



# Gender-Based Violence Prevention and Response: **What Has Changed?**



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Womaniity  
**INDEX**  
2025 Edition

**invictus**  
AFRICA



# Bayelsa State

Glory of All Lands

*Bayelsa State Ecological Park*

# Bayelsa State

Population: 2,872,781

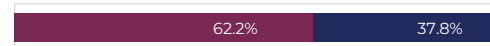
49.9% Female 50.1% Male

Overall Grade 65.8%

## Respondents Demography (n = 1,002)

### GENDER

Female Male



### AREA

Rural Urban



### AGE

<20 20-29 30-39 40-49 50-59 60-69

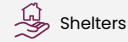


### DISABILITY STATUS

Yes No



N/A



N/A

## Ministry of Women Affairs and Social Development

### BUDGET ALLOCATION

**₦3.94bn**

(This accounts for 0.5% of the total state budget)

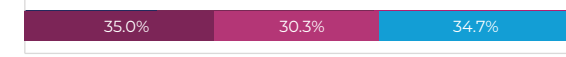
### BUDGET PERFORMANCE

**₦2.46bn**

(This accounts for 62.4% of total allocation to the ministry)



Capital Personnel Overhead Others (Actual spend)



Per Capita Spending

**₦1,716**

| Indexes                   | Indicators       |                  |                  |                  | Total Grades |
|---------------------------|------------------|------------------|------------------|------------------|--------------|
| Laws and Policies         | LP <sub>1</sub>  | LP <sub>2</sub>  | LP <sub>3</sub>  | —                | 75.0%        |
| Access to Legal Justice   | ALJ <sub>1</sub> | ALJ <sub>2</sub> | ALJ <sub>3</sub> | ALJ <sub>4</sub> | 62.5%        |
| Support Services          | SS <sub>1</sub>  | SS <sub>2</sub>  | SS <sub>3</sub>  | SS <sub>4</sub>  | 43.6%        |
| Information and Awareness | IA <sub>1</sub>  | IA <sub>2</sub>  | IA <sub>3</sub>  | IA <sub>4</sub>  | 56.3%        |
| Budget and Spending       | BS <sub>1</sub>  | BS <sub>2</sub>  | BS <sub>3</sub>  | —                | 83.3%        |

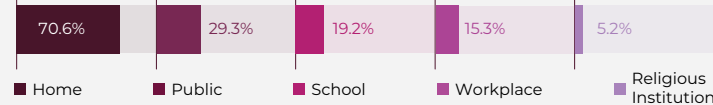
## GBV Context 2025

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

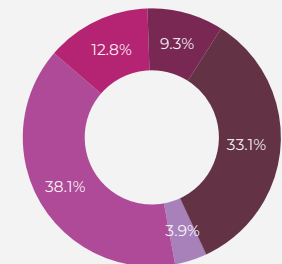
No Yes



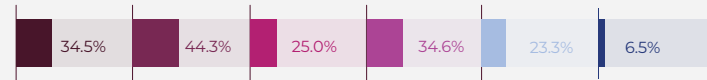
Where did you or the person experience the GBV?



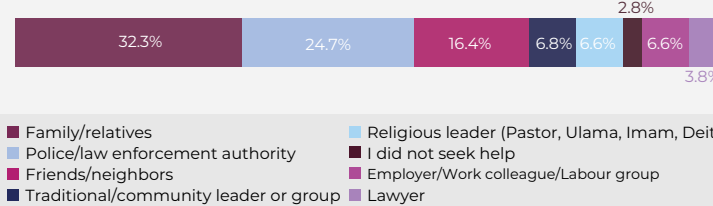
Why did you or the person choose where you sought help?



What form of GBV did you or the person experience?

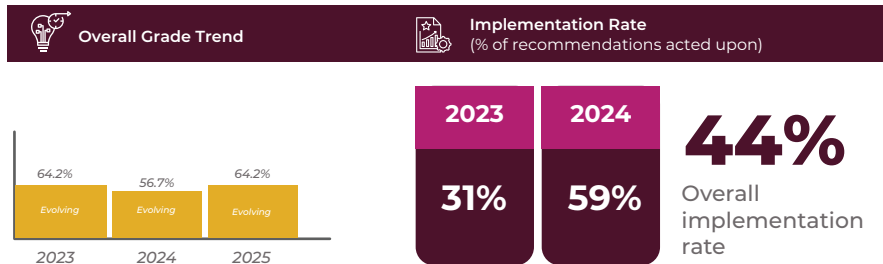


Where did you or the person first seek help?



