerships between formal and informal justice systems to enable a comprehensive and coordinated approach to handling GBV cases.	Not Implemented		
	Government should implement a comprehensive strategy that addresses societal stigmatization, engages religious and traditional leaders to promote gender equality, and conduct targeted awareness programs to educate the public on reporting mechanisms and legal rights.	Not Implemented		
Support Services				
6	Government should provide and improve accessibility of support services by establishing additional SARCs and shelters in different areas of Katsina State, particularly in underserved areas.	Partially Implemented	Aside from the fully functioning government owned NASIHA SARC(under the ministry of girl child education and child development) which was mainly commisioned to render support services to sexually abused minors in the state, the second GBV center/SARC is still a work in progress.	
7	Government should provide training and information sessions to healthcare professionals, police officers, and judicial personnel to improve their awareness and understanding of referral and reporting.	Partially Implemented	There is no indepth training to get the 3 main stakeholders to have a very good knowledge of the importance of referral and reporting of GBV cases	
8	Government should establish mechanisms to enhance coordination and collaboration between formal support systems (SARCs, shelters) and informal support systems to provide comprehensive support to survivors.	Not Implemented	There are no known informal support systems in the state for GBV victims and survivors.	
Information and Awareness				
9	Increase the number and frequency of GBV-related programs and campaigns to reach more people effectively.	Partially Implemented	GBV programs and campaigns are organized less often using audio means to sensitize the public.	

#### WOMANITY INDEX IMPLEMENTATION TRACKER 2023 Policy Recommendations Katsina State

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Improve the inclusiveness of PwDs in GBV awareness programs to ensure collaboration with disability-focused organizations and experts to ensure effective inclusion.

Work closely with experts to determine suitable age for GBV education and develop age-appropriate curricula and training for teachers to ensure proper implementation of comprehensive sex education.

Not Implemented

There aren't materials nor infromation dissemination channels that are sensitive to PwDs. Also, there is no form of synergy with professional facilitators of PwDs.

Not Implemented

There is no age-appriopraite curriculum developed to teach sex education in the state, except for that organized by the AGILE project which only 247 government/pilot secondary schools were covered.

