



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



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Kaduna State

Centre of Learning

Kowa River

Kaduna State

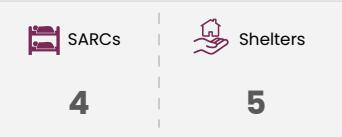
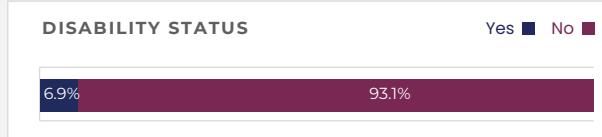
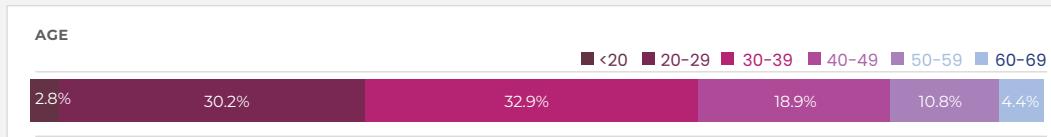
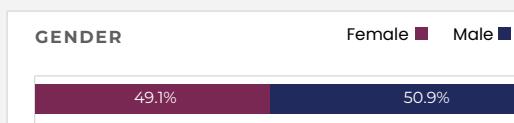
Population: 10,490,813

50.7% Female 49.3% Male

Overall Grade

62.1%

Respondents Demography (n = 1,109)



Ministry of Women Affairs and Social Development

BUDGET ALLOCATION

₦3.54bn

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

BUDGET PERFORMANCE

₦495.40m

(This accounts for 14.0% of total allocation to the ministry)

14.0%

Capital ■ Personnel ■ Overhead ■

33.6% 60.7% 5.7%



Per Capita Spending

₦93.09

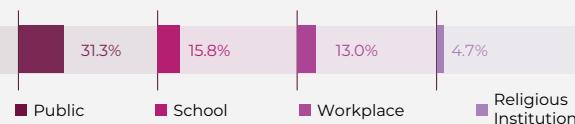
Indexes	Indicators	Total Grades
Laws and Policies	LP ₁ LP ₂ LP ₃	—
Access to Legal Justice	ALJ ₁ ALJ ₂ ALJ ₃	ALJ ₄
Support Services	SS ₁ SS ₂ SS ₃	SS ₄
Information and Awareness	IA ₁ IA ₂ IA ₃	IA ₄
Budget and Spending	BS ₁ BS ₂ BS ₃	—

GBV Context 2025

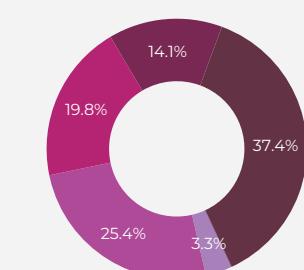
Have you or anyone you know experienced any form of gender-based violence in the last five years?



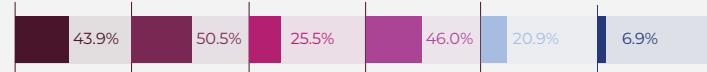
Where did you or the person experience the GBV?



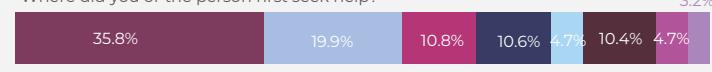
Why did you or the person choose where you sought help?



What form of GBV did you or the person experience?



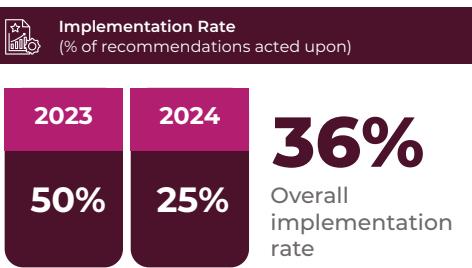
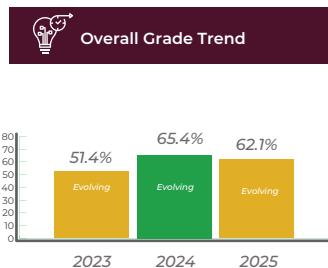
Where did you or the person first seek help?



