



BEYOND ENACTMENT

A DATA-DRIVEN SURVEY REPORT ON THE
IMPLEMENTATION OF THE VAPP ACT (2015)
AND RELATED STATE LAWS

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About Invictus Africa

Invictus Africa is a civic-tech organization that leverages data and technology to drive inclusive policies and programs, equitable resource allocation, and institutional accountability.

Executive Director

Bukky Shonibare

Head, Data and Research

Gabriel Mobuogwu

Data Visualization

Witson Onipe

Invictus Africa Team

Adenike Adeoye, Oluwasesan Adewusi, Ebunoluwa Adegbe, Edidiong Inyang, Ikechukwu Prince, Japheth Stephen, Joy Edo, Margaret Chrisantus, Olorunnisola Abe, Perpetua Aende, Tobacaleb Akanmu.

Contact:

Plot 54, Cadastral Zone, C01, Karmo, Abuja.

+234-901-910-1011, +234-703-326-3444

info@invictusafrica.org

www.invictusafrica.org

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Bukky Shonibare

Executive Director, Invictus Africa

Executive Summary

Ten years after the enactment of the Violence Against Persons (Prohibition) (VAPP) Act, Nigeria stands at a critical juncture where a comprehensive assessment of its implementation is essential. The VAPP Act National Implementation Survey, conducted by Invictus Africa in 2025, serves as an extensive, data-driven assessment of the law's enforcement across 35 states (excluding Kano) and the Federal Capital Territory (FCT).

Methodology

This survey utilized a mixed-methods approach, combining key informant interviews with government officials from relevant Ministries, Departments, and Agencies (MDAs) to assess subnational governments' implementation efforts, alongside a nationally representative survey of 11,574 respondents from diverse socioeconomic backgrounds. By directly comparing official responses with citizens lived realities, this assessment provides an evidence-based perspective on the successes, gaps, and systemic improvements needed to strengthen the VAPP Law's ability to protect Nigerians from all forms of violence.

Key Findings

Public Awareness

Although MDAs in all surveyed states report having conducted awareness campaigns on the VAPP Law, public knowledge remains limited. Just about half of Nigerians (49.3%) have ever heard of the VAPP Law, and among those who have, understanding is often shallow—only about one in three (29%) report a good grasp of its provisions. Awareness is lower among respondents with no formal education (23.8%) and primary education (23.9%), compared to those with tertiary education (55.4% among graduates and 60.6% among postgraduates). Similarly, individuals in rural areas (48.1%) exhibit lower awareness levels than their urban counterparts (51.9%). Awareness levels vary across occupations, with NGO/CSO workers (75.2%) demonstrating the highest awareness, followed by civil servants (59.7%), and religious/traditional leaders (59.3%). In contrast, the lowest awareness levels are observed among self-employed individuals (40.6%), students (46.3%), and the unemployed (36.9%).

Enforcement Systems

Implementation of the VAPP Law shows clear progress but remains uneven across states. For instance, while 23 of the 35 states and the FCT have established sex offenders' registers, only 18 have integrated them into broader GBV tracking systems. Similarly, although 32 states authorize courts to issue Protection Orders, 19 could not provide issuance data—highlighting critical monitoring gaps. Mandatory reporting laws are in place in 30 states, yet 15 offer no penalties for non-compliance, limiting their deterrent value. This weakness is reflected in prosecution patterns: only 21 states recorded more than 20 VAPP-related prosecutions in the past year. Notably, states with penalties for non-reporting had higher prosecution rates (67%) compared to those without (50%)—pointing to the strong link between legal accountability and enforcement outcomes. Respondents' perceptions align with these findings. Among those aware of the VAPP Law, 69.6% report improved GBV response in their states. Yet, lack of awareness (68.1%), inadequate funding (43.7%), and weak law enforcement (39.2%) persist as key obstacles to full implementation and impact.

Support Services

Despite 35 of Nigeria's 35 participating states and the FCT establishing SARCs or shelters, public awareness remains limited. Only 54% of respondents are aware of these services, and only Abia lack SARCs entirely, leaving critical gaps in survivor support. Awareness is particularly low among rural residents (46.7%) and individuals with only primary education (27.2%), reinforcing a two-tier intersectional access barrier where the most vulnerable remain underserved. Service provision shows uneven depth. While immediate needs are relatively well addressed—medical care is available in 28 states and psychosocial counselling in 28 states—long-term support remains inadequate. Legal aid is offered in just 18 states, and reintegration services in only 15, undermining survivors' pathways to recovery and justice.

Although 22 states offer free GBV-related medical care, financial barriers persist in 25 states, suggesting that services are often constrained by limited scope, hidden costs, or lack of awareness. Only eight states ensure survivors always access forensic services, while 25 states report irregular access — a major gap that weakens prosecution efforts under the VAPP Law. Financial support systems also remain fragile. Only 15 states have operational victims' support funds, and of those, 13 depend almost

exclusively on state budgets. With minimal engagement from the private sector or donor agencies, the sustainability of these funds is precarious, signaling an urgent need to diversify funding sources.

Coordination Mechanisms

Out of 36 states, 27 have designated enforcement bodies for the VAPP Law, yet nine lack formal structures, undermining oversight and implementation. While 22 states have appointed Coordinators, leadership gaps persist in five states. Protection Officers—crucial for survivor support and legal facilitation—are present in only 19 states, leaving 17 without this critical role. Although 34 states have interagency coordination frameworks, Borno and Kebbi lack structured mechanisms. Regulation of service providers also remains uneven: only 21 states have formal accreditation systems, and of these, just 16 regularly update provider registers. Furthermore, operational guidelines for service delivery are absent or incomplete in nine states, revealing significant disparities in institutional capacity and service standardization.

Looking Forward

While the VAPP Act and corresponding state VAPP Laws have laid crucial foundations for addressing all forms of violence against persons in private and public life, implementation remains uneven, leaving a gap between law and reality. Closing this gap requires strong political will that drives decisions, resourcing, and actions in four critical areas: raising public awareness through inclusive, sustained campaigns; strengthening enforcement systems with clear accountability measures; expanding survivor support services to ensure accessibility and continuity of care; and institutionalizing coordination mechanisms that integrate actors, standardize service delivery, and foster interagency effectiveness. Without a deliberate focus on closing these systemic gaps, the transformative potential of the VAPP Act and corresponding state laws will remain unrealized—especially for those most at risk. A coordinated, well-resourced, and rights-based implementation strategy is not only a policy imperative but a moral one, if Nigeria is to truly deliver justice, safety, and dignity for all.



PART 1

INTRODUCTION

Background

Origin, Purpose, and Scope of the VAPP Act

The Violence Against Persons (Prohibition) Act (VAPP Act), enacted in 2015, is Nigeria's most comprehensive legal framework for addressing gender-based and other forms of violence. Its purpose is to eliminate violence in both public and private spaces, ensure justice for survivors, and hold perpetrators accountable.

Originally introduced as the Violence Against Women (Prohibition) Bill, the legislation was eventually enacted as the Violence Against Persons (Prohibition) Act. This shift reflected both the harmonization of nine separate violence-related bills that were before the National Assembly at the time, and the recognition that violence—including forms often assumed to affect only women, though women are disproportionately impacted—can affect all persons, regardless of gender. Resultantly, the VAPP Act introduced several groundbreaking provisions that significantly broaden Nigeria's legal understanding and response to violence.

The Act prohibits 26 offences spread across five types of gender-based violence: sexual, physical, psychological and emotional, political, and economic. Many of the offences had been inadequately addressed under existing criminal laws, particularly the Penal Code and the Criminal Code Act, at the time the VAPP Act was passed. It also provides for protective measures such as compensation, shelter, medical and legal support, and enables survivors to apply for Protection Orders, thus reinforcing its survivor-centred approach.

Notably, while previous criminal laws narrowly defined rape as involving only vaginal penetration by the penis, the VAPP Act adopts a broader and more inclusive definition. It recognizes rape to include oral and anal penetration, as well as the use of objects or other parts of the body, thereby addressing a wider range of sexual violence.

The Act is also the first federal legislation in Nigeria to explicitly prohibit Female Genital Mutilation (FGM)—although some states had done so earlier.

As a federal law, the VAPP Act, by default, applies only within the Federal Capital Territory (FCT). However, it has since served as a model for state-level adoption. As of

September 2025, 34 states have signed and gazetted the VAPP Act; two states—Borno and Kogi—have adopted but are yet to gazette it; and one state (Kano) has not passed it at all. While some states have strengthened their versions of the law, others have weakened it by removing or modifying key provisions in ways that undermine the intent and spirit of the original legislation.

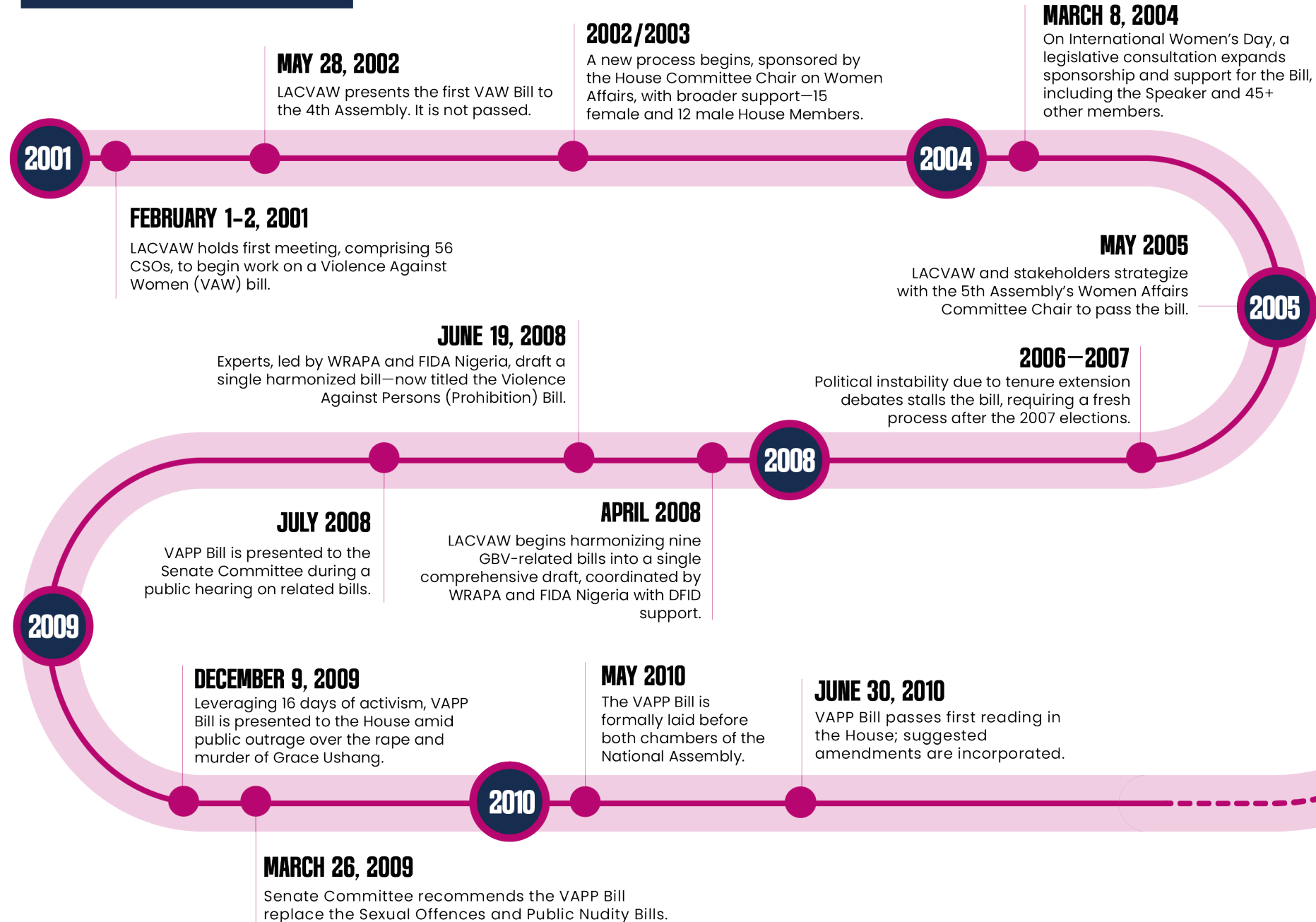
The VAPP Act is significant for its survivor-centred design, its expansive definitions of various forms of violence, and its pivotal role in advancing gender justice and human rights in Nigeria.

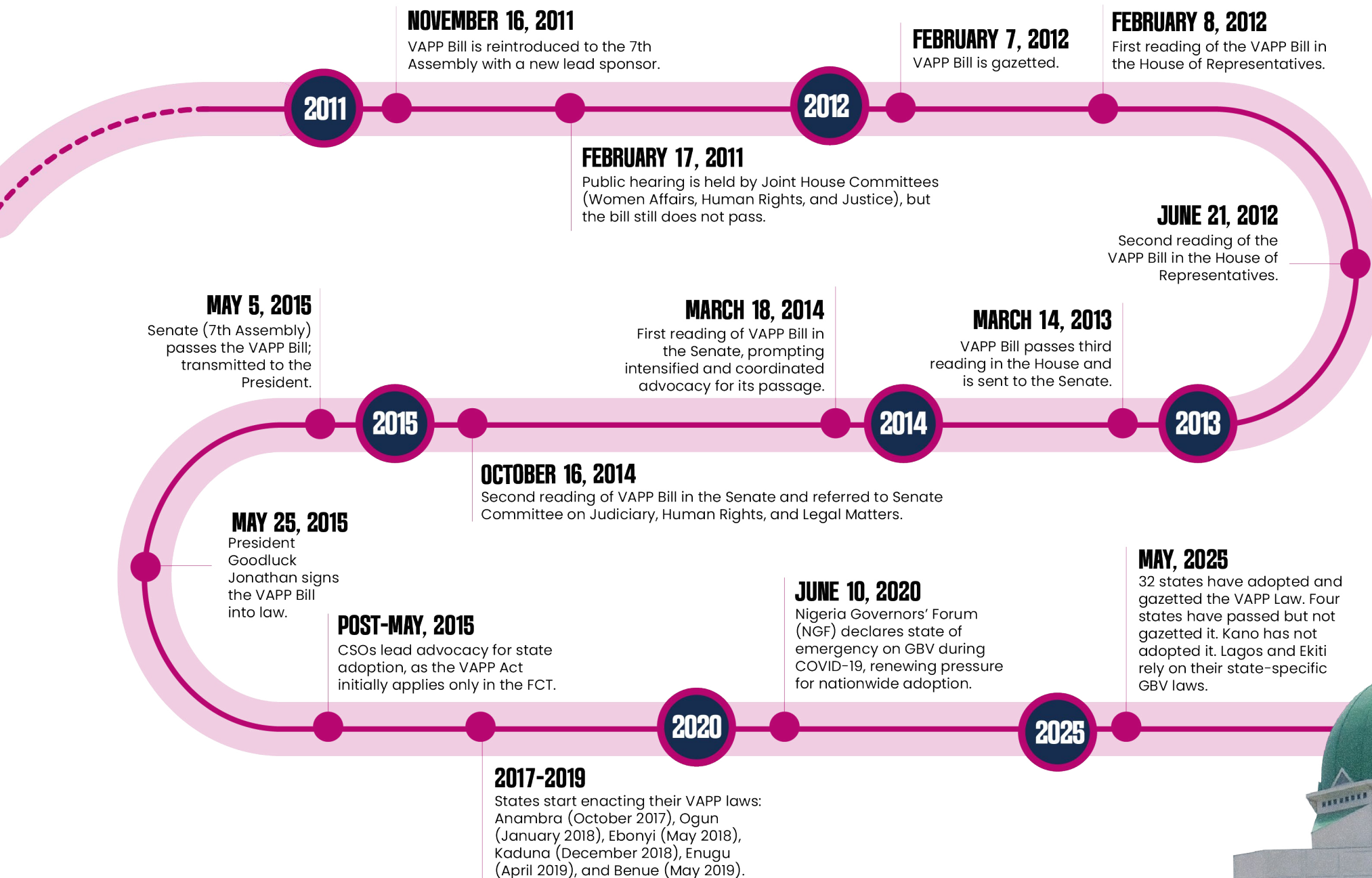
Report Structure

This report is structured into four key sections. Part One provides an introduction, covering the background of the VAPP Act—its origin, purpose, scope, and major milestones before and after its passage in 2015. It also offers a brief overview of the 26 offences covered under the Act and their corresponding penalties, and highlights its current adoption status across states. As Kano State remains the only state yet to adopt the VAPP Act, it was excluded from the assessment. Accordingly, the survey covers 35 states and the Federal Capital Territory (FCT). This section also outlines the study's methodology, including the research design, data analysis approach, and key limitations.

Part Two presents national-level findings across four thematic areas: public awareness, enforcement systems, support services, and coordination mechanisms. Part Three provides a comparative analysis of state performance based on selected implementation indicators. Part Four offers detailed, state-by-state assessments of the VAPP Act's implementation across the 35 states and the FCT.

Timeline of the VAPP Act





Offences and Corresponding Punishments in the VAPP Act, 2015

The 26 offences in the VAPP Act, 2015) are spread across five types of gender-based violence:



Sexual Violence

- 01 **Rape** (Section 1)
Life imprisonment. If offender is less than 14 years old: maximum 14 years imprisonment. Others: at least 12 years imprisonment without an option of fine. Gang/group rape: Jointly, at least 20 years imprisonment without an option of fine. Compensation for victims, paid by perpetrator.
- 02 **Incest** (Section 25)
Imprisonment for 10 years without an option of fine. If parties consent without fraud or threat: five years imprisonment without an option of fine.



Physical Violence

- 03 **Inflicting physical injury** (Section 2)
Imprisonment up to five years, or fine up to N100,000, or both.
- 04 **Female circumcision or genital mutilation** (Section 6)
Imprisonment up to four years, or fine up to N200,000, or both
- 05 **Forceful ejection from home** (Section 9)
Imprisonment up to two years, or fine up to N300,000, or both
- 06 **Depriving a person of his/her liberty** (Section 10)
Imprisonment up to two years, or fine up to N500,000, or both
- 07 **Spousal battery** (Section 19)
Imprisonment up to three years, or fine up to N200,000, or both
- 08 **Attack with harmful substance** (Section 21)
Life imprisonment without an option of fine.
- 09 **Administering a substance with intent** (Section 22)
Imprisonment up to 10 years, or fine of N500,000, or both



Psychological and Emotional Violence

- 10 **Coercion** (Section 3)
Imprisonment for three years.
- 11 **Wilfully placing a person in fear of physical injury** (Section 4)
Imprisonment up to two years, or fine up to N200,000, or both
- 12 **Offensive conduct** (Section 5)
Imprisonment up to two years, or fine up to N500,000, or both
- 13 **Wilfully making false statements** (Section 8)
Imprisonment up to 12 months, or fine of N200,000
- 14 **Forced isolation or separation from family and friends** (Section 13)
Imprisonment up to six months, or fine up to N100,000, or both
- 15 **Emotional, verbal, and psychological abuse** (Section 14)
Imprisonment up to one year, or fine up to N200,000, or both
- 16 **Harmful widowhood practices** (Section 15)
Imprisonment up to two years, or fine up to N500,000, or both
- 17 **Abandonment of spouse, children and other dependants without sustenance** (Section 16)
Imprisonment up to three years, or fine up to N500,000, or both
- 18 **Stalking** (Section 17)
Imprisonment up to two years, or fine up to 500,000, or both
- 19 **Intimidation** (Section 18)
Imprisonment up to one year, or fine up to N200,000, or both
- 20 **Harmful traditional practices** (Section 20)
Imprisonment for four years, or fine up to N500,000, or both
- 21 **Indecent exposure** (Section 26)
Imprisonment for at least one year, or fine up to N500,000, or both



Political Violence

- 22 **Frustrating investigation** (Section 7)
Imprisonment up to three years, or fine up to N500,000, or both
- 23 **Political violence** (Section 23)
Imprisonment up to four years, or fine up to N500,000, or both
- 24 **Violence by State actors** (Section 24)
Imprisonment up to four years, or fine up to N1,000,000, or both



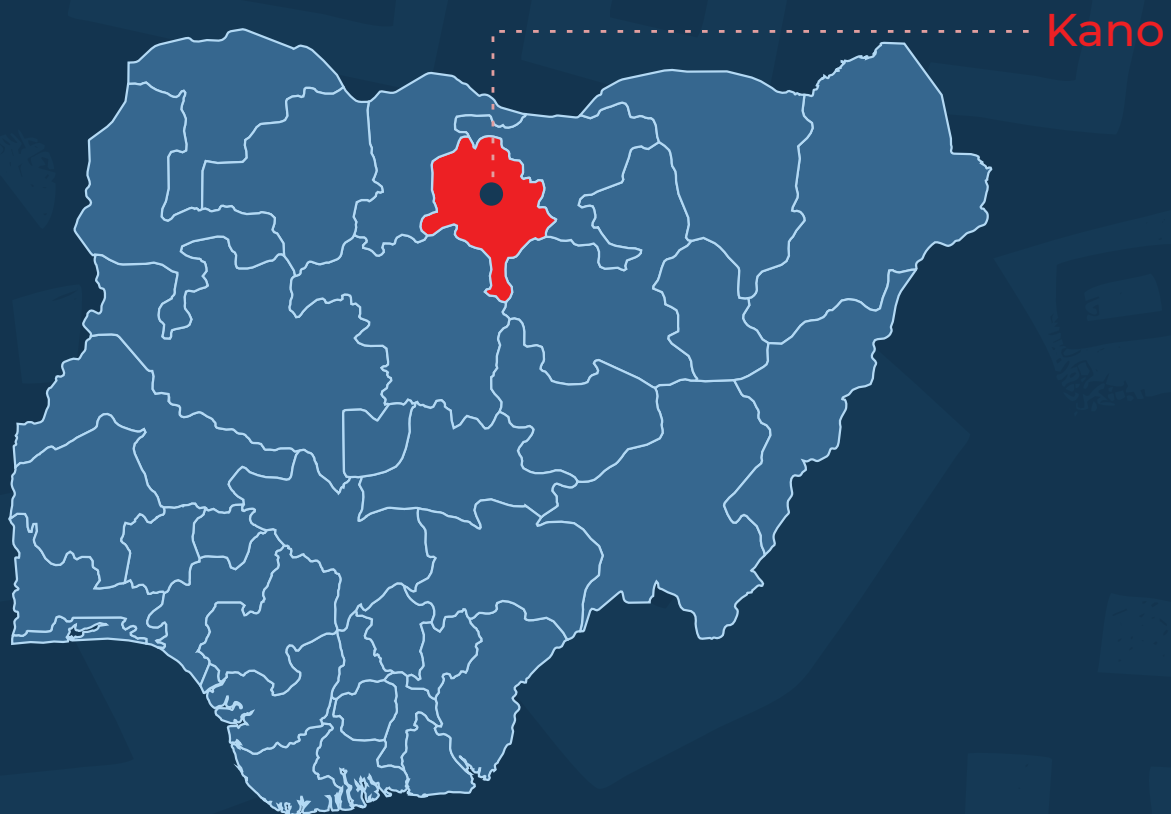
Economic Violence

- 25 **Damage to property with intent to cause distress** (Section 11)
Imprisonment up to two years, or fine up to N300,000, or both
- 26 **Forced financial dependence or economic abuse** (Section 12)
Imprisonment up to two years, or fine up to N500,000, or both

Note: For offences in sections 2, 5, 9–20, and 23–24, any person who attempts to commit the offence; incite, aid, or counsel another person to commit the offence; or receive or assist another in committing the offence will be imprisoned for a period ranging from three months to three years, or pay fine ranging from N100,000 to N700,000, or both. For attempting, supporting, or assisting to attack with harmful substance (s.21), it is up to 25 years imprisonment without an option of fine.



VAPP LAW



● NOT ADOPTED

○ ADOPTED AND GAZETTED

Kano State has not adopted the Violence Against Persons (Prohibition) (VAPP) Act 2015.



Methodology

The VAPP Act National Implementation Survey was conducted in May 2025 using a mixed-methods approach to collect data from both citizens (demand side) and government officials (supply side) of relevant Ministries, Departments, and Agencies (MDAs) across Nigeria's 35 states (excluding Kano) and the FCT. This dual approach enabled triangulation of findings between citizen experiences and government efforts, providing a more holistic evaluation of the VAPP Act's implementation a decade after its enactment.

Quality Assurance

To ensure methodological rigor and data quality, state researchers underwent comprehensive training prior to field deployment. Training focused particularly on standardized administration of supply-side data collection instruments, interview techniques for engaging government officials, and protocols for accurate documentation of qualitative responses. Additionally, regular supervision and guidance from the central research team reinforced adherence to the established methodology throughout the data collection period.

Supply-Side Data Collection

Key Informant Interviews

The supply-side assessment began with key informant interviews (KIIs) with officials from government MDAs responsible for VAPP Act implementation, including the Ministry of Women Affairs, Ministry of Justice, Ministry of Health, Ministry of Education, and Ministry of Information and Communication. Other key stakeholders included the Nigerian Police Force, Police GBV Desks, Courts, Legal Aid Council, and Sexual Assault Referral Centres (SARCs).

Quantitative Data Aggregation

Following the KIIs, the research team systematically converted qualitative responses into quantitative data using a semi-structured questionnaire. This approach enabled the standardization of qualitative insights into measurable indicators and facilitated the development of a unified assessment framework for each state, allowing for comparative analysis across Nigeria's state.

Demand-Side Data Collection

Study Population

The demand-side assessment targeted adults aged 18 years and above residing in Nigeria. To ensure state representation accuracy, respondents provided information for the state where they had primarily resided over the past ten years.

Sample size determination

The sample size was determined using a 95% confidence level and a $\pm 6\%$ margin of error. Given that each of Nigeria's 35 states and the FCT has a population exceeding one million, the minimum required sample was 267 respondents per state. To account for a 10% non-response rate, this was rounded up to 300 respondents per state, resulting in a minimum national sample size of 10,800 respondents. After data collection and cleaning, the final dataset included 11,574 valid responses.

Sampling Strategy

Survey participants were selected by using a two-stage probability design. First, all three senatorial districts within each participating state were included to ensure geographical representation. Second, Local Government Areas (LGAs) were randomly selected from each senatorial district using a proportional approach:

- Senatorial districts with ≤ 4 LGAs: All LGAs included
- Senatorial districts with 5-9 LGAs: Half of LGAs selected (rounded up when necessary)
- Senatorial districts with ≥ 10 LGAs: One-third of LGAs selected (rounded up)

Data collection employed a dual-channel approach using an online survey instrument (Microsoft Forms). State researchers managed localized dissemination within selected LGAs primarily through community-specific WhatsApp groups, while

the central research team conducted broader dissemination via Invictus Africa social media channels.

Data Analysis

Prior to analysis, rigorous data cleaning was performed to ensure quality and reliability by correcting inconsistencies, and standardizing formats across datasets. The analysis was structured around four key themes: public awareness, enforcement systems, support services, and coordination mechanisms. For each thematic area, univariate statistical methods were applied to examine both supply-side and demand-side data, enabling direct comparisons between government implementation efforts and public experiences. Bivariate relationships were analyzed between implementation mechanisms and outcomes, as well as between public awareness levels and demographic factors. Additionally, comparative assessments across states were conducted to identify regional patterns and state-specific insights, supporting targeted recommendations. All data wrangling and statistical analysis were conducted using R statistical software, while visualization was accomplished through Excel and Adobe Illustrator. Key findings were presented through charts, graphs, and maps.

To distinguish between data collected from government MDAs and citizen survey responses from the 35 states and the FCT, icons were incorporated into charts and graphs, helping readers identify the data source.

Limitations of the Study

The study methodology had several limitations that should be acknowledged. Despite efforts by the States Researchers, the online survey primarily reached participants with access to digital devices and internet connectivity. This may have led to the underrepresentation of populations without such access, particularly in rural or economically disadvantaged areas. Additionally, the assessment provides a snapshot of VAPP Act implementation at the time of the survey and may not reflect ongoing developments or recent changes in implementation strategies. Furthermore, both citizen responses and government agency reports may contain inherent biases influenced by recall limitations, social desirability, or institutional interests.



Data collected from MDAs



Data collected from the public



Respondent Demographics (*n* = 11,574)



The survey captured perspectives from 11,574 Nigerians across a demographically diverse sample. Gender representation was nearly equal, comprising 50.4% female and 49.6% male respondents. Reflecting Nigeria's predominantly youthful population, most participants were young adults under the age of 36—23.4% were aged 18–24 and 38.3% were aged 25–35—while middle-aged adults (36–45 years) accounted for 24.4%. Educational attainment was notably high, with 51.3% of respondents holding graduate degrees and a further 14.4% possessing postgraduate qualifications.

The occupational distribution spanned various sectors, including self-employed individuals (28.1%), students (24.5%), civil servants (17.2%), and private sector employees (10.7%), providing a broad representation of societal experiences. Geographically, the sample achieved a reasonable urban–rural balance, with 42.7% of respondents residing in urban areas and 57.3% in rural communities. This balance enables meaningful comparisons of the VAPP Law's reach and implementation across different settlement types. Additionally, 10.2% of respondents identified as persons with disabilities, ensuring the inclusion of perspectives from historically marginalized populations.



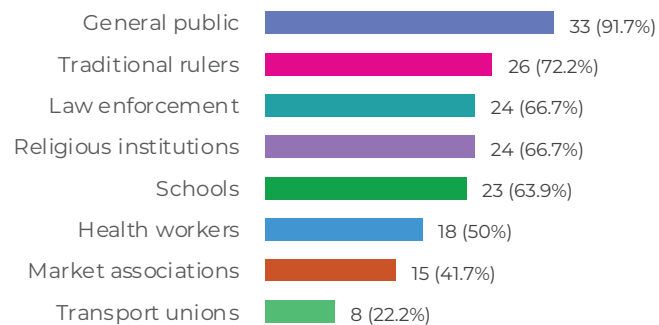
PART 2

NATIONAL ANALYSIS AND FINDINGS

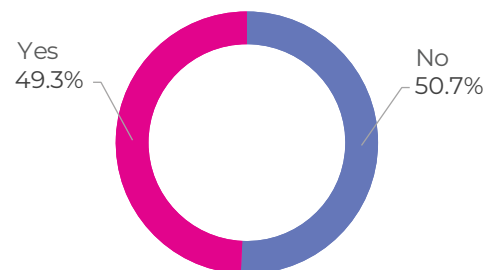
Public Awareness



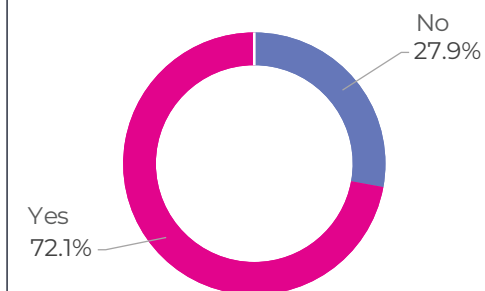
Target groups in state-led awareness campaigns on the VAPP Law



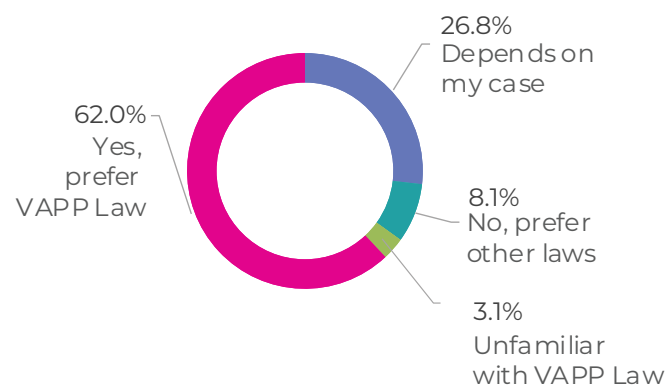
Have you heard of the VAPP Law?



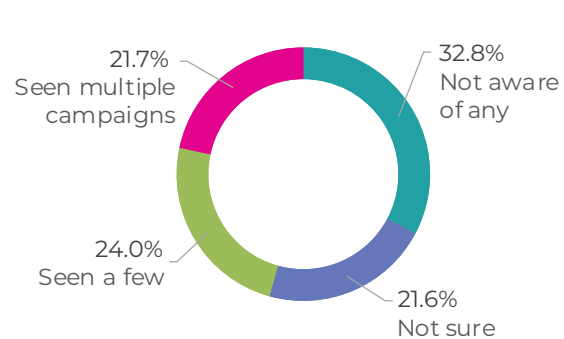
Do you know if the VAPP Law has been passed in your state?



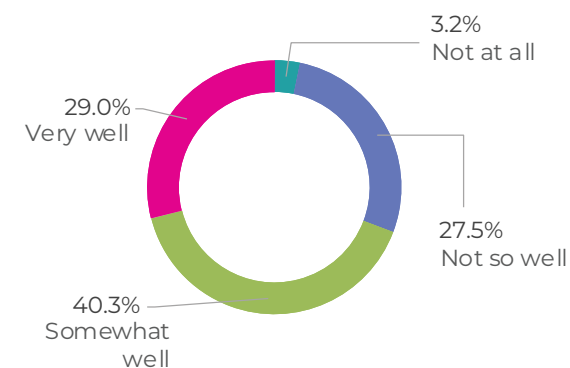
Would you prefer to pursue cases under the VAPP Law instead of other laws?



Have you seen any state-led awareness campaigns about the VAPP Law?



How well do you understand the provisions of the VAPP Law?



The Commitment: Government-Led Awareness Efforts

Data from government officials indicate a nationwide commitment to raising public awareness of the VAPP Law, with a strong emphasis on informing citizens about survivor support services. In the past year, all 35 participating state governments and the Federal Capital Territory (FCT) have undertaken awareness campaigns aimed at diverse segments of society. Public outreach has been most widespread, with 33 states targeting the general population. Recognizing the influential role of community leadership and moral authority, 26 states have actively engaged traditional rulers, while 24 states have involved religious institutions.

Efforts to strengthen the implementation framework have also prioritized law enforcement agencies in 24 states. Education and health sectors have not been overlooked: awareness initiatives have extended to schools in 23 states and to healthcare workers in 18 states. However, economic and occupational networks remain underutilized conduits for dissemination. Only 15 states have reached out to market associations, and just eight have engaged transport unions—suggesting a critical gap in reaching informal sector actors who may be highly vulnerable to gender-based violence but less likely to access formal information channels.

The Gap: Awareness Doesn't Match Action

Although all 36 state governments report conducting public awareness campaigns on the VAPP Law, citizen-level data paints a starkly different picture. Only 49.3% of Nigerians report having heard of the Law, revealing a significant communication gap: while governments may be speaking, the message is not effectively reaching its intended audience. Further, only 24% of citizens recall seeing “a few” campaigns, and 21.6% report exposure to “multiple campaigns.” Alarming, 32.8% state that they have not encountered any awareness campaign, and an additional 21.6% are unsure whether they have. These figures underscore both the limited visibility and potential ineffectiveness of existing campaigns, which appear insufficient to generate widespread public engagement or understanding.

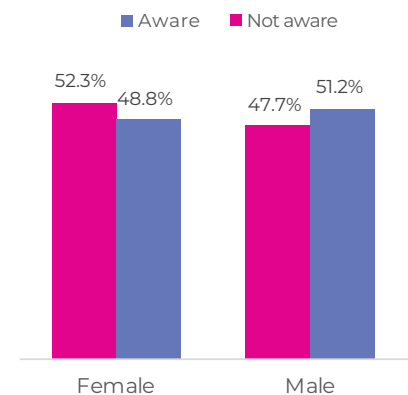
Among those familiar with the VAPP Law, 72.1% are aware that it has been formally enacted, and 62% express a preference for seeking legal redress under its provisions, rather than relying on the older Penal or Criminal Codes. However, a notable 26.8%

remain undecided — suggesting either a lack of confidence in the law's unique protections or an incomplete understanding of its practical relevance. This hesitation may reflect missed opportunities in public education efforts to clearly communicate how the VAPP Law can be accessed and what protections it affords.

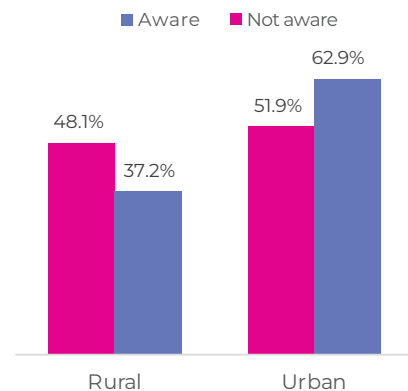
Further disaggregation of awareness data reveals that even among those who have heard of the VAPP Law, knowledge of its contents remains shallow. Only 29% report knowing the Law “very well,” while 40.3% say they know it “somewhat well.” Conversely, a significant portion—27.5%—say they know it “not so well,” and 3.2% “not at all.” This pattern suggests that public knowledge is often surface level, leaving citizens ill-equipped to recognize rights violations, seek redress, or support others in doing so. The persistent gap between awareness and deep understanding could undermine the law's transformative potential and the broader goals of gender justice and protection against violence.

