



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



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# Delta State

The Big Heart



Mungo Park House

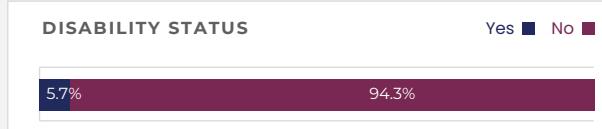
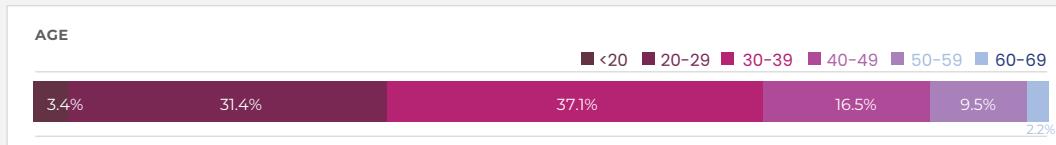
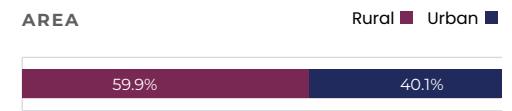
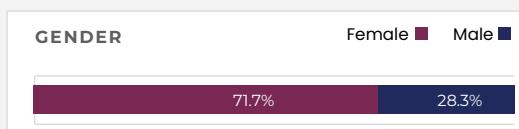
# Delta State

Population: 7,315,664

50.2% Female 49.8% Male

Overall Grade 66.3%

## Respondents Demography (n = 1,157)



## Ministry of Women Affairs and Social Development

### BUDGET ALLOCATION

**N1.71bn**

(This accounts for 0.2% of the total state budget)

### BUDGET PERFORMANCE

**N1.55bn**

(This accounts for 90.9% of total allocation to the ministry)



Capital ■ Personnel ■ Overhead ■ Others ■



Per Capita Spending

**N422.61**

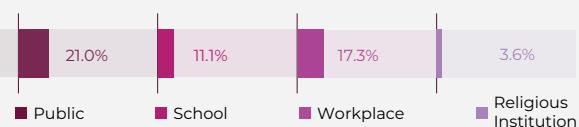
Indexes	Indicators			Total Grades
Laws and Policies	LP <sub>1</sub>	LP <sub>2</sub>	LP <sub>3</sub>	—
Access to Legal Justice	ALJ <sub>1</sub>	ALJ <sub>2</sub>	ALJ <sub>3</sub>	ALJ <sub>4</sub>
Support Services	SS <sub>1</sub>	SS <sub>2</sub>	SS <sub>3</sub>	SS <sub>4</sub>
Information and Awareness	IA <sub>1</sub>	IA <sub>2</sub>	IA <sub>3</sub>	IA <sub>4</sub>
Budget and Spending	BS <sub>1</sub>	BS <sub>2</sub>	BS <sub>3</sub>	—

## GBV Context 2025

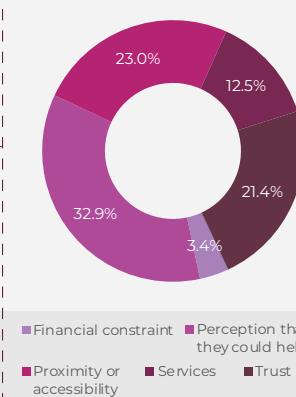
Have you or anyone you know experienced any form of gender-based violence in the last five years?



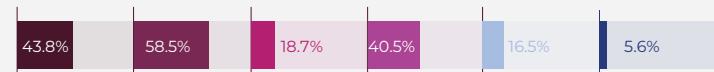
Where did you or the person experience the GBV?