Financial constraint Perception that they could help Proximity or accessibility Services Trust





**Index Grade Trend**

| Index                     | 2023     | 2024          | 2025          |
|---------------------------|----------|---------------|---------------|
| Laws and Policies         | LP 75.0% | -1 ▼ LP 58.3% | +1 ▲ LP 75.0% |
| Access to Legal Justice   | ALJ      | -1 ▼ ALJ      | ALJ 62.5%     |
| Support Services          | SS 25.0% | +1 ▲ SS 86.3% | -1 ▼ SS 56.3% |
| Information and Awareness | IA 86.3% | IA 75.0%      | -1 ▼ IA 56.3% |
| Budget and Spending       | BS 48.3% | BS 50.0%      | +1 ▲ BS 91.7% |

### What Has Changed

#### Positive Developments

- The number of designated family courts increased from 2 to 4 within the past year (3 magistrate courts and 1 high court), with dedicated judges improving case management and accelerating GBV case hearings.
- Approximately 20 GBV-related convictions were secured in the past 12 months.
- A Connect Center for GBV reporting became operational at the Ministry of Health in collaboration with NCDC, providing phone, SMS, WhatsApp, and social media channels for reporting, with staff on duty Monday to Friday.
- Public preference for formal justice systems increased from 61% in 2023 to 65.6% in 2025.

#### Areas of Concern

- Critical Shortage of SARCs and Safe Homes: Only 1-2 functional SARCs exist, both in Yenagoga (12.5% LGA coverage), with the government-supported FMC SARC remaining non-functional due to renovations.
- No dedicated government-operated safe homes exist for survivors needing separation from perpetrators.
- No formal witness protection framework exists, with only 42.2% of respondents feeling safe serving as witnesses.
- Awareness of GBV laws dropped from 84% in 2024 to 60.2% in 2025, while awareness of convictions plummeted from 63.8% to 28.1%.

### Key Actions

#### Laws and Policies

- Formulation and establishment of the Bayelsa State Action Plan for Sexual Exploitation, Abuse and Harassment and Gender-Based Violence by the Ministries of Health, Education, and Justice in collaboration with the World Health Organization (WHO).
- Formulation of Safeguarding and Child Protection in Schools policy by the Ministry of Education in 2024.

### Access to Legal Justice

- More family courts have been established to facilitate GBV cases. This also increased the number of Judges assigned to the family courts in 2025

### Support Services

- Establishment of the Gender Response Initiative Team (GRIT) to provide support services to GBV victims and survivors in the state.
- The Ministry of Health in collaboration with the National Centre for Disease Control (NCDC) has also built an event-based Surveillance Connect Center.

### Information and Awareness

- Production of new IEC materials for sensitization and awareness creation purposes by the Ministry of Women Affairs.

### Change Spotlight

A standout achievement in Bayelsa State's efforts to enhance GBV prevention and response between 2023 and 2025 is the expansion of family courts specifically dedicated to GBV cases, addressing a major bottleneck in the litigation process. Previously, only two family courts existed – one at the magistrate level and one at the high court, leading to significant delays given the rising number of GBV cases. In direct response to findings in the Womanity Index, which highlighted the critical need for more specialized courts, the state successfully established two additional family courts. This expansion has already improved the judicial capacity to handle GBV issues more efficiently, facilitating quicker hearings and demonstrating the state's resilience and commitment to strengthening legal frameworks. Community stakeholders and survivors have reported increased confidence in accessing justice, and local coverage has praised this reform as a vital step toward reducing GBV impunity and better protecting victims, aligning closely with the broader state goals of improving GBV prevention and response outcomes.

## Bayelsa State GBV Assessment Survey

## LAWS AND POLICIES



Are you aware of existing laws and/or policies that address gender-based violence (GBV) in the state? Yes ■ No ■



Do you think customary or religious laws and/or practices are sufficient in preventing and responding to GBV in the state? Yes ■ No ■



Do you know of anyone who has been convicted for GBV-related offenses? Yes ■ No ■



## 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? Yes ■ No ■



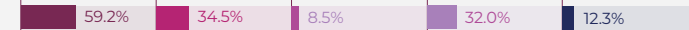
Do you believe that these shelters and/or SARCs are effectively functional, adequately equipped, properly maintained, and sustainable over time?