Public Awareness

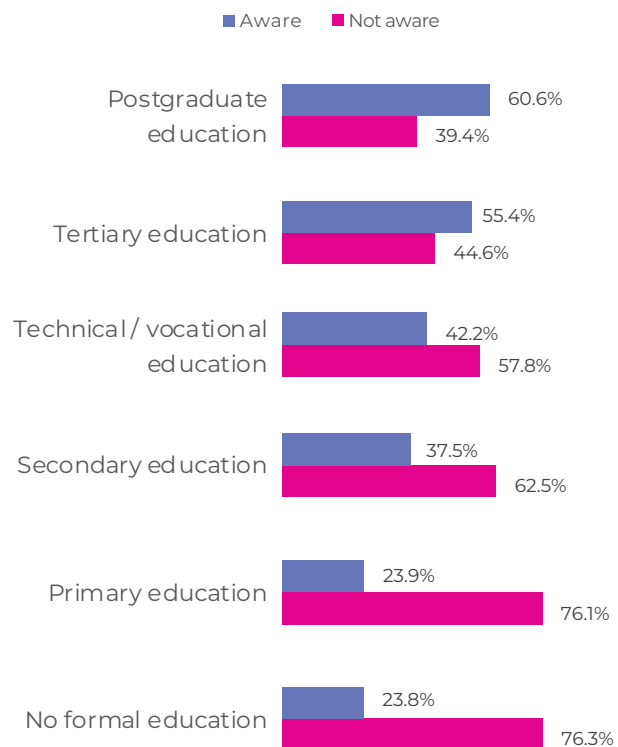
 **Gender differences in public awareness of the VAPP Law**



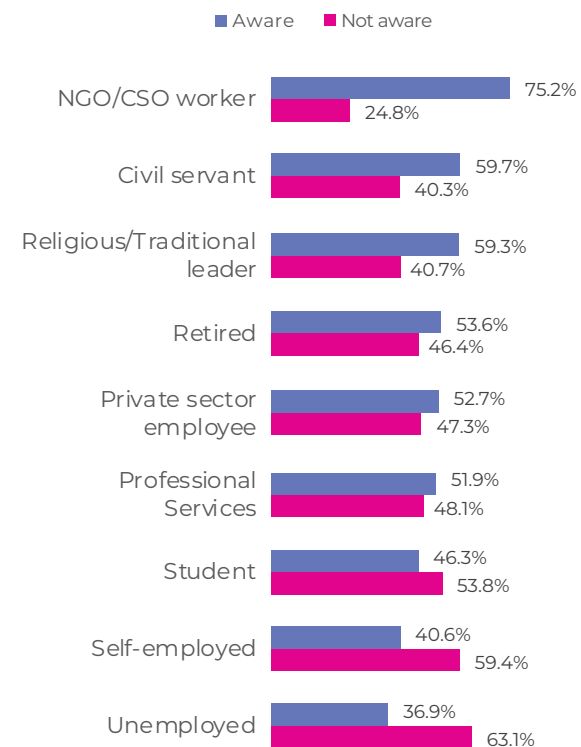
 **Awareness of VAPP Law in urban and Rural area**



 **Educational level and awareness of the VAPP Law**



 **Awareness of VAPP Law across different occupations**



The Disparity: Unequal Awareness Across Populations

Awareness of the VAPP Law shows minimal gender disparity—55.6% of males and 52.1% of females have heard of it. However, educational level is a major differentiator. Awareness is highest among those with postgraduate (60.6%) and tertiary education (55.4%), but critically low among respondents with no formal education (23.8%) or only primary education (23.9%). This gradient indicates that current campaigns are more accessible to highly educated populations.

Occupational data reinforces this trend. NGO/CSO workers (75.2%) show the highest awareness, followed by civil servants (59.7%) and religious/traditional leaders (59.3%). In contrast, awareness is lower among self-employed individuals (40.6%), students (46.3%), and the unemployed (36.9%), pointing to a disconnect between outreach efforts and more vulnerable groups.

Geographically, urban residents (54.0%) are significantly more aware than rural residents (42.9%), suggesting a need for targeted rural engagement. Overall, the data reveal that current awareness strategies insufficiently reach those most at risk of exclusion.

Summary of Key Findings

Although MDAs in all surveyed states claim to have conducted awareness campaigns on the VAPP Law, public knowledge remains limited. Fewer than half of Nigerians (49.3%) have even heard of the VAPP Law, and among those who have, understanding is often shallow—only about one in three (29%) report a good grasp of its provisions. Awareness and comprehension are markedly lower among citizens with less formal education, those working in the informal sector, and the unemployed, compared to their more educated, urban-based, and formally employed counterparts.

Recommendations

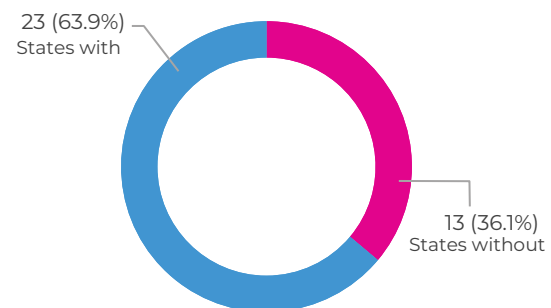
To close the awareness and understanding gap, outreach efforts must be deliberately targeted toward rural populations, individuals with limited formal education, and

informal sector workers. This requires moving beyond formal institutions and leveraging community-based strategies, including trusted informal networks and the use of local languages. Developing simplified, visual materials will help bridge literacy barriers and enhance accessibility. In addition, communication must evolve from merely announcing the existence of the VAPP Law to providing practical, actionable knowledge. Citizens need to understand the specific protections the law offers, how to identify violations, and where and how to access support services. Interactive formats—such as dialogue sessions, community forums, and participatory media—should replace passive, one-way information dissemination to foster deeper engagement and long-term impact.

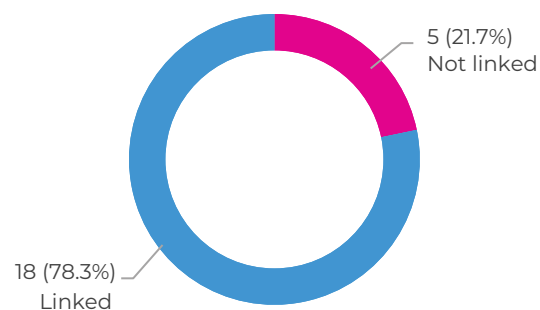
Enforcement Systems



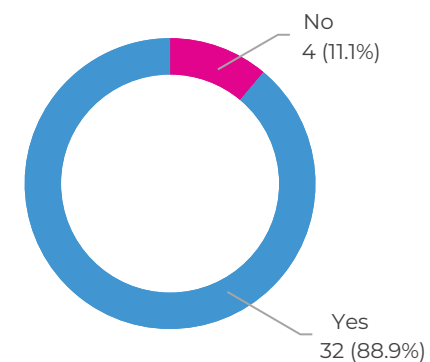
Sex Offenders' Register in states



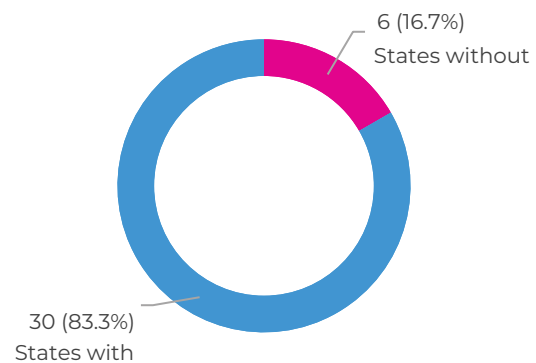
Sex Offenders' Register linked to a GBV database



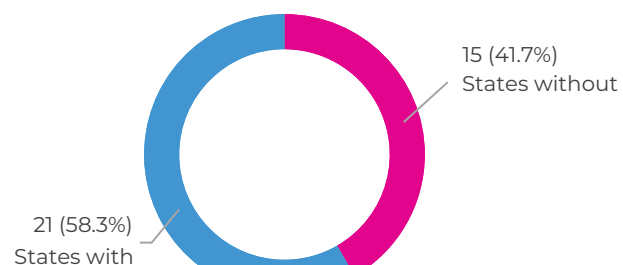
Courts Authorized to Issue Protection Orders



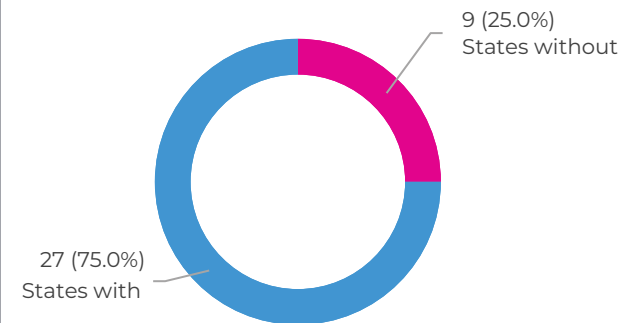
Mandatory GBV reporting by professionals in states



Penalties for failure to report GBV cases under the VAPP Law



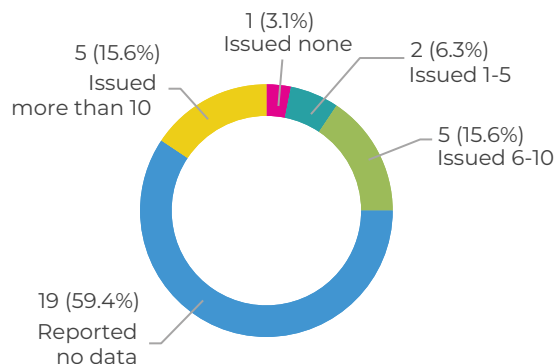
Standardized reporting and referral protocols for GBV cases



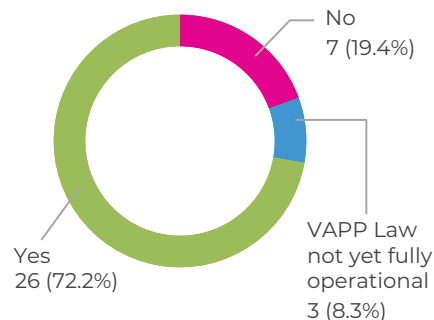
Enforcement Systems



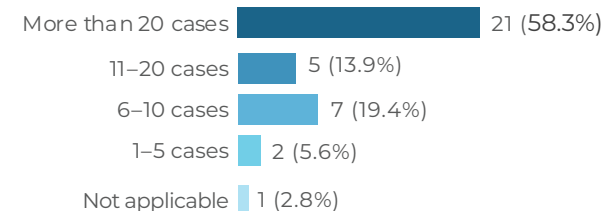
Number of Protection Orders issued in states in the past 12 months



Survivors received compensation or restitution under the VAPP Law in the past year?

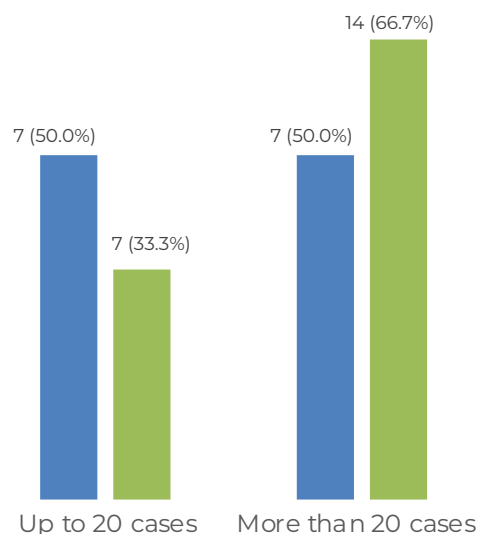


Number of GBV prosecutions using the VAPP Law in states in the past year



Correlation between non-reporting penalties and GBV prosecution rates across states

■ No penalties ■ Penalties exist



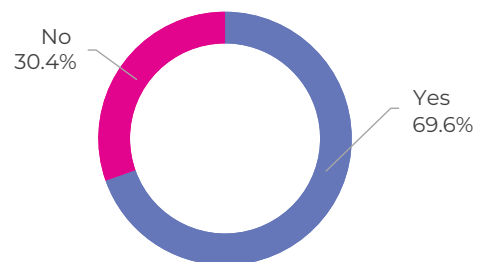
Enforcing VAPP: Institutional Progress and Gaps


Implementation of the VAPP Law reveals progress, yet uneven institutional commitment persists. Twenty-three of the 35 surveyed states and the FCT have established sex offenders' registers, with 18 linked to GBV tracking systems—advancing coordinated enforcement. However, five states (Borno, Nasarawa, Ogun, Osun, Rivers) operate these tools in isolation, weakening their effectiveness. Courts in 32 states are empowered to issue Protection Orders, but Borno, Edo, Sokoto, and Taraba have not adopted this provision. Notably, 19 states could not report how many orders were issued in the past year, indicating tracking deficiencies.

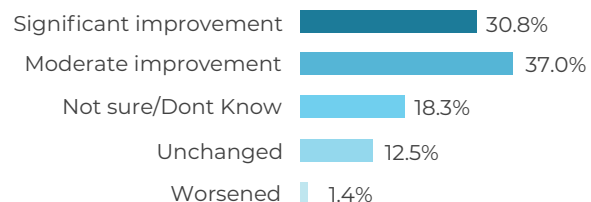
While 27 states have standardized GBV reporting protocols, nine—including Bayelsa, Borno, and Rivers—do not. Legal aid is available in all but Bayelsa. However, only 26 states reported any survivor compensation, and just 21 recorded more than 20 VAPP prosecutions last year. Mandatory GBV reporting by professionals is in place in 30 states and the FCT. In contrast, Bauchi, Bayelsa, Cross River, Enugu, and Kaduna lack such mandates, and 15 states impose no penalties for non-reporting, limiting accountability. More so, states with penalties for non-reporting show stronger enforcement: 67% recorded over 20 prosecutions, compared to 50% where no penalties exist. This pattern affirms the role of enforceable reporting mechanisms in driving effective implementation.

Enforcement Systems

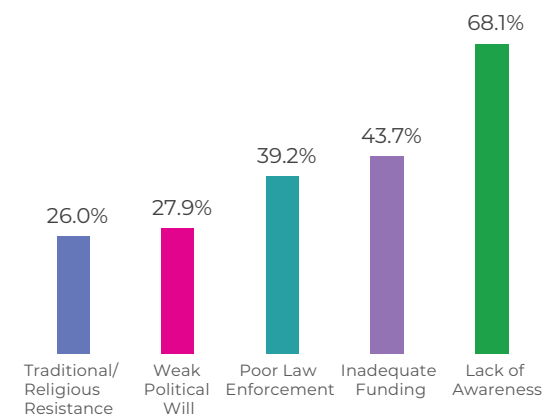
 Has GBV response improved since the VAPP Law was adopted in your state?



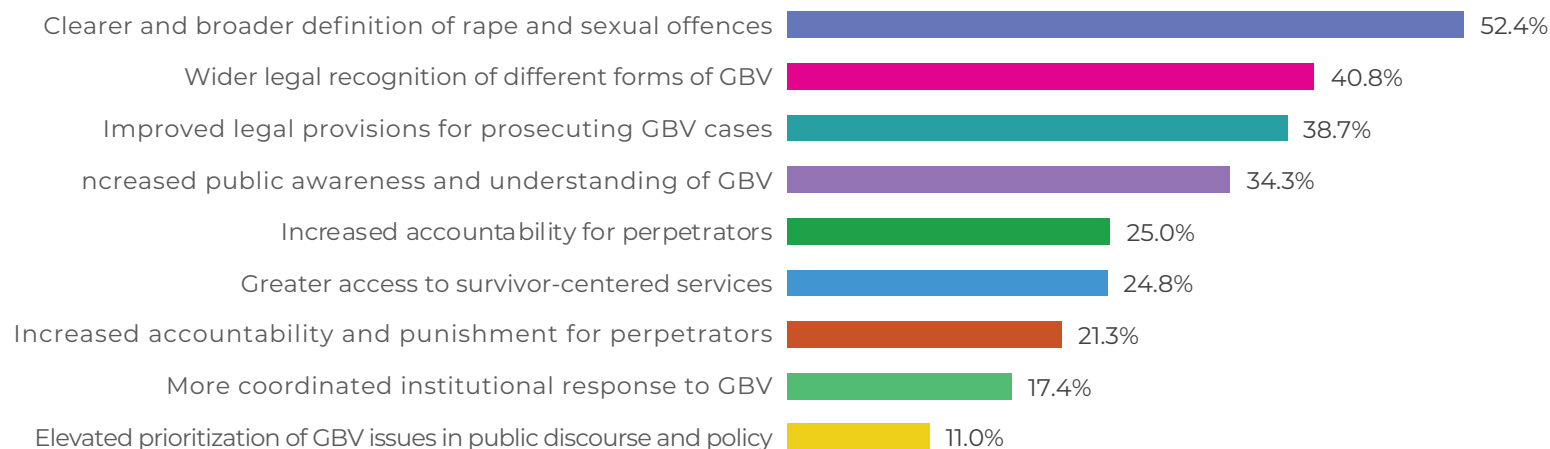
 Has GBV survivors' access to justice improved since the VAPP Law was passed?



 What are the major barriers to implementing the VAPP Law in your state?



 What have been the key impacts of the VAPP Law in your state and nationwide?



Citizen Perception: Measuring the Impact of VAPP Law

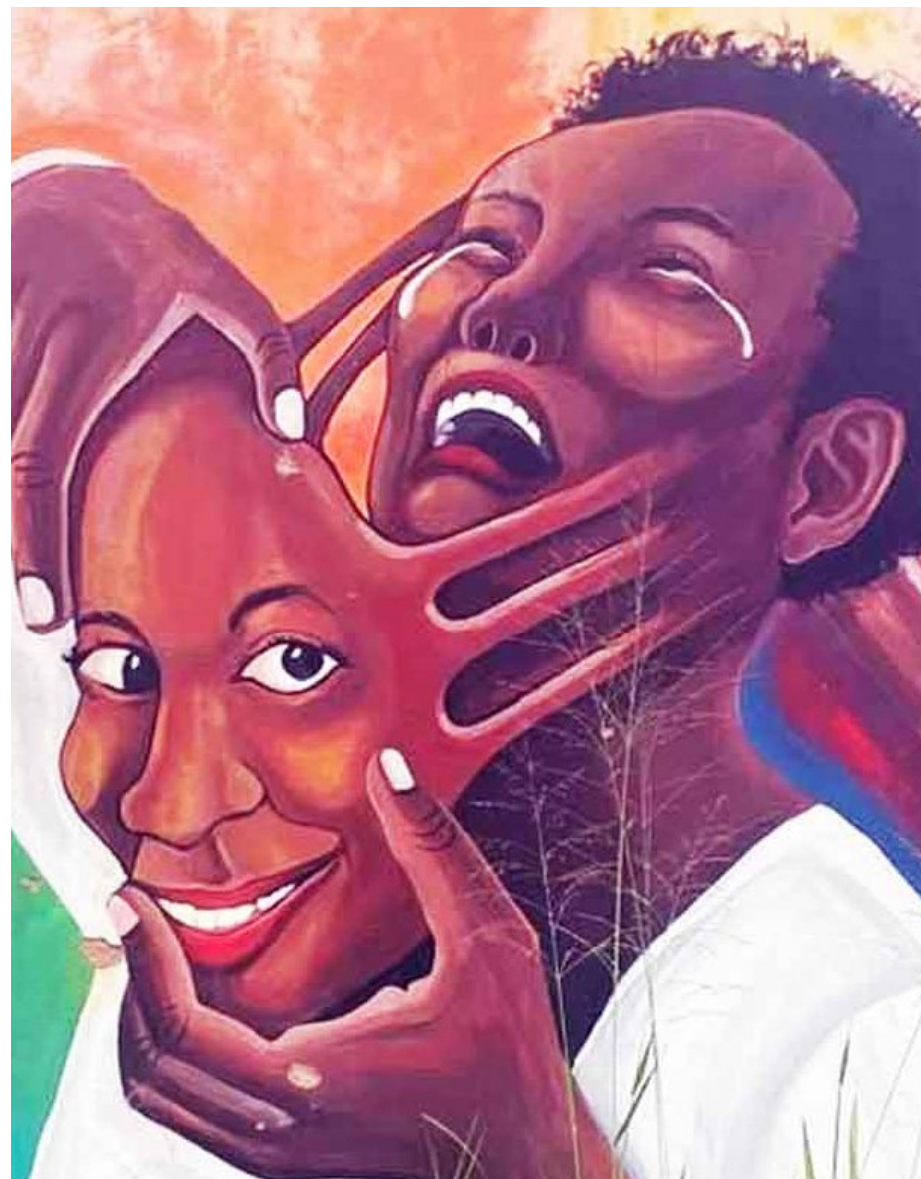
Among citizens aware of the VAPP Law, a majority—69.6%—believe their state's response to gender-based violence has improved since its adoption, suggesting that domestication is beginning to yield tangible benefits. This perception extends to access to justice, with 30.8% reporting significant improvements and another 37.0% noting moderate gains. Yet, the presence of dissenting views—12.5% seeing no change and 1.4% perceiving a decline—signals that implementation remains uneven across contexts.

When asked about the Law's most significant contributions, citizens pointed first to its expansive and explicit definitions of violence, particularly sexual offences (52.4%), followed by greater legal recognition of varied GBV forms (40.8%) and stronger provisions for prosecution (38.7%). These legal clarifications appear to be strengthening public understanding, with 34.3% reporting increased awareness of GBV issues. Still, 11.0% perceive no significant change, highlighting persistent gaps in outreach and legal literacy.


These gaps are reinforced by perceptions of the barriers to implementation. Lack of awareness emerged as the most pressing obstacle (68.1%), closely followed by inadequate funding (43.7%) and poor enforcement (39.2%). Although less frequently cited, resistance from traditional and religious leaders (26.0%) and limited political will (27.9%) represent enduring structural challenges. Taken together, these insights suggest that while the VAPP Law has made measurable strides in reshaping the GBV response landscape, its potential remains constrained by fragmented implementation and insufficient public engagement.

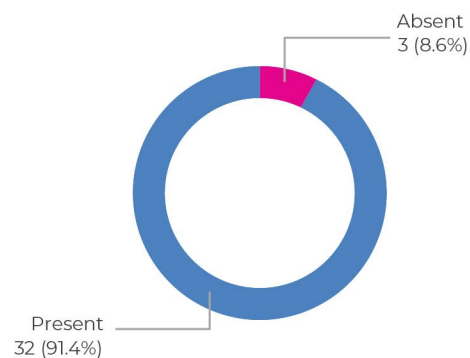
Recommendations:

States should mandate GBV reporting and enforce penalties for non-compliance to strengthen prosecution efforts. The 15 states currently without such enforcement must introduce sanctions for professionals to enhance accountability. Likewise, the nine states lacking standardized reporting protocols should adopt uniform systems to ensure consistency and improve data quality. To close critical data gaps, governments must establish unified tracking systems. With 19 states unable to provide protection order records and 18 lacking integrated sex offender registries, centralized data management is essential for effective monitoring, evaluation, and policy development.

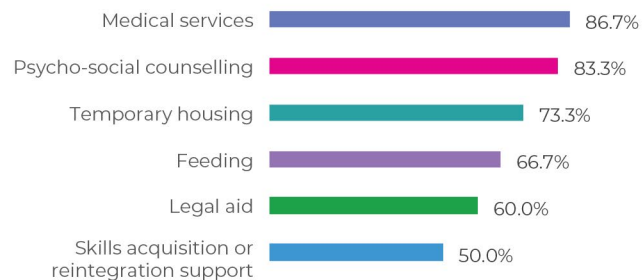


Support Services

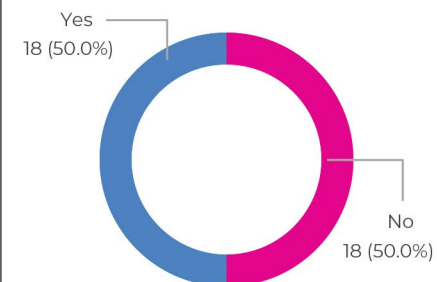
 **Functional SARC and/or shelters in states**



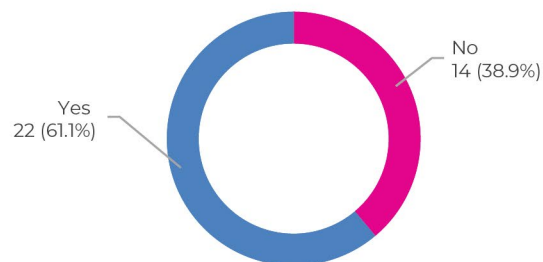
 **Types of Support Provided by SARCs/Shelters Across States**



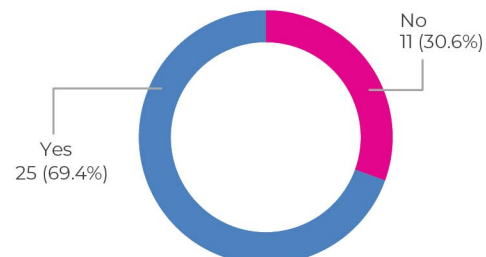
 **Is free medical care for GBV survivors mandated?**



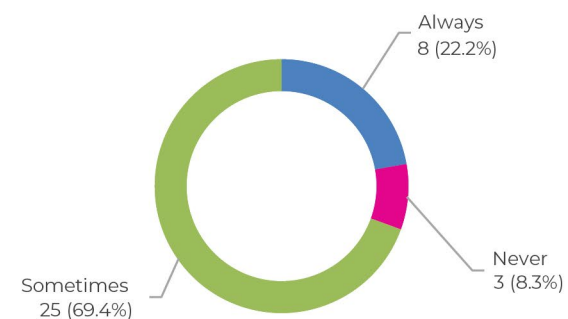
 **Are health facilities actually providing free GBV care?**



 **Do cost-related barriers limit survivors' access to medical or forensic services?**

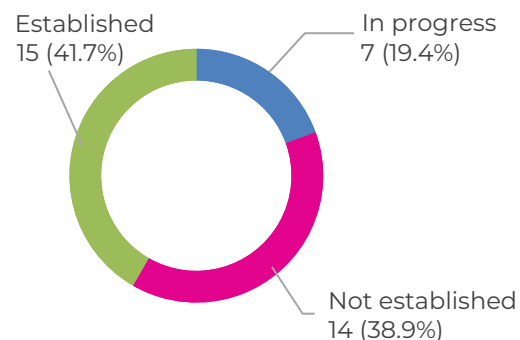


 **Do survivors routinely access medical reports and forensic services for prosecution purposes?**

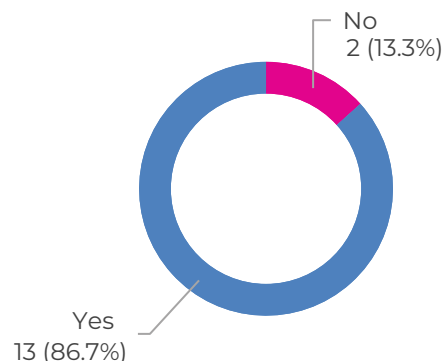


Support Services

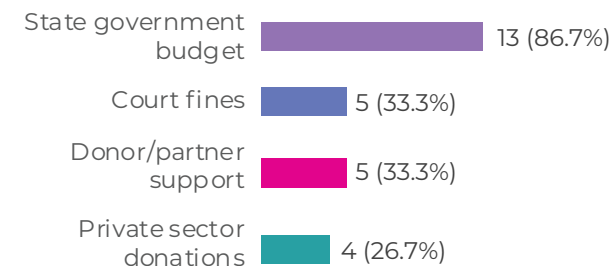
 Status of Victims Support Fund in states



 Victim support fund currently receiving and disbursing resources?



 Primary funding sources for the Victims Support Fund



Institutional Efforts: Government-Led Support for Survivors

Among the 35 surveyed states and the FCT, 35 have established government-funded Sexual Assault Referral Centres (SARCs), shelters, or temporary homes for survivors, with 32 fully operational. Nonetheless, only Abia state lack SARCs entirely, while Benue, Kogi and Taraba states maintain facilities that are non-functional, highlighting persistent regional disparities in survivor support infrastructure.

Medical services are the most commonly available form of assistance, offered in 28 states, closely followed by psychosocial counselling in 28 states. This indicates a governmental emphasis on addressing immediate health and mental well-being needs. Provision of basic necessities, such as temporary housing (22 states) and feeding services (20 states), is relatively widespread; however, long-term recovery support remains underdeveloped. Legal aid is accessible in only 18 states, and reintegration programs like skills acquisition exist in just 15 states, underscoring significant gaps in facilitating survivors' economic empowerment and sustainable recovery.

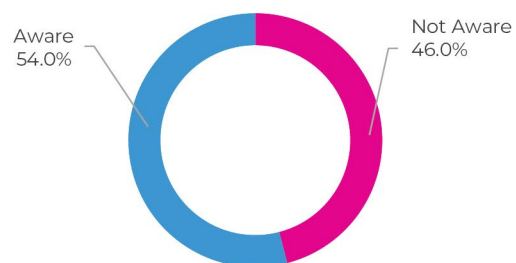
The legal mandate for free medical care is evenly divided, with 17 states and the FCT requiring it by law and 18 states lacking such legislation. Yet, 22 states provide free GBV-related medical services, suggesting some governments extend care beyond formal legal obligations. Despite this, 25 states report financial barriers for survivors, while only 11 states indicate no such obstacles. This disconnect implies that free services may be limited in scope, accessibility, or survivor awareness, perpetuating economic barriers to care.

Access to medical reports and forensic services—crucial for successful prosecution—is highly inconsistent. Only eight states report survivors “always” having access, whereas 25 states provide these services sporadically, and three states report no access at all. This significant shortfall undermines the prosecutorial objectives of the VAPP Law, jeopardizing justice outcomes.

Support Services



Are you aware of SARCs, shelters, or other GBV support services in your state?



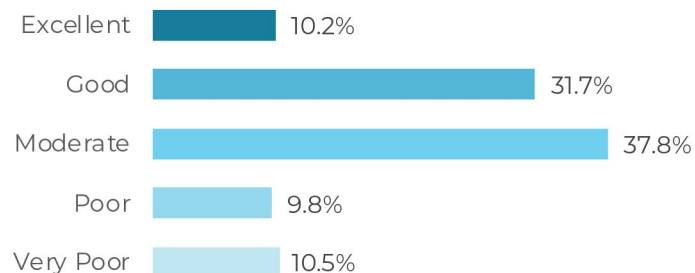
Finally, the establishment of victims' support fund remains uneven: 15 states have operational funds, seven are in the process of establishing them, and 14 have no framework in place. Of those operational, 13 actively disburse resources, but their financial sustainability is precarious, relying predominantly on state budgets with minimal contributions from private or donor sources. This highlights an urgent need for diversified and sustainable funding mechanisms to ensure continuous support for survivors.

Public Experience: Citizen Awareness and Perception of GBV Support

Despite the establishment of SARCs, shelters, or protective services in 30 states and the FCT, public awareness of these resources remains limited. Only 54.0% of respondents report being aware of available support services, while 46.0% indicate no knowledge of their existence. This substantial awareness gap suggests that even in states with operational facilities, outreach and public education efforts are insufficient. Perceptions of service quality also vary. While 37.8% of respondents rated survivor-centered services as moderate and 31.8% as good—implying that a significant number of survivors find services reasonably responsive—concerns persist. A combined 20.3% rated service availability as poor or very poor. These findings point to disparities in service delivery and indicate the need for both improved public communication strategies and a more consistent quality of survivor support across states.

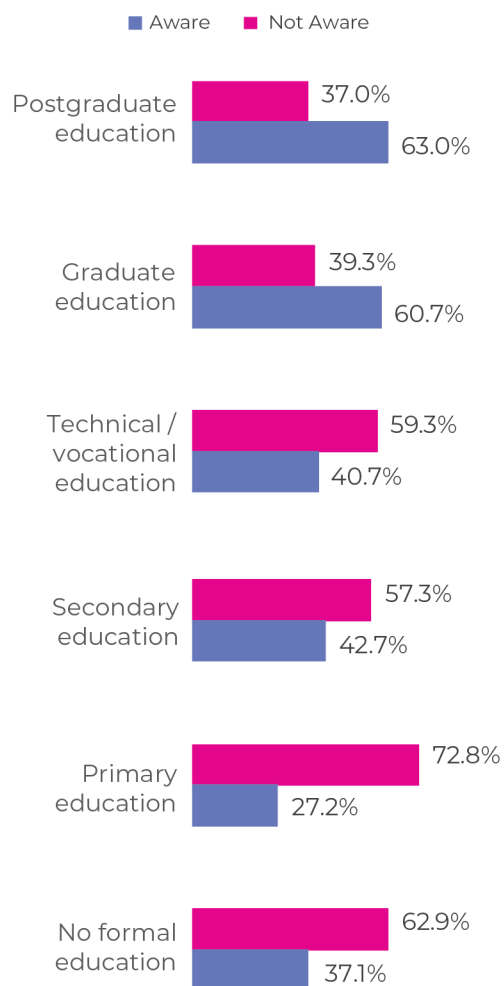


How would you rate the availability of survivor-centered services in your state?

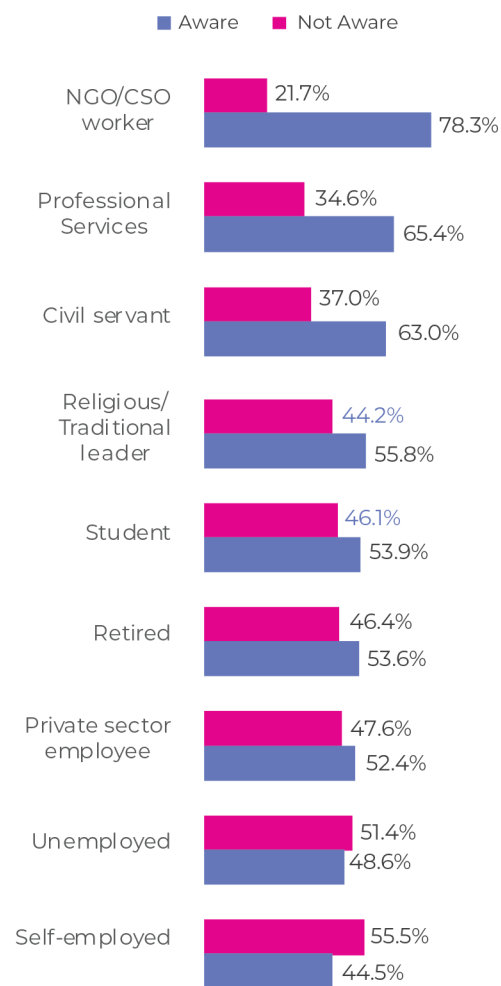


Support Services

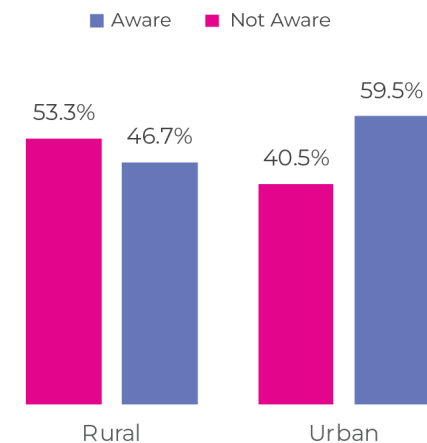
 Educational level and awareness of SARCs



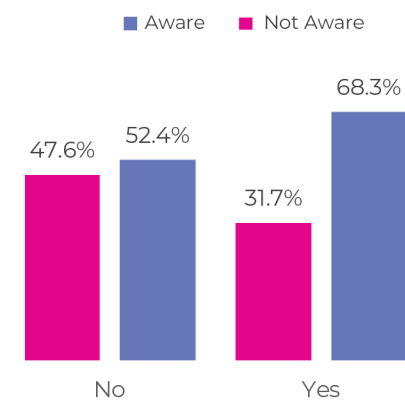
 Awareness of SARCs across different occupations



 Awareness of SARCs in urban vs. rural areas



 Awareness of SARCs across disability status



Unequal Access: Social and Demographic Patterns in Service Awareness

Awareness of SARCs and related support services is unevenly distributed across social and demographic groups, reflecting persistent structural inequalities in access to information and support. Individuals with higher education levels report significantly greater awareness: 63.0% among those with postgraduate degrees and 60.7% among tertiary-educated respondents. In stark contrast, awareness falls to 37.1% among individuals with no formal education and just 27.2% for those with only primary education, exposing a critical knowledge gap among the most educationally disadvantaged.

Professional affiliation also shapes awareness. NGO and civil society workers exhibit the highest awareness (78.3%), followed by professionals (65.4%) and civil servants (63.0%). Conversely, self-employed individuals report the lowest levels (44.5%), suggesting that institutional affiliation plays a key role in information dissemination. Geographic location further compounds these disparities. Urban residents (59.5%) are more likely to be informed about SARCs than rural residents (46.7%), likely due to proximity to services and better access to media and advocacy campaigns. Notably, persons with disabilities demonstrate higher awareness (68.3%) compared to those without disabilities (52.4%), potentially reflecting targeted outreach or more frequent interaction with formal support networks. These patterns highlight the urgent need for inclusive, grassroots-level outreach strategies that address the informational divide across education, occupation, geography, and ability status.

Recommendations

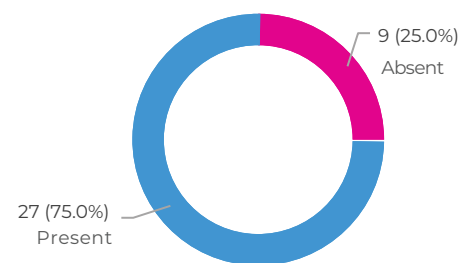
To address the 46% of citizens unaware of SARCs and shelters, states should implement localized awareness campaigns—targeting rural areas through community outreach, traditional and digital media, and trusted local figures to bridge access gaps. Reintegration support must go beyond immediate care, with expanded legal aid, economic empowerment, and skills acquisition initiatives that enable survivors to rebuild their lives with dignity. To strengthen financial sustainability, states must reduce overreliance on government budgets—13 of 15 victims' support funds depend solely on them—by leveraging public-private partnerships, donor funding, and allocating a portion of court fines to survivor support services.