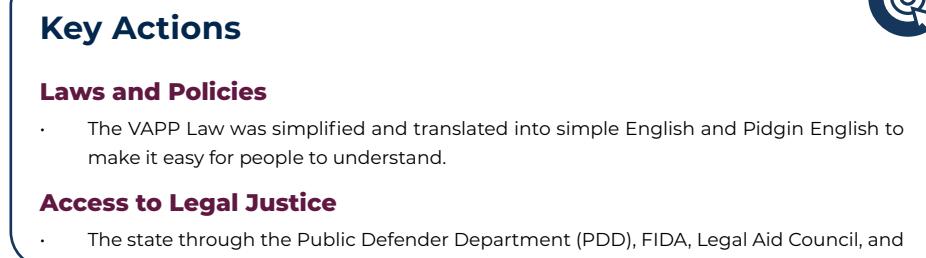
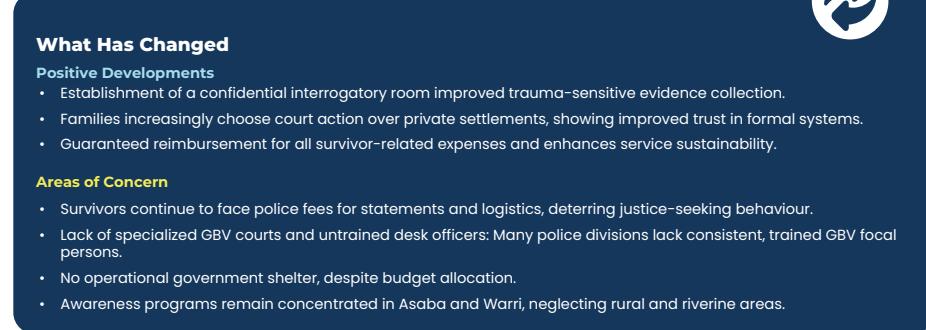
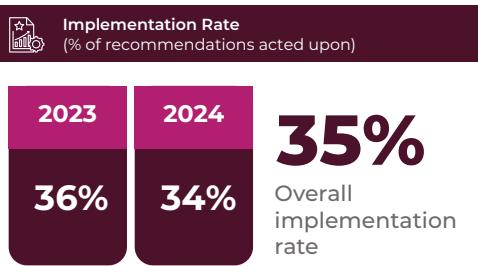
Why did you or the person choose where you sought help?



What form of GBV did you or the person experience?



■ Family/relatives  
■ Police/law enforcement authority  
■ Friends/neighbors  
■ Traditional/community leader or group  
■ Religious leader (Pastor, Ulama, Imam, Deity)  
■ I did not seek help  
■ Employer/Work colleague/Labour group  
■ Lawyer



other CSOs continues to provide free legal representation to survivors.

### Support Services

- The Delta State Government officially captured SARC funding in the state budget.
- SARCs continue to provide one-stop services (medical care, counselling, forensic evidence collection, and legal aid).

### Information and Awareness

- The Ministry of Women Affairs rolls out radio jingles, market sensitizations, and IEC material distribution across the state. Posters and billboards were sighted in Asaba and Warri.

### Change Spotlight

Delta State has made significant progress in gender-based violence (GBV) support by institutionalizing a dedicated state budget line for its Sexual Assault Referral Centres (SARCs), marking a transformative milestone. Previously reliant on funding from the Nigeria Governors' Forum, many responders often bore costs out of pocket, transferring hidden expenses to survivors. However, by 2025, this was replaced by robust state budget allocations that now enable survivors to access completely free medical care, psychosocial support, forensic services, and legal aid. A SARC Director highlighted that all survivor needs at the SARC are fully covered, and all frontline expenses are reimbursed through this state budget provision. This financial commitment has empowered a notable surge in GBV convictions, with over 10 recorded within a single year.



## Delta State GBV Assessment Survey

Overall Grade 66.3%

### LAWS AND POLICIES



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

Yes 27.8% No 72.2%



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

Yes 60.5% No 39.5%



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

Yes 21.9% No 78.1%

### 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 7.5% No 92.5%



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

Agree 49.4% Strongly agree 20.7% Indifferent 13.8% Disagree 10.3% Strongly Disagree 5.7%

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

Police 60.0% Hospital 31.2% Support group 4.8% Legal 12.4% None 17.4%



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

Yes 49.0% No 51.0%



### ACCESS TO LEGAL JUSTICE



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

Formal justice: e.g., police, courts, etc. 56.7% Informal justice: e.g., traditional or religious heads, community groups, etc. 37.4% I will not seek justice 5.9%



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

Yes, I would 33.4% It depends on the robustness and effectiveness of the witness protection program 26.8% No, I would not 39.8%