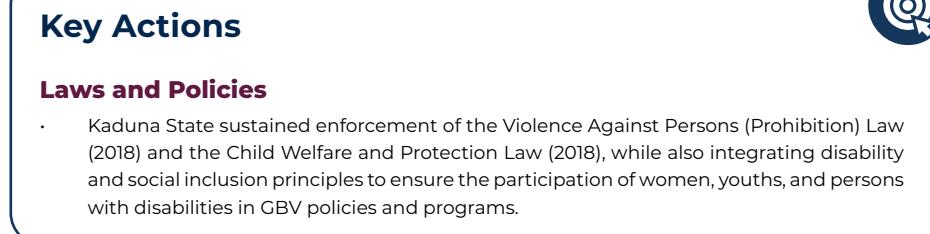
■ Domestic ■ Physical ■ Sexual ■ Mental ■ Economic ■ Cultural practices

■ 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

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



Index	2023	2024	2025
Laws and Policies	LP 25.0%	+1 ▲ LP 58.3%	+1 ▲ LP 66.7%
Access to Legal Justice	ALJ 61.3%	ALJ 56.3%	ALJ 62.5%
Support Services	SS 61.3%	+1▲ SS 81.3%	-1 ▽ SS 62.5%
Information and Awareness	IA 61.3%	+1▲ IA 81.3%	-1 ▽ IA 68.8%
Budget and Spending	BS 48.3%	BS 50.0%	BS 50.0%



Access to Legal Justice

- Legal aid desks, through the Ministry of Justice and Legal Aid Council, provide free representation to survivors.
- Informal justice actors received capacity building on survivor-centered mediation.

Support Services

- The Ministry of Human Services and Social Development, in partnership with security agencies, SARCs, and the Ministry of Health, strengthened the GBV referral directory.
- SARCs disseminated hotline contacts for emergency response during outreach programs and distributed hygiene kits to survivors in vulnerable communities.

Information and Awareness

- The state sustained annual 16 Days of Activism Against GBV campaigns through radio, television, and community outreaches
- The Ministry of Human Services and Social Development produced and distributed pamphlets, posters, handouts, and radio jingles across LGAs.
- Sensitization programs in collaboration with the Disability Affairs Board adopted inclusive approaches, such as sign interpretation, spoken content, and picture-based messages.
- Implementation of sectoral reporting mechanism where MDAs present quarterly reports on GBV awareness and impact by Ministry of Human Services and Social Development..

Change Spotlight

Kaduna State established the Children Diversion Programme, a groundbreaking initiative that redirects children in conflict with the law away from conventional Remand Homes. Instead of confinement, the programme allows 135 children (across three cohorts as of 2025) to live at home while attending daily sessions for three months, where they receive psycho-social counselling, skills acquisition training, numeracy and literacy education, stipends, and recreational activities in a child-friendly environment.

This friendly-child justice approach prioritizes rehabilitation over punishment by addressing the root causes of behaviour through counselling, community service, skills training, and mentorship. As the first Children Diversion Centre in Northern Nigeria and the second nationwide, it represents a significant advancement in child protection, social inclusion, and the broader framework of gender-based violence prevention and social protection initiatives.



Kaduna State GBV Assessment Survey

Overall Grade 62.1%

LAWS AND POLICIES



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

Yes ■ No ■

49.0% 51.0%



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

Yes ■ No ■

63.1% 36.9%



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

Yes ■ No ■

28.2% 71.8%

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 ■

14.6% 85.4%



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

Yes ■ No ■

53.8% 23.1% 4.5% 14.1% 4.5%

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



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

Yes ■ No ■

80.6% 21.5% 15.4% 32.8% 6.3%

■ 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 ■

36.2% 63.8%

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

54.2% 43.6% 2.2%



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

64.5% 22.8% 12.6%



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

■ Yes ■ No

35.2% 64.8%

INFORMATION AND AWARENESS



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

■ Yes ■ No

48.2% 51.8%



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

■ Yes ■ No

67.2% 11.3% 20.8% 0.8%

■ 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?