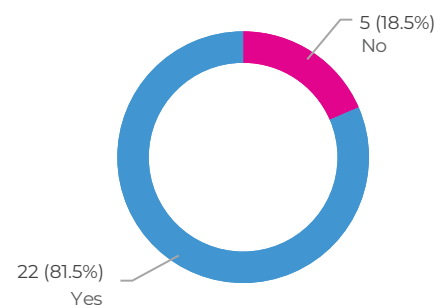
Coordination Mechanisms



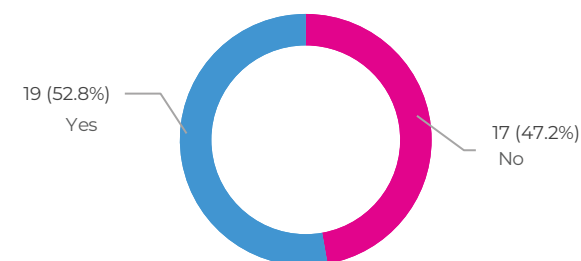
Designated regulatory body for VAPP Law enforcement



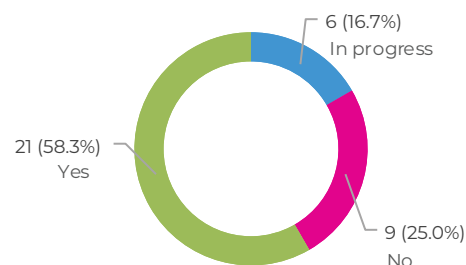
Appointment of a domestic violence prevention Coordinator by state agencies



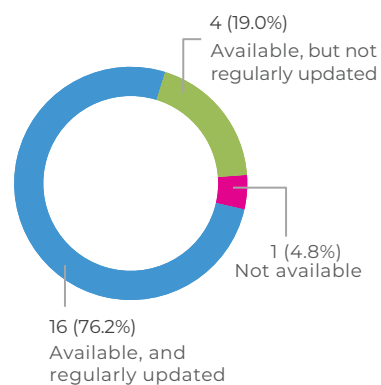
Deployment of Protection Officers across Area Councils/LGAs



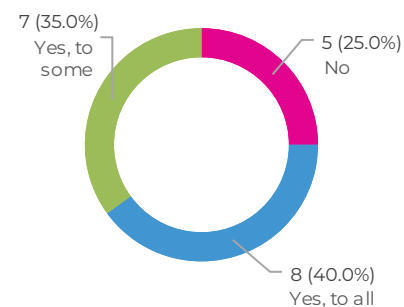
Established system for registering and accrediting service providers



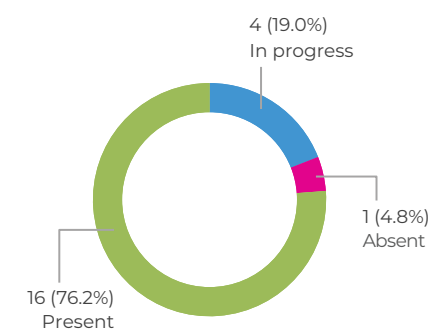
Availability and status of state-maintained register of accredited service providers



Circulation of service providers' register to relevant institutions



Operational guidelines for accredited service providers



Coordination Mechanism: Institutional Structures and Oversight

Across the 36 jurisdictions surveyed, 27 states have established regulatory bodies for VAPP Law enforcement, reflecting substantial institutional buy-in. However, the absence of formal enforcement structures in nine states undermines uniformity and weakens accountability. While 22 states have appointed a Coordinator to drive implementation, leadership gaps persist in five states, signaling inconsistent policy execution. Protection Officers—crucial for legal enforcement and survivor case management—have been appointed in only 19 states, leaving nearly half the country without this critical frontline support. On a more positive note, interagency collaboration is taking root, with 34 states reporting formal coordination mechanisms, although Borno and Kebbi remain outliers without structured frameworks.

Accreditation and Regulation of Service Providers

Out of 36 jurisdictions, 21 states have formal registration systems for GBV service providers, nine are in development, and nine lack any structured accreditation—undermining oversight and compromising service quality. Among those with systems, 16 regularly update their registers, but four do so inconsistently, and one has not updated at all. Coordination remains uneven: only eight states circulate provider registers to all relevant institutions, seven share them selectively, and five do not circulate them at all, weakening inter-agency collaboration. On service standardization, 16 states have developed operational guidelines, four are in progress, and one has yet to begin, reflecting fragmented efforts toward quality assurance.

Recommendations

States without designated enforcement bodies or Protection Officers should establish these structures to ensure consistent VAPP Law implementation and strengthen survivor access to legal protections. Accreditation frameworks must be instituted in the nine states lacking them to uphold service quality and regulatory oversight. To enhance coordination, states should ensure provider registers are regularly updated and disseminated to all enforcement and support agencies. Finally, the five states without operational guidelines should expedite the development of standardized protocols to ensure uniform and accountable service delivery.



PART 3

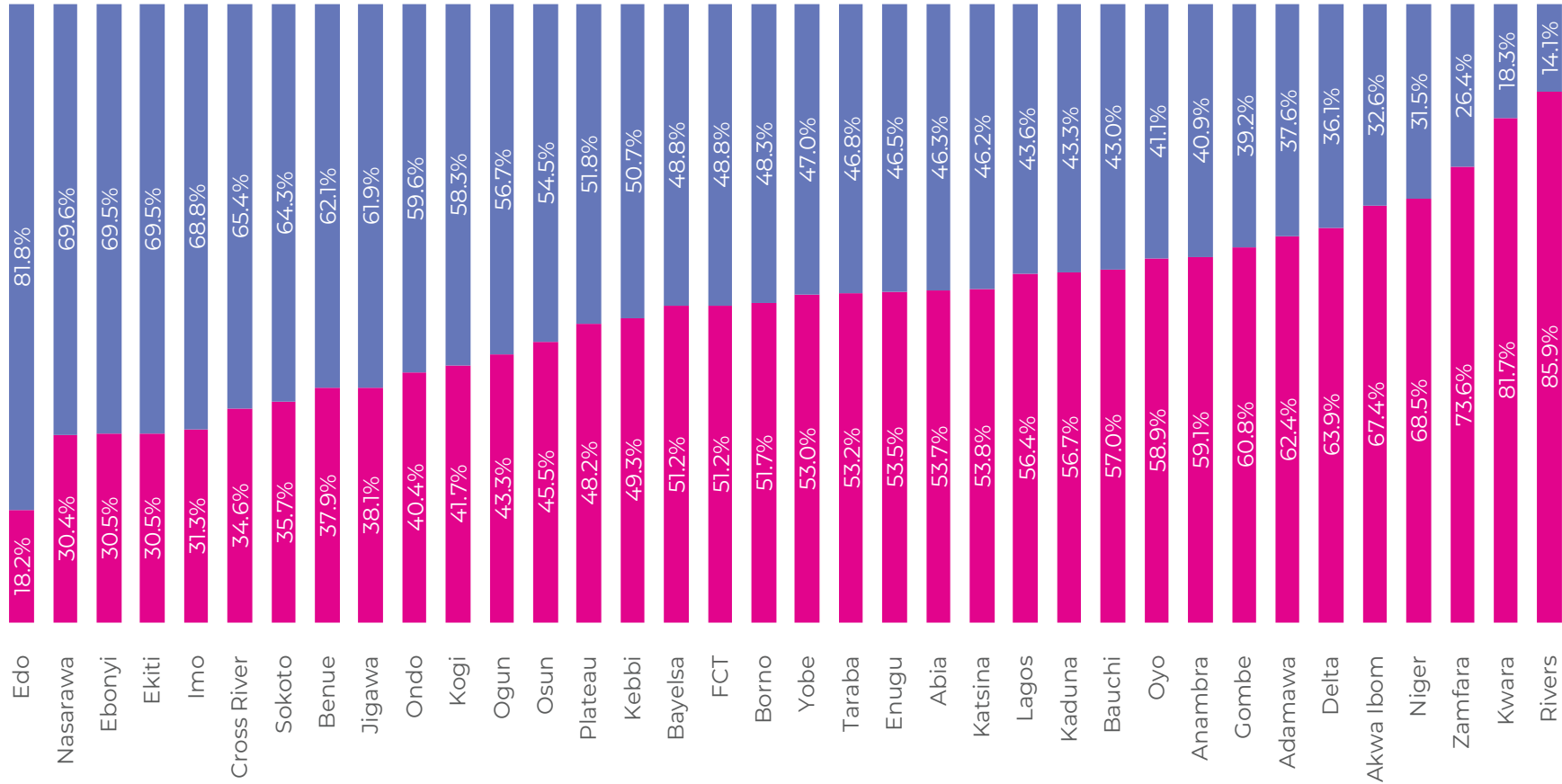
COMPARATIVE STATE ANALYSIS



Comparative State Analysis

Awareness of the VAPP Law across Nigeria's 35 states (excluding Kano) and the FCT

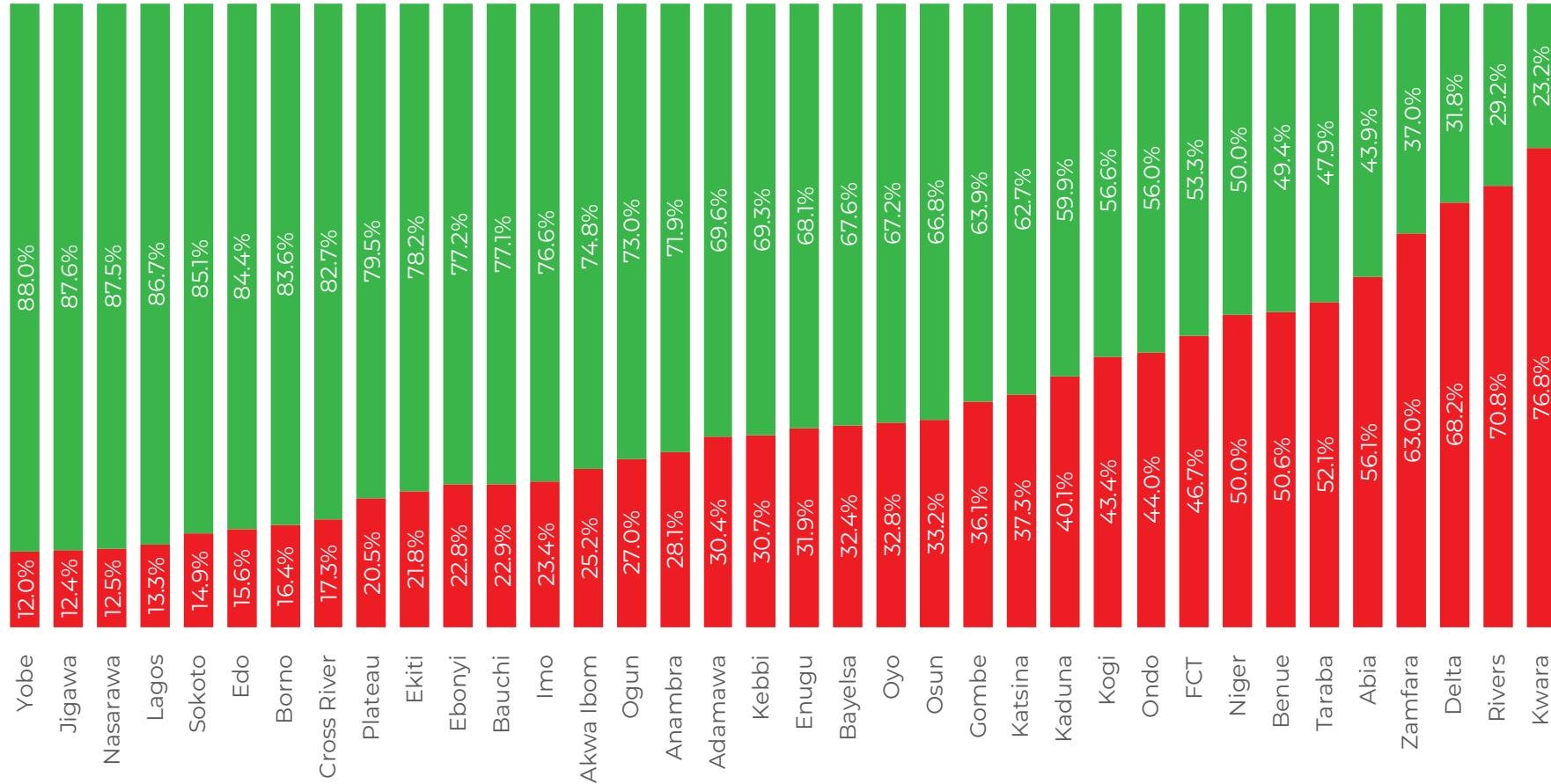
■ Heard of VAPP ■ Not heard of VAPP



Comparative State Analysis

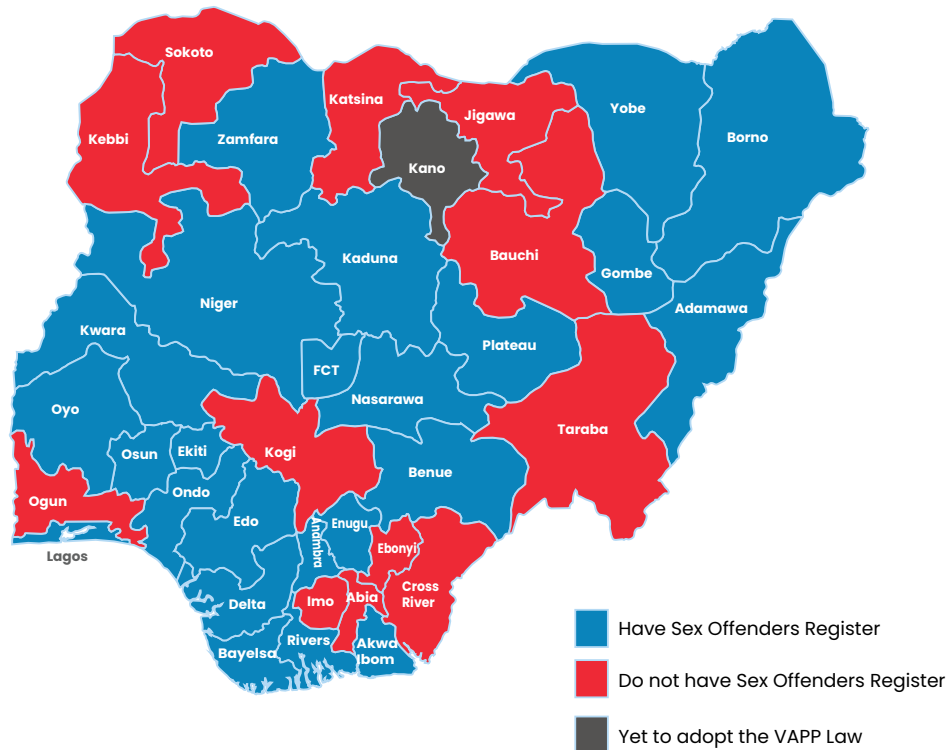
Public perception of overall response to GBV since the domestication of the VAPP Law across Nigeria's 35 states (excluding Kano) and the FCT

■ Improved ■ Not improved

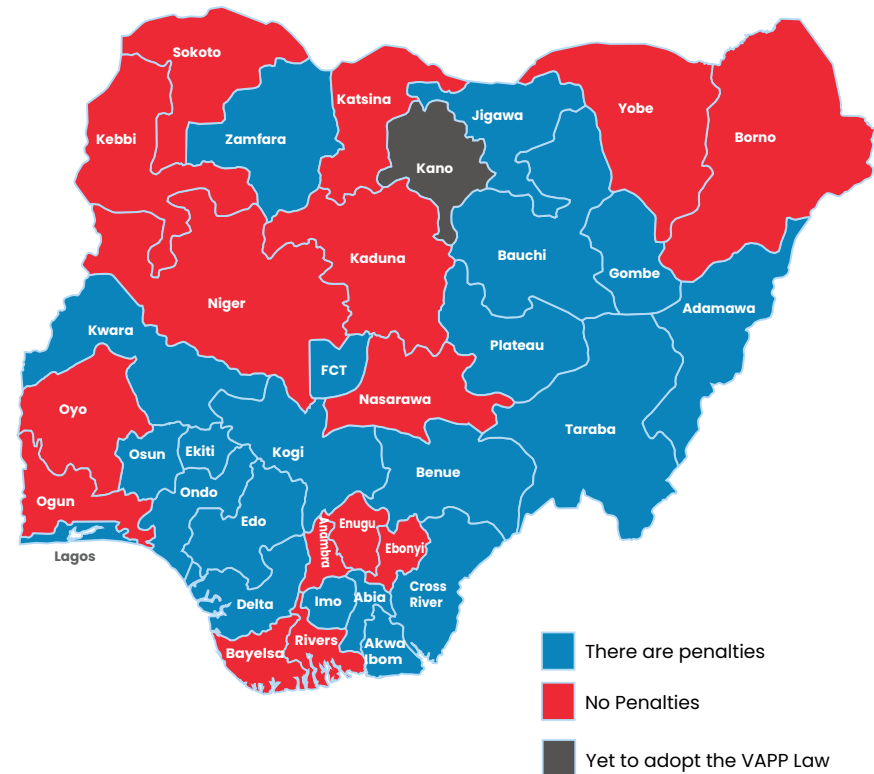


Comparative State Analysis

Implementation of Sex Offenders' Register across Nigeria

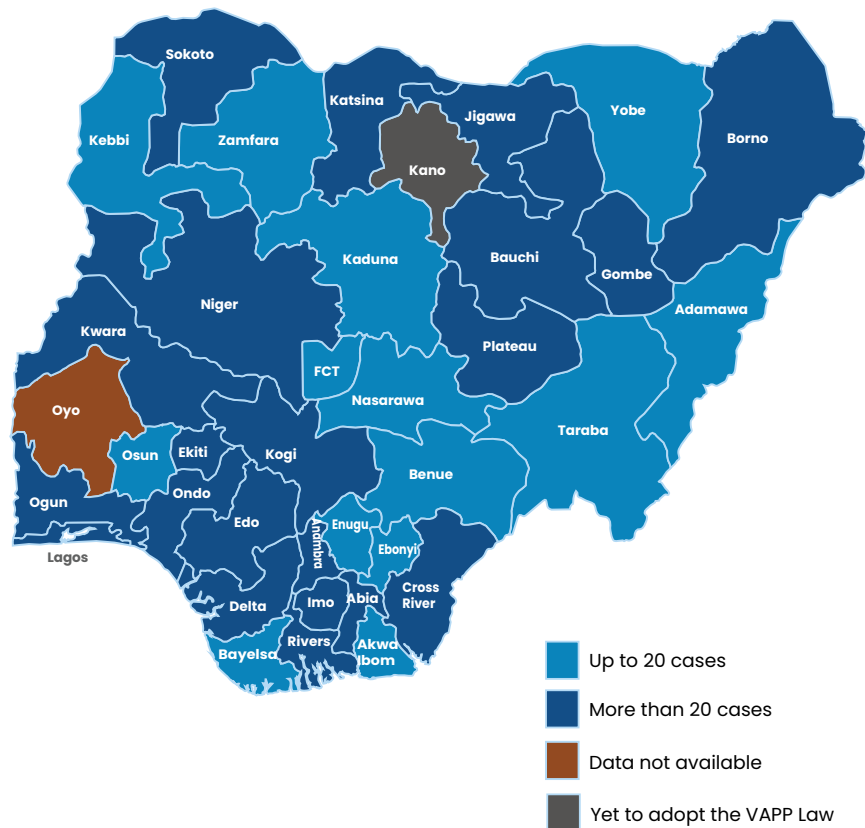


Implementation of non-reporting penalties for GBV Cases under the VAPP Law across Nigeria

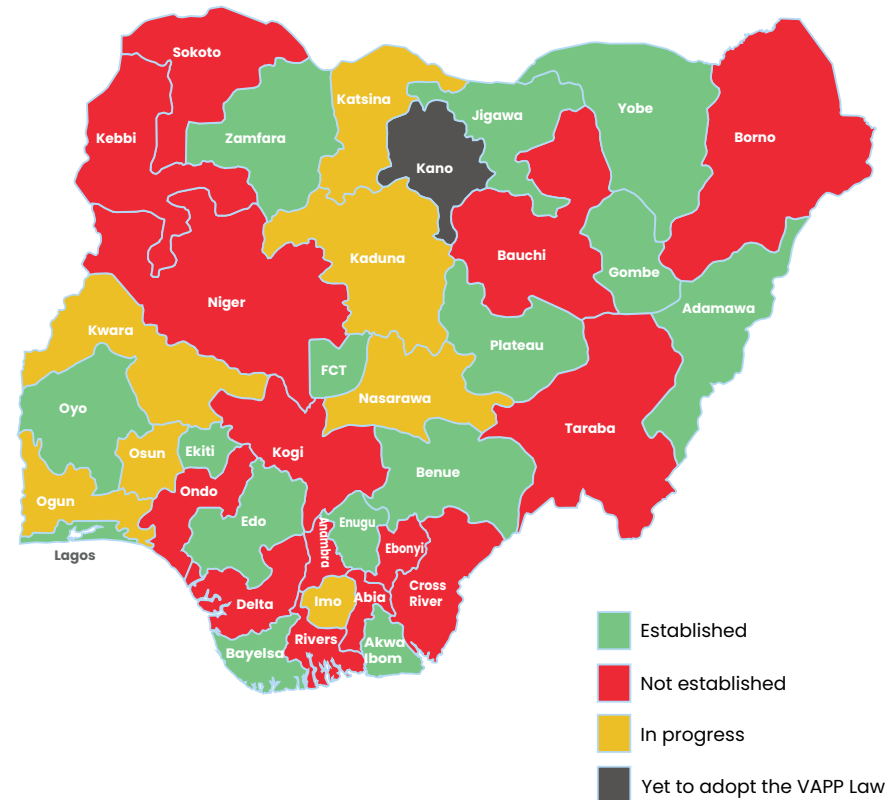


Comparative State Analysis

**GBV prosecutions under the VAPP Law:
Case distribution across Nigeria**



**Implementation of Victims Support Fund
across Nigeria**



PART 4

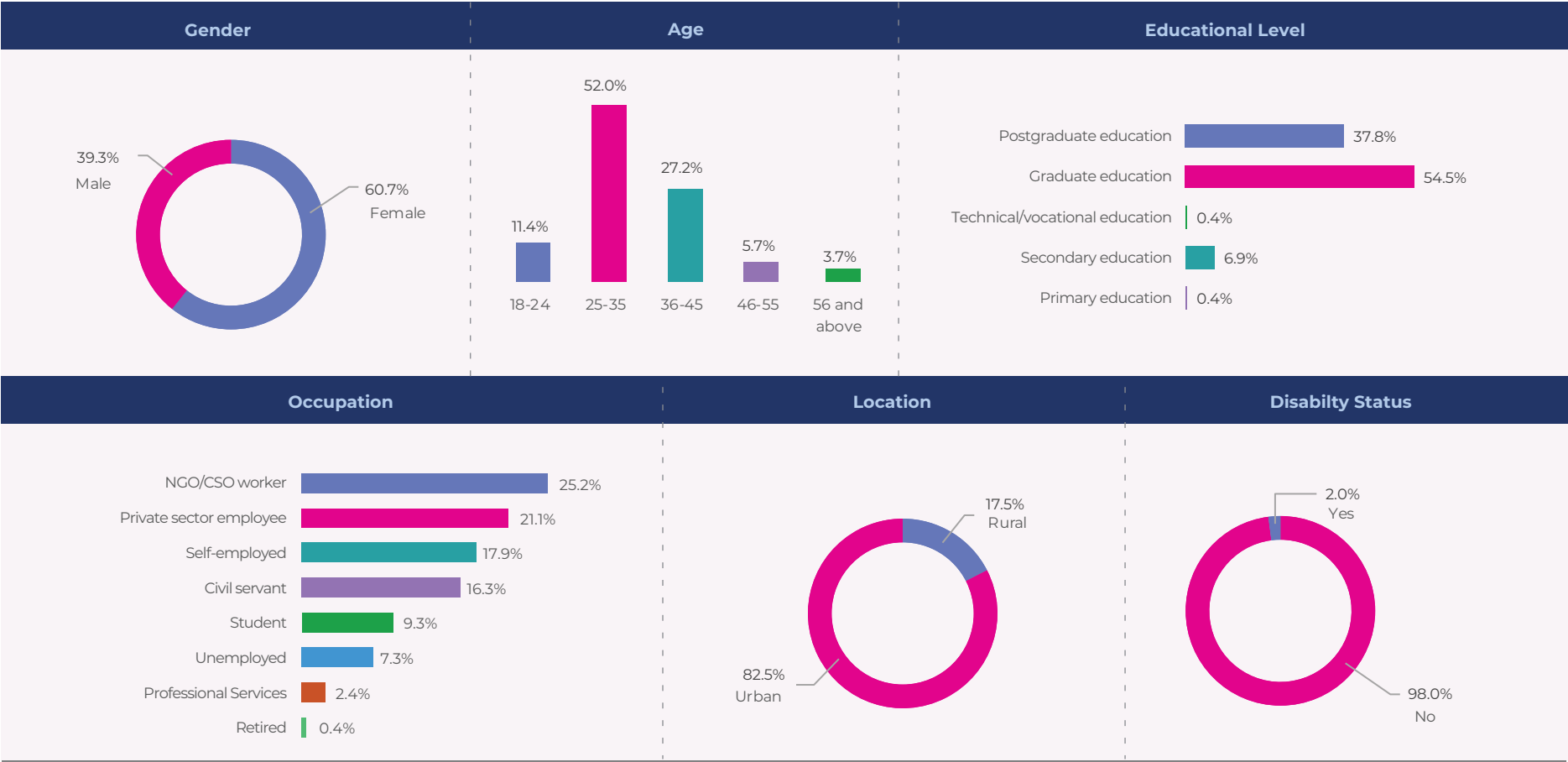
STATE-BY-STATE REPORT





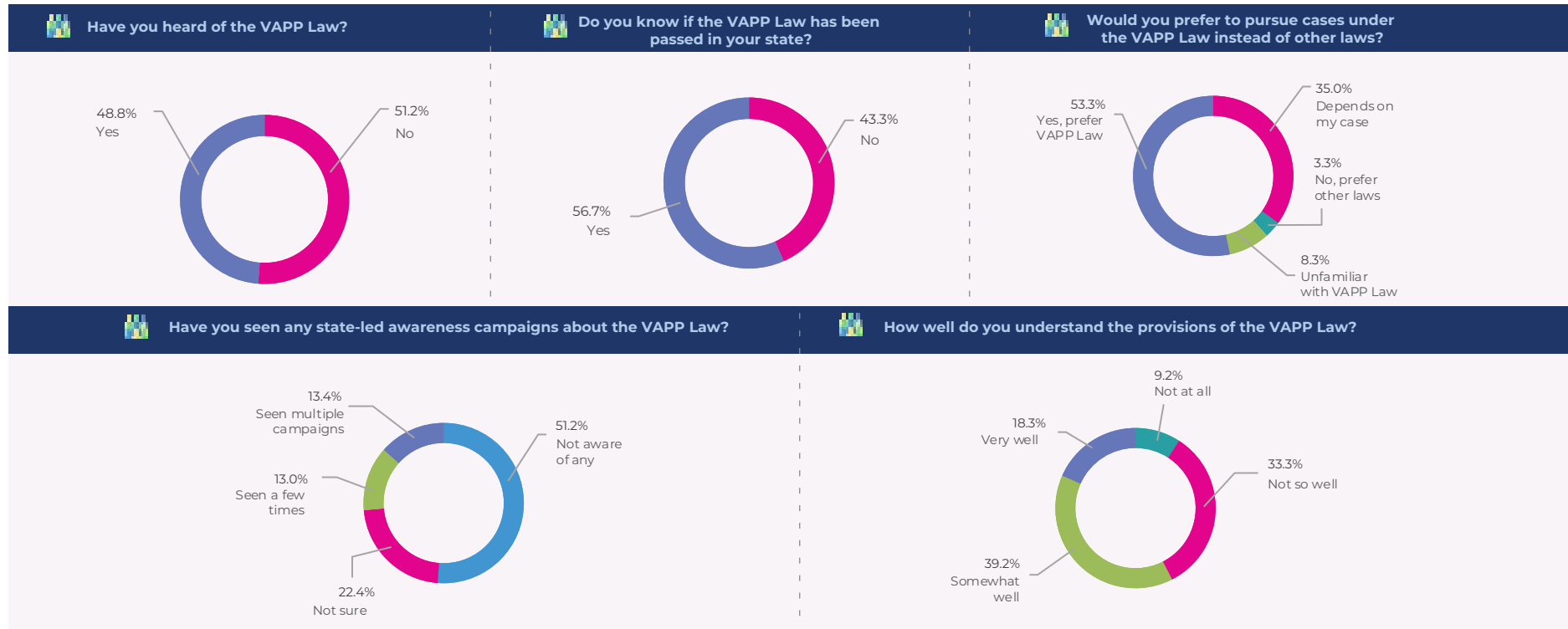
**FEDERAL CAPITAL
TERRITORY**

Federal Capital Territory | Respondent Demographics (n = 246)



The respondent profile reflects a highly educated, urban sample, with 92.3% having attained graduate education. A significant majority (82.5%) reside in urban areas. The sample is predominantly female (60.7%), with young adults aged 25-35 years comprising the largest age group (52.0%). Occupationally, NGO/CSO workers (25.2%) and private sector employees (21.1%) are most represented, followed by self-employed individuals (17.9%) and civil servants (16.3%). Persons with disabilities make up 2% of the sample.

Federal Capital Territory | Public Awareness



FINDINGS

- FCT has conducted awareness campaigns on the VAPP Act in the past year, targeting a broad range of groups: schools, religious institutions, traditional rulers, market associations, law enforcement, and the public.
- However, only 48.8% of FCT residents have heard of the VAPP Act.
- 51.2% report never seeing any state-led awareness campaigns.
- Just 18.3% of those who have heard of the VAPP Act, understand its provisions "very well".

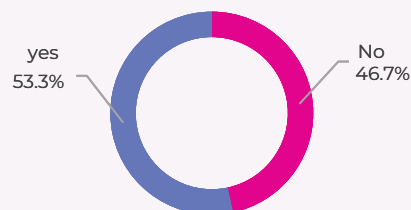
RECOMMENDATIONS

- Expand public awareness campaigns to Area Councils and rural communities.
- Strengthen partnerships with traditional leaders and religious institutions to enhance culturally sensitive and community-specific education efforts.
- Develop simplified, multilingual information materials to improve legal literacy and accessibility.

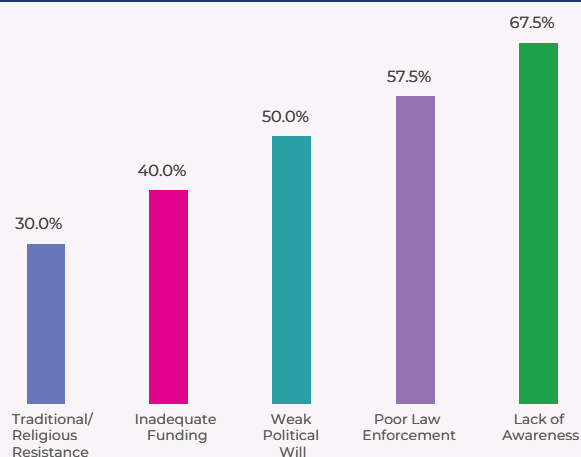
Federal Capital Territory | Enforcement Systems



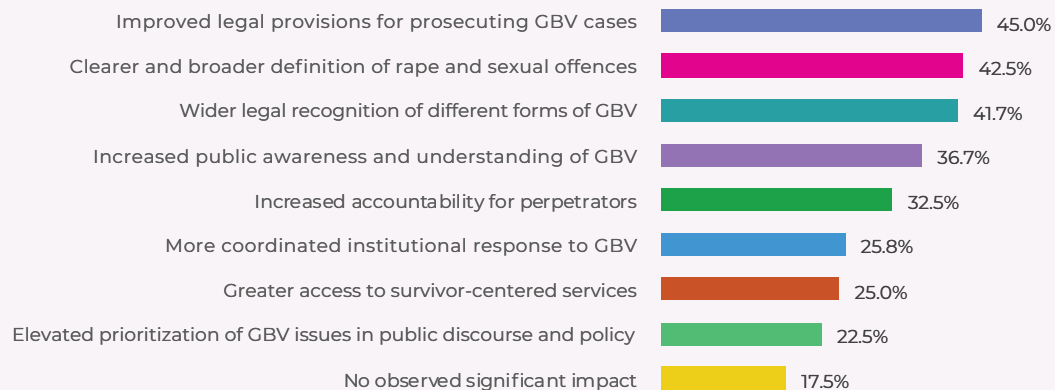
Since the VAPP Law was domesticated in your state, do you think the state's overall response to gender-based violence (GBV) has improved?



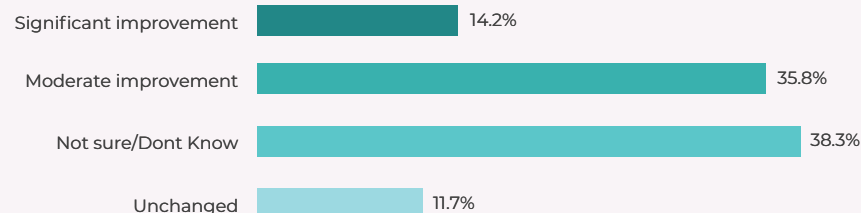
Which of the following do you think are the major barriers to implementing the VAPP Law in your state?



In your opinion, what has been the key impacts of the VAPP Law in your state and across Nigeria?




Since the VAPP Law was passed, do you think GBV survivors in your state have experienced better access to justice?



FINDINGS

- The primary success of the VAPP Act in the FCT lies in strengthening the legal framework for GBV cases. Institutional and awareness impacts show moderate recognition.
- Despite some recognized progress, nearly half of FCT residents (46.7%) report no improvement in the territory's overall response to GBV since the passage of the VAPP Act.
- Access to justice under the VAPP Act remains uncertain: 38.3% of respondents are unsure of its impact, while only 14.2% report significant improvement.
- Systemic challenges persist, including lack of awareness (67.5%), poor law enforcement (57.5%) and weak political will (50.0%).

Federal Capital Territory | Enforcement Systems

		Status
	Sex Offenders' Register <ul style="list-style-type: none">• Register established and functional• Linked to national GBV database• Updated quarterly• Accessible to the public	Fully Operational
	Protection Orders <ul style="list-style-type: none">• Courts authorized to issue orders• Number of orders issued in past 12 months: 1-5• Police enforcement: Occasional	
	Mandatory Reporting <ul style="list-style-type: none">• VAPP Law mandates reporting• Penalties exist for non-compliance• Standardized protocols in place	Fully Operational
	Legal Remedies <ul style="list-style-type: none">• Number of survivors who received compensation in the past year: None• Number of cases prosecuted under VAPP Act in the past 12 months: 6-10	Available but underutilized

RECOMMENDATIONS

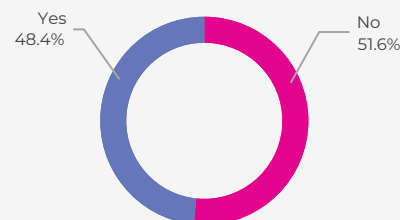
- Expand specialized GBV prosecution units and courts to enhance case handling.
- Provide continuous targeted training for law enforcement officers to improve enforcement efforts.
- Survivor-centered legal aid should be expanded through increased pro bono funding and formalized compensation mechanisms to ensure effective redress.



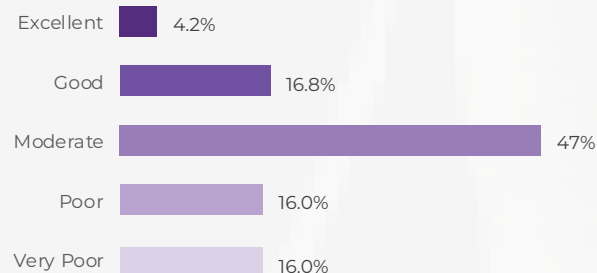
Federal Capital Territory | Support Service



Are you aware of any Sexual Assault Referral Centres (SARCs), shelters, or other protective services for GBV survivors in your state?



How would you rate the availability of survivor-centered services



Status

SARCs and Shelters



- Number of government-funded SARCs/Shelters: 2
- Actively receiving survivors
- Services offered: Psychosocial counselling, medical care

Functional but Limited

Free Medical Assistance



- Government facilities NOT mandated to provide free care
- Cost barriers persist for survivors
- Medical reports and forensic services are sometimes accessed for prosecution

Unavailable

Victims Support Fund



- Funding sources: State budget, donor funding and private sector contributions
- Services supported: Legal aid, medical care, psychosocial support, rehabilitation.

Established and Operational

RECOMMENDATIONS

- Expand the number of SARCs and shelters across the FCT, with at least one well-resourced facility per Area Council.
- Government health facilities should be mandated to provide free medical care to GBV survivors, addressing cost-related barriers.
- Strengthen coordination between SARCs and legal aid providers to ensure consistent access to forensic services.

		Status
	Regulatory Body <ul style="list-style-type: none">Formally designated body: National Agency for the Prohibition of Trafficking in Persons (NAPTIP)Coordinator appointed for domestic violence preventionAnnual report: Submitted to government and National Bureau of StatisticsCoordination structures: High-Level Multi-Agency Task Team (Hi-MAT) and the Service Providers Accountability Resource Committee (SPARC)Protection Officers: Appointed in all 6 Area Councils	Established and Operational
	Service Provider Registration <ul style="list-style-type: none">State-maintained register regularly updatedRegister partially circulated key institutions such as police stations and courtsOperational guidelines developed for accredited providers.	

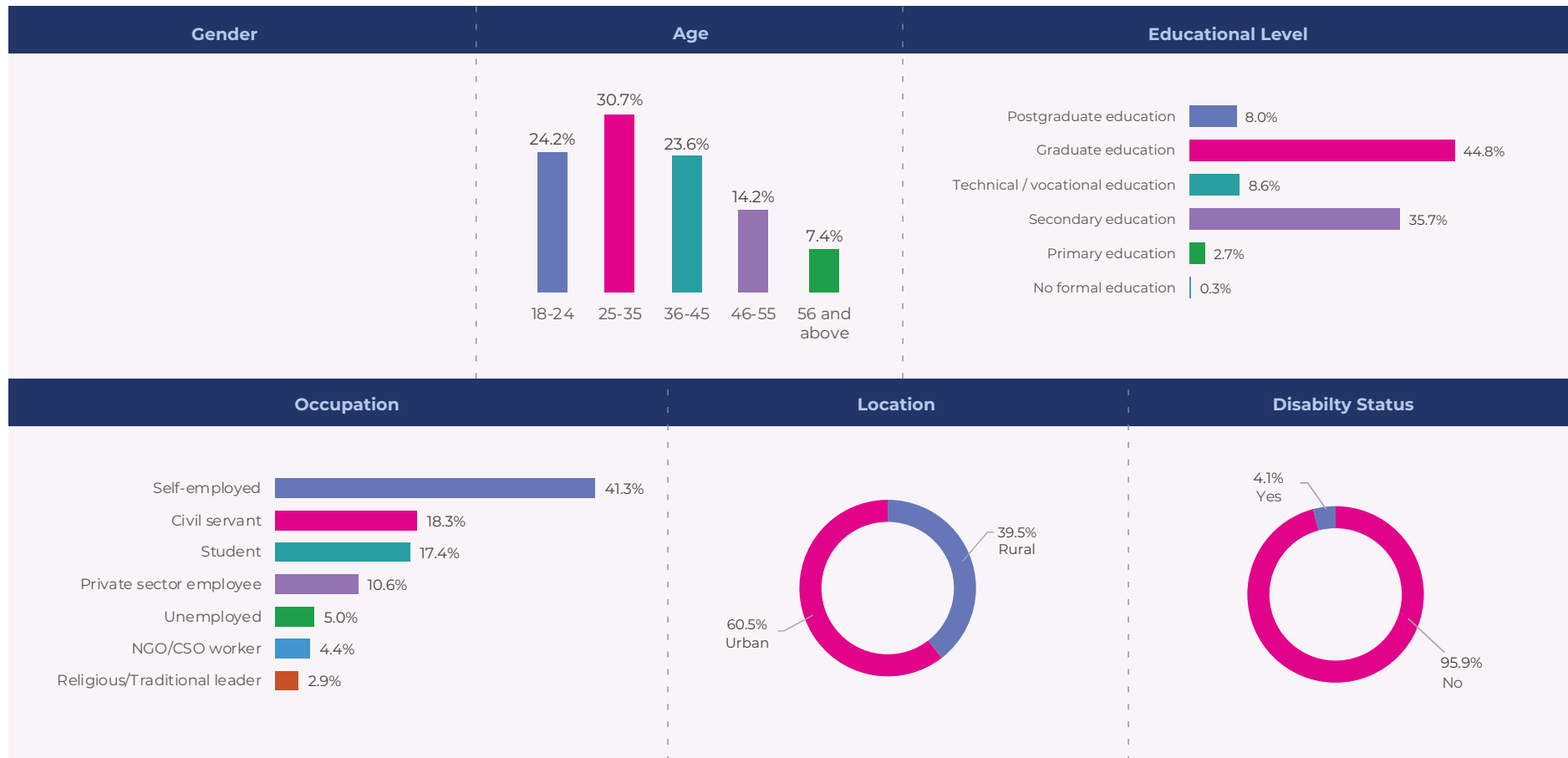
RECOMMENDATIONS
<ul style="list-style-type: none">NAPTIP should strengthen cross-sectoral collaboration through structured engagement with HiMAT, SPARC members, and other key actors to enhance coordination and service delivery.Provide continuous training for all key actors including personnel from health institutions, law enforcement agencies, the judiciary, families, religious and traditional leaders, and community level justice structures.