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

Yes 14.3% No 85.7%

### INFORMATION AND AWARENESS



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

Yes 8.4% No 91.6%



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

Mostly useful 26.8% Completely useful 17.5% A little bit useful 52.6% Not useful at all 3.1%



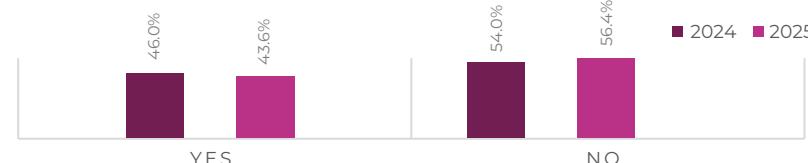
Which GBV information and education materials are you aware of for persons with disabilities?

Audio 17.3% Visual 19.0% Sign 16.7% Picture 12.3% Simplified 4.0% Subtitle 4.5% Braille 4.0% None 52.5%

## Delta State GBV Context Trend (2024-2025)

Overall Grade 66.3%

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



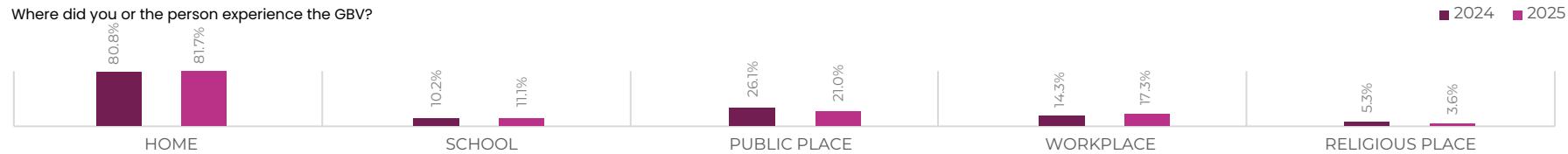
# 43.6%

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

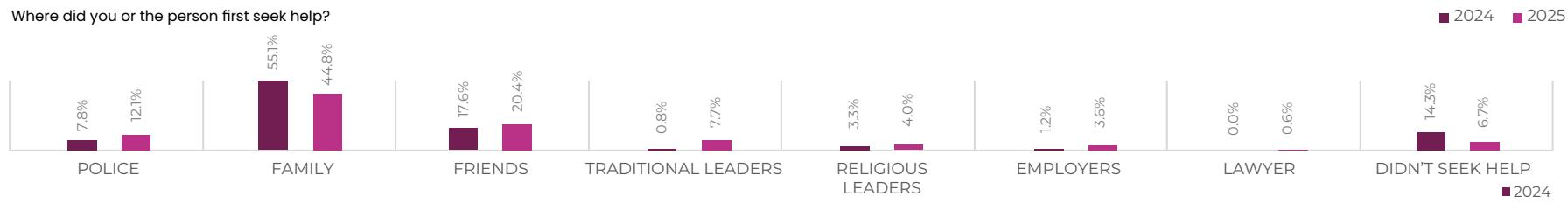
What form of GBV did you or the person experience?



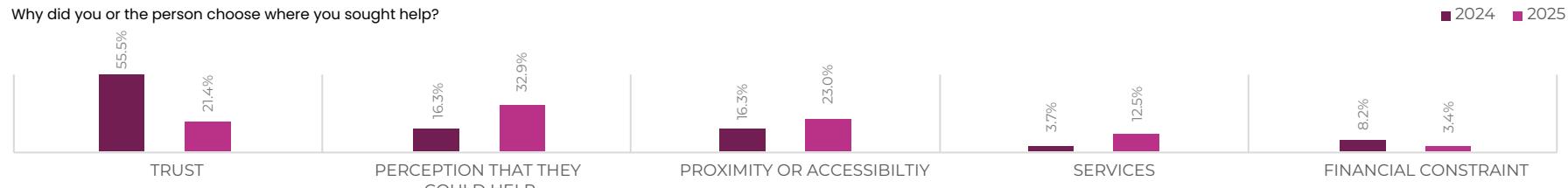
Where did you or the person experience the GBV?



Where did you or the person first seek help?