■ Yes ■ No

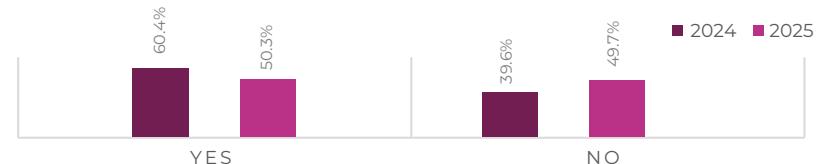
29.4% 16.6% 16.9% 15.0% 7.0% 4.0% 4.9% 47.6%

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

Kaduna State GBV Context Trend (2024-2025)

Overall Grade 62.1%

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



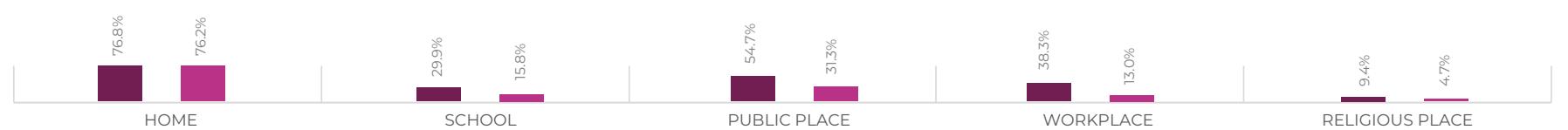
50.3%

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

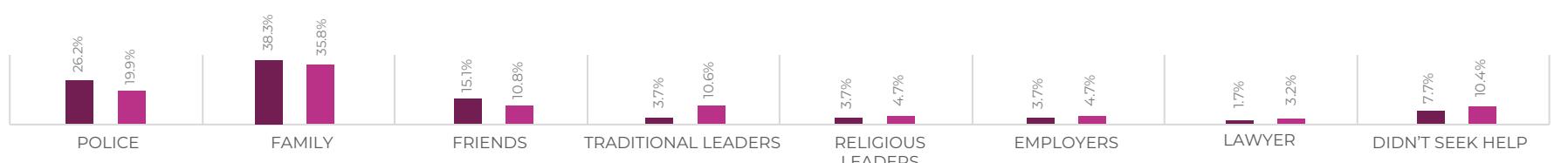
What form of GBV did you or the person experience?



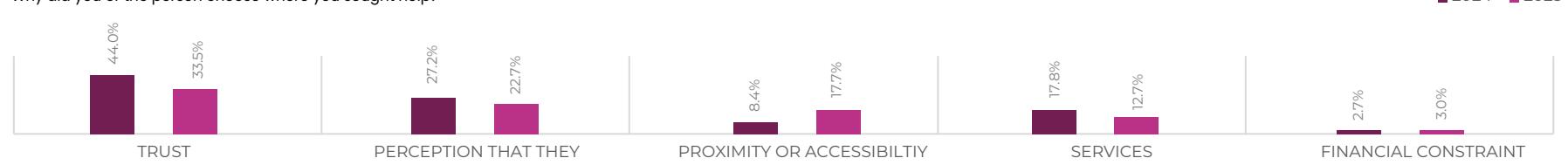
Where did you or the person experience the GBV?



Where did you or the person first seek help?