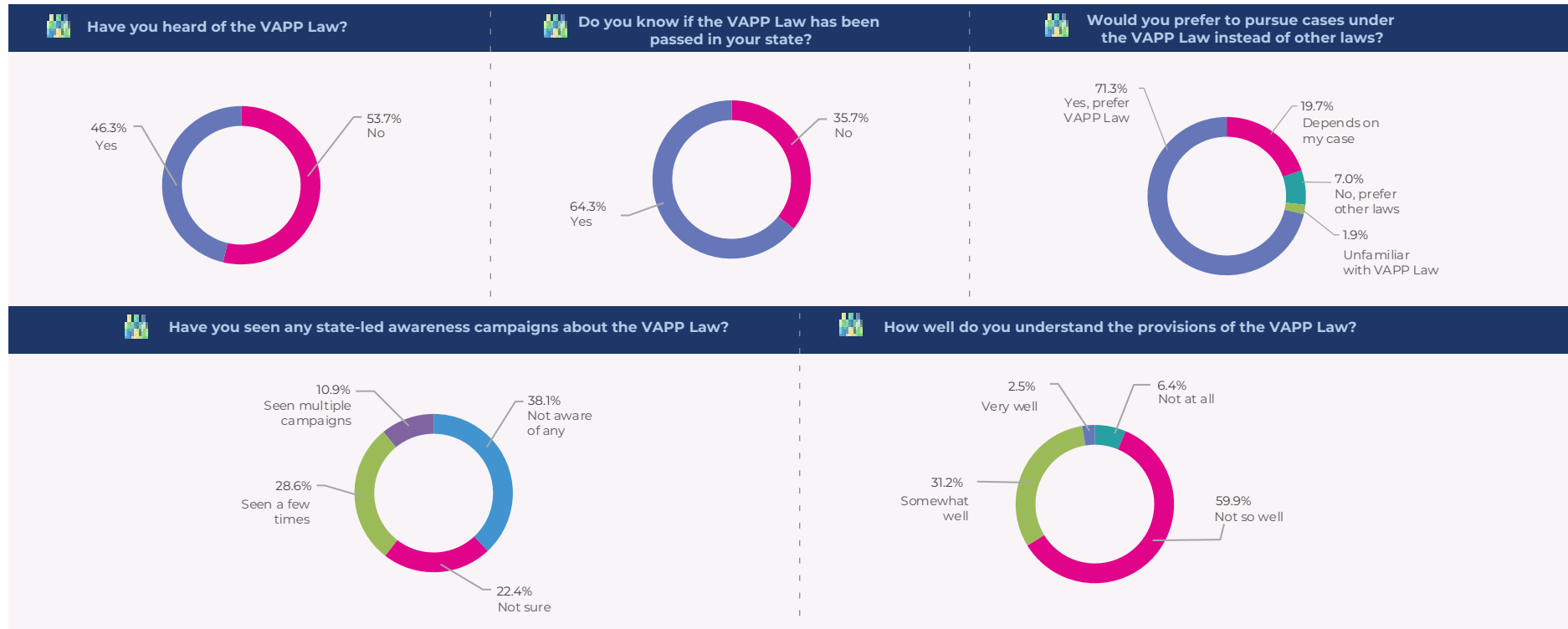
ABIA STATE

Abia State | Respondent Demographics (n = 339)



The demographic spread in Abia State reveals a young and relatively educated population, with respondents aged 25-35 making up the largest age group (30.7%) and nearly half (44.8%) having attained graduate education. Urban residents dominate the sample at 60.5%. Occupations are diverse, with 41.3% self-employed, 18.3% civil servants, and 17.4% students, indicating active economic participation. While disability inclusion is minimal, with only 4.1% identifying as persons with disabilities.

Abia State | Public Awareness



FINDINGS

- VAPP Law awareness efforts have been carried out in Abia state, with a primary focus on law enforcement.
- Awareness is limited in Abia State, with only 46.3% of respondents familiar with it.
- Also, understanding of the law's contents is shallow, with just 2.5% having a strong grasp.
- However, 71.3% of respondents see the law's relevance and prefer to pursue legal redress under it.

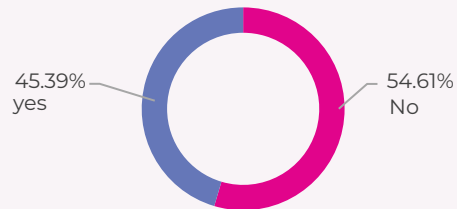
RECOMMENDATIONS

- Broaden awareness efforts beyond law enforcement to reach a wider audience, including community leaders, women, youth, and vulnerable groups.
- Develop targeted education programs to improve comprehension of the VAPP Law, its provisions, and protections, especially among those who interact with survivors.
- Utilize diverse channels (media, community platforms, schools) to disseminate information, promote awareness, and ensure easy access to support services and legal redress mechanisms.

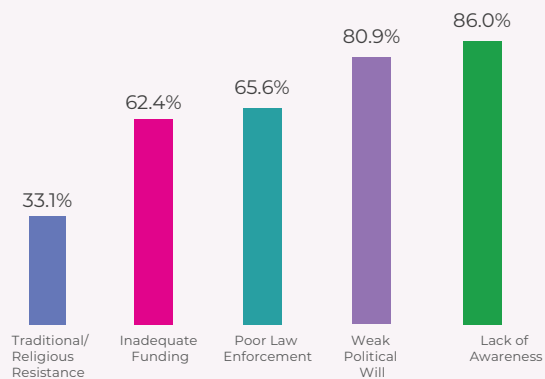
Abia State | Enforcement Systems



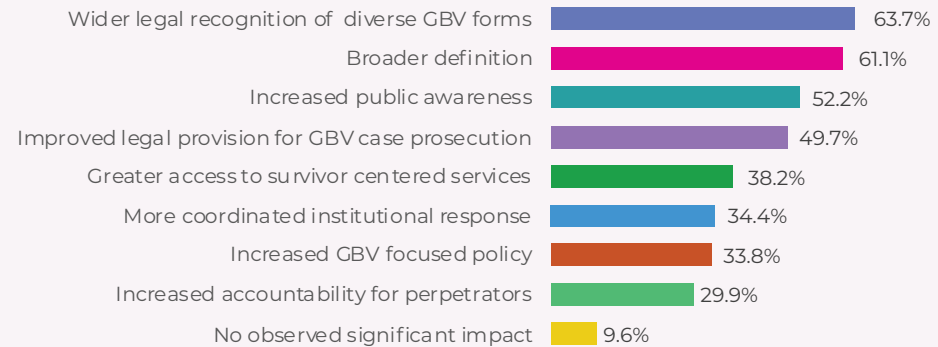
Since the VAPP Law was domesticated in your state, do you think the state's overall response to gender-based violence (GBV) has improved?



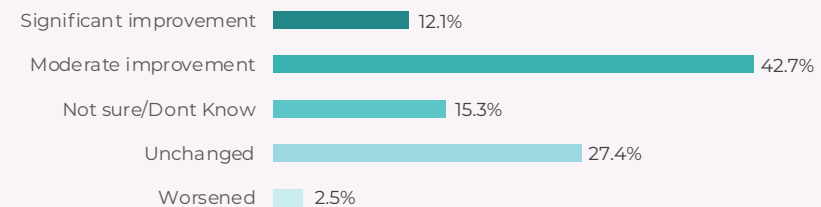
Which of the following do you think are the major barriers to implementing the VAPP Law in your state?



In your opinion, what has been the key impacts of the VAPP Law in your state and across Nigeria?







Since the VAPP Law was passed, do you think GBV survivors in your state have experienced better access to justice?



FINDINGS

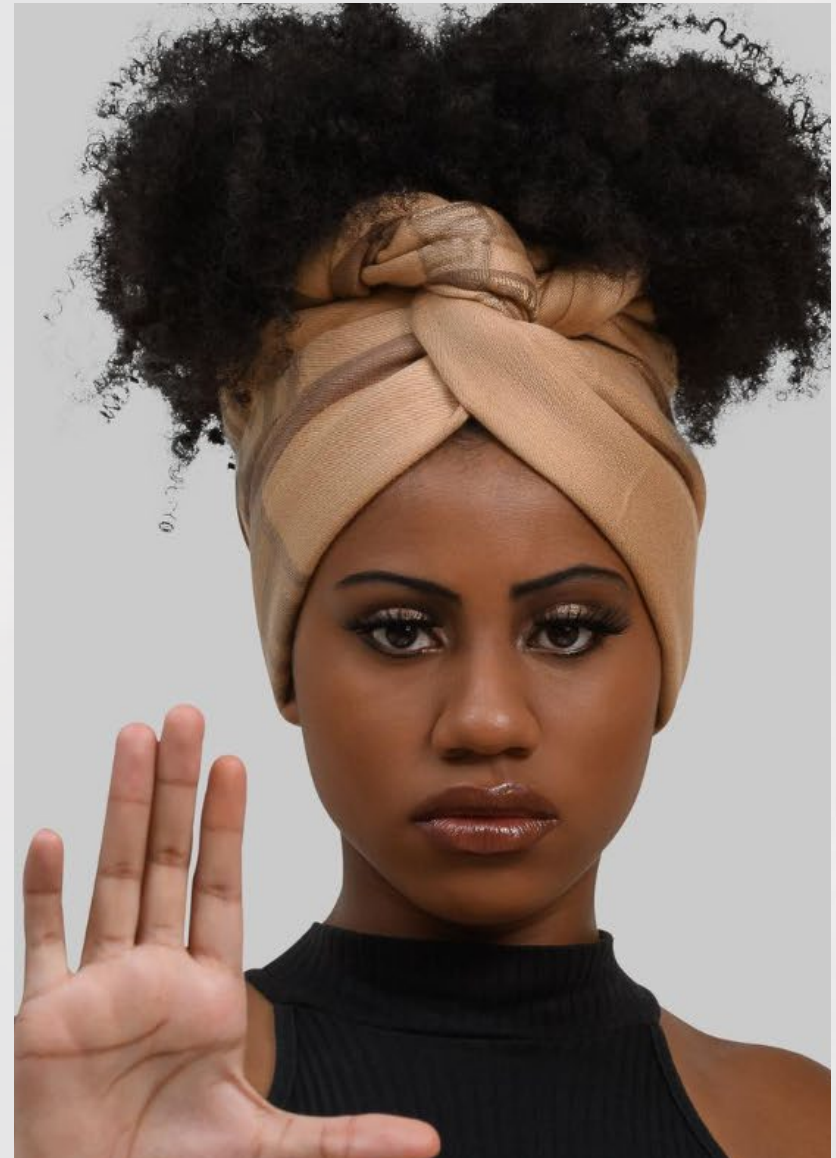
- Public opinion on the VAPP Law's effectiveness is divided: 45.39% see improvement in GBV response, while 54.61% do not.
- Strides have been made in enhancing the key impacts of the law, such as wider legal recognition (63.7%), expanded definitions of GBV (61.1%), and improved prosecution measures (49.7%).
- Access to justice under the VAPP Act: 42.7% of respondents see a moderate improvement, while only 12.1% report significant improvement.
- 86.0% of respondents cite lack of awareness, followed closely by weak political will (80.9%), poor law enforcement (65.6%), and inadequate funding (62.4%) as major barriers to implementation.

Abia State | Enforcement Systems

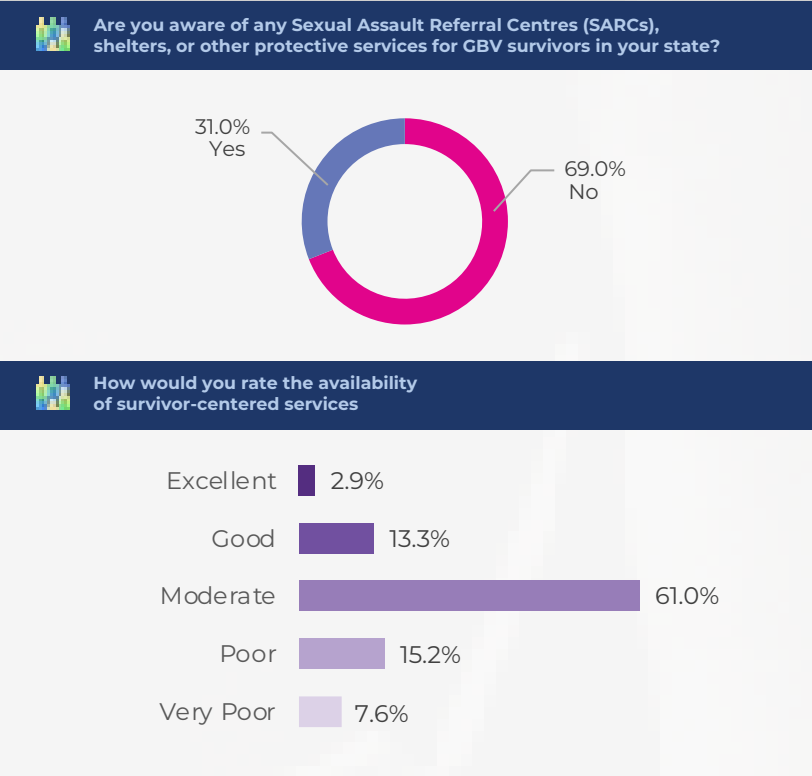
		Status
 Sex Offenders' Register <ul style="list-style-type: none"> Register is non-existence No linkage to any GBV national database 		Unavailable
 Protection Orders <ul style="list-style-type: none"> Courts are authorized to issue orders Number of orders issued in the past year is unavailable Police Enforcement is consistent 		
 Mandatory Reporting <ul style="list-style-type: none"> VAPP Law mandates reporting Penalties exist for non-compliance Standardized protocols in place 		Fully Operational
 Legal Remedies <ul style="list-style-type: none"> Survivors have successfully obtained compensation or restitution through the provisions of the VAPP Law. More than 20 cases have been prosecuted under VAPP Act in the past 12 months. 		Available




RECOMMENDATIONS

- Establish a Sex Offenders' Register linked to GBV databases to strengthen VAPP Law enforcement.
- Track and record data on protection orders, compensation, and justice outcomes to inform policy adjustments.





Abia State | Support Service



		Status
	SARCs and Shelters <ul style="list-style-type: none">Number of government-funded SARCs/Shelters: None	Unavailable
	Free Medical Assistance <ul style="list-style-type: none">Government facilities NOT mandated to provide free careCost barriers persist for survivorsMedical reports and forensic services are sometimes accessed for prosecution.	Unavailable
	Victims Support Fund <ul style="list-style-type: none">Victims Support Fund is unavailable	Unavailable

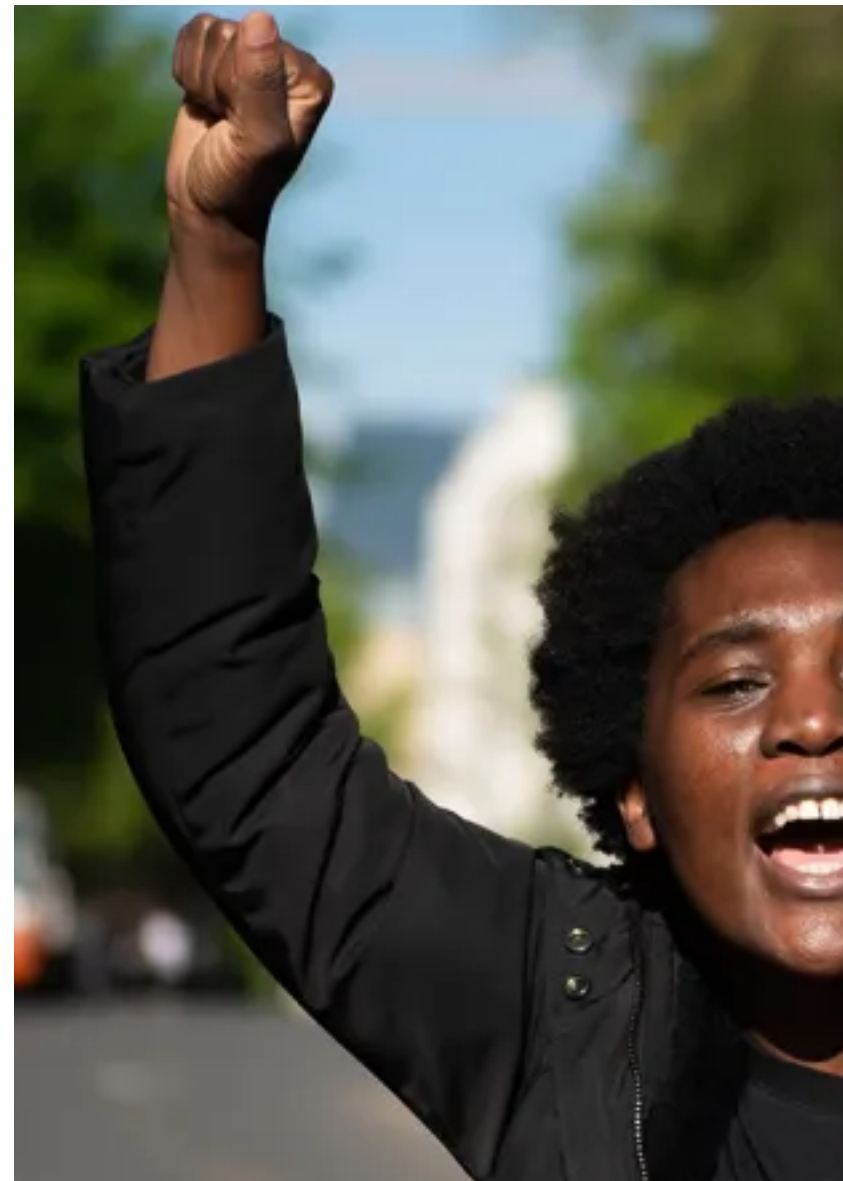
RECOMMENDATIONS

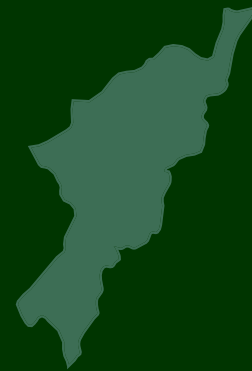
- Fast-track completion and operationalization of the three SARCs under construction with RoLAC by 2026.
- Mandate free medical care for survivors in government facilities, removing cost barriers.
- Create a Victims Support Fund to provide financial assistance to survivors.
- Ensure accessible medical reports and forensic services for prosecution and support.

Status	
 <p>Regulatory Body</p> <ul style="list-style-type: none"> Formally designated body: A body has been designated but NOT mentioned. Coordinator appointed for domestic violence prevention. Annual report: NOT submitted to government and National Bureau of Statistics. There is a state coordination mechanism between the relevant MDAs. Protection Officers are NOT appointed. 	Unavailable
 <p>Service Provider Registration</p> <ul style="list-style-type: none"> State-maintained register regularly updated Register been circulated to all relevant institutions (e.g., police stations, protection officers, and courts) Operational guidelines developed for accredited providers. 	

RECOMMENDATIONS

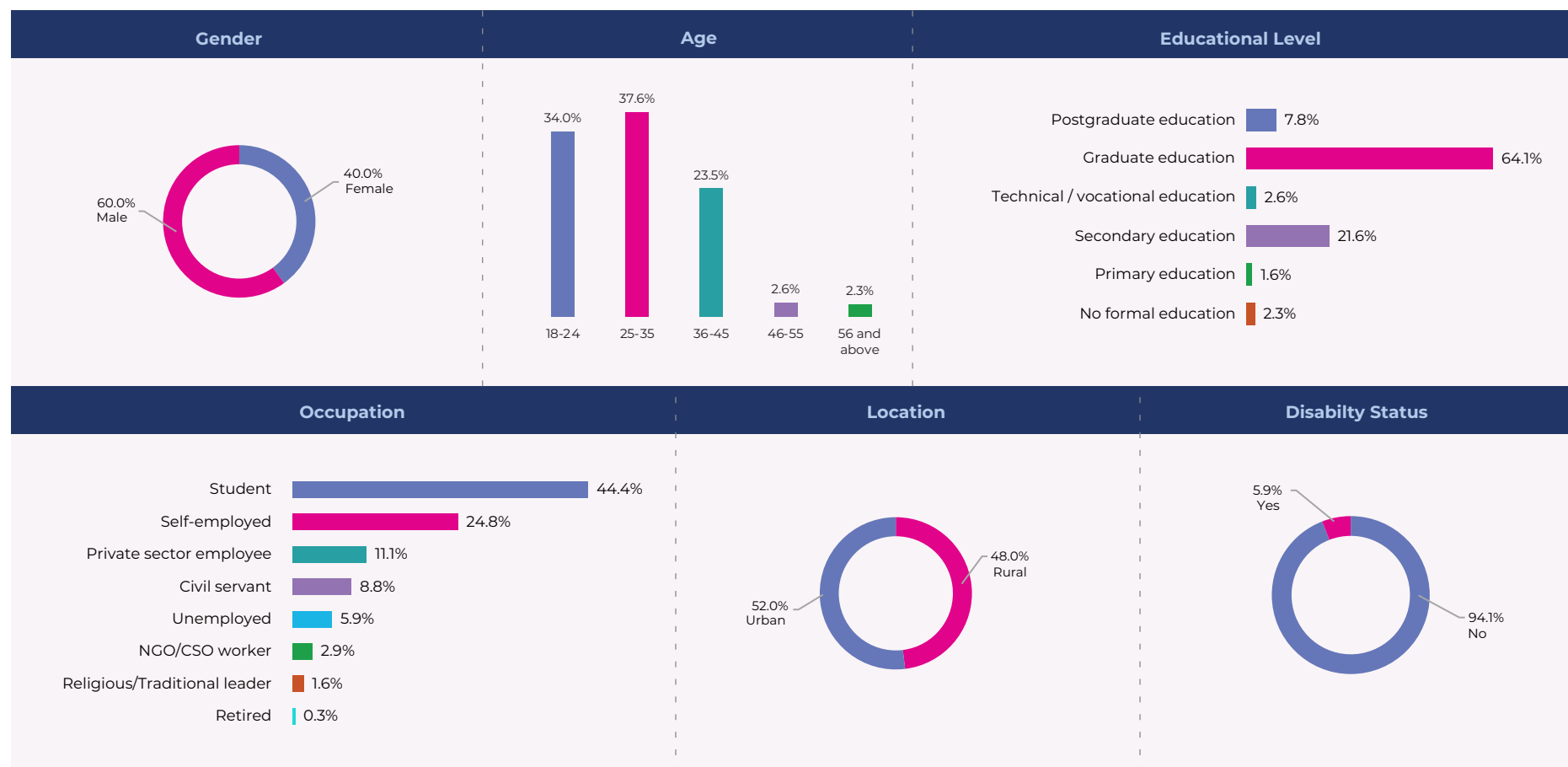
- Publicly identify a formal regulatory body for overseeing domestic violence prevention.
- Appoint Protection Officers to support implementation and enforcement.
- Ensure submission of annual reports to the government and National Bureau of Statistics for informed decision-making.
- Encourage regular interaction between the regulatory body, affiliated ministries, and community stakeholders to improve enforcement and service coordination.





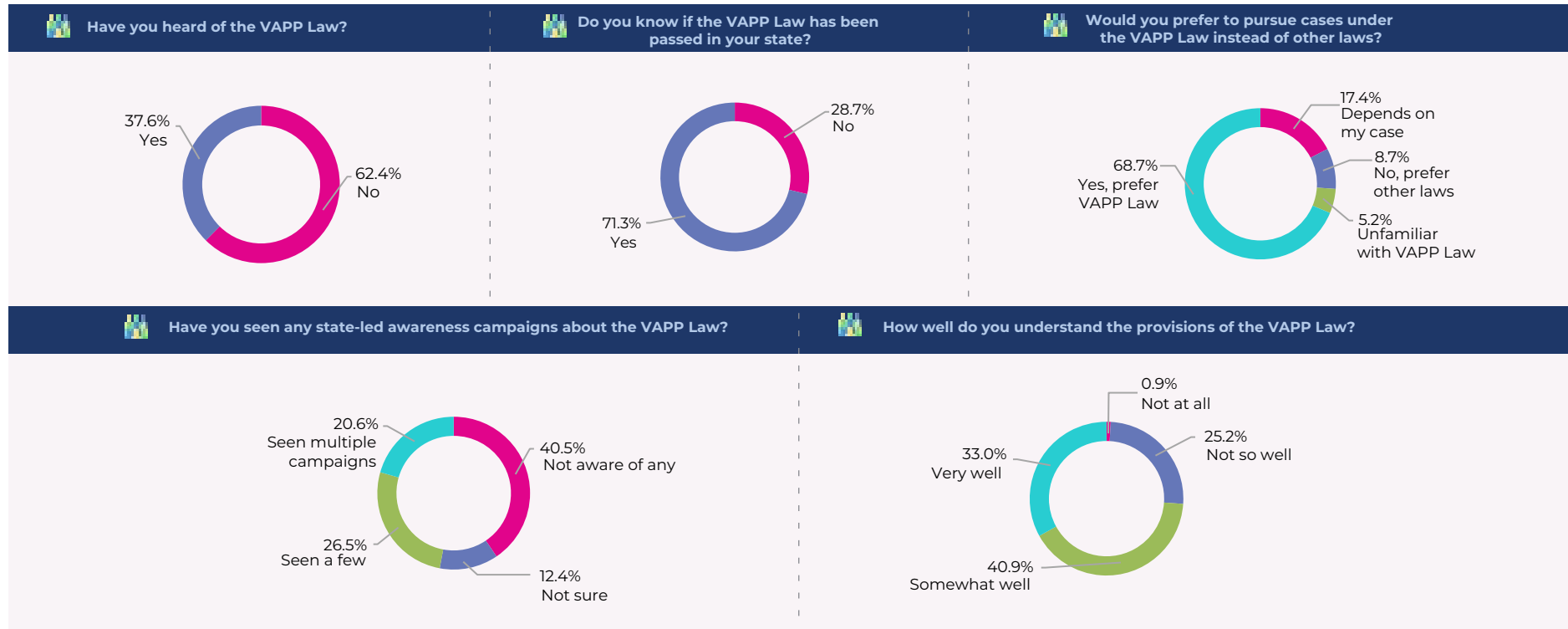
ADAMAWA STATE

Adamawa State | Respondent Demographics (n = 306)



The survey respondents from Adamawa State are mostly male (60.0%), with females constituting 40.0%. The majority fall within the 18-35 age range, with 37.6% between 25-35 years and 34.0% between 18-24 years. Most respondents are highly educated, with 64.1% holding graduate education and 21.6% having secondary education. Students dominate the occupational landscape (44.4%), followed by self-employed individuals (24.8%) and private sector employees (11.1%). The sample is almost evenly split between urban (52.0%) and rural (48.0%) dwellers, with 5.9% of respondents identifying as persons with disabilities.

Adamawa State | Public Awareness



FINDINGS

- The state government has implemented VAPP Law awareness initiatives, reaching schools, health workers, the public, religious groups, traditional leaders, and market associations.
- Nonetheless, only 37.6% of respondents in Adamawa State have heard of the VAPP Law.
- Among those aware of the law, only 33.0% of respondents claim strong knowledge of the VAPP Law's provisions.
- 40.5% of respondents have not seen any state-led awareness initiatives.

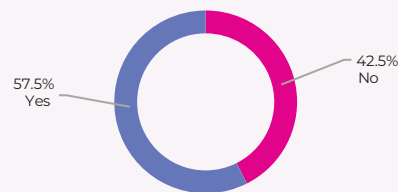
RECOMMENDATIONS

- Increase outreach efforts to reach a larger audience, especially those who haven't been exposed to existing initiatives.
- Enhance awareness initiatives to provide more in-depth information about the VAPP Law's provisions, beyond just raising awareness.
- Identify and target specific groups or areas that have been missed by current awareness efforts to increase overall awareness and understanding of the VAPP Law.

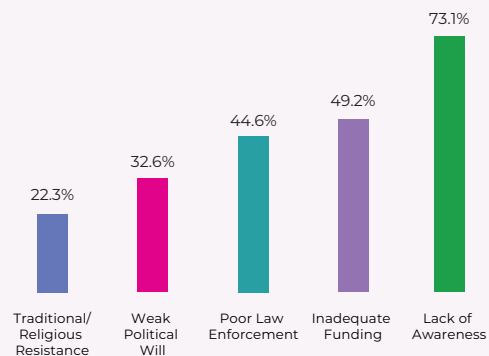
Adamawa State | Enforcement Systems



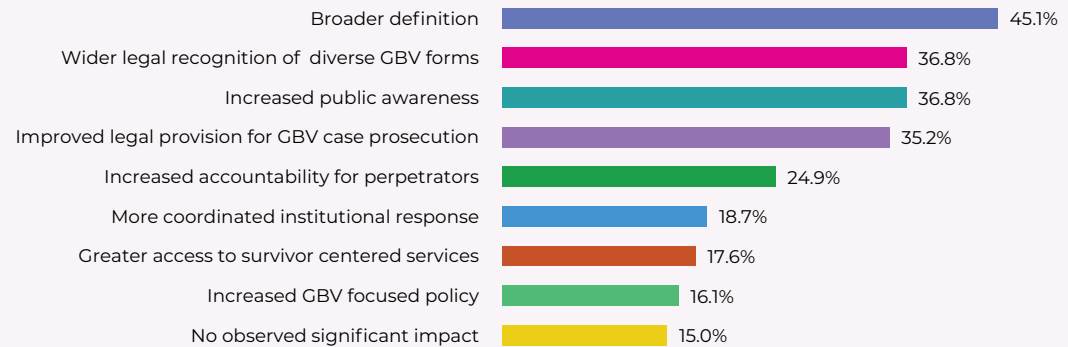
Since the VAPP Law was domesticated in your state, do you think the state's overall response to gender-based violence (GBV) has improved?



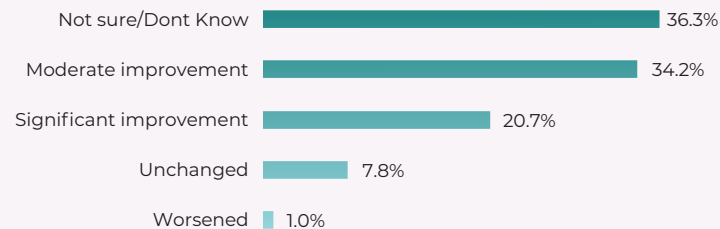
Which of the following do you think are the major barriers to implementing the VAPP Law in your state?



In your opinion, what has been the key impacts of the VAPP Law in your state and across Nigeria?







Since the VAPP Law was passed, do you think GBV survivors in your state have experienced better access to justice?



FINDINGS

- 57.5% of respondents think the state's response to GBV has improved since adopting the VAPP Law.
- The most cited impacts include a broader definition of GBV (45.1%), wider legal recognition of diverse GBV forms (36.8%), and increased public awareness (36.8%).
- Access to justice perceptions shows 34.2% report moderate improvement while 20.7% report significant improvement.
- Major challenges include lack of awareness, inadequate funding, poor enforcement, weak political will, and resistance from traditional/religious groups.

Adamawa State | Enforcement Systems

		Status
	Sex Offenders' Register <ul style="list-style-type: none"> • Register established and functional • Linked to national GBV database • Updated quarterly • Accessible to the public 	<div>Fully Operational</div> <div>Operational</div> <div>Fully Operational</div> <div>Fully Operational</div>
	Protection Orders <ul style="list-style-type: none"> • Courts are authorized to issue orders • Number of orders issued in the past year is unavailable • Police Enforcement is consistent 	
	Mandatory Reporting <ul style="list-style-type: none"> • VAPP Law mandates reporting • Penalties exist for non-compliance • Standardized protocols in place 	
	Legal Remedies <ul style="list-style-type: none"> • Survivors have successfully obtained compensation or restitution through the provisions of the VAPP Law. • Number of cases prosecuted under VAPP Act in the past 12 months: 6-10. 	

RECOMMENDATIONS

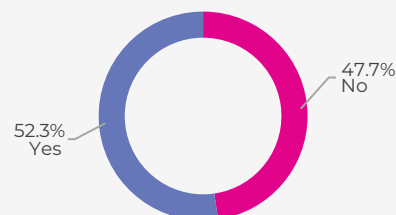
- Collect and share data on the number of Protection Orders issued to assess effectiveness.
- Build on existing legal remedies by raising awareness about survivor compensation and restitution provisions.



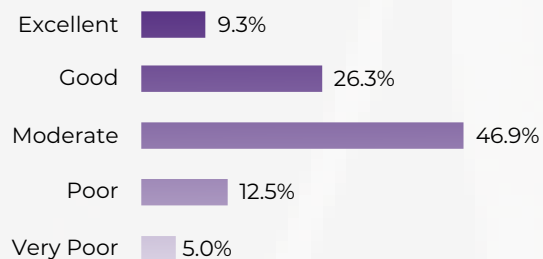
Adamawa State | Support Service



Are you aware of any Sexual Assault Referral Centres (SARCs), shelters, or other protective services for GBV survivors in your state?



How would you rate the availability of survivor-centered services



Status



SARCs and Shelters

- 5 government funded SARCs/Shelters
- Actively receiving survivors.
- Services offered: Temporary housing, Feeding, Medical services, Skills acquisition or reintegration support, Legal aid and Psycho-social counselling.

Functional



Free Medical Assistance

- Government facilities are mandated to provide free care.
- Survivors do not face any cost-related barriers.
- Medical reports and forensic services are sometimes accessed for prosecution

Available





Victims Support Fund

- Funding sources: State budget, donor funding and partner support contributions.
- Services supported: Medical Services, SARC/Shelter, Rehabilitation and reintegration.

Established and Operational

RECOMMENDATIONS

- Establish additional facilities in underserved areas to improve access to support services.
- Mandate standardized protocols for collecting forensic evidence in public health facilities to ensure consistent availability of medical reports for prosecution.
- Enhance coordination between SARCs, health facilities, and legal aid providers, and diversify funding for the Victims Support Fund to ensure equitable service coverage.

Status	
<div></div> <div>Regulatory Body<ul style="list-style-type: none">Formally designated body: A body has been designated but NOT mentioned.Coordinator appointed for domestic violence prevention.Annual report: NOT submitted to government and National Bureau of Statistics.There is a state coordination mechanism between the relevant MDAs.Protection Officers are NOT appointed.</div>	Established and Operational
<div></div> <div>Service Provider Registration<ul style="list-style-type: none">State-maintained register regularly updatedRegister been circulated to all relevant institutions (e.g., police stations, protection officers, and courts)Operational guidelines for accredited providers are in progress.</div>	

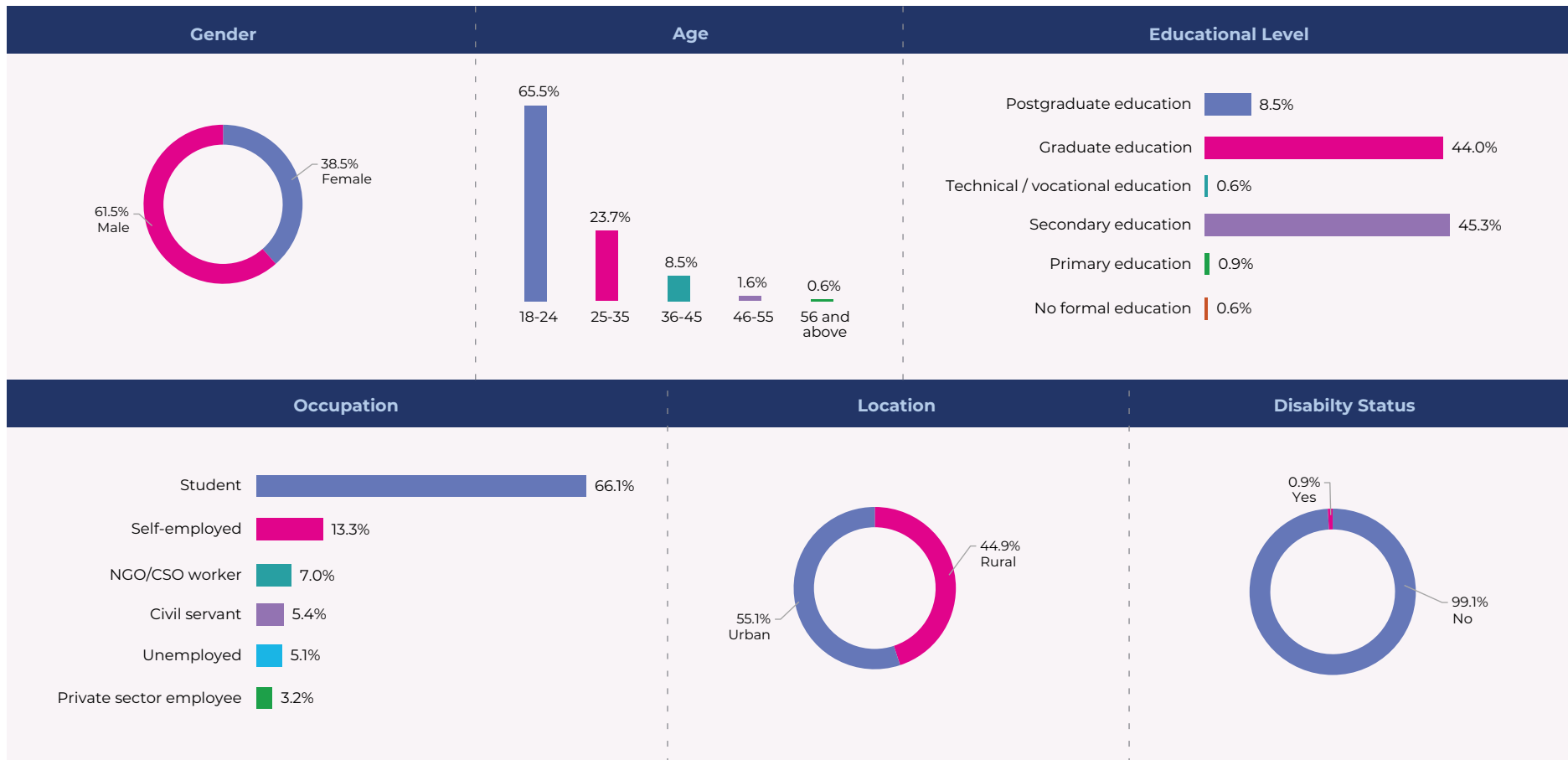
RECOMMENDATIONS
<ul style="list-style-type: none">Widely share the register with relevant institutions to improve referrals and collaboration.Develop clear protocols for accredited service providers to standardize procedures and enhance care quality.Provide targeted training, community engagement, and logistical support to elevate their visibility and capacity, especially in underserved areas.