■ Agree ■ Strongly agree ■ Indifferent ■ Disagree ■ Strongly Disagree



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



■ Police ■ Hospital ■ Support group ■ Legal ■ None



Do you think informal support systems such as family, friends, religious centres, community groups, etc., are helpful to GBV victims/survivors? Yes ■ No ■



## ACCESS TO LEGAL JUSTICE



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



■ Formal justice: e.g., police, courts, etc.  
■ Informal justice: e.g., traditional or religious heads, community groups, etc.  
■ I will not seek justice



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



■ Yes, I would  
■ It depends on the robustness and effectiveness of the witness protection program  
■ No, I would not



Are you aware of legal assistance and services provided by the State to GBV victim/survivors? ■ Yes ■ No



## INFORMATION AND AWARENESS



Do you know of any GBV information and/or education programs or materials in the state? Yes ■ No ■



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



■ Mostly useful ■ Completely useful ■ A little bit useful ■ Not useful at all



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

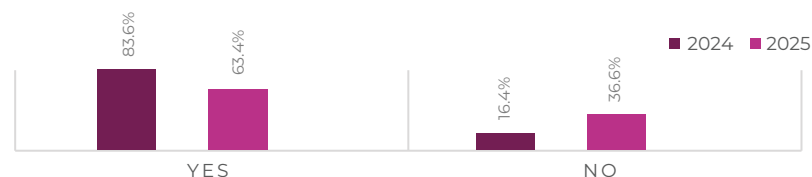


■ Audio ■ Visual ■ Sign ■ Picture ■ Simplified ■ Subtitle ■ Braille ■ None

# Bayelsa State GBV Context Trend (2024-2025)

Overall Grade **65.8%**

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



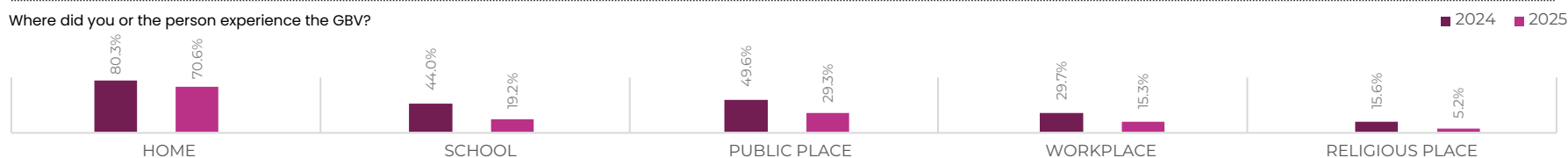
# 63.4%

of Bayelsa State population have either experienced GBV or knows someone who have experienced GBV

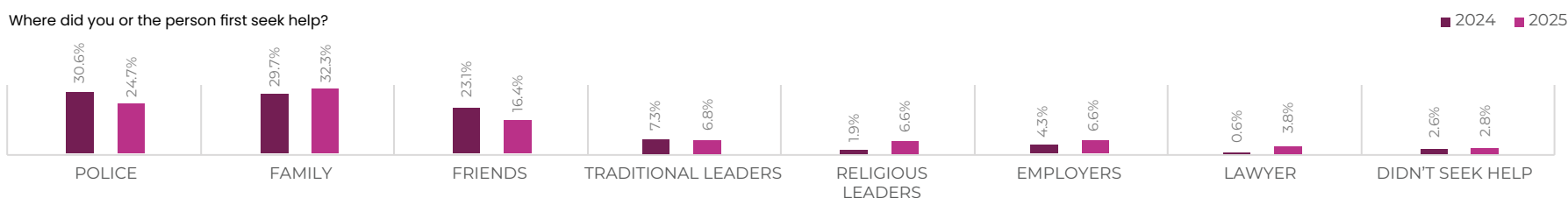
What form of GBV did you or the person experience?



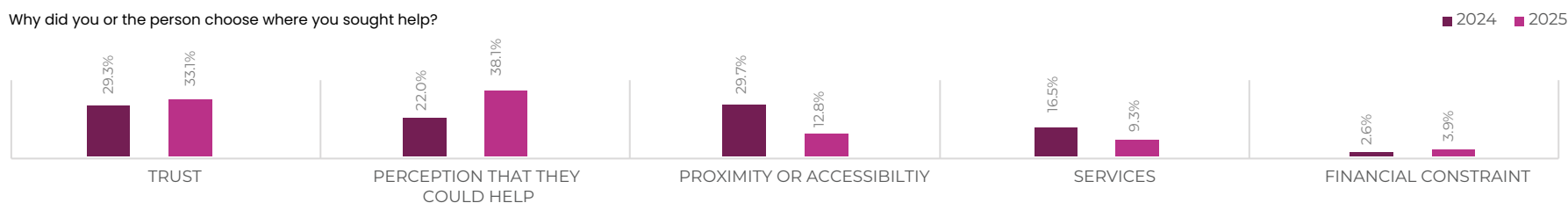
Where did you or the person experience the GBV?