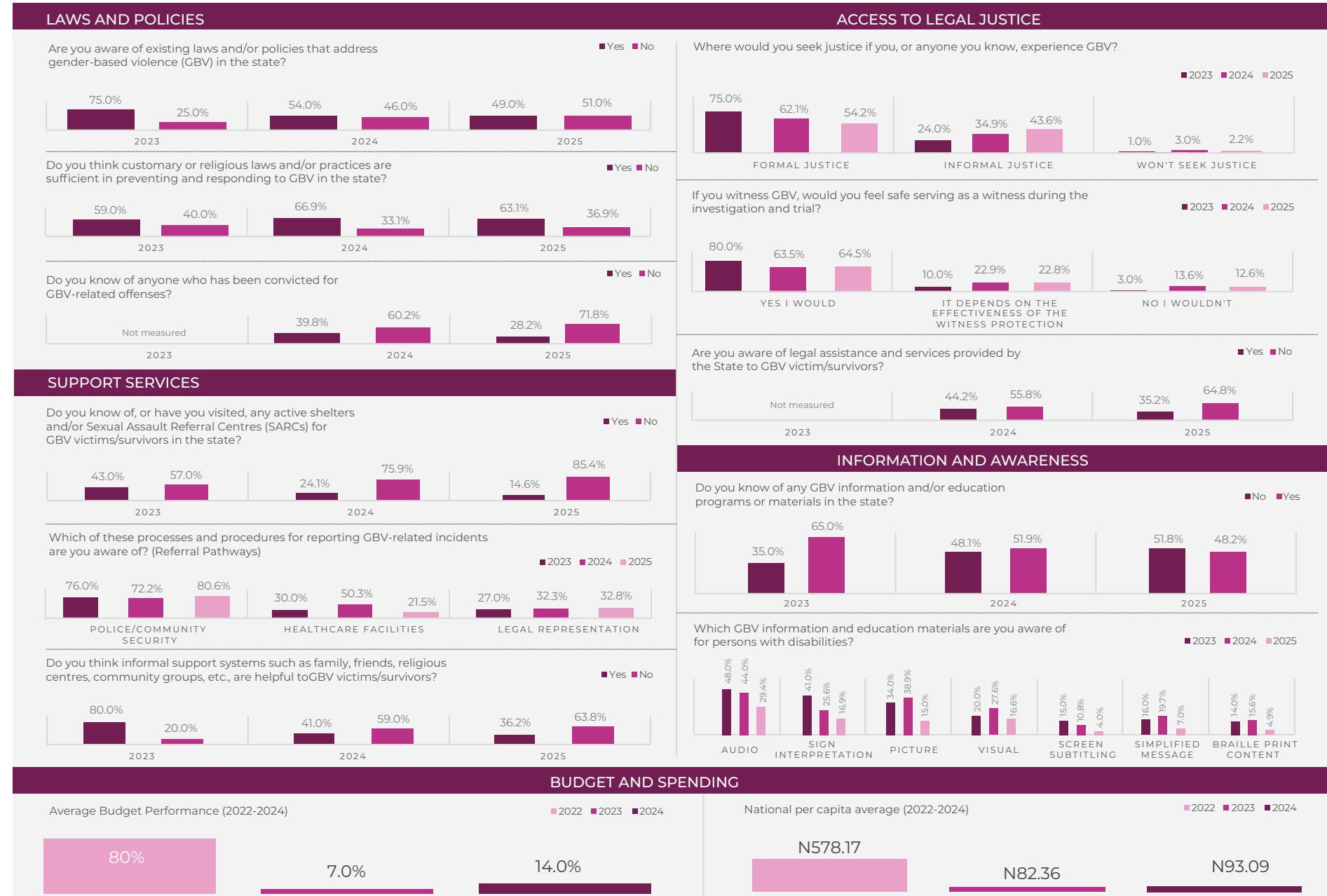


Why did you or the person choose where you sought help?