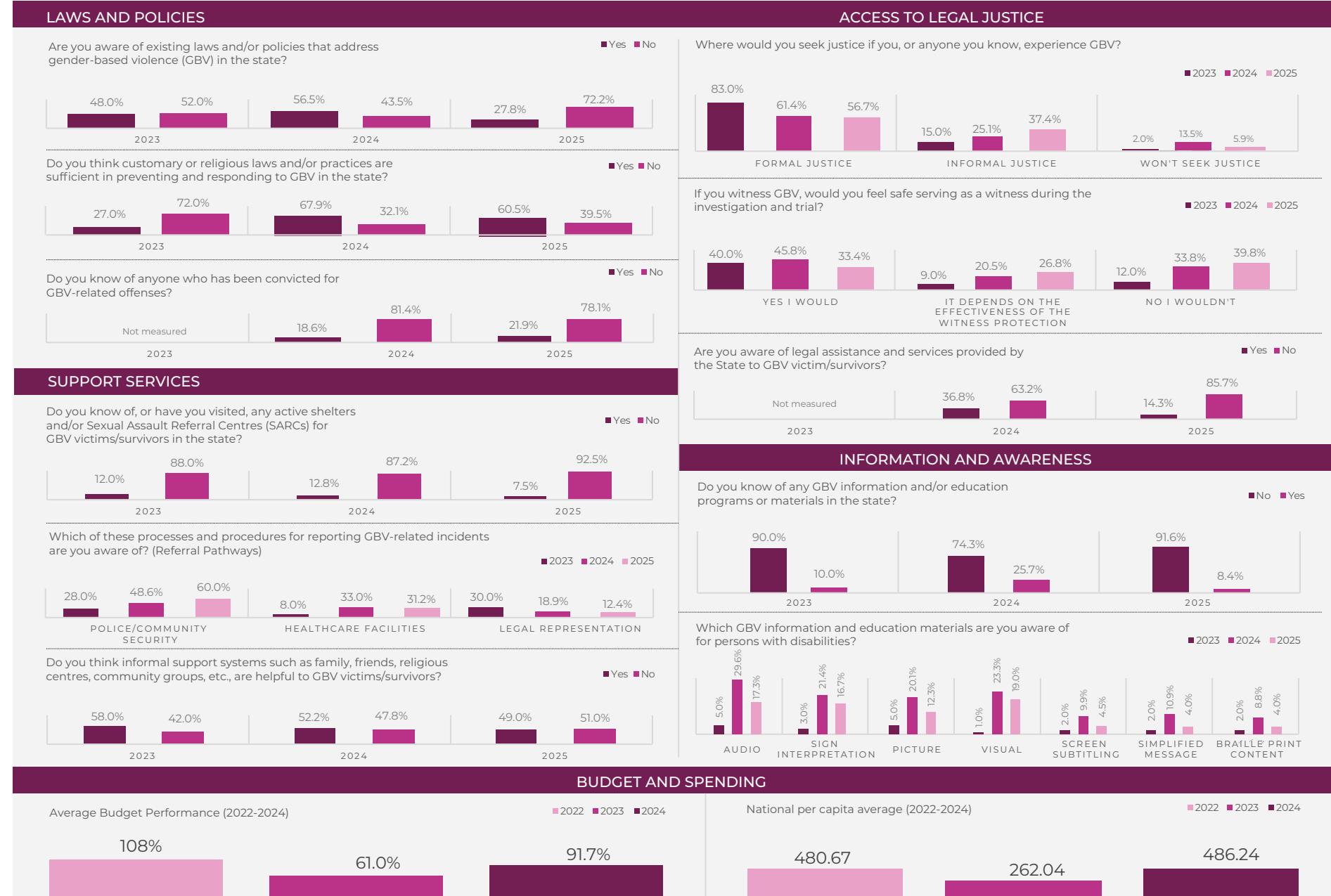


Why did you or the person choose where you sought help?