Where did you or the person first seek help?

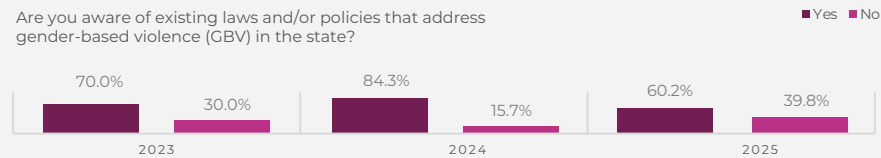


Why did you or the person choose where you sought help?

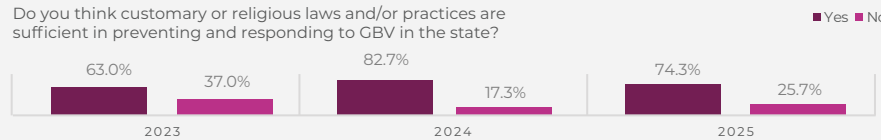


## LAWS AND POLICIES

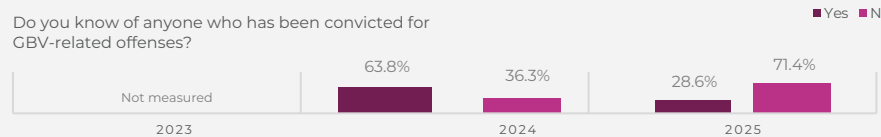
Are you aware of existing laws and/or policies that address gender-based violence (GBV) in the state?



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

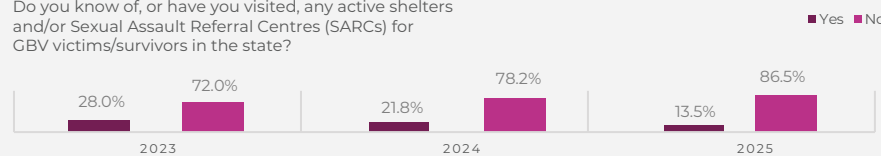


Do you know of anyone who has been convicted for GBV-related offenses?

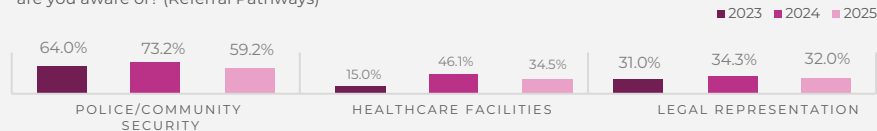


## SUPPORT SERVICES

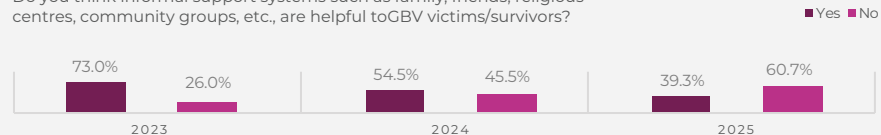
Do you know of, or have you visited, any active shelters and/or Sexual Assault Referral Centres (SARCs) for GBV victims/survivors in the state?



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

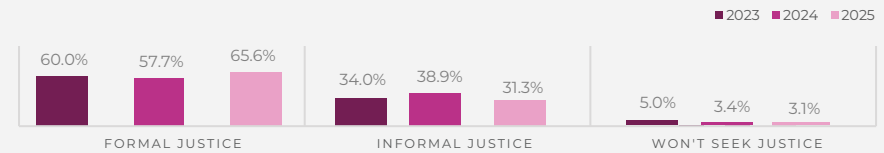


Do you think informal support systems such as family, friends, religious centres, community groups, etc., are helpful to GBV victims/survivors?

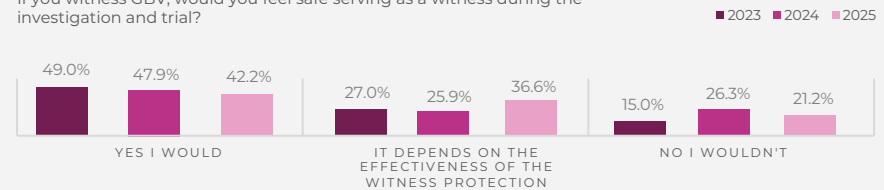


## ACCESS TO LEGAL JUSTICE

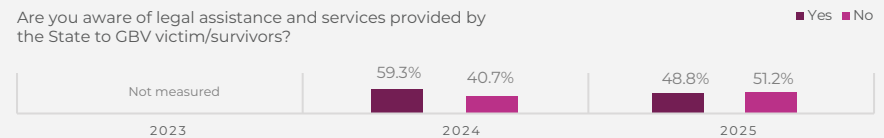
Where would you seek justice if you, or anyone you know, experience GBV?