State Data Trend (2023-2025)

Overall Grade 62.1%





KEY INSIGHTS

Laws and Policies

Current State in 2025

Kaduna State's legal framework for addressing gender-based violence (GBV) is anchored on the domesticated Violence Against Persons (Prohibition) Law (VAPP Law, 2018), complemented by the Penal Code and the Child Welfare Protection Law. Key stakeholder from the Ministry of Justice confirmed that these laws are widely used in various courts including high courts, Sharia courts, and magistrate courts, with most provisions retained from the Federal VAPP Act, adapted slightly for local contexts.

Awareness of these legal frameworks remains limited among the public; survey data indicates only 49.0% of respondents are aware of GBV laws. Despite the low awareness, confidence in the effectiveness of existing laws remains relatively high, with 63.1% believing laws successfully curb GBV. In 2025, convictions under these laws numbered two for the VAPP Law and about fourteen under the Penal Code. Judicial stakeholders attribute improved prosecution rates to more expeditious case handling, aided by accelerated hearings and dedicated magistrates trained on GBV laws. These efforts reflect a stronger commitment by judges and prosecutors to ensure justice for survivors.

Traditional and religious justice systems continue to influence community responses to GBV significantly. Though 63.1% of respondents recognize customary frameworks and 63.6% view them as helpful, stakeholders reveal that these systems can both assist and undermine formal justice – with some community and religious leaders actively referring cases to police, while others favor quiet settlements to avoid communal disharmony. Ongoing advocacy and sensitization aim to improve linkages between customary practice and statutory laws to enhance survivor protection.

Changes Over Time (2023–2025)

Public familiarity with GBV laws declined sharply from 75.0% in 2023 to 49.0% in 2025, even as reliance on traditional informal justice grew. Awareness of conviction outcomes also fell from 67% to 28%, signalling weak communication about justice achievements. This trend underlines the critical need to power legal reforms with sustained legal literacy, public education, and transparent reporting of case outcomes to build trust and accountability.

Access to Legal Justice

Current State in 2025

Formal justice avenues remain important, with 54.2% of respondents opting for police and courts, yet a significant 43.6% still prefer informal traditional or religious mediation. Stakeholder insights show that while family support units and gender desks in police stations are functional and improving, legal aid services remain concentrated in urban areas, with many rural survivors unaware or unable to access them. There is also an Alternative Dispute Resolution (ADR) Centre at the Ministry of Justice that is also an alternative for survivors to report especially intimate-partner violence in the State. Additionally, two GBV Courts and two GBV Judges alongside Four Family Courts with four Judges have been established.

Confidence in witness protection and judicial confidentiality has grown sharply, reflected in 64.6% of respondents willing to serve as GBV case witnesses. This improvement corresponds with reforms to enhance security and privacy in court settings. Partnerships between the Ministry of Justice, Legal Aid Council, SARCs, and NGOs like FIDA form a coordinated referral and prosecution system supported by a new state-level GBV case tracking dashboard.

Nonetheless, the growing preference for informal justice systems (now 44%) and low awareness of legal aid (35%) highlight challenges in extending formal justice outreach and sustaining public trust outside urban centers.

Changes Over Time (2023–2025)

Between 2023 and 2025, Kaduna State strengthened its justice system for GBV survivors through the establishment of specialized GBV courts, functional police gender desks, and closer collaboration among the Ministry of Justice, Legal Aid Council, SARCs, and FIDA. These efforts led to faster case resolution, improved referrals, and better coordination, supported by a new state-level GBV case-tracking dashboard that enhances transparency. However, reliance on formal justice systems declined sharply from 75.0% in 2023 to 54.2% in 2025, while preference for informal mechanisms rose from 24.0% to 43.6%.

Willingness to serve as witnesses in GBV cases improved significantly from 80.0% in 2023 to 64.5% in 2025 indicating growing trust in confidentiality and judicial protection. Yet awareness of state-

provided legal aid declined from 44.2% to 35.2%, while confidence in informal systems rose from 24.0% to 43.6%, reflecting their deep social roots.