## State Data Trend (2023-2025)

Overall Grade 66.3%





## KEY INSIGHTS

### Laws and Policies

#### Current State in 2025

Delta State has demonstrated commendable progress in strengthening its legal framework for addressing GBV. The state has enacted several laws including the Violence Against Persons Prohibition (VAPP) Law (2020), Child's Rights Law (2016), Administration of Criminal Justice Law, Domestic Help Law, and the new GBV Law (2024) that collectively criminalize various forms of abuse such as rape, domestic violence, cyberbullying, economic violence, and harmful traditional practices. To improve accessibility, the VAPP Law was simplified and translated into Pidgin English, a move described by a police officer as an effort "so the ordinary man can understand." Stakeholders also highlighted the introduction of plea bargaining as an alternative to family settlements, enabling survivors to receive compensation while discouraging out-of-court resolutions that perpetuate impunity.

Despite this strong legal foundation, public awareness and usage of these laws remain weak. Only 27.8% of respondents are aware of existing GBV-related laws, and just 21.9% know of any convictions, despite police and SARC reports confirming at least 30 convictions between mid-2024 and mid-2025. While 61.1% of respondents believe formal laws are effective, limited awareness undermines their impact. Customary and religious mechanisms continue to shape perceptions, with 39.5% aware of such systems and 60.5% believing they help prevent or respond to GBV. This underscores the need for stronger public sensitization, improved enforcement, and harmonization of statutory, customary, and religious laws and practices to ensure that Delta State's progressive legal frameworks translate into real protection for survivors.

#### Changes Over Time (2023–2025)

From 2023 to 2025, Delta State recorded both progress and setbacks in its GBV legal landscape. The period saw important policy gains, including the enactment of the 2024 GBV Law and the introduction of plea bargaining to discourage family settlements. However, these institutional advances contrast with a consistent decline in public awareness and confidence indicators. Awareness of GBV laws moved upward from 48.0% in 2023 to 56% in 2024, then decline to 27.8% in 2025. Although conviction rates reportedly improved, citizen awareness of these outcomes fell dramatically from 18.6% in 2024 to 21.9% in 2025.

Perceptions of customary and religious laws showed fluctuating confidence: 27% in 2023 believed such systems were sufficient to prevent or respond to GBV, increasing to 19% in 2024, before decreasing to 60% in 2025. This rebound suggests renewed community reliance on traditional mechanisms amid persistent gaps in awareness and accessibility of formal systems.

### Access to Legal Justice

#### Current State in 2025

Delta State's GBV referral pathway provides a formal route from reporting to police or SARCs, through medical, psychosocial, and legal support, and finally to prosecution by the Ministry of Justice. While 56.7% of respondents indicated willingness to pursue justice through formal channels, a substantial 37.4% still preferred informal routes. The remaining 5.9% said they would not seek justice at all, primarily due to fear of stigmatization, disbelief, or financial constraints.

Awareness of legal aid and state-supported services for GBV survivors remains alarmingly low, with only 14.3% aware of such assistance. Most information comes through social media, friends, or television rather than through official or institutional channels. Stakeholders noted that free legal aid, though provided by CSOs such as FIDA and the Legal Aid Council, remains largely urban-focused, leaving rural survivors underserved. The justice system also struggles with operational bottlenecks, including the absence of specialized GBV Family Support Units, frequent rotation of officers or untrained desk officers, and slow court processes. According to a police representative, "Some divisions do not have functional GBV desks, and when cases come, we rely on CSOs to guide the process."

Furthermore, witness participation is weak; only a third (33.4%) of respondents said they would feel safe testifying in GBV cases, while many cited fear and inadequate protection despite the provisions of the Administration of Criminal Justice Law (ACJL) for virtual testimony. Also, courts are slow without dedicated GBV judges, causing discontinuity and case restarts on judge transfers or demise.

#### Changes Over Time (2023–2025)

Between 2023 and 2025, Delta State recorded notable shifts in how survivors and citizens engage with justice systems for GBV cases. Use of formal justice mechanisms declined steadily from 82.6% in 2023 to 61% in 2024, and further to 56.7% in 2025 while reliance on informal systems almost doubled, rising from 14.5% to 37.4%. The proportion of individuals unwilling to seek justice fluctuated, peaking at 14% in 2024 before dropping to 5.9% in 2025. This trend signals declining trust in formal structures and a growing dependence on community-based mechanisms. Confidence in participating in the

justice process also weakened, as the share of those who felt safe serving as witnesses dropped from 40.0% in 2023 to 33.4% in 2025.