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

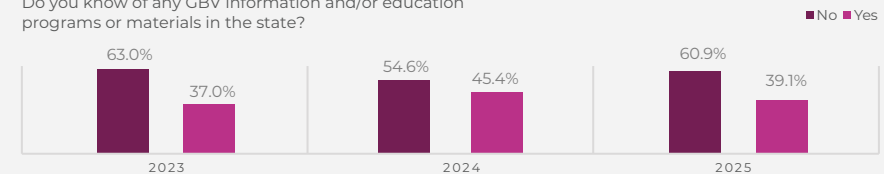


Are you aware of legal assistance and services provided by the State to GBV victim/survivors?

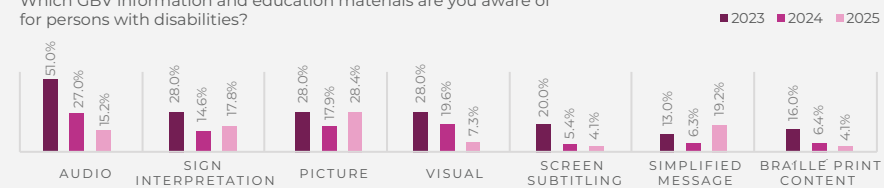


## INFORMATION AND AWARENESS

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

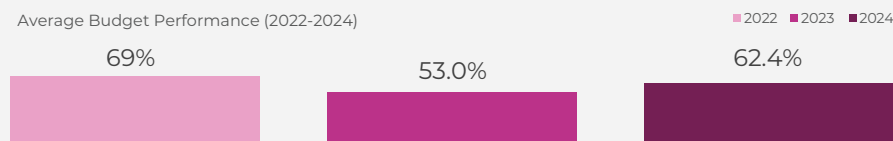


Which GBV information and education materials are you aware of for persons with disabilities?

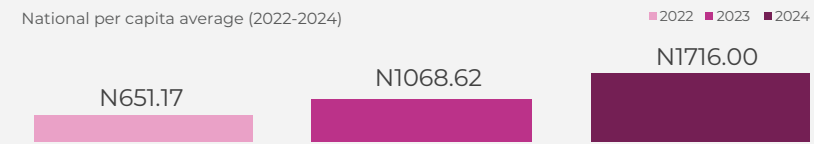


## BUDGET AND SPENDING

Average Budget Performance (2022-2024)



National per capita average (2022-2024)





## KEY INSIGHTS

### Laws and Policies

#### Current State in 2025

The 2021 Violence Against Persons Prohibition (VAPP) Law in Bayelsa has improved the legal landscape, especially with an expanded definition of rape that includes penetration beyond vaginal intercourse, even encompassing oral rape. However, notable gaps persist: the law does not criminalize indecent exposure, and the criminalization of female genital mutilation (FGM) is weaker than the federal law, with lower penalties and criminalization of victims. Pre-existing laws, such as the Criminal Code and Child Rights Law, continue to be used alongside the newer legislation.

Awareness of GBV laws and policies in Bayelsa State stands at 60.2% among respondents, with key information sources including radio (44.8%), NGOs (38.6%), social media (36.8%), and friends and family (34.7%). Despite this awareness, 71.4% of respondents were unaware of any GBV convictions, and only 28.6% knew of successful prosecutions, representing a significant drop of 63.8% points in conviction visibility since 2024. Nonetheless, 68% expressed confidence in the current formal legal framework, supported by recent legal reforms and improved institutional collaboration. Cumulatively, stakeholders across the state confirmed approximately 20 convictions.

Customary and religious laws remain influential, with 55.6% of respondents aware of these norms, and 74.3% believing they effectively prevent and respond to GBV. Government-led reforms and active church involvement have boosted confidence in these traditional mechanisms. However, harmful practices such as wife inheritance and FGM persist, especially where traditions are deeply entrenched. The Ministry of Justice notes some women within families enforce such customs. Religious leaders' resistance to divorce and encouragement for women to stay in abusive marriages further complicate GBV interventions.

#### Changes Over Time (2023–2025)

The level of awareness of existing GBV laws and policies in the state declined notably from 69.9% in 2023 and 84.3% in 2024 to 60.2% in 2025. This sharp drop is largely attributed to the inability to access funds for sensitization and awareness programs following the death of the former Commissioner of Women Affairs and the delay in appointing a replacement. Interestingly, while awareness of GBV-related laws decreased, the percentage of respondents who believe that customary or religious laws are sufficient in addressing GBV increased from 62.6% in 2023 and 64% in 2024 to 71.4% in 2025.