Support Services

Current State in 2025

Kaduna operates four SARCs and two functional Shelters for boys and girls and two functional Children Homes, alongside three private shelters providing free 24/7 medical, psychosocial, and legal support. At each LGA, there is a social welfare office, with at least a Social Welfare Officer that receives GBV reports, provide services and refer survivors to appropriate services or the nearest SARC. Despite these infrastructures, only 14.6% of respondents were aware of or had utilized these facilities, consistent with key informants' observation of prevailing stigma and limited access, particularly in remote LGAs. Survivors frequently seek informal support from family or community leaders instead.

Formal pathways are most recognized for law enforcement (80.6% awareness), but less for legal (32.8%), health (21.5%), and psychosocial services (15.1%). Support services while improving are unevenly spread, highlighting the need to raise community awareness and outreach. Nonetheless, a majority see formal support structures as more effective than informal alternatives.

Changes Over Time (2023–2025)

Despite establishment of additional centres across the state and functional facilities offering free 24/7 medical, psychosocial, and legal support, awareness of SARCs and shelters has declined markedly from 43.0% in 2023 to 24.1% in 2024 and further to just 14.6% in 2025. As a stakeholder explained, "we have more centres now than ever before, but people don't know about them."

Awareness of police and security reporting pathways improved significantly, rising from 76.0% in 2023 to 80.6% in 2025, reflecting greater visibility of police gender desks. However, awareness of healthcare facility pathways declined sharply from 50.3% in 2024 to 21.5% in 2025, while knowledge of legal and psychosocial support channels remained low at 32% and 15.1%, respectively. Preference for informal support systems also fell from 80.0% in 2023 to 36.2% in 2025, suggesting gradual acceptance of formal mechanisms.

Information and Awareness

Current State in 2025

Public knowledge of GBV programs remains limited with only 48.2% aware. Radio remains the dominant information source (63.2%), followed by social media and NGOs. Key stakeholder reported that the Ministry of Education disseminates gender education materials in schools, including formats for people with disabilities such as audio and videos. The Ministry has established a formal Monitoring and Evaluation (M&E) system since last year to track awareness efforts, though community reach beyond schools remains limited.

Encouragingly, 67% of respondents rated GBV materials as "mostly useful," and 11.5% as "completely useful," suggesting improved quality and relevance of awareness tools. MHSSD officials confirmed that sensitization efforts have begun to yield positive results, with a noticeable rise in case reporting. However, inclusivity in information delivery remains weak; only 29.4% of respondents received GBV information through audio formats, 16.9% through sign interpretation, 16.6% through visual materials, and just 4.9% through braille, indicating that disability-friendly communication channels are still limited and underutilized. While schools participate in awareness drives, GBV education has yet to be formally integrated into the curriculum.

Changes Over Time (2023–2025)

GBV awareness over the three-year period declined from 65% to 48.2%, showing reduced public exposure to GBV programs despite improvements in institutional coordination. However, perceptions of content quality improved notably, as those rating materials as "mostly useful" increased from 48.6% to 67%, while negative ratings dropped significantly. This suggests that although fewer people are being reached, the information disseminated is becoming more effective and relevant.

Awareness of disability-accessible materials showed an inconsistent pattern: knowledge of braille increased from 14.0% in 2023 to 15.6% in 2024 but fell to 4.9% in 2025, while the use of sign interpretation as an information channel increased to 25.6% in 2024 before declining to 16.9% in 2025. These fluctuations indicate that inclusion efforts are often short-term and dependent on donor funding rather than state-driven continuity. Radio and community sensitization remain the dominant outreach methods, with gradual institutional progress seen through emerging M&E systems and social inclusion policies introduced in 2025.