Awareness of legal assistance programs plummeted from 37% in 2024 to just 14.3% in 2025, suggesting that institutional outreach has not kept pace with program expansion. Nonetheless, operational improvements were evident: SARCs documented 132 reports, 101 charges, and 10 convictions in 2025, reflecting better case follow-up and prosecution. Families are increasingly willing to approach the courts rather than resorting to settlements, supported by new measures like plea bargaining and the establishment of confidential interrogatory rooms to reduce survivor trauma.

## Support Services

### Current State in 2025

Delta State has made structural progress in survivor support through the establishment of three SARCs in Asaba, Warri, and Ughelli, each offering free medical, psychosocial, legal, and forensic services. A SARC Director emphasized that "everything a survivor needs are free at SARC, and whatever is spent is paid back to us through the state budget," while an official at the state's Ministry of Women Affairs confirmed the creation of a dedicated SARC budget line to sustain services. However, awareness and usage remain critically low as only 7.5% of respondents know of or have visited an active SARC or shelter, and just 13.8% are aware of any survivor support services.

Shelter availability remains a major gap, with no operational government-owned adult shelter despite budgetary provisions for one still under construction. Coordination challenges persist, police often distrust SARC forensic reports, preferring their own clinics, and survivors still report unofficial police fees during complaint filing and the Ministry of Health's lack of GBV trained desk officers further weakens health-sector referrals.

### Changes Over Time (2023–2025)

From 2023 to 2025, Delta State made modest gains in GBV support services, though awareness and access remain limited. Awareness of SARCs stood at 12% in both 2023 and 12.8% 2024 before dropping to 7.5% in 2025, showing weak survivor engagement despite improved service delivery. Awareness of hospital referral pathways rose significantly from 8% in 2023 to 33% in 2024 but dropped slightly to 31.2% in 2025, while police pathway awareness also increased from 28% in 2023 to 48.6% in 2024 and 60% in 2025, suggesting progress in formal reporting channels. Conversely, awareness of legal aid services declined from 30% in 2023 to 18.9% in 2024 and further to 12.4% in 2025, indicating persistent gaps in legal accessibility. Meanwhile, the proportion of respondents who believed informal support systems were helpful rose from 58% in 2023 to 52% in 2024, settling at 49% in 2025.

Despite having three SARCs, the absence of operational shelters continues to hinder survivor protection. This was echoed by a FIDA representative who noted that, "With three SARCs, we should have shelters, but we don't have any." Nonetheless, SARCs handled 132 cases between July 2024 and June 2025, with 101 charges and 10 convictions, reflecting stronger institutional performance supported by dedicated state funding.

## Information and Awareness

### Current State in 2025

Public awareness of GBV in Delta State remains critically low, with only 8.4% familiar with any GBV awareness materials or programs in 2025. Although social media (27.8%), family and friends (22.7%), and healthcare workers or NGOs (18.6% each) serve as the most common information channels, traditional media such as radio and television still have limited penetration, especially in rural areas. As confirmed by the Ministry of Women Affairs (MoWA), campaigns are largely urban-focused centered around Asaba and Warri with outreach through market flyers and radio jingles, leaving rural and riverine communities under-informed. The limited usefulness of existing materials where only 26.8% found them "mostly useful" and 52.6% described them as "a little bit useful" further highlights the need for simpler, more targeted communication strategies.

While some progress has been made integrating GBV education into school curricula through Social Studies and National Values, a standardized GBV curriculum is still under development. Awareness and inclusion for persons with disabilities remain notably weak, with less than 20% aware of visual, audio, or picture-based GBV materials, and only 4–4.5% aware of braille and subtitled formats. Although the MoWA employs sign interpreters, the ministry acknowledged that mixed-group trainings are ineffective and recommended segmenting PWDs by specific needs for better inclusion. These findings underscore that despite structured efforts, GBV awareness dissemination in Delta State remains uneven, urban-biased, and insufficiently inclusive.