Conversely, knowledge of actual convictions for GBV-related offenses dropped significantly – from 63.8% in 2024 to only 28.6% in 2025, highlighting a growing gap between awareness, enforcement, and perceptions of justice.

### Access to Legal Justice

#### Current State in 2025

Legal aid is available throughout Bayelsa State, free for GBV survivors' prosecutions, but physical access is problematic in remote riverine areas due to high transportation costs. The 2025 Womanity Index shows that only 48.8% of respondents are aware of any legal assistance and services provided by the state to GBV victims/survivors. 65.6% of respondents prefer to seek justice from formal institutions if they experience GBV, while 31.3% prioritize informal justice systems.

The reporting process in the state usually starts at police stations, where survivors receive medical referrals; investigations are survivor-centered, and evidence is collected before prosecution. The Ministry of Justice follows up cases from police to court, but enforcement faces challenges including victim reluctance to pursue cases, court delays lasting over six months, and limited family court capacity with only one court at the high court level, causing significant backlogs.

Specialized GBV support has improved with gender desks at all police formations and an increase in family courts from two to four, helping manage cases more effectively. Training for police and judicial officers on GBV is ongoing. However, informal justice practices remain widespread, with 61.4% of respondents believing informal systems support justice, while 38.6% disagree. In practice, informal settlements often block formal justice due to poverty-driven settlements and traditional leaders preferring community resolution.

Witness protection remains a critical gap, with 42.2% feeling safe to testify, 36.6% cautious depending on protection programs, and 21.2% feeling unsafe. No formal witness protection system exists in Bayelsa State, exposing witnesses to violence and intimidation. The Legal Aid Director cited a case where a police witness was murdered before the trial. Calls have been made to establish robust, confidential witness protection laws to improve safety and encourage survivor and witness participation in GBV cases.

#### Changes Over Time (2023–2025)

There has been a notable increase in preference for formal justice systems from 60% in 2023 to 65.6% in 2025, suggesting rising confidence in formal legal institutions. The proportion relying on



informal justice declined from 34% in 2023 to 31.3% in 2025, indicating a gradual shift toward formal legal channels. However, the percentage of respondents who would feel safe serving as witnesses declined from 48.5% in 2023 to 42.2% in 2025 (a 6.8 percentage point drop). Those who said their willingness depends on witness protection effectiveness increased from 27% in 2023 to 36.6% in 2025, reflecting growing awareness of the importance of institutional protection.

Awareness of legal services dropped from 59.3% in 2024 to 48.8% in 2025. This reversal suggests poor publicity and accessibility of legal aid programs, possibly linked to reduced sensitization campaigns following the death of the Commissioner of Women Affairs

## Support Services

### Current State in 2025

The Womanity Index data reveals that 86.5% of respondents are unaware of or have ever visited SARCs or shelters in the state, with only 13.6% reporting awareness. Among those aware, 34.8% consider these facilities functional, well-equipped, and properly maintained. The limited awareness is linked to the reality that existing centres are few and mainly concentrated in Yenagoa, the state capital.

Referral pathways for GBV cases are mainly directed to police or community security (59.2%), hospitals/healthcare (34.5%), and legal representation (32%). However, 65.5% of respondents lack knowledge of reporting processes. Efforts to improve reporting include the recent establishment of a Connect Center for surveillance and communication, though a toll-free hotline is still missing. Collaborative planning between ministries has produced a State Action Plan addressing sexual exploitation, abuse, harassment, and GBV, but implementation is pending. Despite attempts, access to dedicated GBV hotlines remains a challenge.

On survivor support, 59.4% of respondents lack awareness of available support services, relying mostly on radio (52.8%) and NGOs (48.6%) for information. The state offers legal, counselling, and economic assistance through aligned ministries and GRIT coordination. Some medical services are subsidized but not free, with official charges varying widely. Geographic access is limited, mostly benefiting Yenagoa residents, while safe homes for survivors are notably absent, highlighting a critical gap in protection and accommodation.

Informal support systems are generally perceived as less effective than formal ones, with 60.7% disagreeing that informal systems are better. While family and community awareness is increasing, stigma and harmful cultural practices hinder formal reporting and effective intervention. Attempts to resolve GBV cases through informal or religious channels often fail, leading to continued abuse. Traditional support exists but does not sufficiently replace formal structures needed for survivor protection and justice.