Budget and Spending

Budget Analysis 2024

Kaduna State allocated ₦3.54 billion to GBV interventions in 2024, accounting for 0.53% of its total budget, yet managed to spend only ₦495.40 million, a disappointing 14.0% execution rate. This represents one of the most significant gaps between commitment and delivery among states with specific GBV budget lines, resulting in a per capita expenditure of just ₦93.09, well below what the population size and initial allocation should have yielded. Given Kaduna's status as one of Nigeria's most populous states, this minimal per capita investment suggests that most residents had limited access to funded GBV services.

Changes Over Time (2022–2024)

Across the last three years of the Womanity Index, Kaduna State consistently included GBV-specific line items in its approved budgets for 2022, 2023, and 2024. Several of these items recurred across the three budget cycles, including "Vesico-Vaginal Fistula (VVF) Intervention," "Sexual Assault Referral Centres (SARCs)," and the "Construction of Shelter for Women and Children in Zones 1, 2, and 3." These items received allocations of ₦66.00 million in 2022, ₦63.58 million in 2023, and ₦70.02 million in 2024. Despite their repeated inclusion, each of these line items recorded 0% implementation across all three years. The state also experienced a significant decline in overall budget performance during the review period. Actual spending decreased sharply from ₦2.89 billion in 2022 to ₦425.35

million in 2023, before rising slightly to ₦495.40 million in 2024. Per capita spending stood at ₦93.09 in 2024, ₦82.36 in 2023, and ₦578.17 in 2022. The sharp decline after 2022 indicates a reversal in per capita investment and highlights inconsistent prioritization of GBV-related spending across the period.

Human Angle Stories

Her daughter was raped by her Islamic teacher. Even though she knew what to do - take her to the hospital and go to the police, she approached the mosque's committee. The teacher admitted it, but the committee said it was Satan's doing and not his fault. They told her reporting would shame the school, the religion, and her family. They suggested that the cleric could marry the girl instead. When she mentioned the police, neighbours started avoiding her. Her husband urged her to leave the matter to God, like the leaders said.

"I wish I knew who to call for help. I wish I knew that even religious leaders cannot stop me from going to the police." Her daughter's rapist faced no consequences. Community pressure and the absence of information about legal rights silenced them both, and justice never came.

KEY GAPS AND RECOMMENDATIONS

Index	Key Gaps	Recommendations
Laws and Policies	Awareness and understanding of GBV laws remain low across rural LGAs.	Develop and distribute simplified, translated versions of the VAPP Law in Hausa and other local languages, with targeted training for community leaders and law enforcement.
	Public awareness of GBV convictions is very low despite recorded convictions.	Establish a public communication platform to share GBV conviction outcomes through radio and community programs as a way of building community trust in the formal justice system.
	Traditional and religious justice systems influence GBV case outcomes, sometimes favouring quiet settlements.	Strengthen linkages between statutory legal frameworks and traditional justice systems through advocacy and sensitization programs.
Access to Legal Justice	Survivors abandon cases due to cost, stigma, family pressure, and low awareness of free legal aid.	Expand legal aid awareness via radio, paralegal outreaches, and community legal literacy sessions by partnering with NBA and Legal Aid Council, focusing on rural areas.
	Court delays and limited specialized GBV courts restrict fast case resolution.	Fully operationalize Family Support Units and GBV courts in all senatorial districts, with trained judges and prosecutors, to ensure faster and survivor-friendly hearings.
	Increasing willingness to serve as GBV case witnesses reflects growing trust, though informal justice systems remain popular.	Sustain judicial confidentiality and security reforms to further increase public trust and encourage formal justice access.
Support Services	SARCs and shelters are present mainly in urban areas; rural survivors face access barriers and stigma.	Establish mobile SARCs or satellite outreach centers in underserved LGAs alongside community awareness campaigns to reduce stigma and improve access.
	Funding shortages and donor dependence limit the sustainability of SARCs and shelter operations.	Create a dedicated GBV funding line within the MHSSD's annual budget to provide consistent resources for SARCs, shelters, and related support services.
	Stigma and limited public awareness inhibit survivors' utilization of formal support services.	Invest in broad community sensitization to increase awareness and acceptance of formal support mechanisms to improve survivor engagement.
Information and Awareness	GBV awareness declined significantly; radio and social media dominate access, schools and health facilities play minor roles.	Launch a comprehensive state-wide multimedia awareness campaign integrating radio broadcasts, school programs, and health centre outreach for broader impact.
	Disability-accessible IEC materials are scarce and unevenly known, limiting inclusivity.	Scale up the production and state-wide distribution of inclusive IEC materials including braille, audio, and pictorial formats, while collaborating with the Disability Affairs Board.
	Formal GBV and child protection education in schools is sporadic and not yet institutionalized.	Institutionalize GBV and child protection education within school curricula supported by teacher training and student-led awareness clubs for sustainability and wider reach.
Budget and Spending	Kaduna's GBV spending collapsed from ₦2.89 billion in 2022 to ₦495.40 million in 2024, dropping per capita investment from ₦578.17 to ₦93.09. Despite consistent budget allocations, execution rate plummeted to 14%, with zero spending on shelters, VVF treatment, and SARCs for three consecutive years.	Conduct urgent financial audit to identify bottlenecks in fund disbursement and implement quarterly release schedules tied to implementation milestones. Prioritize operationalizing already-allocated shelters and SARCs to address the 0% implementation crisis.