### Changes Over Time (2023–2025)

From 2023 to 2025, GBV information awareness in Delta State fluctuated without steady progress—rising from 10% in 2023 to 26% in 2024, then falling sharply to 8.4% in 2025. While more people found GBV information useful over time, over half (52.6%) in 2025 still described it as only "a little useful," showing that messages remain unclear and inaccessible. Awareness of disability-inclusive materials also declined after 2024, with sign interpretation falling from 21.4% in 2024 to 16.7% and other formats like audio and braille below 20%. Despite this, demand for school-based GBV in 2025 education remains high (94.9%), though, as a Ministry of Justice (MoJ) official noted, "a standardized GBV curriculum is still under development." highlighting the gap between institutional intentions and implementation.

## Budget and Spending

### Budget Analysis 2024

Delta State presents a notable success story in GBV budget implementation for 2024. While the state's initial allocation of ₦1.71 billion represented a modest 0.2% of its total budget, Delta achieved an exceptional 91.7% execution rate, spending ₦1.79 billion on GBV programs. The near-complete utilization of allocated funds indicates strong administrative capacity and sustained commitment throughout the fiscal year, suggesting that Delta has established functional mechanisms for disbursing and implementing GBV programs without the bureaucratic delays that plague many

other states in the country. However, per capita spending remains relatively low at ₦486.24.

### **Changes Over Time (2022-2024)**

In Delta State, actual spending on GBV-related interventions amounted to ₦1.66 billion in 2022, ₦931.99 million in 2023, and ₦1.55 billion in 2024. The state recorded a budget performance of 108.0% in 2022, which declined to 61.0% in 2023, before rising again to 91.7% in 2024. While there were no GBV-specific line items in the 2022 budget, several appeared in both the 2023 and 2024 budgets. Some of these items recurred across the two years, including the "Renovation of Transit Home for Disabled Persons in Asaba" and the "Construction of Shelter for Sexual and Gender-Based Violence (SGBV) Survivors and Others." Notably, these projects were fully implemented in 2024. Delta State recorded ₦486.24 in 2024, ₦262.04 in 2023, and ₦480.67 in 2022. The pattern reflects relatively good but fluctuating investment, with 2024 representing a return to higher levels after a dip in 2023.

### **Human Angle Stories**

Our key informant explained how the lack of shelter hindered a survivor from reaching a safe place. She recounted the story of a woman who, while running away from her abusive partner, called her at 11 p.m. According to the informant, there was nowhere for the woman to go, so she asked her to lock her indoors. "As big as this Asaba, no shelter home. We have just been talking, no shelter home," she said.