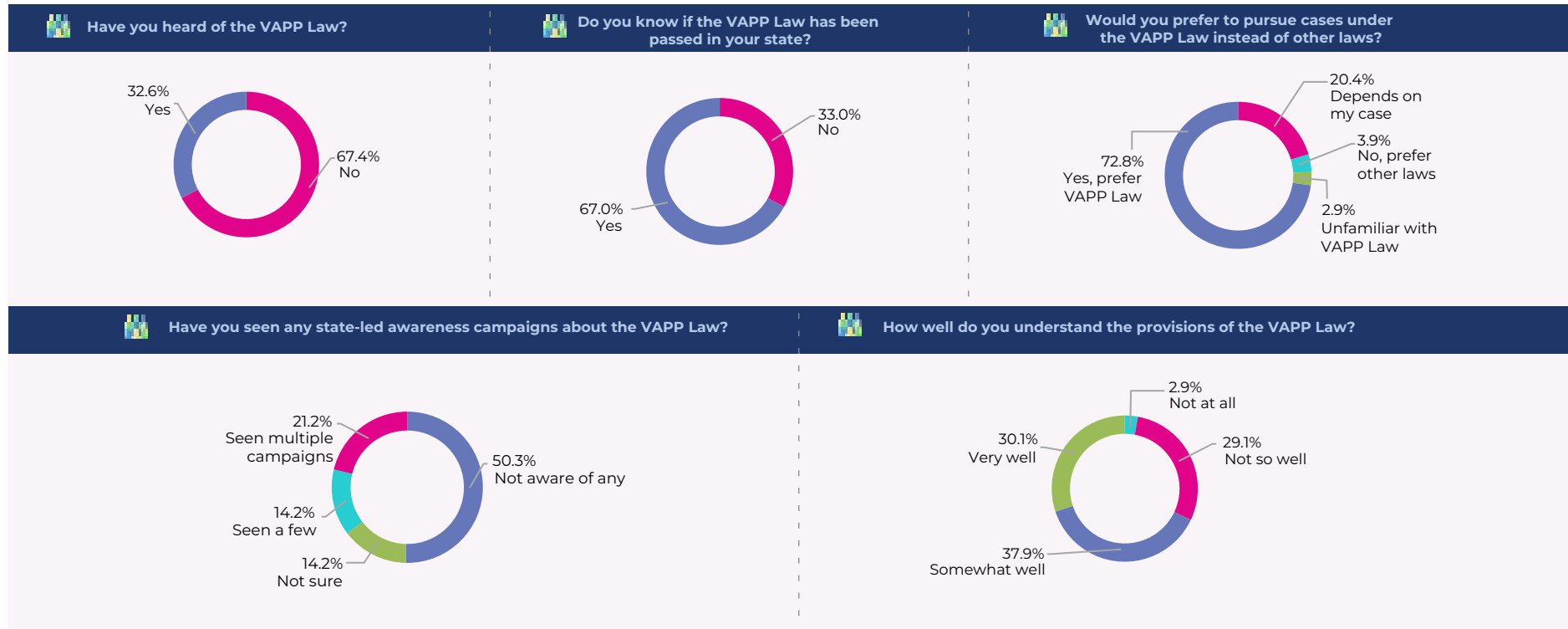
**AKWA IBOM
STATE**

Akwa Ibom State | Respondent Demographics (n = 316)



The survey respondents from Akwa Ibom State are predominantly young and male, with 65.5% between 18-24 years old and 61.5% identifying as male. The sample has a mix of educational backgrounds, with 44.0% holding graduate education and 8.5% having postgraduate qualifications, while 45.3% have secondary education. The respondents are almost evenly split between urban (55.1%) and rural (44.9%) areas. Students dominate the occupational landscape (66.1%), followed by self-employed individuals (13.3%) and NGO/CSO workers (7.0%). Persons with disabilities make up a small proportion of the sample (0.9%).

Akwa Ibom State | Public Awareness



FINDINGS

- Akwa Ibom has conducted awareness campaigns on the VAPP Act in the past year, targeting a broad range of groups: schools, religious institutions, traditional rulers, market associations, law enforcement, and the public.
- Only 32.6% of Akwa Ibom residents have heard of the VAPP law.
- Half of the respondents (50.3%) report never seeing any state-led awareness campaigns.
- Among those aware of the VAPP Act, 30.1% report understanding its provisions “very well”.

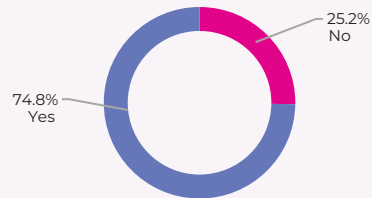
RECOMMENDATIONS

- Expand outreach beyond existing groups to reach wider community segments, especially rural populations where awareness is likely lowest.
- Increase visibility of campaigns through consistent use of mass media and community-based channels.
- Strengthen capacity-building efforts by providing simplified, user-friendly information materials and training sessions to improve residents’ understanding of the VAPP Act’s provisions

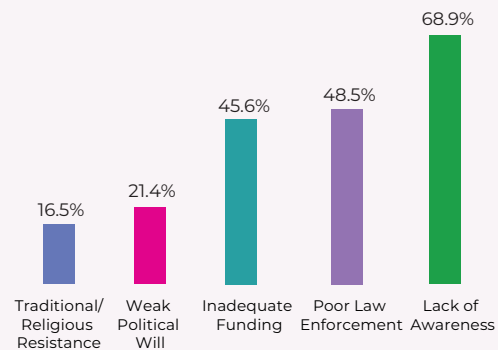
Akwa Ibom State | Enforcement Systems



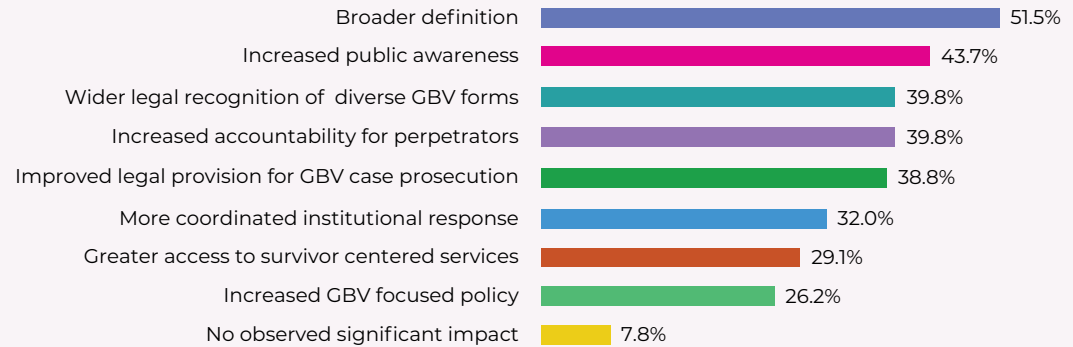
Since the VAPP Law was domesticated in your state, do you think the state's overall response to gender-based violence (GBV) has improved?



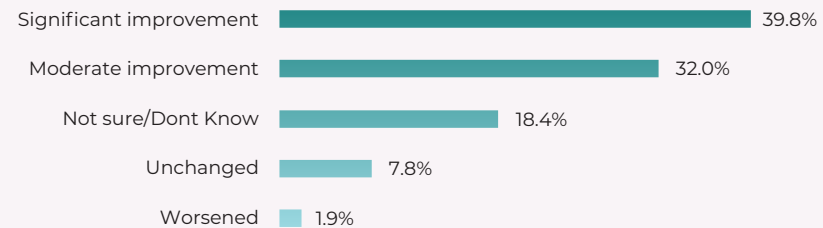
Which of the following do you think are the major barriers to implementing the VAPP Law in your state?



In your opinion, what has been the key impacts of the VAPP Law in your state and across Nigeria?







Since the VAPP Law was passed, do you think GBV survivors in your state have experienced better access to justice?



FINDINGS

- 74.8% say the state's GBV response has improved since the VAPP Act.
- Access to justice shows 39.8% report major improvement.
- Key impacts include broader GBV definition (51.5%), higher awareness (43.7%), and stronger legal recognition (39.8%).
- Main barriers are low awareness (68.9%), weak enforcement (48.5%), and poor funding (45.6%).

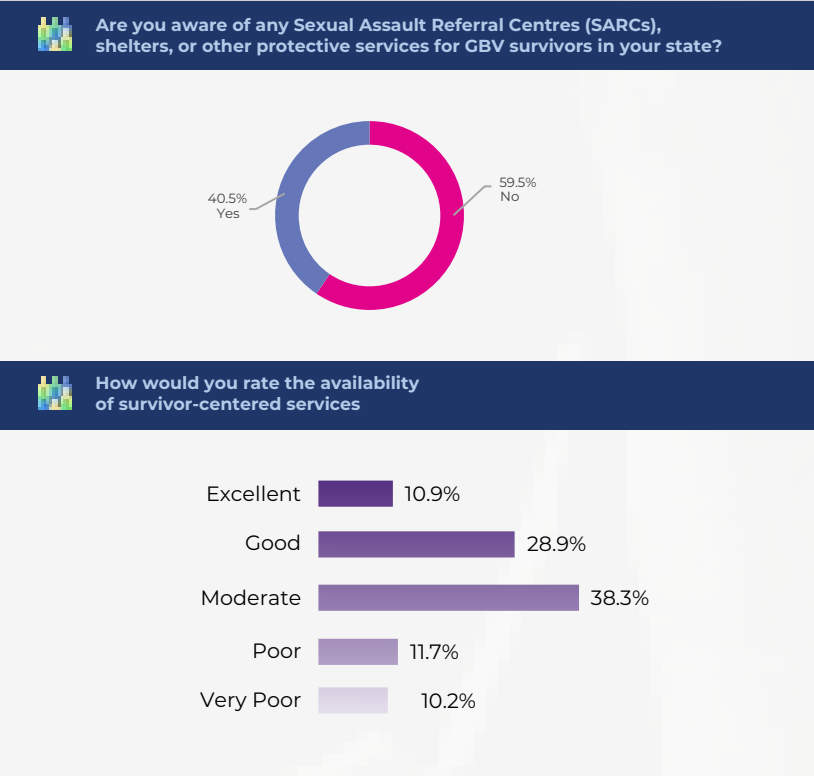
		Status
	Sex Offenders' Register <ul style="list-style-type: none"> Register established and functional Linked to national GBV database Updated quarterly Accessible to relevant and selected authorities. 	Fully Operational
	Protection Orders <ul style="list-style-type: none"> Courts are authorized to issue orders Number of orders issued in the past 12 months: More than 10 Police Enforcement: Occasionally 	Operational
	Mandatory Reporting <ul style="list-style-type: none"> VAPP Law mandates reporting Penalties exist for non-compliance Standardized protocols in place 	Fully Operational
	Legal Remedies <ul style="list-style-type: none"> Survivors have successfully obtained compensation or restitution through the provisions of the VAPP Law. Number of cases prosecuted under VAPP Act in the past 12 months: 11-20. 	Fully Operational

RECOMMENDATIONS

- Improve enforcement of Protection Orders by ensuring consistent police compliance and setting up monitoring systems to track implementation.
- Strengthen use of the Sex Offenders' Register by widening access for relevant stakeholders and promoting integration with other justice sector tools.
- Expand survivor support through legal remedies by increasing awareness of compensation options and scaling up the number of VAPP Act prosecutions.





Akwa Ibom State | Support Service



Status	
<div>SARCs and Shelters<ul style="list-style-type: none">Government funded SARCs and Shelters: 1.Actively receiving survivors.Services offered: Temporary housing, Feeding, Medical services, Skills acquisition or reintegration support, Legal aid and Psycho-social counselling.</div>	Functional
<div>Free Medical Assistance<ul style="list-style-type: none">Government facilities NOT mandated to provide free careSurvivors continue to face cost barriers.Medical reports and forensic services are sometimes accessed for prosecution.</div>	Available
<div>Victims Support Fund<ul style="list-style-type: none">Victims support fund has been established but is not currently active.</div>	Unavailable

RECOMMENDATIONS

- Mandate free medical and forensic services in all government health facilities to remove access barriers for survivors.
- Operationalize the Victims Support Fund with dedicated budgets and partnerships to sustain shelters, SARCs, and survivor services.

Status	
 <p>Regulatory Body</p> <ul style="list-style-type: none"> Formally designated body: All agencies involved. Coordinator appointed for domestic violence prevention. Annual report: Submitted to government and National Bureau of Statistics There is a state coordination mechanism between the relevant MDAs. Protection Officers are appointed across LGAs. 	<p>Established and Operational</p>
 <p>Service Provider Registration</p> <ul style="list-style-type: none"> State-maintained register regularly updated Register been circulated to all relevant institutions (e.g., police stations, protection officers, and courts) Operational guidelines for accredited providers have been developed. 	

RECOMMENDATIONS

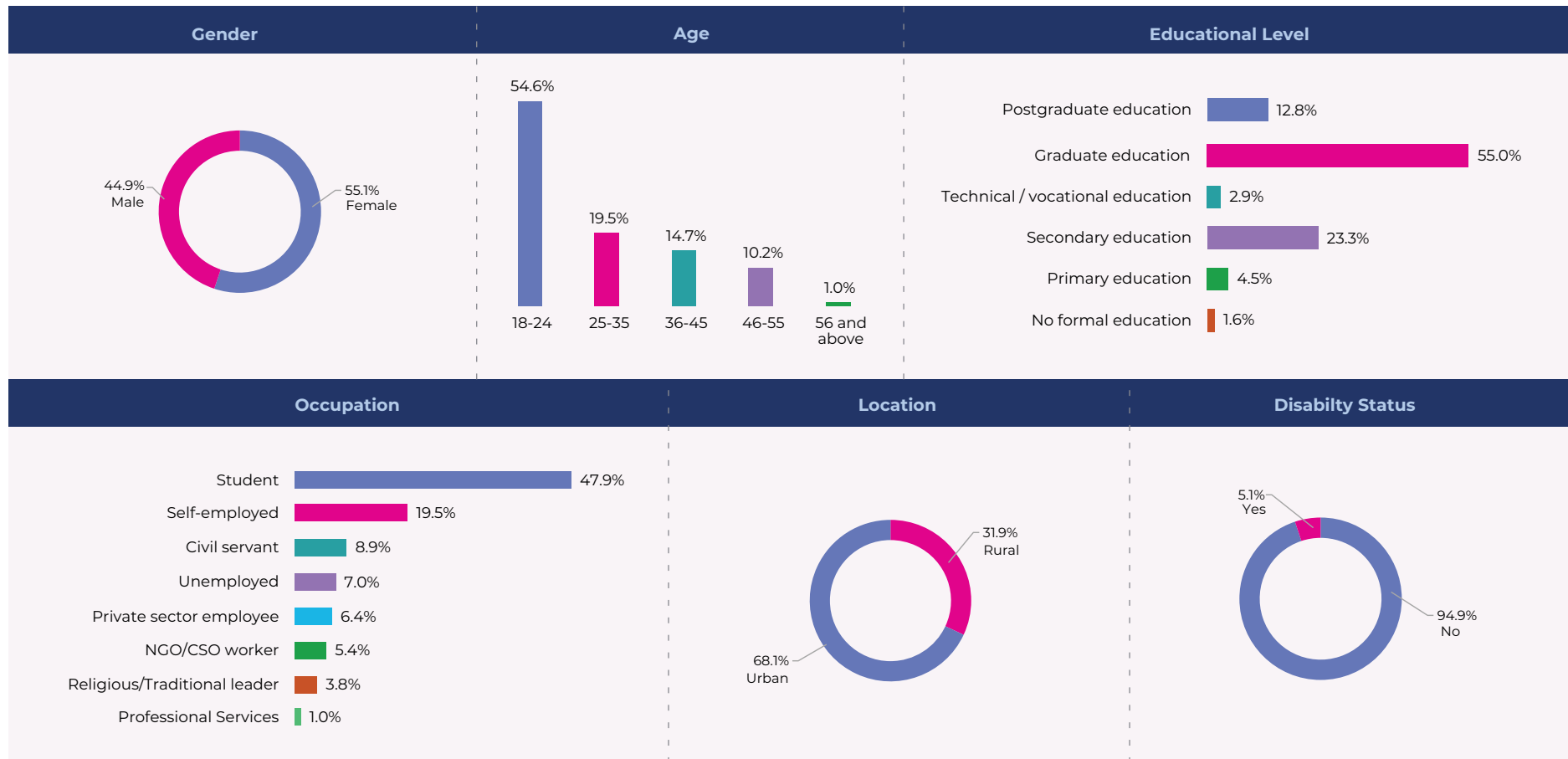
- Strengthen coordination mechanisms by ensuring effective monitoring of Protection Officers across LGAs and wider dissemination of annual reports to improve accountability.
- Enhance service provider registration through regular compliance checks, continuous updates, and strict adherence to operational guidelines for accredited providers.





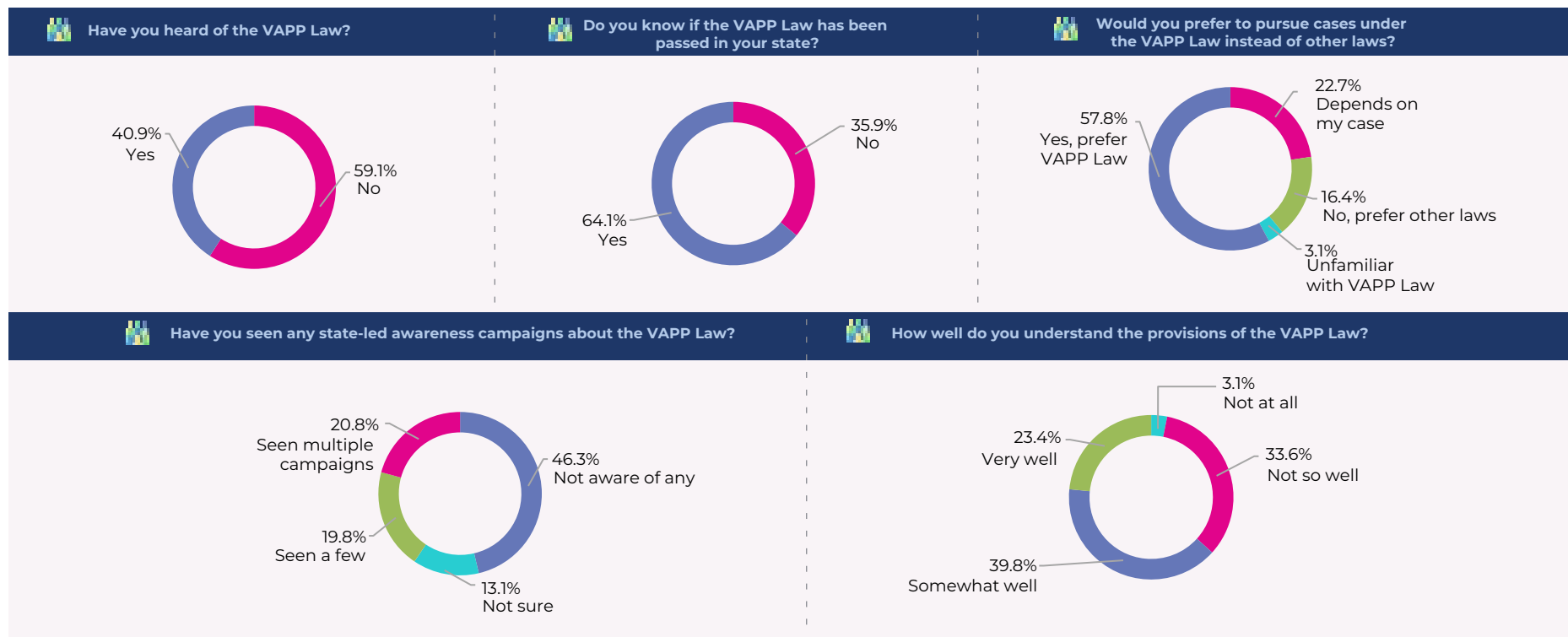
ANAMBRA STATE

Anambra State | Respondent Demographics (n = 313)



The respondent profile from Anambra State is predominantly youthful, with 54.6% aged 18-24 years, and highly educated, with 67.8% having higher education. The majority (68.1%) reside in urban areas, and there's a slight female majority (55.1%). Students make up the largest occupational group (47.9%), followed by self-employed individuals (19.5%) and civil servants (8.9%). Additionally, 5.1% of respondents have disabilities.

Anambra State | Public Awareness



FINDINGS

- The state government has conducted awareness campaigns on the VAPP Law, targeting the general public with information on legal, health, and social support services.
- 40.91% of respondents in Anambra State have heard of the VAPP Law.
- Among those aware, only 23.4% of respondents report understanding the law very well.
- Exposure to awareness initiatives is limited, with 46.31% of respondents reporting they have not seen any campaigns, and only 20.8% reporting exposure to multiple campaigns.

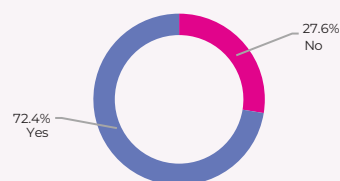
RECOMMENDATIONS

- Expand outreach efforts to reach a broader audience, particularly those who have not been exposed to existing awareness initiatives.
- Develop and deliver culturally appropriate, multilingual educational materials through partnerships with traditional leaders, religious organizations, and community-based groups.
- Institutionalize regular awareness drives that combine mass media campaigns with grassroots engagement to improve practical understanding of legal protections and support services under the VAPP Law.

Anambra State | Enforcement Systems



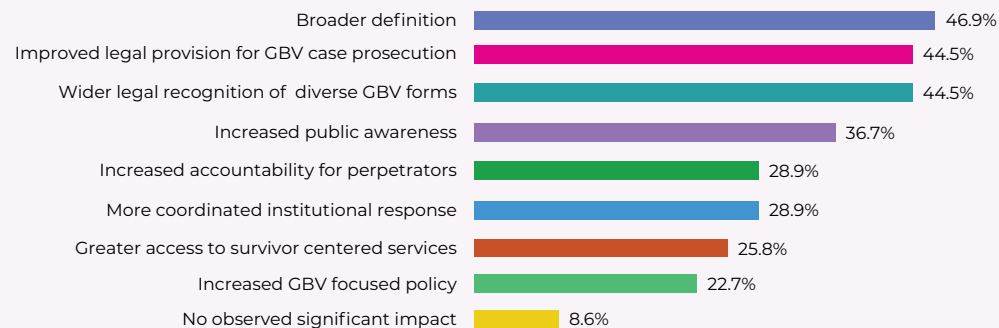
Since the VAPP Law was domesticated in your state, do you think the state's overall response to gender-based violence (GBV) has improved?



Which of the following do you think are the major barriers to implementing the VAPP Law in your state?



In your opinion, what has been the key impacts of the VAPP Law in your state and across Nigeria?







Since the VAPP Law was passed, do you think GBV survivors in your state have experienced better access to justice?



FINDINGS

- 72.4% of respondents perceive an improvement in the state's response to GBV since the domestication of the VAPP Law.
- The most notable impacts include challenging entrenched GBV culture as the definition covers a broader spectrum (46.9%), strengthening legal frameworks for prosecuting GBV cases (44.5%), broader recognition of GBV-related crimes, and increased public awareness (44.5%).
- Perceptions of access to justice remain uneven: 36.7% report significant improvement, 32.8% report moderate progress, and 10.9% observe no change.
- Key barriers affecting implementation include low awareness of the law (61.7%), inadequate funding (45.3%), poor law enforcement (36.7%), and the limitation in knowledge of some stakeholder (Traditional/Religious bodies -35.2%).

Anambra State | Enforcement Systems

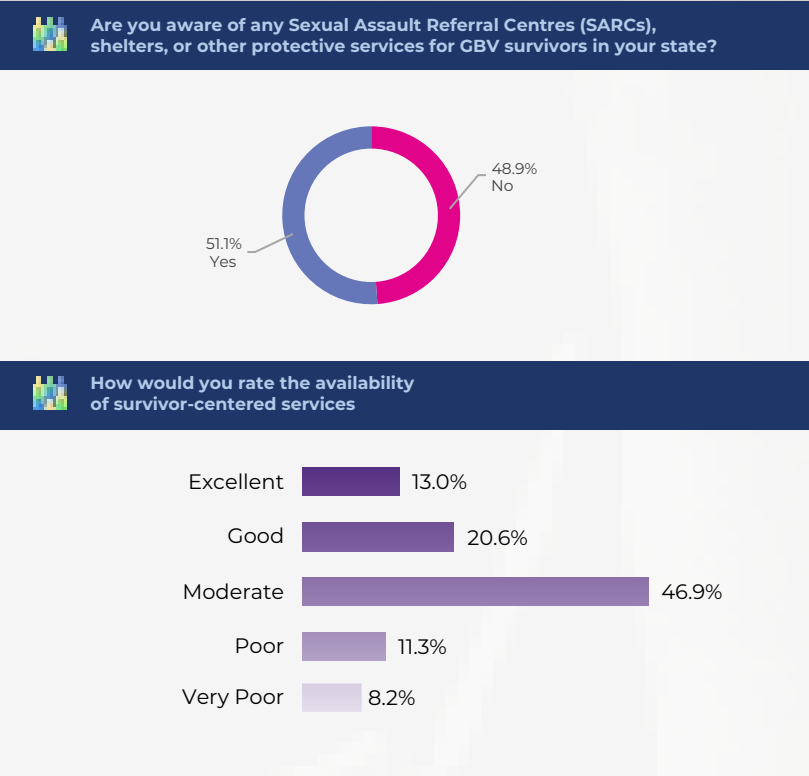
		Status
	Sex Offenders' Register <ul style="list-style-type: none"> Register established and functional. Publicly accessible. Integrated with state and national GBV databases. Updated regularly to support offender tracking and accountability. 	Fully Operational
	Protection Orders <ul style="list-style-type: none"> Courts authorized to issue orders. Police and security actors consistently enforce orders. Number of orders issued in the past 12 months not documented. 	Operational
	Mandatory Reporting <ul style="list-style-type: none"> Reporting required for professionals in health, education, and social welfare sectors. Lack of statutory penalties for non-compliance. Standardized protocols in place. 	Partially Operational
	Legal Remedies <ul style="list-style-type: none"> Survivors can access pro bono legal aid and pursue restitution. Over 20 GBV cases have been prosecuted under the VAPP Law in the past year. 	Fully Operational




RECOMMENDATIONS

- Strengthen institutional coordination by developing data-sharing protocols and cross-jurisdictional agreements.
- Expand survivor-centered legal support through increased funding for pro bono services.
- Establish specialized GBV prosecution units and a centralized case management system.





Anambra State | Support Service



		Status
	SARCs and Shelters <ul style="list-style-type: none">Number of government-funded SARCs/Shelters: 1Actively receiving survivorsServices offered: medical care, psychosocial counselling, forensic documentation	Functional but limited
	Free Medical Assistance <ul style="list-style-type: none">Government facilities are mandated to provide free care.Survivors do not face any cost-related barriers.Survivors regularly obtain medical reports and forensic evidence for use in prosecutions.	
	Victims Support Fund <ul style="list-style-type: none">No evidence of a Victims Support Fund in the state.Survivors lack financial, psychosocial, or rehabilitative assistance beyond medical care.	Not Established

RECOMMENDATIONS

- Establish a survivor-centered support infrastructure, including at least one fully operational SARC per senatorial district and safe shelters across all LGAs.
- Create a statutory Victims Support Fund with diverse revenue streams to finance rehabilitation, skills acquisition, and emergency relief.

Status	
<div></div> <div>Regulatory Body<ul style="list-style-type: none">GBV Response Committee designated as the lead coordinating body.Coordinator appointed to oversee domestic violence prevention.Annual implementation reports submitted to the state government and National Bureau of Statistics.Cross-sectoral coordination exists across justice, women affairs, health, finance, and education ministries.Protection Officers deployed in Area Councils to support judiciary and localized service delivery.</div>	Established and Operational
<div></div> <div>Service Provider Registration<ul style="list-style-type: none">No formal accreditation or registration system for GBV service providers.No evidence of a regularly updated service provider register.List of providers not disseminated to police, courts, or other frontline actors.</div>	Not Available

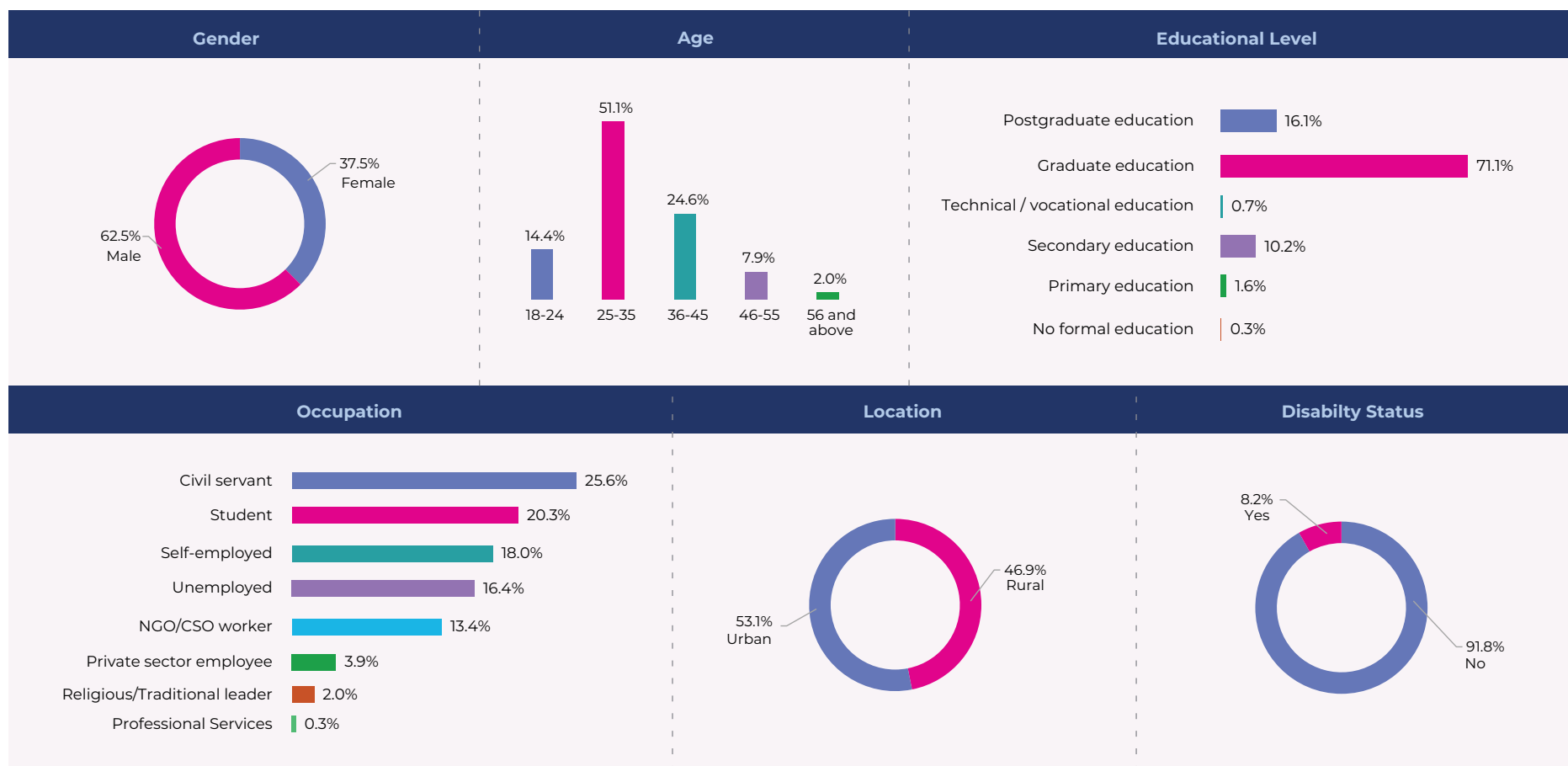
RECOMMENDATIONS
<ul style="list-style-type: none">Establish and operationalize a formal accreditation framework for GBV service providers, including a regularly updated register and clear operational guidelines to standardize referrals and strengthen service delivery.Strengthen coordination structures by empowering the GBV Response Committee to engage both state and non-state actors through inclusive platforms and provide continuous capacity building for frontline institutions to ensure survivor-centered, cross-sectoral collaboration.





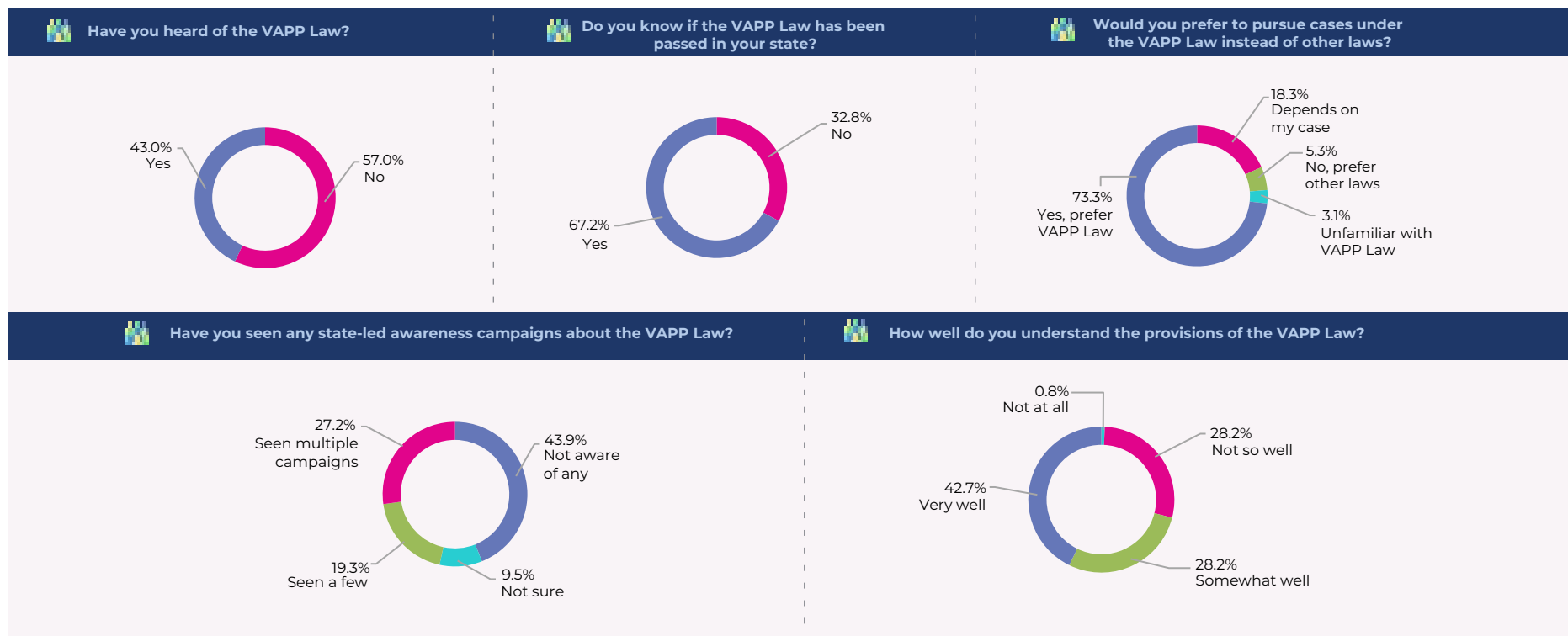
BAUCHI STATE

Bauchi State | Respondent Demographics (n = 305)



Respondents from Bauchi State presents a well-educated, predominantly male demographic with 62.5% male and 37.5% female participants. Educational levels are remarkably high, with 87.2% holding graduate qualifications. The age profile is heavily concentrated among working-age adults, with 75.7% falling between 25 and 45 years, particularly the 25-35 age bracket, representing over half (51.1%) of respondents. Occupational distribution shows strong representation from the public sector, with civil servants leading at 25.6%, followed by students (20.3%) and self-employed individuals (18.0%). The geographical spread demonstrates a slight urban majority at 53.1% versus 46.9% rural residents, while persons with disabilities constitute 8.2% of the sample.