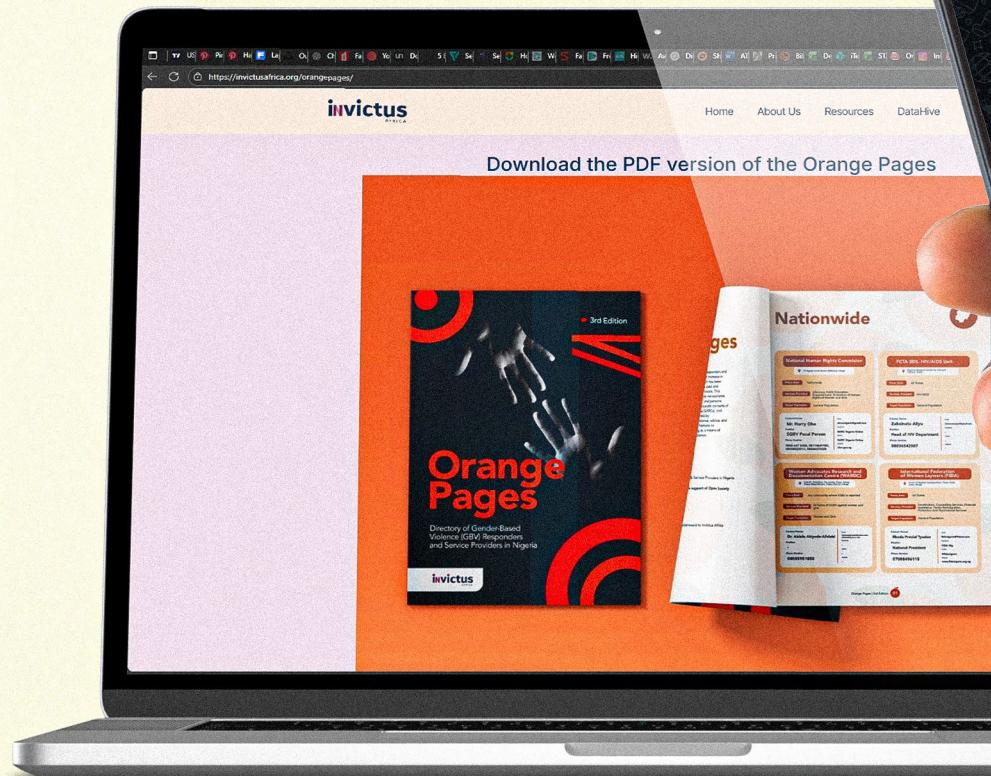


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