## KEY GAPS AND RECOMMENDATIONS

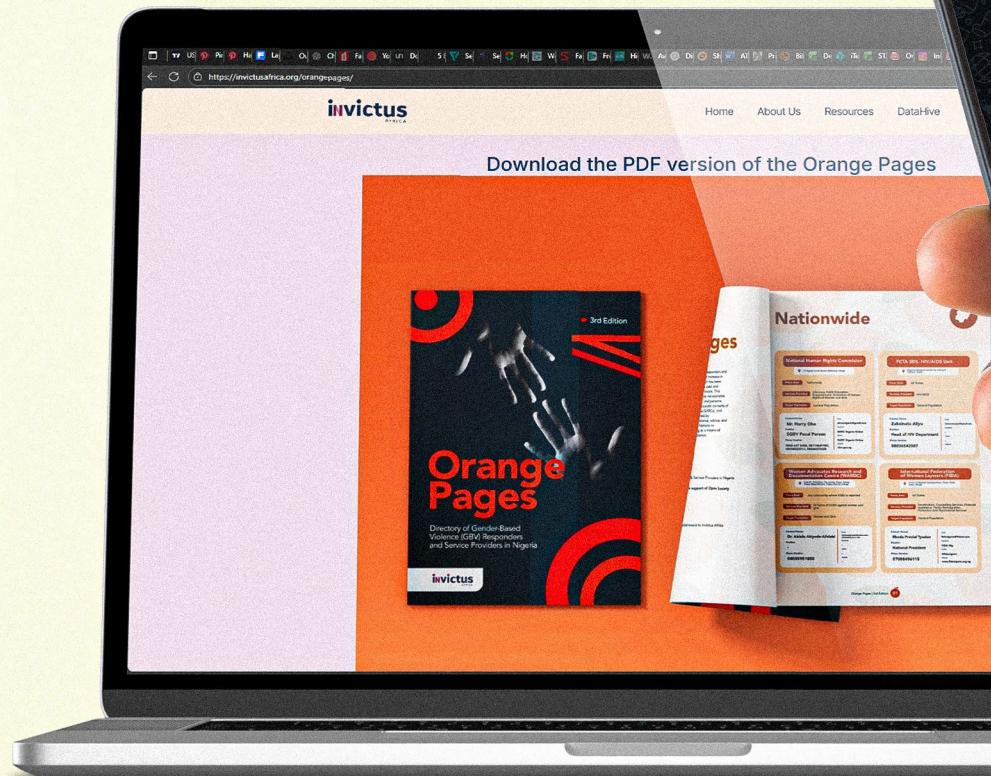
Index	Key Gaps	Recommendations
 <b>Laws and Policies</b>	Awareness of GBV-related laws, including the VAPP and 2024 GBV Law, remains very low: only 27.8% of respondents know of these laws.	Strengthen public sensitization using avenues like community radio, social media, and local theatre to expand legal literacy and citizens' knowledge of GBV laws.
	There is no functional or well-defined witness protection mechanism, leading to fear of retaliation and witness withdrawal during GBV cases.	Establish a robust state-level witness protection framework and raise awareness on virtual testimony provisions under the ACJL to enhance survivor and witness safety.
 <b>Access to Legal Justice</b>	Persistent court delays and case restarts following judge transfers or death slow down justice delivery despite ACJL provisions.	Create dedicated GBV courts or specialized judges to fast-track GBV-related cases, ensure continuity, and prevent prolonged adjournments.
	Survivors face hidden unofficial costs (fueling police vehicles, statement fees, logistics, etc), discouraging formal reporting and prosecution.	Establish a dedicated GBV response budget line to fund police and justice logistics, ensuring survivors are not required to pay for investigation or court processes.
	Inconsistent presence and low capacity of GBV Desk Officers across police divisions weaken survivor response and referral coordination.	Institutionalize mandatory training and retraining of police GBV Desk Officers and monitor compliance through periodic supervision.
 <b>Support Services</b>	There is no operational government-owned adult shelter, and most NGO shelters are closed, leaving survivors, especially those in rural areas, without safe spaces.	Prioritize the completion and operationalization of the state shelter through the Ministry of Women Affairs (MoWA) and partner with NGOs to provide temporary safe spaces in underserved LGAs.
	Public awareness of SARCs and shelters is very low (7.5%), limiting survivor access to free medical, psychosocial, and legal services.	Intensify state-wide awareness campaigns, leveraging schools, CSOs, and community gatekeepers to improve knowledge of available GBV support services.
	Weak coordination between police and SARCs, with distrust in forensic reports and duplication of evidence gathering.	Establish clear SARC-police referral protocols and a joint evidence management framework to strengthen inter-agency coordination and case tracking.
 <b>Information and Awareness</b>	Over 91.6% of respondents have never seen GBV awareness materials or programs, with campaigns largely urban-centered (Asaba, Warri).	Implement consistent, rural-inclusive GBV campaigns, ensuring equitable reach to riverine and remote LGAs via radio, town criers, and market outreach.
	GBV education in schools is not standardized and remains largely CSO-driven, integrated sporadically into Social Studies or National Values.	Integrate comprehensive GBV education into school curricula through the Ministry of Education (MoE) and train teachers to deliver age-appropriate prevention and response content.
	Awareness of disability-accessible information materials (braille, audio, sign interpretation) remains low, averaging below 20%.	Develop and distribute disability-inclusive IEC materials (audio, visual, braille, subtitled) and establish a disability commission to ensure equitable information access for all groups.
 <b>Budget and Spending</b>	Delta's per capita GBV spending in 2024 was ₦422.61, which remains relatively low compared to the recommended benchmark of ₦1000, indicating that the total allocation is still insufficient to meet the scale of GBV needs in the state.	Increase per capita investment in GBV interventions by expanding overall budget allocations and scaling up funding for prevention, response, and survivor support services to better match population needs.



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