Bauchi State | Public Awareness



FINDINGS

- The state government has implemented VAPP Law awareness initiatives, reaching schools, health workers, the public, religious groups, traditional leaders, and market associations.
- Nonetheless, only 43% of respondents have heard of the VAPP Law.
- 42.7% of those who have heard of the VAPP Act, understand its provisions "very well".
- 43.9% of respondents are not aware any state-led awareness initiatives.

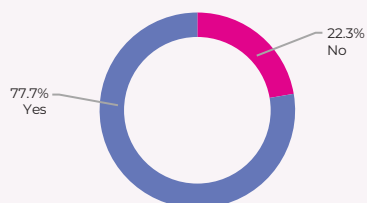
RECOMMENDATIONS

- Scale up awareness campaigns across all LGAs using radio, TV, digital platforms, and locally translated materials to bridge knowledge gaps.
- Leverage community structures by engaging traditional rulers, religious leaders, and schools to deliver culturally relevant messaging.
- Institutionalize regular sensitization with feedback systems to track effectiveness and ensure continuous public education on the VAPP Law.

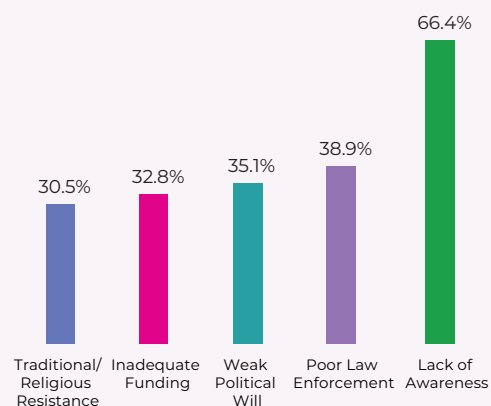
Bauchi State | Enforcement Systems



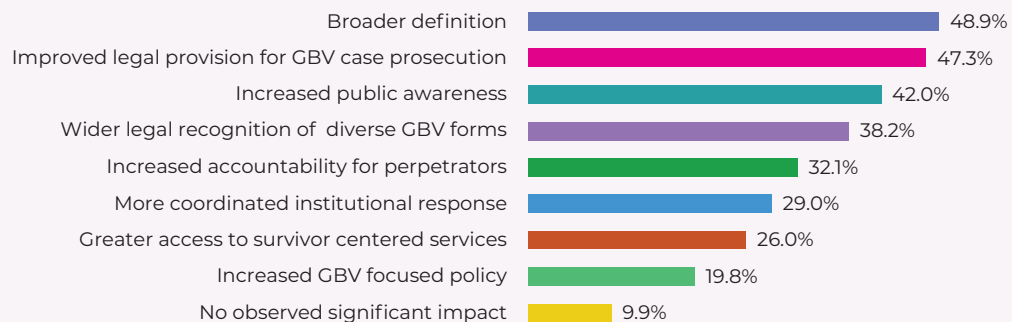
Since the VAPP Law was domesticated in your state, do you think the state's overall response to gender-based violence (GBV) has improved?



Which of the following do you think are the major barriers to implementing the VAPP Law in your state?



In your opinion, what has been the key impacts of the VAPP Law in your state and across Nigeria?




Since the VAPP Law was passed, do you think GBV survivors in your state have experienced better access to justice?



FINDINGS

- 77.7% believe Bauchi State's GBV response has improved since the VAPP Law, compared to 22.3% who see no change.
- Access to justice shows progress, with 40.5% reporting significant improvement and 32.1% moderate improvement.
- Key impacts include a broader GBV definition (48.9%), stronger legal provisions for prosecution (47.3%), and increased public awareness (42.0%).
- Major barriers remain, led by lack of awareness (66.4%), poor law enforcement (38.9%), weak political will (35.1%), inadequate funding (32.8%), and traditional/religious resistance (30.5%).

Status		
	Sex Offenders' Register <ul style="list-style-type: none">Register is non-existence.No linkage to any GBV national database	Unavailable
	Protection Orders <ul style="list-style-type: none">Courts are authorized to issue ordersNumber of orders issued in the past year is unavailablePolice enforcement: Occasional	
	Mandatory Reporting <ul style="list-style-type: none">Reporting is not mandatory.Penalties exist for non-complianceStandardized protocols in place	
	Legal Remedies <ul style="list-style-type: none">Survivors have successfully obtained compensation or restitution through the provisions of the VAPP Law.Number of cases prosecuted under VAPP Act in the past 12 months: More than 20 cases.	

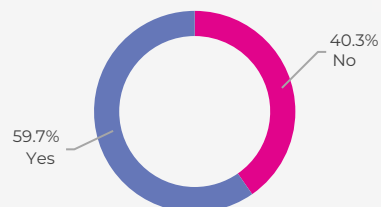
RECOMMENDATIONS	
<ul style="list-style-type: none">Establish a Sex Offenders' Register linked to national databases to strengthen offender monitoring and community protection.Make reporting mandatory.	



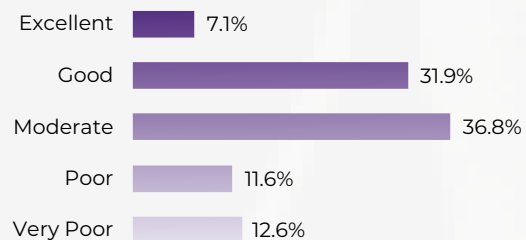
Bauchi State | Support Service



Are you aware of any Sexual Assault Referral Centres (SARCs), shelters, or other protective services for GBV survivors in your state?



How would you rate the availability of survivor-centered services



Status



SARCs and Shelters

- One government-funded SARC
- Actively receiving survivors
- Services offered: medical treatment, Post-Exposure Prophylaxis (PEP), counseling, documentation, and referral to prosecution

Functional but limited



Free Medical Assistance

- Government facilities are mandated to provide free care.
- Survivors do not face any cost-related barriers.
- Medical reports and forensic services are sometimes accessed for prosecution.

Available





Victims Support Fund

- Victims Support Fund is unavailable

Unavailable

RECOMMENDATIONS

- Establish government-funded SARCs and shelters to provide safe spaces and comprehensive support services for survivors.
- Strengthen free medical assistance by ensuring consistent access to forensic services and timely issuance of medical reports for prosecution.
- Create and operationalize a Victims Support Fund with dedicated budget lines to provide financial relief and sustain survivor services.

Status	
<div></div> <div>Regulatory Body<ul style="list-style-type: none">Formally designated body: GBV Response Committee.Coordinator appointed for domestic violence prevention.Annual report: NOT submitted to government and National Bureau of StatisticsThere is a state coordination mechanism between the relevant MDAs.Protection Officers have NOT been appointed across LGAs.</div>	Established but limited
<div></div> <div>Service Provider Registration<ul style="list-style-type: none">No state-maintained registerOperational guidelines for accredited providers are not available progress.</div>	

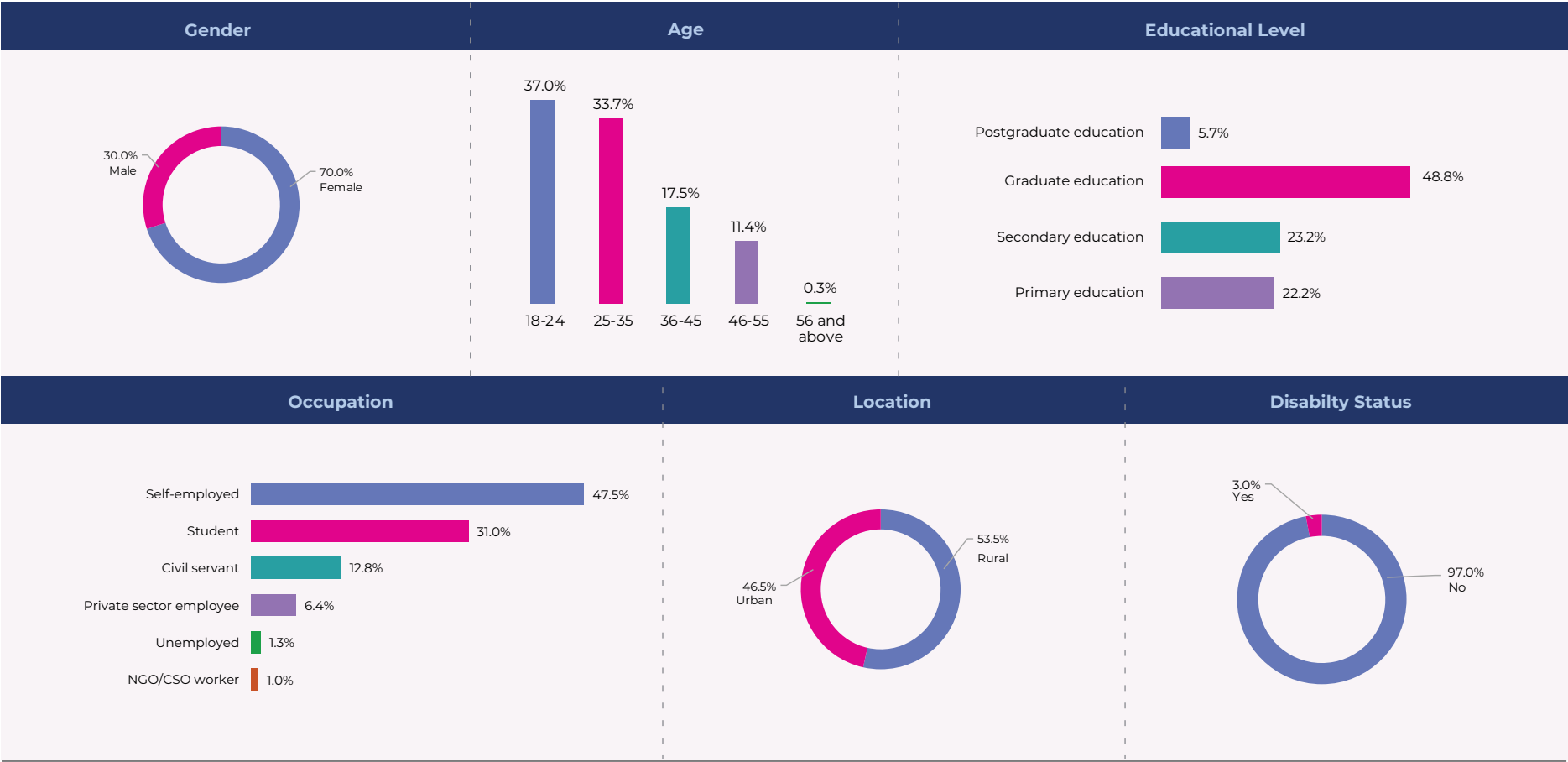
RECOMMENDATIONS
<ul style="list-style-type: none">Strengthen the regulatory body by ensuring annual reporting, appointing Protection Officers across all LGAs, and improving accountability in coordination mechanisms.Establish a state service provider register with clear operational guidelines to standardize accreditation and improve coordination among GBV service providers.





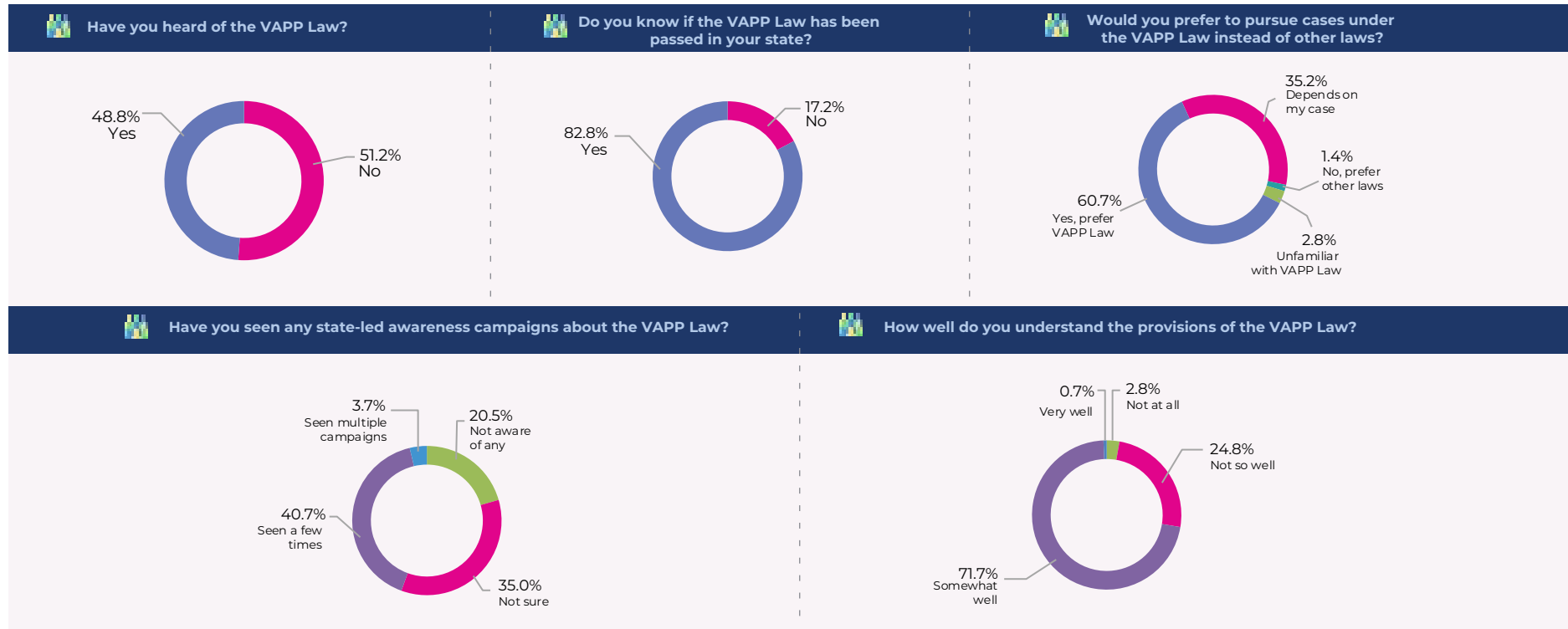
BAYELSA STATE

Bayelsa State | Respondent Demographics (n = 297)



The state’s demographic profile shows a predominantly young and female population, with females making up 70% and the largest age groups between 18–24 years (37%) and 25–35 years (33.7%). Education levels vary, as nearly half (48.8%) have graduate education while others completed secondary (23.2%) or primary education (22.2%). Self-employed individuals (47.5%) and students (31%) form the bulk of respondents, reflecting diverse livelihood patterns that shape how people access information and engage with GBV issues. A slight majority live in rural areas (53.5%), while persons with disabilities constitute 11% of the sample.

Bayelsa State | Public Awareness



FINDINGS

- Bayelsa has implemented VAPP Law awareness initiatives targeting diverse groups and the public.
- Just 48.8% of Bayelsa residents have heard of the VAPP Law.
- Among those aware, 82.8% know the law has been passed in the state, and 60.7% would prefer pursuing cases under it.
- Understanding is shallow: while 71.7% say they know the law “somewhat well” only 0.7% report strong knowledge.

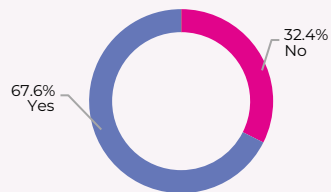
RECOMMENDATIONS

- Expand and diversify awareness campaigns to reach schools, rural communities, traditional leaders, and marginalized groups for deeper understanding of the VAPP Law.
- Track and publish campaign metrics to enable transparent evaluation and continuous improvement of outreach strategies.

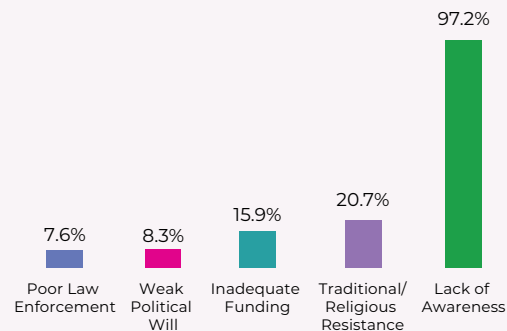
Bayelsa State | Enforcement Systems



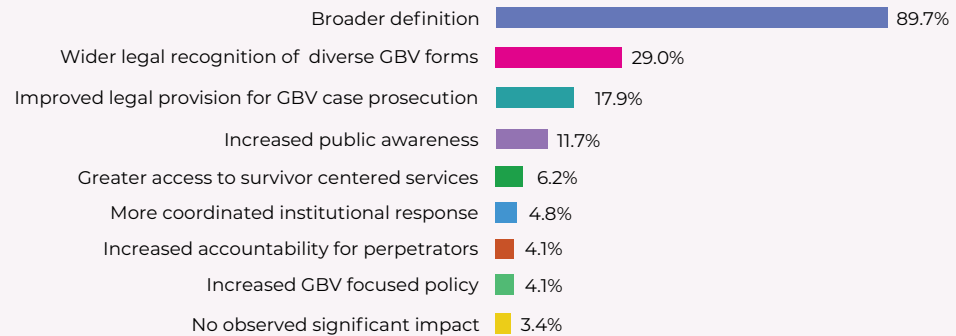
Since the VAPP Law was domesticated in your state, do you think the state's overall response to gender-based violence (GBV) has improved?



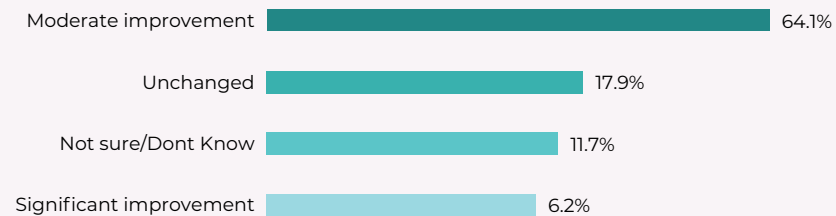
Which of the following do you think are the major barriers to implementing the VAPP Law in your state?



In your opinion, what has been the key impacts of the VAPP Law in your state and across Nigeria?



Since the VAPP Law was passed, do you think GBV survivors in your state have experienced better access to justice?



FINDINGS

- Most respondents (67.6%) believe the state's GBV response has improved since the VAPP Law, though progress remains gradual.
- The law's biggest impact is its broader GBV definition, cited by 89.7%, followed by improved legal recognition of diverse abuse forms (29.0%) and stronger prosecutorial provisions (17.9%).
- For access to justice remains, 64.1% report moderate improvement, only 6.2% see significant progress, while 29.6% note no change or are uncertain.
- Lack of awareness is the dominant barrier (97.2%), far outweighing cultural/religious resistance (20.7%), inadequate funding (15.9%), weak political will (8.3%), and poor law enforcement (7.6%).

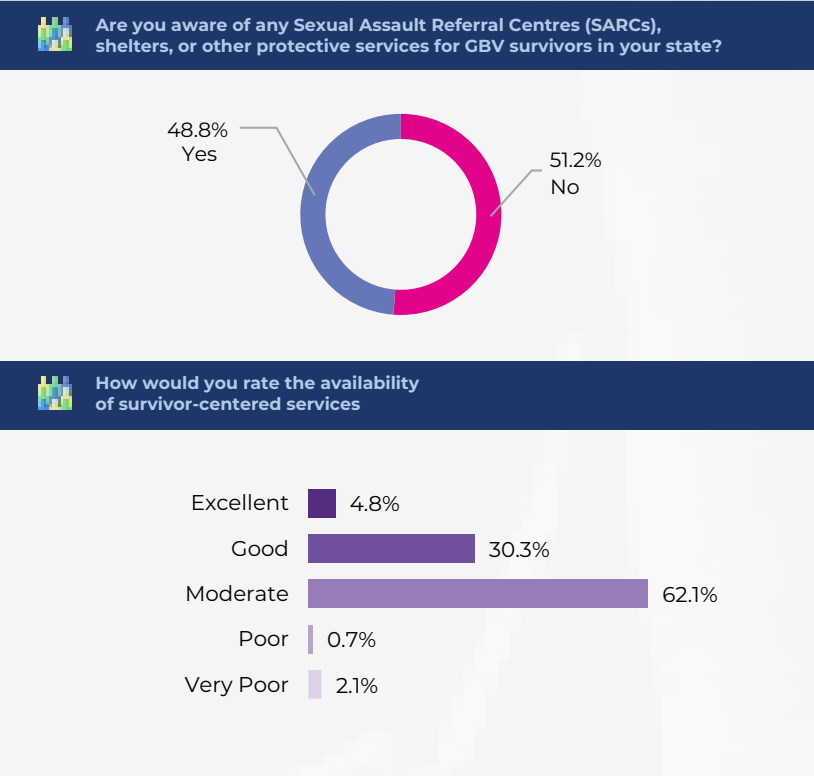
Status		
	Sex Offenders' Register <ul style="list-style-type: none">No Register is available.	Unavailable
	Protection Orders <ul style="list-style-type: none">Courts are authorized to issue ordersNumber of orders issued in the past year is unavailablePolice Enforcement is not consistent	
	Mandatory Reporting <ul style="list-style-type: none">Reporting is not mandatory.Penalties exist for non-complianceStandardized protocols in place	Not Operational
	Legal Remedies <ul style="list-style-type: none">Legal aid providers or pro-bono lawyers for survivors are NOT available.	Unavailable

RECOMMENDATIONS

- Strengthen the Sex Offenders' Register by ensuring regular updates and expanding controlled public access to enhance transparency and community safety.
- Improve enforcement of Protection Orders through consistent police compliance, monitoring, and clear reporting on issued orders.
- Establish mandatory reporting and legal aid services with standardized protocols and accessible pro-bono support for survivors.





Bayelsa State | Support Service



		Status
	SARCs and Shelters <ul style="list-style-type: none">Government funded SARCs and Shelters are available.Actively receiving survivors.Services offered: Temporary housing, Skills acquisition or reintegration support, Medical services and Feeding.	Available
	 Free Medical Assistance <ul style="list-style-type: none">Government facilities are NOT mandated to provide free care.Survivors face any cost-related barriers.Medical reports and forensic services are sometimes accessed for prosecution	Available
	 Victims Support Fund <ul style="list-style-type: none">Funding sources: State budget, donor funding and partner support contributions.Services supported: SARC/Shelter, Rehabilitation and reintegration.	Unavailable

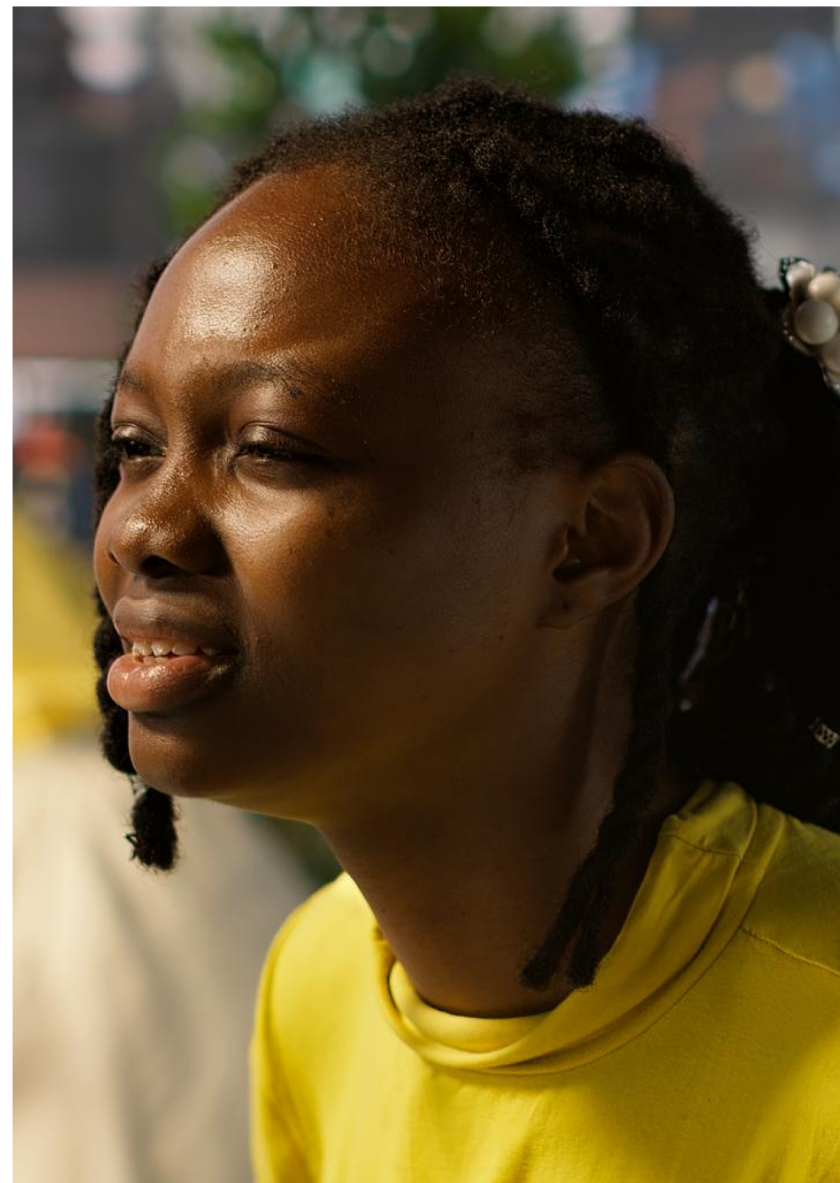
RECOMMENDATIONS

- Mandate free medical assistance in all government health facilities to eliminate cost barriers and ensure equitable survivor care.
- Ensure consistent forensic and medical reporting by standardizing access to documentation required for GBV prosecution.
- Strengthen the Victims Support Fund through sustainable budgetary commitments and improved transparency in resource allocation.

Status	
 <p>Regulatory Body</p> <ul style="list-style-type: none"> A regulatory body has not been established 	Established
 <p>Service Provider Registration</p> <ul style="list-style-type: none"> State-maintained register exists but NOT regularly updated Register been circulated to some relevant institutions. Operational guidelines for accredited providers are in progress. 	Unavailable

RECOMMENDATIONS

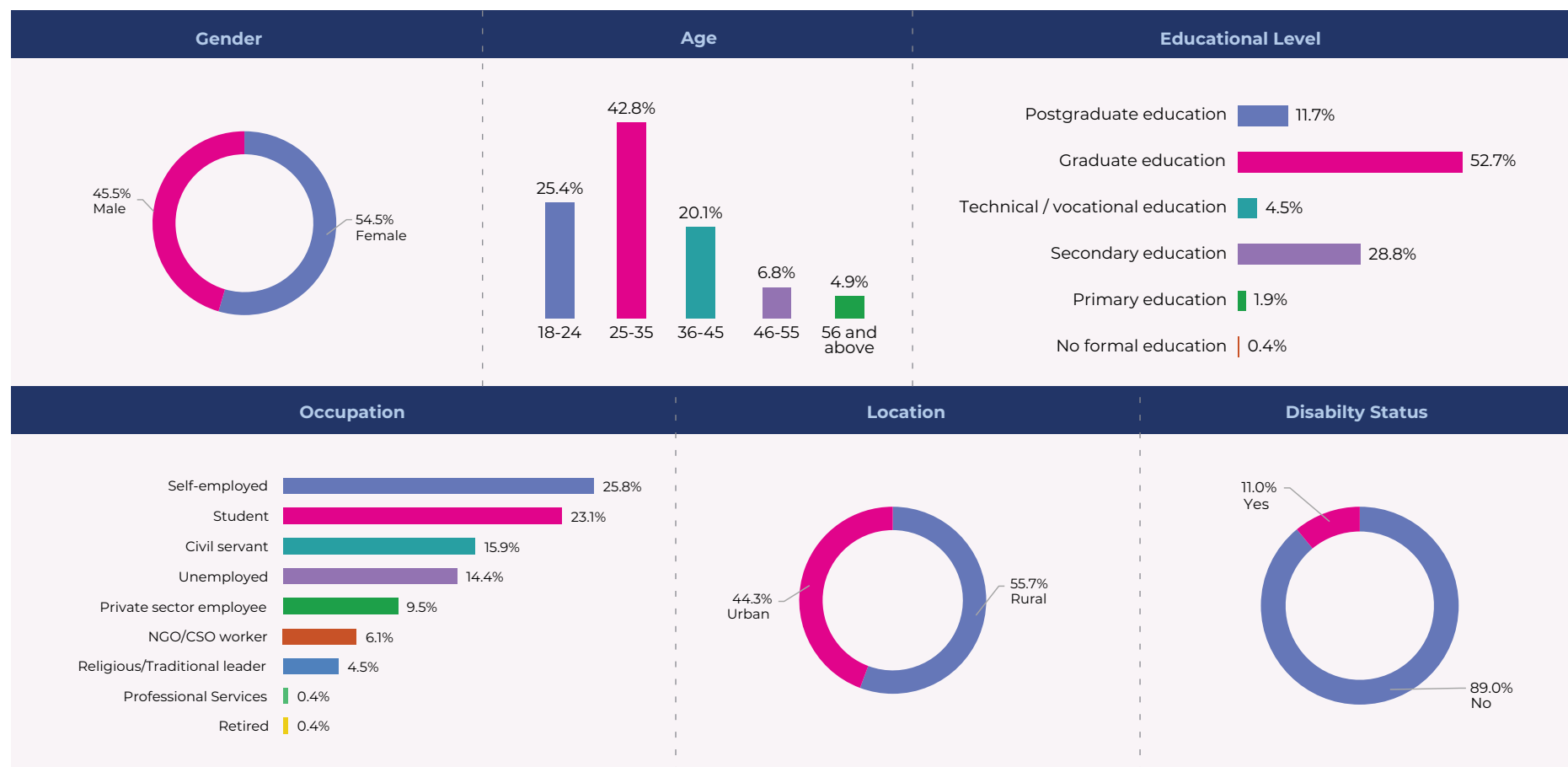
- Appoint a lead regulatory body and coordinator to oversee VAPP Law implementation, with a clear reporting framework and annual submissions to state and federal authorities.
- Institutionalize service provider accreditation by maintaining an updated register and ensuring circulation to all relevant institutions.
- Develop and promote operational guidelines while building awareness and capacity among stakeholders for effective use.





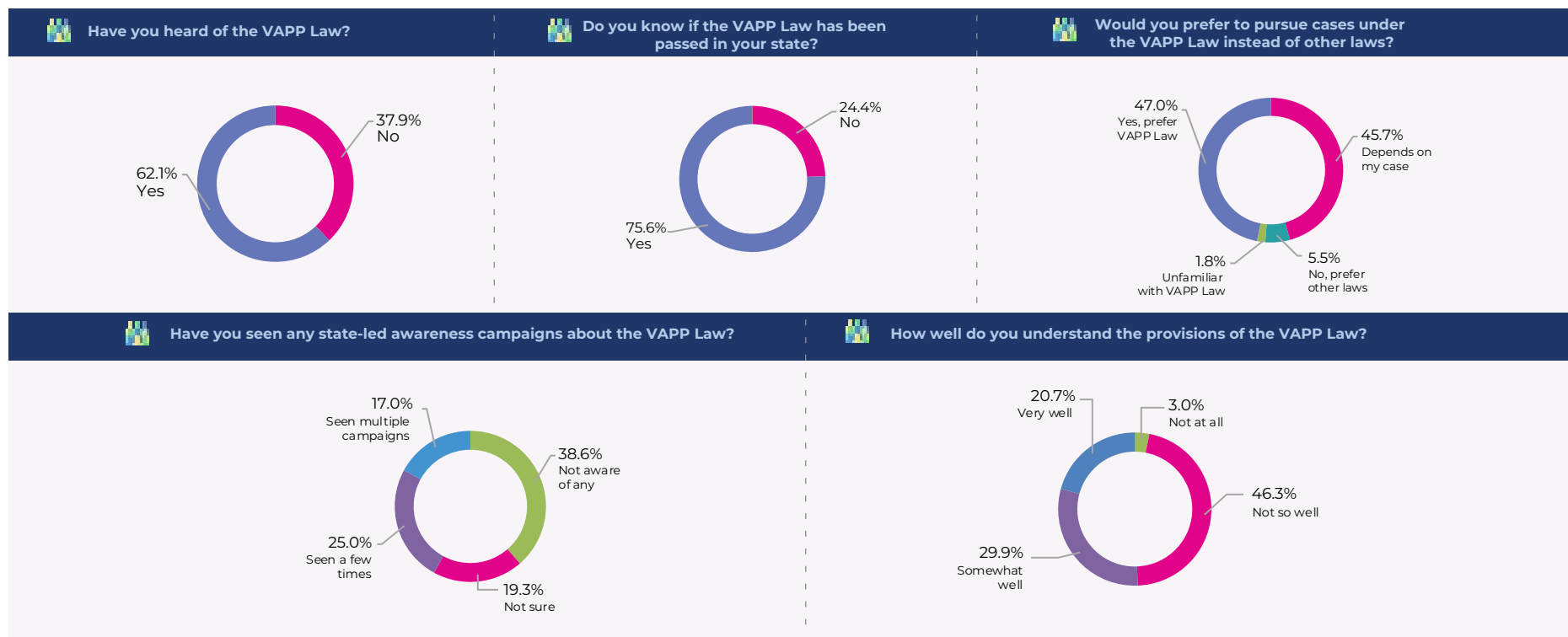
BENUE STATE

Benue State | Respondent Demographics (n = 297)



The respondent profile from Benue State reflects a well-educated, rural-leaning sample. Two-thirds of respondents (64.4%) had graduate or postgraduate education, while just over half (55.7%) reside in rural areas. Women represent 54.5% of respondents, while young adults aged 25-35 years form the largest group at 42.8%. Self-employed individuals (25.8%) and students (23.1%) dominate occupational categories, followed by civil servants (15.9%) and unemployed respondents (14.4%). Persons with disabilities constitute 11% of the sample.

Benue State | Public Awareness



FINDINGS

- The state government has implemented VAPP Law awareness initiatives, reaching schools, health workers, the public, religious groups, traditional leaders, and market associations.
- 62.1% of respondents in Benue State have heard of the VAPP Law.
- Among those aware of the law, only 20.7% report strong knowledge of its provisions, while nearly half admit poor understanding.
- 47.0% of respondents would pursue legal action under the VAPP Act.

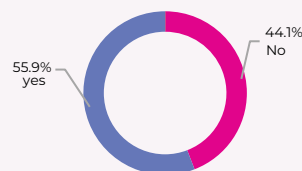
RECOMMENDATIONS

- Increase outreach efforts to reach a larger audience, especially those who haven't been exposed to existing initiatives.
- Enhance awareness initiatives to provide more in-depth information about the VAPP Law's provisions, beyond just raising awareness.
- Institutionalize training for frontline workers and engage community champions/peer educators for sustained awareness.

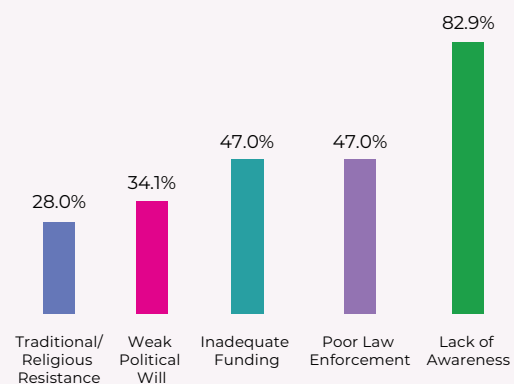
Benue State | Enforcement Systems



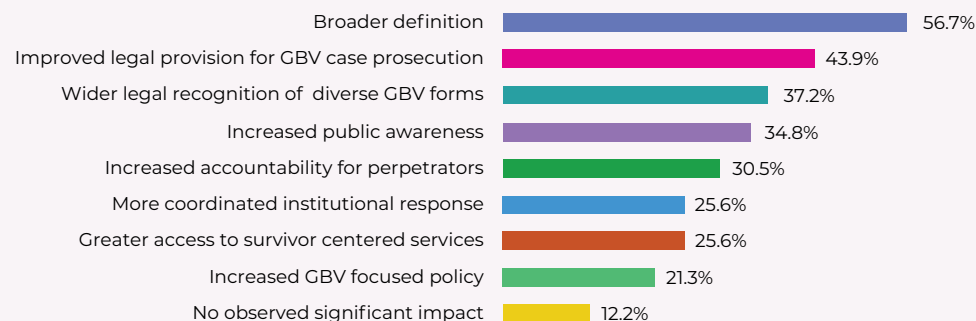
Since the VAPP Law was domesticated in your state, do you think the state's overall response to gender-based violence (GBV) has improved?



Which of the following do you think are the major barriers to implementing the VAPP Law in your state?



In your opinion, what has been the key impacts of the VAPP Law in your state and across Nigeria?







Since the VAPP Law was passed, do you think GBV survivors in your state have experienced better access to justice?



FINDINGS

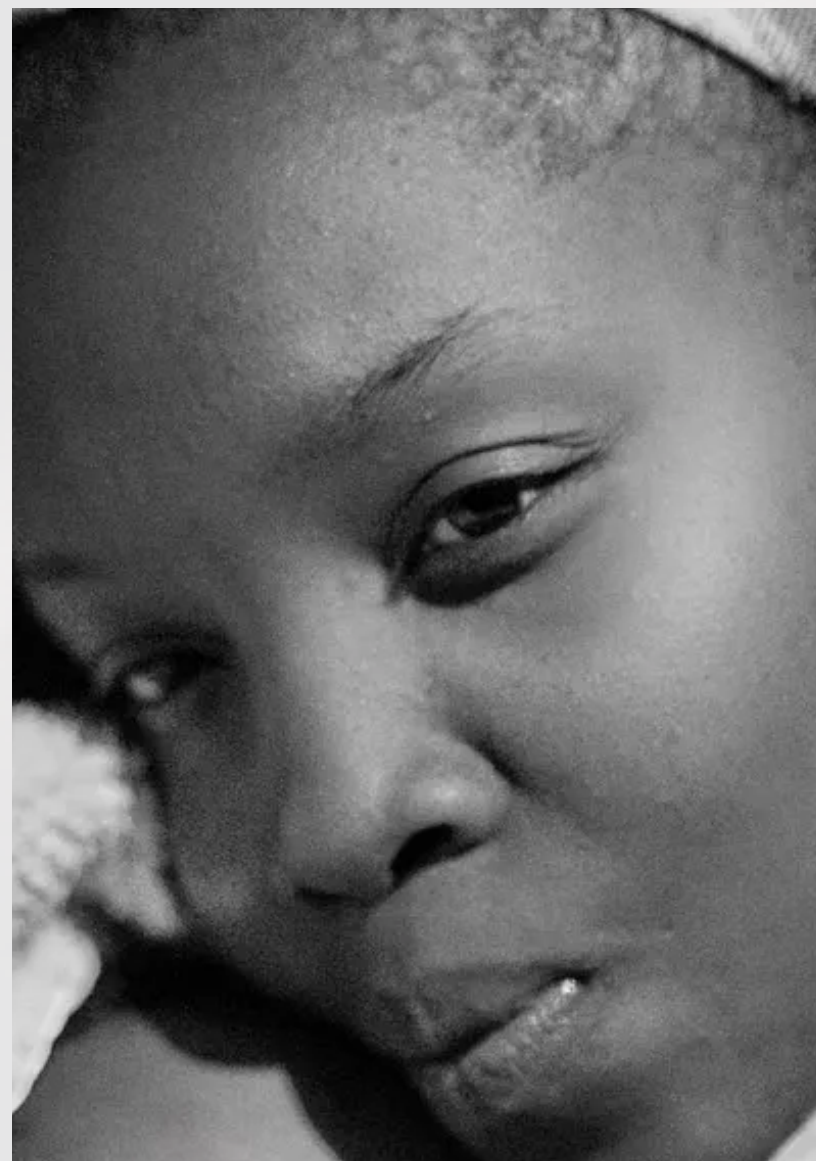
- 55.9% of respondents believe the state's response to GBV has improved, while 44.1% see no significant change.
- Key impacts include broader GBV definitions (56.7%), stronger prosecution provisions (43.9%), and wider legal recognition (37.2%).
- Access to justice shows 31.7% report moderate improvement and 21.3% significant progress, though many remain unconvinced.
- Major barriers include lack of awareness (82%), poor enforcement (47%), weak political will (47%), and inadequate funding (34.1%).