### Changes Over Time (2023–2025)

Between 2023 and 2025, the state shows consistent increase in lack of awareness of SARCs/Shelters (72% in 2023, 78.2% in 2024, and 86.5% in 2025). There is increasing preference for reporting to formal referral pathways like the police and healthcare facilities. The proportion believing informal support

systems are helpful dropped sharply from 73% in 2023 to 54.5% in 2024, suggesting declining trust in family- and community-based responses but experienced a slight increase to 60.7% in 2025. Knowledge of referral pathways fluctuated from 2023 to 2025, peaking in 2024 before declining in 2025, revealing fragile and unsustainable sensitization efforts.

## Information and Awareness

### Current State in 2025

The assessment of knowledge on GBV information and awareness programs reveals significant gaps, with 60.9% of respondents lacking awareness while 39.1% show knowledge. Key information sources include radio (57.7%), NGOs/CSOs (40.3%), family and friends (39%), social media (36%), television (34.9%), healthcare workers/facilities (30.1%), educational institutions (28.3%), and workplaces (7.1%). Despite production of IEC materials like flyers and T-shirts carrying GBV messages, their distribution has stalled due to leadership changes in the Ministry of Women Affairs.

Regarding the usefulness of GBV materials, 45.9% find them mostly useful, 31.4% completely useful, 20.4% a little useful, and 2.3% not useful. There is strong support for GBV and child sexual abuse education in schools, with 94% in favor. The Ministry of Education has integrated GBV topics in Social Studies and Civic Education from primary to secondary levels, supplemented by NGOs. However, implementation challenges persist, particularly the incomplete child protection policy and funding constraints hindering the effectiveness of school-level desk officers.

Public sensitization efforts are conducted through radio, television, town hall meetings, and road walks, with the Gender Response Initiative Team (GRIT) active in monthly radio programs and planned sensitization tours. Social media plays an increasing role, while a reporting center for GBV has been established in partnership with public health authorities. However, funding challenges and leadership gaps have hindered progress.

Use of GBV information and education materials designed for persons with disabilities is generally low. Only 15.2% of respondents reported using audio or spoken content, 4.1% braille or screen subtitling, 7.3% visual content, 17.8% sign interpretation, 28.4% picture-based messages, and 19.2% simplified messages. GRIT includes PWDs and uses visual and written materials, though braille materials for visually impaired persons are yet to be fully developed. The Ministry of Education is pursuing braille resources for special needs students, recently receiving shipments from abroad to support inclusive GBV education.

### Changes Over Time (2023–2025)

There was significant improvement in awareness between 2023 (37%) and 2024 (45.4%), indicating that GBV sensitization programs gained traction. However, by 2025, awareness dropped to 39.1%, reversing earlier gains. The sharp increase in those unaware (from 54.6% to 60.9%) points to a weak sustainability framework for GBV education efforts. The Ministry of Education confirmed funding challenges: "So much has been put in place to carry out major GBV related activities in the state particularly with schools (both private and government-owned) but funds have been the major challenge with the implementation of such programmes." The fluctuating trend reflects short-term impacts rather than institutionalized approaches. On awareness of GBV materials for PWDs, those

reporting no knowledge rose from 13% in 2023 to 46% in 2024, remaining almost unchanged at 45.7% in 2025. This indicates consistent neglect of PWD-inclusive communication over the three-year period.

## Budget and Spending

### Budget Analysis 2024

Bayelsa state allocated ₦3.94 billion to GBV programs, representing 0.52% of its total budget, and achieved a 62.4% execution rate with actual spending of ₦2.46 billion (0.52% of total actual expenditure). This translates to a per capita GBV spend of ₦1,716.00, the second highest nationally, reflecting substantial investment in GBV prevention and response services relative to the state's female population.





### Changes Over Time (2022–2024)

Bayelsa State's GBV-related allocations was ₦1.27 billion in 2022, ₦2.80 billion in 2023, and ₦3.94 billion in 2024. Actual budget performance, however, fluctuated. Bayelsa achieved 69.0% in 2022, declined to 53.0% in 2023, and improved again to 62.4% in 2024. While the state did not include any GBV-specific line items in its 2022 or 2023 budgets, an allocation of ₦109 million was introduced in 2024 for the "Construction of Sexual Assault Referral Centre (SARC) and Construction of Correctional Facilities." Despite this positive step, no actual spending was recorded for the project. Per capita spending stood at ₦1,716.00 in 2024, ₦1,068.62 in 2023, and ₦651.17 in 2022. The consistent upward movement across all three years demonstrates sustained and strengthening commitment to GBV-related prevention and response.