Benue State | Enforcement Systems

		Status
 Sex Offenders' Register <ul style="list-style-type: none"> Register established and functional Linked to national GBV database Irregularly updated Accessible to the public 		<div>Functional but limited</div> <div>Operational</div> <div>Fully Operational</div> <div>Partially Operational</div>
 Protection Orders <ul style="list-style-type: none"> Courts are authorized to issue orders Number of orders issued in the past year is unavailable Police Enforcement is consistent 		
 Mandatory Reporting <ul style="list-style-type: none"> VAPP Law mandates reporting Penalties exist for non-compliance Standardized protocols in place 		
 Legal Remedies <ul style="list-style-type: none"> Legal aid and pro bono services are available for survivors. Number of survivors who received compensation in the past year: None Number of cases prosecuted under VAPP Act in the past 12 months: 11-20. 		

RECOMMENDATIONS

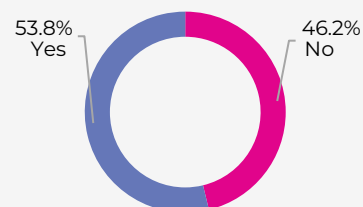
- Strengthen awareness campaigns targeting communities, schools, and local leaders to address the major gap in public knowledge.
- Improve enforcement and monitoring by ensuring regular updates of the Sex Offenders' Register and publishing data on Protection Orders.
- Expand survivor support by activating compensation mechanisms and scaling up access to legal remedies beyond legal aid.
- Increase political and financial commitment through stronger state funding, coordinated oversight, and accountability frameworks across MDAs.



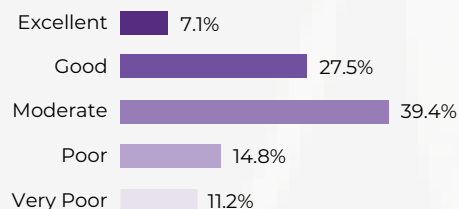
Benue State | Support Service



Are you aware of any Sexual Assault Referral Centres (SARCs), shelters, or other protective services for GBV survivors in your state?



How would you rate the availability of survivor-centered services?



Status



SARCs and Shelters

- One government-owned SARC
- SARC is non-functional due to absence of dedicated budget line for its operations

Available but Non-functional



Free Medical Assistance

- Government facilities are not mandated to provide free care.
- Survivors face cost-related barriers.
- Medical reports and forensic services are only sometimes accessed for prosecution.

Unavailable





Victims Support Fund

- Funding sources: Primarily donor and partner support.
- It has not received or disbursed resources in the past year.
- Previously supported legal aid, medical care, psychosocial services, and SARC/Shelter operations.

Established but Inactive

RECOMMENDATIONS

- Strengthen SARCs and Shelters by improving funding, expanding coverage across communities, and ensuring consistent quality of survivor-centered services.
- Mandate free medical care in government health facilities for GBV survivors, including guaranteed access to medical reports and forensic documentation needed for prosecutions.
- Reactivate and sustain the Victims Support Fund through stable state budget allocations and stronger donor/partner engagement to provide continuous financial and psychosocial support for survivors.

Status	
<div></div> <div>Regulatory Body<ul style="list-style-type: none">Formally designated body: Ministry of Women AffairsCoordinator for domestic violence prevention: Not appointed.Annual report: Submitted to state government but not to the National Bureau of Statistics.There is a state coordination mechanism between the relevant MDAs.Protection Officers are appointed across LGAs.</div>	Established but Limited
<div></div> <div>Service Provider Registration<ul style="list-style-type: none">State-maintained register exists but is infrequently updated.Register circulated only to some institutions (e.g., police stations, protection officers, courts), leaving gaps.Operational guidelines for accredited providers are in place.</div>	

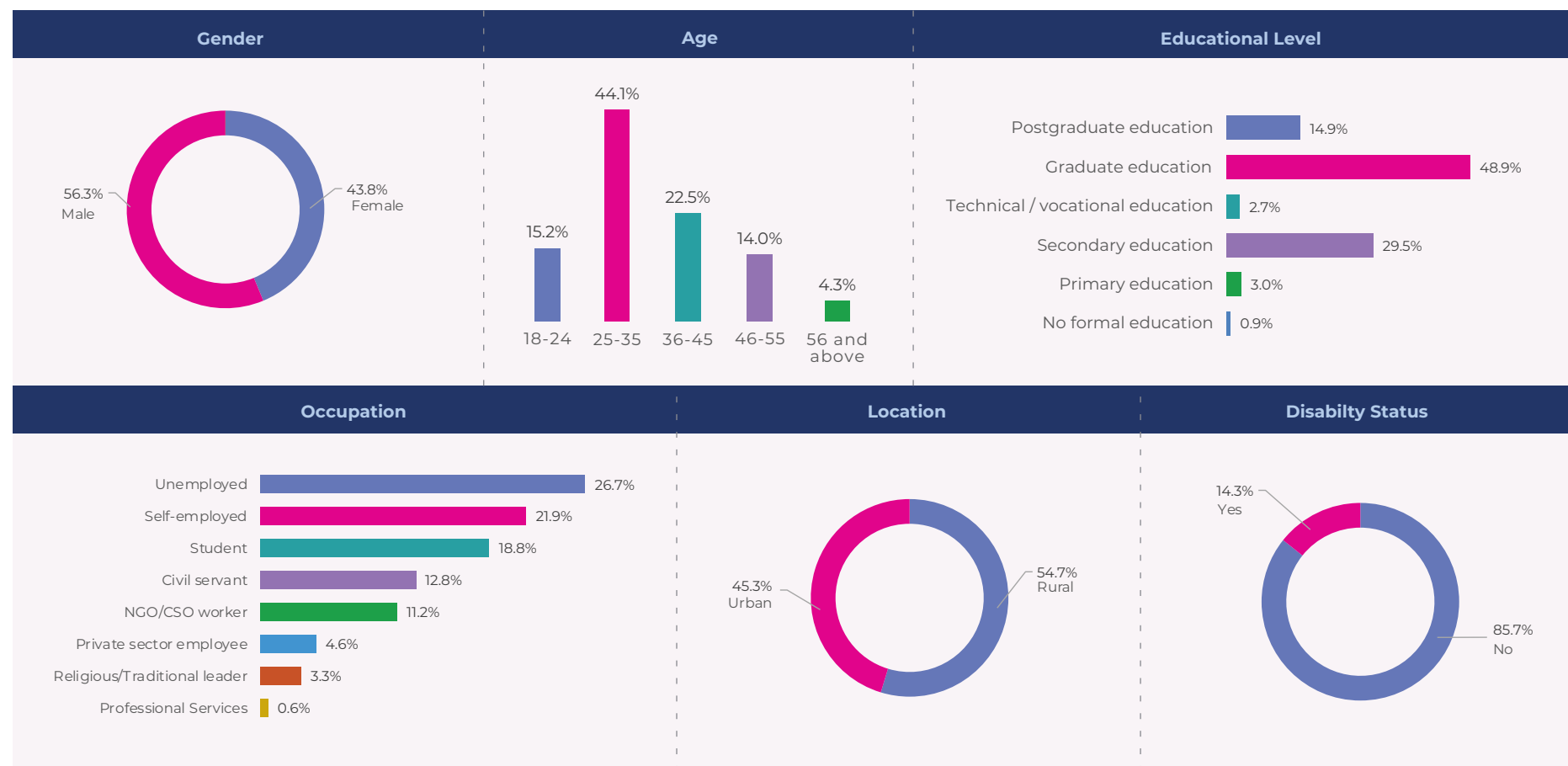
RECOMMENDATIONS
<ul style="list-style-type: none">Appoint a Domestic Violence Coordinator within the Ministry of Women Affairs to provide dedicated leadership and strengthen oversight of VAPP Law implementation.Ensure annual reports are submitted to the National Bureau of Statistics (NBS) for integration into national data systems and to enhance accountability.Update and fully circulate the service provider register regularly, ensuring all relevant institutions (police, courts, health facilities, and protection officers) have access, alongside finalized operational guidelines.





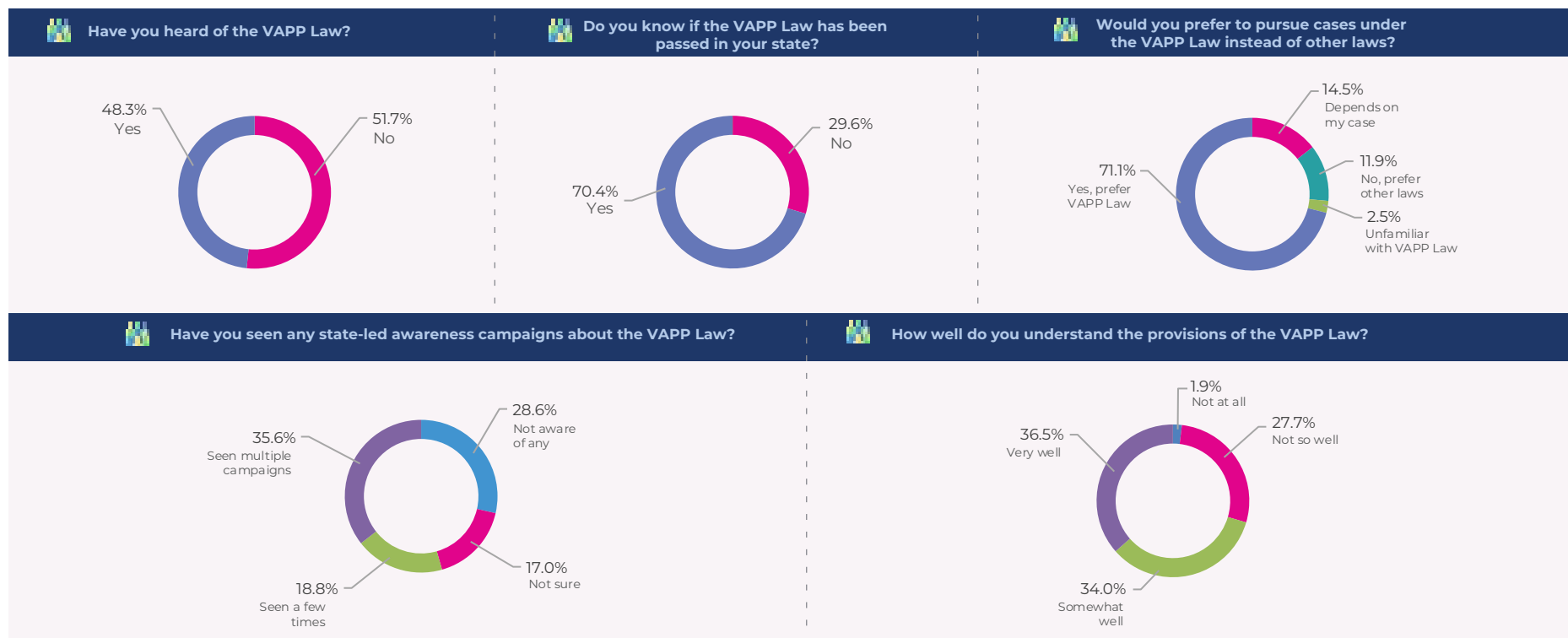
BORNO STATE

Borno State | Respondent Demographics (n = 329)



A slight majority of the respondents in Borno State are male (56.3%) while 43.8% are female. While 54.7% reside in rural areas, 45.3% in urban areas. The largest age group is 25–35 years (44.1%), followed by those aged 36–45 (22.5%). Educational attainment is relatively high, with 48.9% holding tertiary qualifications and 14.9% having completed postgraduate studies. Most respondents are unemployed (26.7%), while 21.9% are self-employed and 18.8% are students. Persons with disabilities constitute 14.3% of the sample.

Borno State | Public Awareness



FINDINGS

- The state government has implemented targeted sensitization campaigns aimed at both law enforcement agencies and the public.
- Only 54.4% of respondents reported exposure to state-led VAPP Law campaigns.
- 51.7% of respondents do not know the VAPP Law exists in Borno State.
- Understanding of the law's provisions is mixed: only 36.5% report strong comprehension, while the majority show partial or limited knowledge.

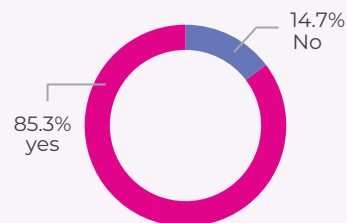
RECOMMENDATIONS

- Expand awareness campaigns by scaling outreach in rural and urban areas using radio, TV, and community forums.
- Targeted education programs should be developed in schools, religious centers, and community groups to strengthen public understanding of the law's provisions.
- Simplify and localize campaign materials in local languages with visual aids to improve comprehension and ensure diverse groups can engage with the VAPP Law.

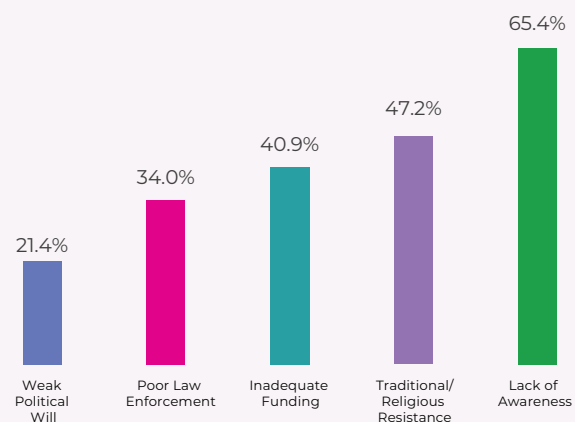
Borno State | Enforcement Systems



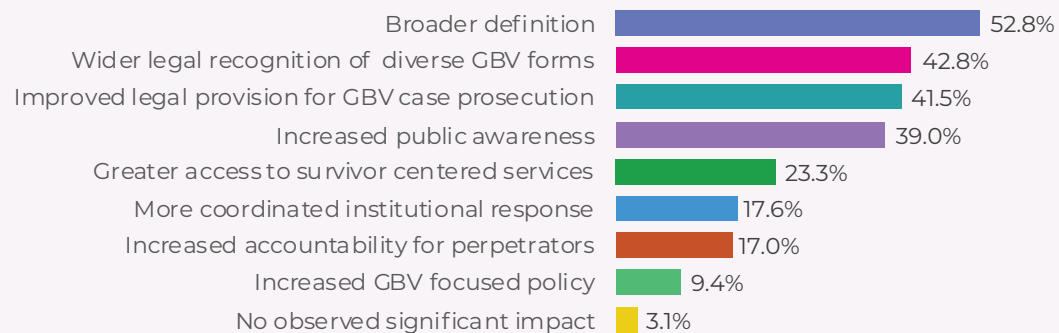
Since the VAPP Law was domesticated in your state, do you think the state's overall response to gender-based violence (GBV) has improved?



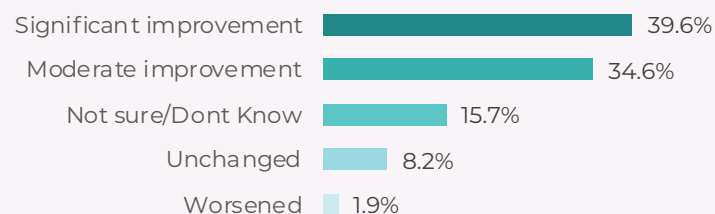
Which of the following do you think are the major barriers to implementing the VAPP Law in your state?



In your opinion, what has been the key impacts of the VAPP Law in your state and across Nigeria?







Since the VAPP Law was passed, do you think GBV survivors in your state have experienced better access to justice?



FINDINGS

- 85.3% of respondents think the state's response to GBV has improved since adopting the VAPP Law.
- The law's key impacts include a broader definition of GBV, wider legal recognition of diverse forms, and improved prosecution provisions.
- Access to justice perceptions show 39.6% report significant improvement.
- Major challenges include lack of awareness (65.4%), traditional/religious resistance (47.2%), inadequate funding (40.9%), and poor law enforcement (34.0%).

		Status
	Sex Offenders' Register <ul style="list-style-type: none">Register established and functionalUpdated quarterlyAccessible only to select officials (not the public)	Operational but Limited
	Protection Orders <ul style="list-style-type: none">Courts are not authorized to issue orders	
	Mandatory Reporting <ul style="list-style-type: none">VAPP Law mandates reportingPenalties do not exist for non-complianceStandardized protocols NOT in place	Operational but Limited
	Legal Remedies <ul style="list-style-type: none">Survivors have successfully obtained compensation or restitution through the provisions of the VAPP Law.Number of cases prosecuted under VAPP Act in the past 12 months: more than 20 cases.	

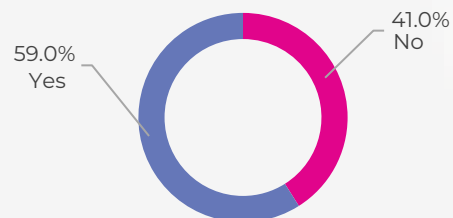
RECOMMENDATIONS
<ul style="list-style-type: none">Expand controlled public access to the Sex Offenders' Register to improve awareness, deterrence, and trust while safeguarding sensitive data.Authorize and equip courts to issue Protection Orders under the VAPP Law, supported by training for judicial officers.Strengthen access to justice by expanding pro bono services, deploying mobile legal clinics, and addressing barriers through sustained awareness and community engagement.



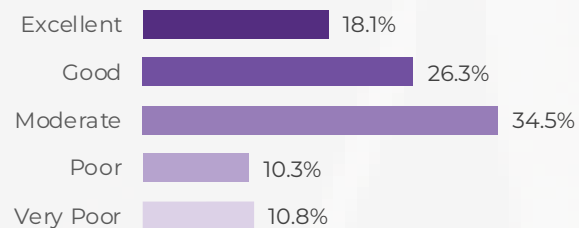
Borno State | Support Service



Are you aware of any Sexual Assault Referral Centres (SARCs), shelters, or other protective services for GBV survivors in your state?



How would you rate the availability of survivor-centered services



Status



SARCs and Shelters

- Two functional government-funded SARCs
- Two state-owned shelters
- Actively receiving survivors
- Services offered: medical treatment, trauma counselling, and empowerment support

Available and Functional



Free Medical Assistance

- Government facilities are not mandated to provide free care under the VAPP Law.
- No private facilities provide free services.
- Survivors face any cost-related barriers.
- Medical reports and forensic services are accessible for prosecution.

Not Available





Victims Support Fund

- No state-funded financial assistance mechanism exists.
- Survivors lack support for essential services and long-term rehabilitation.

Not Established

RECOMMENDATIONS

- Establish State-Funded SARCs and Shelters.
- Mandate Free Medical Assistance for GBV Survivors.
- Set up a state-managed Victims Support Fund, backed by budget allocations, donor contributions, and private sector support.

Status	
<div><div>Regulatory Body<ul style="list-style-type: none">No formally designated body to coordinate VAPP Law implementation.No Coordinator appointed.No annual implementation reports submitted to state/federal government or NBS.Protection Officers not appointed to assist the courts.</div></div>	Not Established
<div><div>Service Provider Registration<ul style="list-style-type: none">The state maintains a register of accredited service providers.The register is updated regularly and circulated to relevant institutions (police stations, courts, etc.).Operational guidelines for accredited providers have been developed.</div></div>	Established

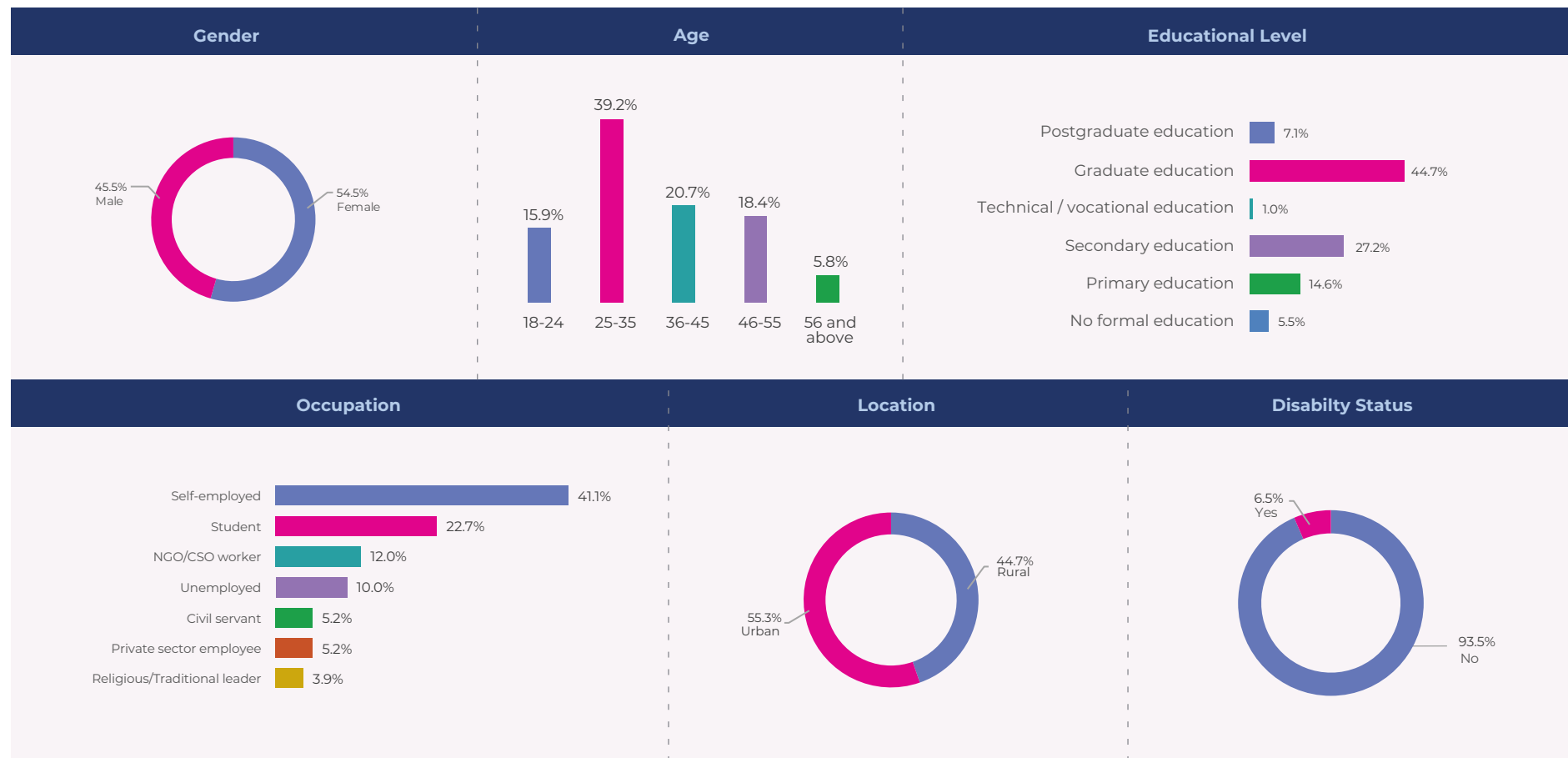
RECOMMENDATIONS
<ul style="list-style-type: none">Designate a lead agency and Coordinator to ensure compliance and reporting.Post Protection Officers across LGAs to support courts and survivors.Enforce annual reporting and link service provider data to national systems.





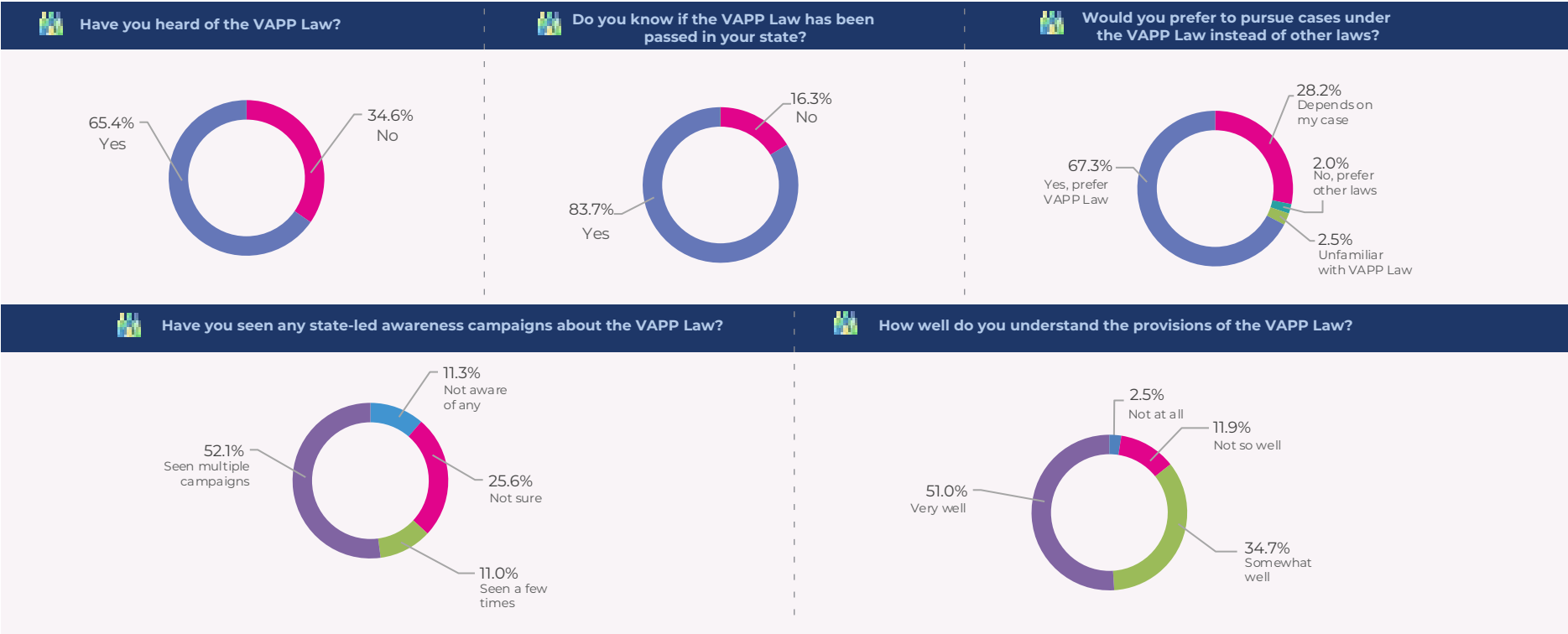
CROSS RIVER STATE

Cross River State | Respondent Demographics (n = 309)



The sample from Cross River State comprises 54.5% female and 45.5% male respondents, with a reasonable urban–rural balance: 55.3% reside in urban areas and 44.7% in rural communities. Nearly half of the participants hold graduate education, with 44.7% being graduates and 7.1% postgraduates. Others have completed secondary (27.2%) or primary education (14.6%). The largest age group is 25–35 years (39.2%), followed by those aged 36–45 years (20.7%). Self-employed individuals represent the largest occupational category (41.1%), alongside students (22.7%) and NGO/CSO workers (12%). Persons with disabilities account for 6.5% of the sample.

Cross River State | Public Awareness



FINDINGS

- Cross River State has conducted awareness campaigns on the VAPP Law, engaging diverse groups including religious leaders, traditional rulers, health professionals, law enforcement personnel, and members of the public.
- 65.4% of respondents know about the VAPP Law and 52.1% have seen multiple campaigns.
- 67.3% prefer using the VAPP Law for cases.

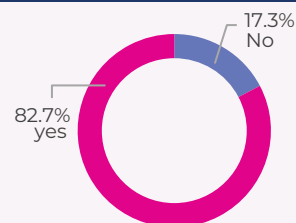
RECOMMENDATIONS

- Expand and diversify outreach campaigns using community-based platforms (town halls, religious gatherings, schools, local media).
- Improve public comprehension of the VAPP Law by providing simplified guides, local-language materials, interactive workshops, and creative formats (storytelling, drama).

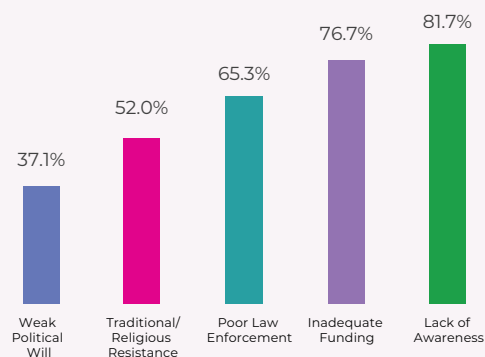
Cross River State | Enforcement Systems



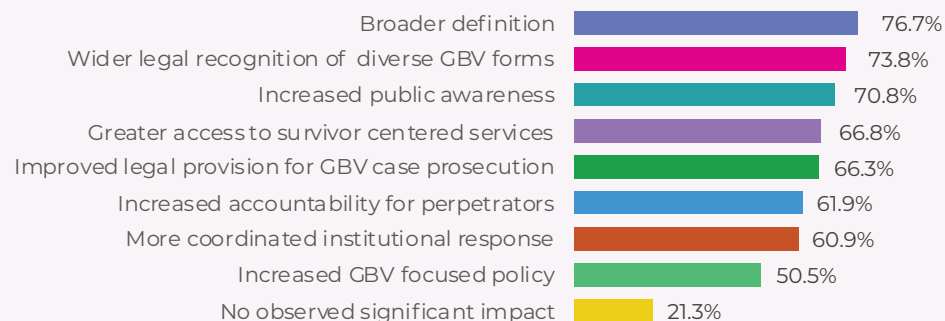
Since the VAPP Law was domesticated in your state, do you think the state's overall response to gender-based violence (GBV) has improved?



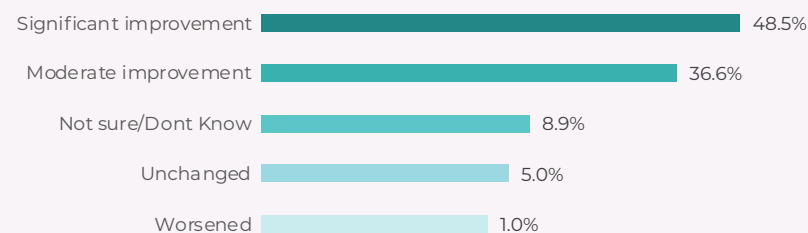
Which of the following do you think are the major barriers to implementing the VAPP Law in your state?



In your opinion, what has been the key impacts of the VAPP Law in your state and across Nigeria?







Since the VAPP Law was passed, do you think GBV survivors in your state have experienced better access to justice?



FINDINGS

- 82.7% of respondents believe Cross River State's GBV response has improved
- The VAPP Law has led to broader GBV definitions (76.7%), wider legal recognition (73.8%), increased public awareness (70.8%), better survivor-centered services (66.8%), and stronger prosecution provisions (66.3%).
- Key challenges remain, including lack of awareness (81.7%), inadequate funding (76.7%), poor law enforcement (65.3%), traditional and religious resistance (52.0%), and weak political will (37.1%)

		Status
	Sex Offenders' Register <ul style="list-style-type: none">No public register in place.	Not Established
	Protection Orders <ul style="list-style-type: none">Courts are authorized to issue ordersNo publicly available data on orders issued in the past year.Police Enforcement is consistent	
	Mandatory Reporting <ul style="list-style-type: none">VAPP Law mandates reporting by professionals in health, social welfare, and education.Penalties exist for non-complianceStandardized protocols in place.	Fully Operational
	Legal Remedies <ul style="list-style-type: none">Legal aid and pro bono services available.Over 20 cases have been prosecuted under the VAPP Law in the past year.Survivors have successfully obtained restitution.	Fully Operational

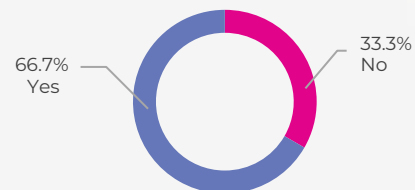
RECOMMENDATIONS
<ul style="list-style-type: none">Establish and operationalize a public Sex Offenders' Register.Strengthen accountability on Protection Orders.Strengthen systemic support through sustained public education campaigns



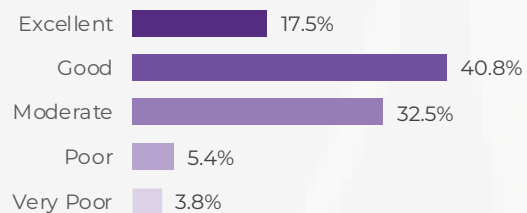
Cross River State | Support Service



Are you aware of any Sexual Assault Referral Centres (SARCs), shelters, or other protective services for GBV survivors in your state?



How would you rate the availability of survivor-centered services



Status



SARCs and Shelters

- One state-funded SARC
- No state-owned shelter
- Services offered: medical care and psychosocial support

Functional but Limited



Free Medical Assistance

- Government facilities are not mandated to provide free medical care.
- Cost-related barriers hinder survivors' access to treatment.
- Medical reports and forensic services are only sometimes accessed for prosecution.

Not Available





Victims Support Fund

- No financial assistance mechanisms available for survivors.
- Absence of support fund limits access to essential services and long-term rehabilitation.