## Human Angle Stories

She thought it was just a stroll with her boyfriend, but it turned into a near-death experience. He lured her into a nearby bush and attempted to take her life. When he left briefly to fetch a bag, intending to return and finish what he had started, concerned bystanders noticed his suspicious movements and intervened. The survivor was found with life-threatening injuries but survived. The Bayelsa State Government responded by establishing the Gender Response Initiative Team (GRIT), a coordinated structure to ensure justice for survivors and strengthen prevention and response mechanisms across the state.

## KEY GAPS AND RECOMMENDATIONS

| Index   | Key Gaps   | Recommendations  |
|---|--|--|
| <br><b>Laws and Policies</b>           | Low level of awareness of GBV convictions and prosecution in the state.  | Convicted and prosecuted cases in the state should be collated, printed, and disseminated to organizations/institutions working on GBV on a quarterly basis by the Ministry of Justice.  |
|   | High level of knowledge of customary and religious practices in preventing and responding to GBV exists.   | Institutionalize partnerships with traditional rulers and faith leaders to implement community GBV prevention protocols in all 105 wards of Bayelsa State.   |
| <br><b>Access to Legal Justice</b>     | Findings show increased preference to seek formal justice systems on GBV matters.  | Strengthen and decentralize GBV legal support desks within the formal justice system to all eight (8) LGAs of Bayelsa State.   |
|   | No formal witness protection program exists in the state. Only 42.2% of respondents feel safe serving as witnesses, while 36.6% condition their participation on effective protection mechanisms.  | Develop and implement a state-level witness protection policy in collaboration with security agencies.   |
|   | Informal justice systems obstructing formal processes – despite 65.6% preference for formal justice, traditional and religious leaders routinely settle GBV cases outside the legal system, often through monetary compensation.                   | Enforce laws against obstructing justice, sensitize traditional and religious leaders on reporting GBV cases, incentivize referrals to formal justice, and publicize successful prosecutions to promote formal justice.  |
| <br><b>Support Services</b>            | Critical shortage of SARCs and shelters, as only 1-2 functional SARCs exist, both in Yenagoa (1 of 8 LGAs), representing 12.5% LGA coverage. The state-supported SARC at FMC has been under renovation and non-functional.                         | Prioritize immediate reopening and full operationalization of the FMC SARC with adequate staffing and equipment and establish at least one functional SARC in each of the three senatorial districts.  |
|   | Available support services are concentrated at the urban centre, leaving most rural communities grossly underserved.   | Establish GBV Response Units in the 8 local government areas of Bayelsa State.   |
|   | No government-operated safe homes exist for survivors needing separation from perpetrators.  | Establish dedicated government-funded safe homes in at least two locations (urban and riverine access points) with capacity for long-term accommodation, psychosocial support, skills training, and educational support.   |
|   | No public health facility provides free medical care to GBV victims and survivors.   | Institute a GBV Free Medical Care Policy across all public health facilities in Bayelsa State, ensuring that survivors receive post-GBV treatment.   |
| <br><b>Information and Awareness</b> | Public awareness of GBV information and programs dropped from 45.4% in 2024 to 39.1% in 2025, while unawareness rose from 54.6% to 60.9%.  | Institutionalize GBV awareness campaigns across MDAs (Women Affairs, Education, Health, Information, Justice) to reduce dependence on a single ministry. Allocate quarterly budgets specifically for radio programs, community outreach, and IEC material production and distribution.   |
|   | While 94% of respondents support teaching GBV and child sexual abuse education in schools, no standardized curriculum or guide exists. Education relies on ad-hoc NGO visits and embedded content in social studies/civic education.               | Develop a standardized, age-appropriate GBV and child sexual abuse prevention curriculum for primary and secondary levels in collaboration with the Ministry of Education and NERDC. Train teachers as first responders and establish school-based GBV reporting desks with clear referral pathways to police and women affairs. |
|   | Severe neglect of PWD-inclusive information and PWD representation in GRIT has not translated to accessible information dissemination.   | Develop and disseminate PWD-inclusive GBV IEC materials including braille pamphlets, sign language video content, and audio materials in collaboration with disability organizations. Ensure all public sensitization programs include sign language interpreters and accessible formats.  |
| <br><b>Budget and Spending</b>       | Bayelsa ranks second nationally with ₦1,716.00 per capita GBV spending in 2024, but execution declined from 69% to 62.4% over three years. The ₦109 million SARC construction—the state's first GBV-specific line item—recorded 0% implementation. | Fast-track SARC construction and add line items for shelters, emergency response, and survivor rehabilitation. Implement quarterly monitoring to reverse execution decline and ensure spending matches allocation levels.  |





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