Established and Operational

RECOMMENDATIONS

- Establish State-Funded SARCs and Shelters.
- Mandate all state health facilities to provide free medical and forensic services.
- Create and Operationalize a Victims Support Fund

Status	
<div><p>Regulatory Body</p><ul style="list-style-type: none">No formally designated agency to oversee VAPP Law enforcement.No state-appointed Coordinator to submit annual reports to government or NBS.No designated Protection Officers to support courts in GBV case management.</div>	<p>Not Established</p>
<div><p>Service Provider Registration</p><ul style="list-style-type: none">The state-maintained register of accredited providers exists and is regularly updated.The register has not been circulated to relevant institutions (police, protection officers, courts).Operational guidelines for accredited providers are in progress.</div>	

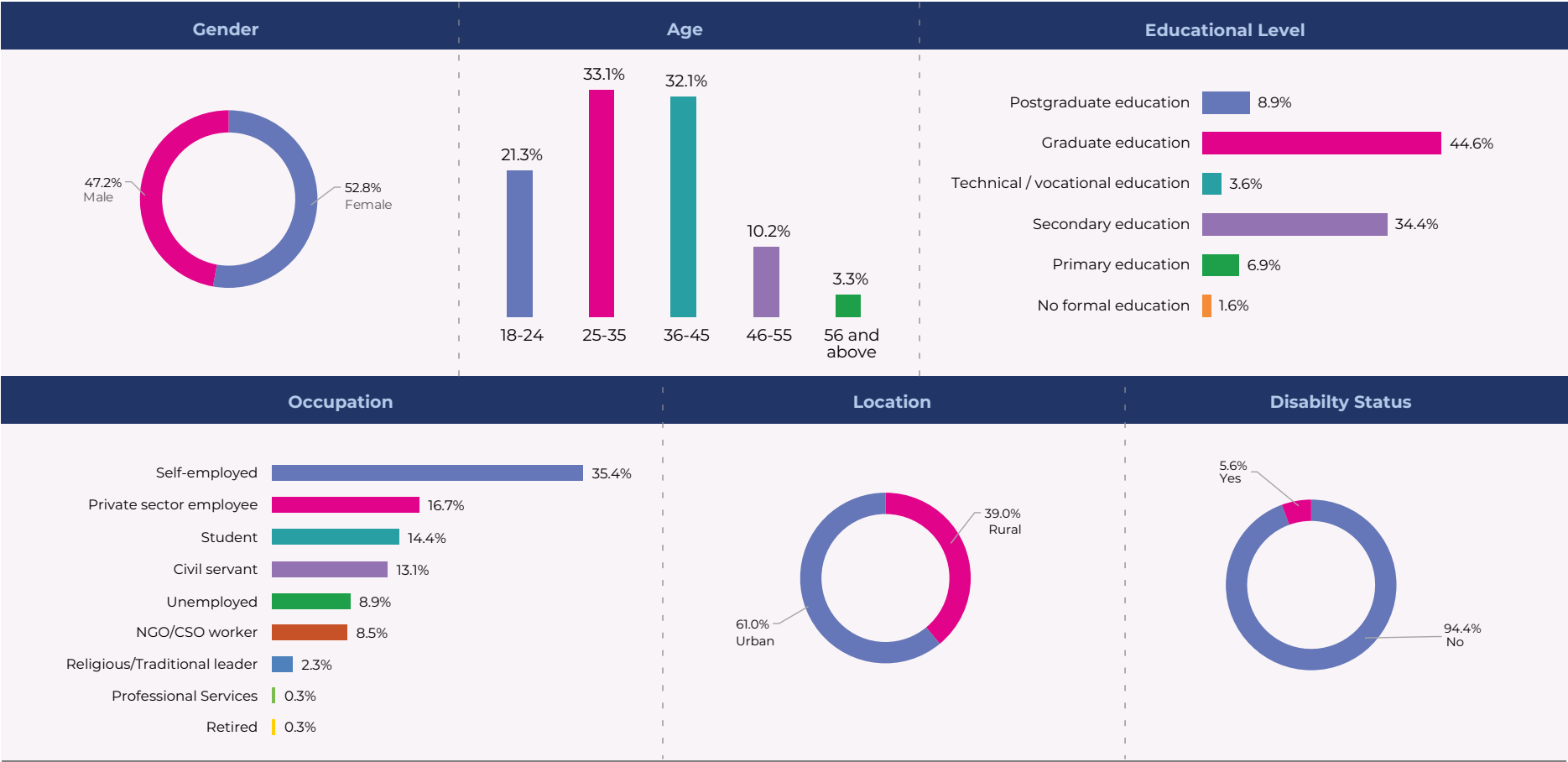
RECOMMENDATIONS
<ul style="list-style-type: none">Legally designate a lead agency to oversee VAPP Law implementation and appoint a Coordinator responsible for annual reporting to government and NBS, ensuring leadership and accountability.Ensure Protection Officers are appointed and trained to support courts, improving survivor access to timely legal protection and coordinated responses.Circulate and Operationalize Service Provider Register





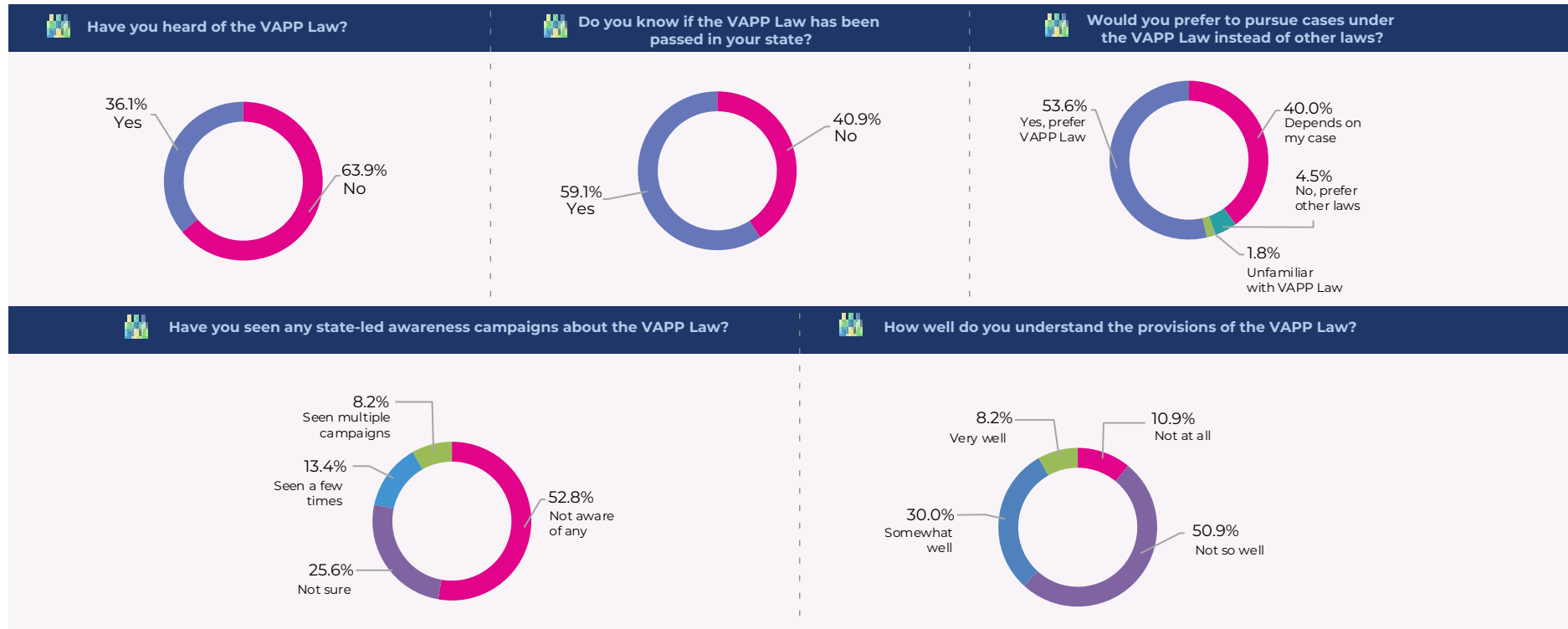
DELTA STATE

Delta State | Respondent Demographics (n = 305)



The respondent profile from Delta State shows 53.5% holding graduate education, and 34.4% secondary school degrees. Urban residents make up 61.0% of the sample. The gender distribution is relatively balanced, with females slightly more represented at 52.8%. Young adults aged 25–35 years form the largest age group (33.1%), closely followed by those aged 36–45 years (32.1%). Occupationally, self-employed individuals dominate the sample (35.4%), followed by private sector employees (16.7%), students (14.4%), and civil servants (13.1%). Persons with disabilities constitute 5.6% of the respondents.

Delta State | Public Awareness



FINDINGS

- The state government has implemented VAPP Law awareness initiatives, reaching schools, health workers, the public, religious groups, traditional leaders, and market associations.
- Only 36.1% of respondents have heard of the VAPP Law; 63.9% are unaware.
- Exposure to state-led campaigns is low: 52.8% never saw any campaigns/
- Among those aware, 59.1% know the law has been enacted.

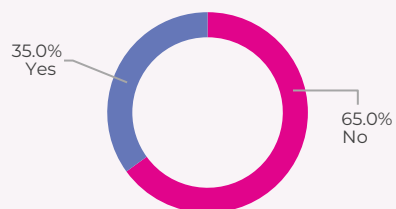
RECOMMENDATIONS

- Launch broad, sustained campaigns to reach those unaware of the VAPP Law.
- Provide simple, local-language materials and interactive programs on the law's provisions.
- Strengthen trust and guidance to ensure survivors use the VAPP Law effectively.

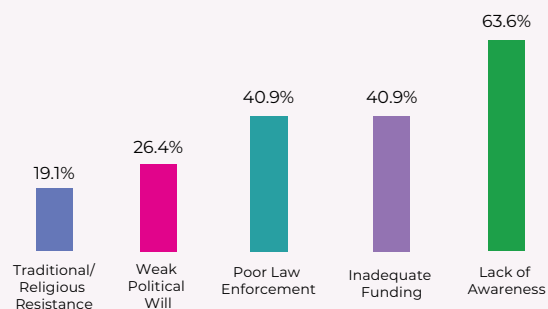
Delta State | Enforcement Systems



Since the VAPP Law was domesticated in your state, do you think the state's overall response to gender-based violence (GBV) has improved?



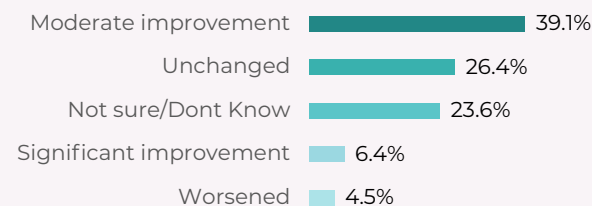
Which of the following do you think are the major barriers to implementing the VAPP Law in your state?



In your opinion, what has been the key impacts of the VAPP Law in your state and across Nigeria?







Since the VAPP Law was passed, do you think GBV survivors in your state have experienced better access to justice?



FINDINGS

- 35% of respondents feel the state's response to GBV has improved since the VAPP Law, while a staggering 65% see no progress.
- Respondents attribute several positive impacts to the VAPP Law, including increased perpetrator accountability, broader recognition of GBV forms, and better prosecution outcomes.
- Significant hurdles to effective implementation persist, including widespread lack of awareness, inadequate funding, poor enforcement, weak political will, and resistance from traditional or religious groups.

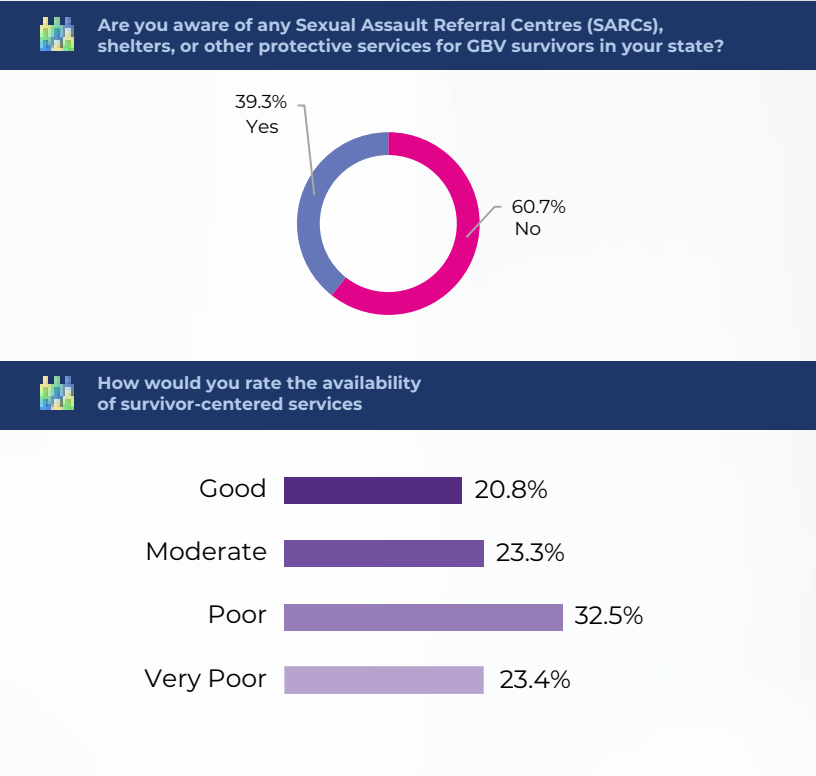
		Status
	Sex Offenders' Register <ul style="list-style-type: none">Register established and linked to national GBV database.Occasionally updated with convicted offenders.Access restricted to judicial officers only.	Operational
	Protection Orders <ul style="list-style-type: none">Courts legally authorized to issue Protection OrdersEnforcement by police is occasionalNo public data on number of orders issued in the past year	
	Mandatory Reporting <ul style="list-style-type: none">Reporting mandated for health, education, and social welfare professionalsPenalties exist for non-complianceNo standardized protocols across institutions, leading to inconsistent responses.	Operational
	Legal Remedies <ul style="list-style-type: none">Survivors supported by pro bono lawyers and legal aid organizationsOver 20 GBV cases prosecuted in the past 12 monthsSurvivors have successfully received compensation under the VAPP Law .	Fully Operational

RECOMMENDATIONS

- Allow controlled public access to the register to enhance deterrence, transparency, and community protection, while safeguarding privacy rights.
- Publish annual data on issued Protection Orders and ensure consistent police enforcement.
- Develop clear, state-wide procedures for reporting and referral across all sectors to ensure timely, coordinated, and survivor-centered responses.





Delta State | Support Service



Status	
<div>SARCs and Shelters<ul style="list-style-type: none">Three government-owned SARCs in Asaba, Warri, and Ughelli.Actively receiving and supporting survivors.Services offered: Temporary housing, feeding, medical care, psycho-social counselling, skills acquisition/reintegration support, and legal aid.</div>	Fully Functional
<div>Free Medical Assistance<ul style="list-style-type: none">Government facilities mandated to provide free medical care under the VAPP Law.Survivors access treatment without cost-related barriers.Medical reports and forensic services occasionally available for prosecution.</div>	
<div>Victims Support Fund<ul style="list-style-type: none">No state-led Victims Support Fund in place.Survivors lack consistent financial, transportation, or livelihood support beyond immediate care.</div>	

RECOMMENDATIONS

- Establish a state-funded and partner-supported mechanism to cover survivors’ ongoing needs.
- Ensure consistent availability of medical reports and forensic evidence collection in all state facilities.
- Increase funding and staffing for existing SARCs to maintain quality services and extend reach, ensuring more survivors can access timely and comprehensive care.

Status	
<p>Regulatory Body</p>  <ul style="list-style-type: none"> Formally designated body: GBV Response Committee. Coordinator appointed for domestic violence prevention. Annual report: Not submitted to government or NBS (non-compliance with VAPP Act). State coordination mechanism exists between MDAs and social sectors. Protection Officers appointed across all LGAs. 	Operational
<p>Service Provider Registration</p>  <ul style="list-style-type: none"> State-maintained register exists but not regularly updated. Register has not been shared with police, protection officers, and courts. Clear operational guidelines for accredited providers are established. 	

RECOMMENDATIONS

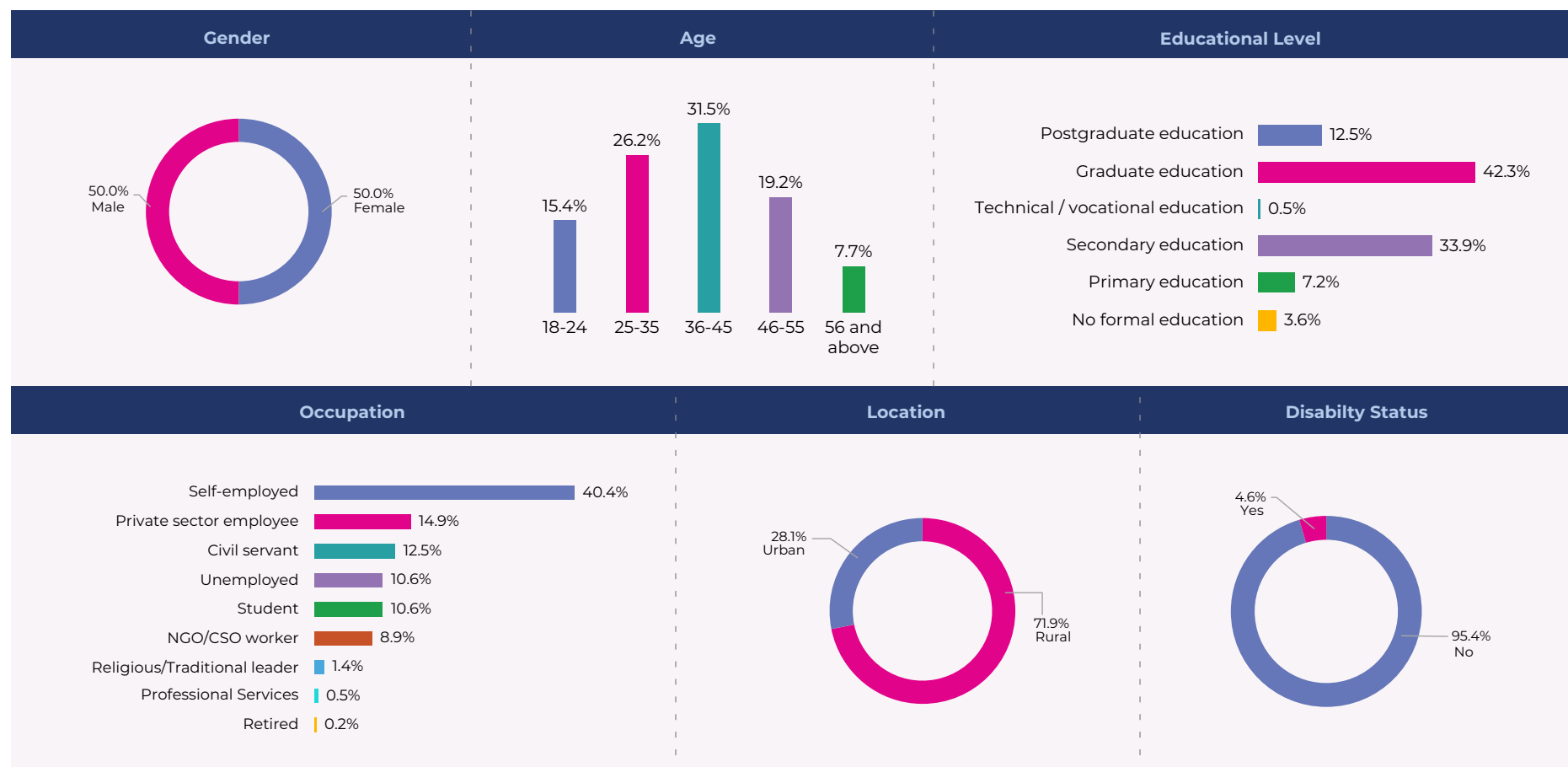
- Ensure annual VAPP reports are submitted to state, federal, and NBS.
- Regularly update service provider lists and circulate to police, courts, and officers.
- Strengthen inter-agency collaboration and oversight of Protection Officers.





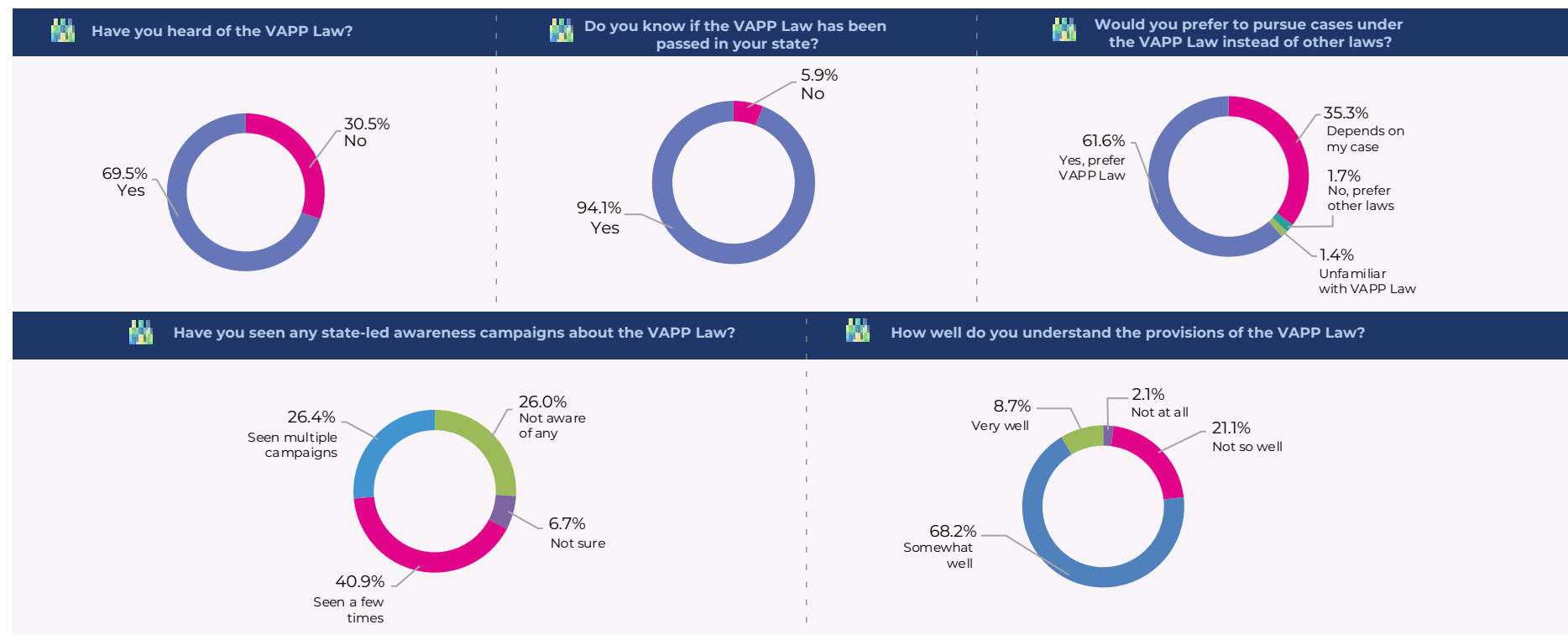
EBONYI STATE

Ebonyi State | Respondent Demographics (n = 416)



The respondent profile from Ebonyi State shows a moderately educated and predominantly rural sample, with 54.8% holding graduate and post-graduate qualifications and 33.9% having secondary education. The majority (71.9%) live in rural areas, while 50% of respondents are male and 50% female. The largest age group is 36-45 years (31.5%), followed by 25-35 years (26.2%). Self-employed individuals are the most represented occupation (40.4%), and 4.6% of respondents have disabilities.

Ebonyi State | Public Awareness



FINDINGS

- The state government has launched VAPP Law awareness initiatives targeting traditional rulers, law enforcement agencies, and the general public.
- 67.3% have seen awareness campaigns (40.9% a few times, 26.4% multiple times), while 32.7% have not or are unsure.
- 69.5% know of the VAPP Law, yet only 8.7% understand it “very well,” with 23.2% reporting little or no understanding.
- 61.6% prefer pursuing cases under the VAPP Law, though 35.3% say it depends on the case.

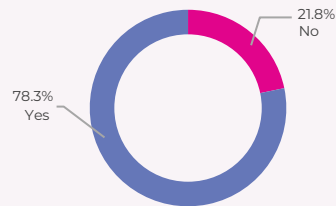
RECOMMENDATIONS

- Increase outreach efforts to reach a larger audience, especially those who haven't been exposed to existing initiatives.
- Enhance awareness initiatives to provide more in-depth information about the VAPP Law's provisions, beyond just raising awareness.
- Identify and target specific groups or areas that have been missed by current awareness efforts to increase overall awareness and understanding of the VAPP Law.

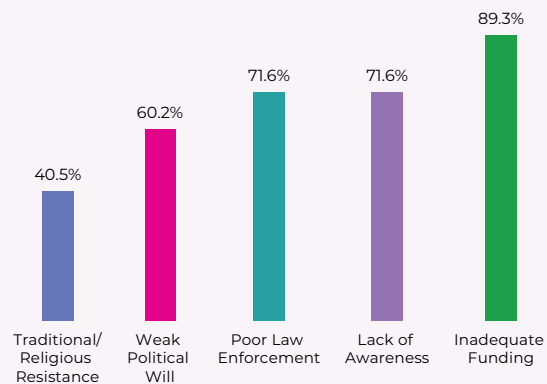
Ebonyi State | Enforcement Systems



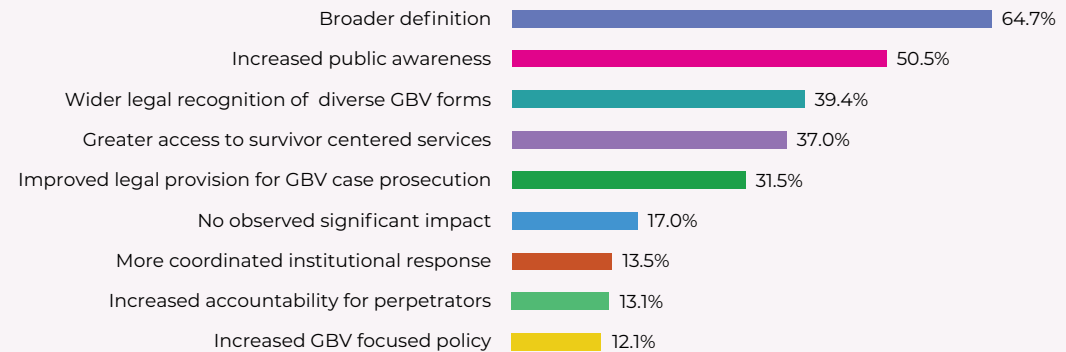
Since the VAPP Law was domesticated in your state, do you think the state's overall response to gender-based violence (GBV) has improved?



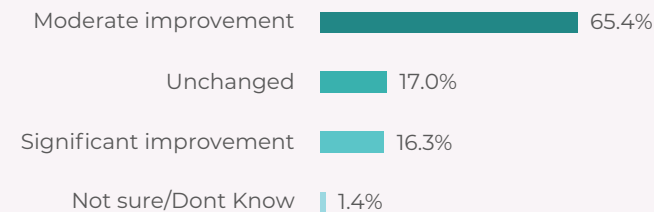
Which of the following do you think are the major barriers to implementing the VAPP Law in your state?



In your opinion, what has been the key impacts of the VAPP Law in your state and across Nigeria?



Since the VAPP Law was passed, do you think GBV survivors in your state have experienced better access to justice?



FINDINGS

- 78.3% of respondents report government response to GBV has improved since VAPP domestication.
- 81.7% see some progress in access to justice (65.4% moderate, 16.3% significant).
- Broader GBV definition (64.7%), increased awareness (50.5%), wider recognition of GBV forms (39.4%) are recorded as major impacts of the VAPP law.
- Inadequate funding (89.3%), weak enforcement & limited awareness (71.6% each), low political will (60.2%), and cultural/religious resistance (40.5%) form part of the major barriers to the VAPP law

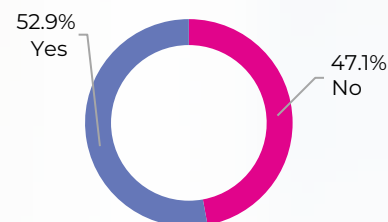
Status		
	Sex Offenders' Register <ul style="list-style-type: none">No register established and functional.Not linked to national GBV database.	Not Operational
	Protection Orders <ul style="list-style-type: none">Courts authorized to issue orders.Number of orders issued unavailable.Enforcement by police inconsistent.	
	Mandatory Reporting <ul style="list-style-type: none">Reporting mandated for health, education, and welfare professionals.Standardized protocols in place.No penalties for non-compliance.	Operational
	Legal Remedies <ul style="list-style-type: none">Survivors have received compensation under the VAPP Law.Pro bono lawyers and legal aid available.Number of cases prosecuted in last 12 months: 6–10.	Fully Operational
RECOMMENDATIONS		
<ul style="list-style-type: none">Make the Sex Offenders' Register publicly accessible and link it to the national GBV database to improve transparency, deterrence, and community protection.Publish annual data on issued Protection Orders and ensure consistent police enforcement to enhance survivor protection and build public trust.Introduce penalties for non-compliance with mandatory reporting laws to ensure professionals fulfill their duty.		



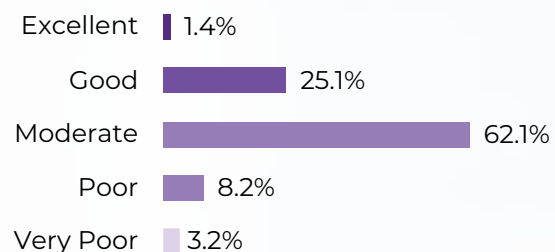
Ebonyi State | Support Service



Are you aware of any Sexual Assault Referral Centres (SARCs), shelters, or other protective services for GBV survivors in your state?



How would you rate the availability of survivor-centered services



Status



SARCs and Shelters

- One government-funded SARC available.
- Actively receiving survivors.
- Services offered: Medical services and Psycho-social counselling.

Functional



Free Medical Assistance

- Law mandates free medical care, but no facilities provide it.
- Survivors face cost-related barriers.
- Forensic/medical reports sometimes accessed for prosecution.

Not Available





Victims Support Fund

- No dedicated funding mechanism exists.
- Survivors lack consistent financial and rehabilitation support.

Not Established

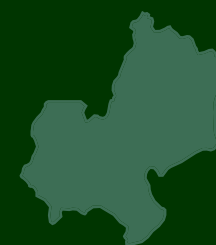
RECOMMENDATIONS

- Establish additional SARCs and broaden their services to include shelters, legal aid, and reintegration support for survivors.
- Enforce the VAPP Law mandate by designating government health facilities to provide free medical and forensic services
- Create and operationalize a state-funded Victims Support Fund to cover medical, housing, and livelihood needs.

Status	
<div><div>Regulatory Body<ul style="list-style-type: none">Formally designated body: Ministry of Justice.Coordinator appointed for domestic violence prevention.Annual report: Not submitted to government or NBS.No state coordination mechanism reported between MDAs.Protection Officers not appointed across LGAs.</div></div>	Partially Operational
<div><div>Service Provider Registration<ul style="list-style-type: none">System for registering/accrediting service providers exists.No comprehensive register maintained.Register not circulated to relevant institutions (e.g., police, courts).No standardized operational guidelines for accredited providers.</div></div>	Established

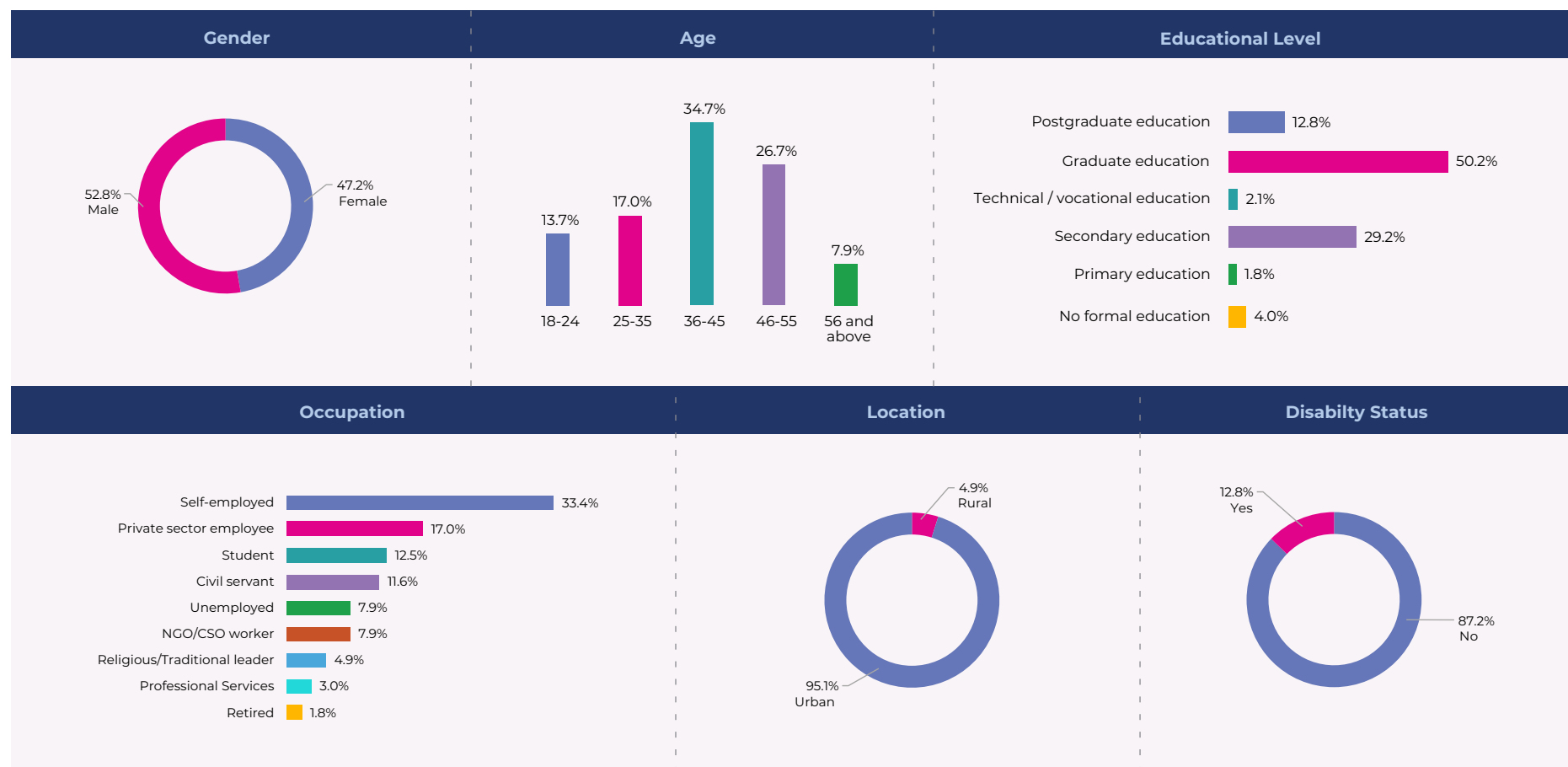
RECOMMENDATIONS
<ul style="list-style-type: none">Ensure the Coordinator submits annual implementation reports to state, federal government, and NBS.Develop and enforce standardized operational guidelines for accredited service providers.Create and regularly update a centralized, publicly accessible register of accredited providers for better coordination and access.





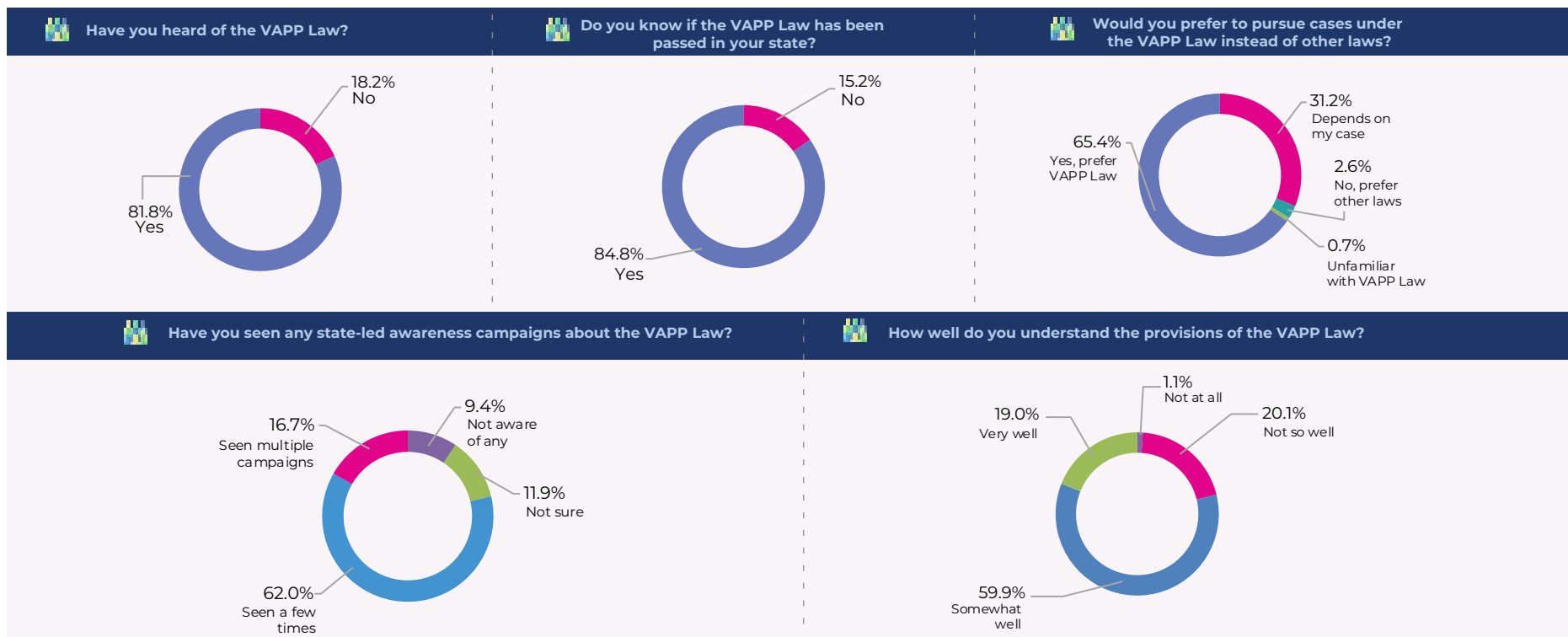
EDO STATE

Edo State | Respondent Demographics (n = 329)



The respondent profile from Edo State reflects a moderately educated, urban sample, with 50.2% having attained graduate education and 12.8% holding postgraduate qualifications. A vast majority (95.1%) reside in urban areas. The gender distribution is relatively balanced, with males comprising 52.8% and females 47.2% of the sample. Adults aged 36–45 years represent the largest age group (34.7%), followed by those aged 46–55 years (26.7%). Occupationally, self-employed individuals are most represented (33.4%), followed by private sector employees (17.0%), students (12.5%), and civil servants (11.6%). Persons with disabilities make up 12.8% of the sample.

Edo State | Public Awareness



FINDINGS

- The State government has rolled out VAPP Law awareness initiatives targeting diverse groups, including schools, health workers, religious organizations, traditional leaders, market associations, and the general public.
- 81.8% of respondents in Edo State have heard of the VAPP Law, and 84.8% confirm it has been passed in the state.
- Only 19.0% of respondents claim strong knowledge of the VAPP Law's provisions, while 59.9% somewhat understand it.
- 62.0% of respondents have seen a few awareness campaigns, while 9.4% report not seeing any.

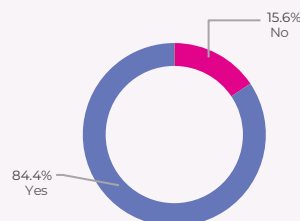
RECOMMENDATIONS

- Expand outreach to ensure consistent visibility across all communities.
- Integrate simplified VAPP Law education into schools, markets, and community forums to improve understanding.
- Promote Confidence in Legal Use.

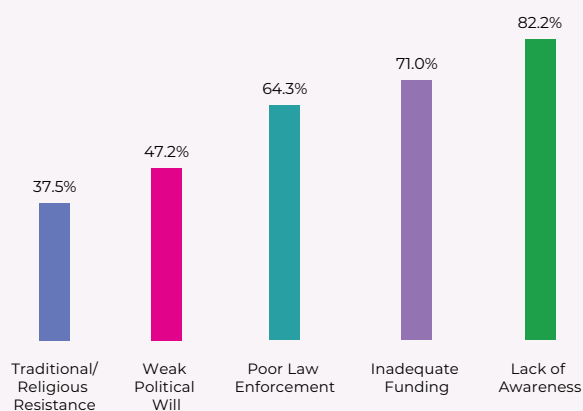
Edo State | Enforcement Systems



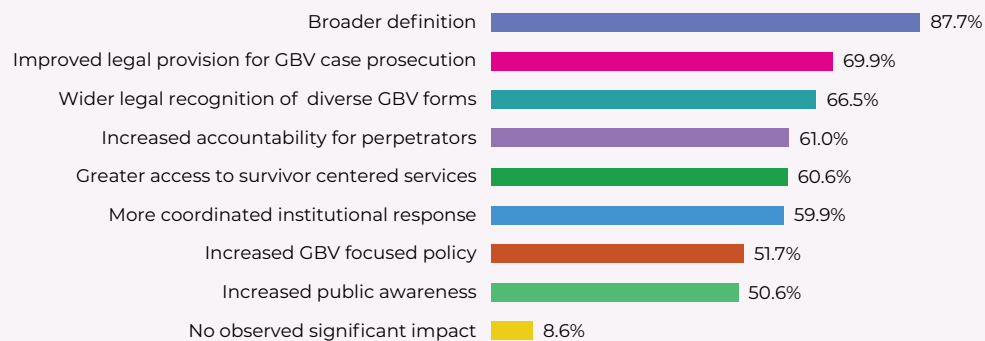
Since the VAPP Law was domesticated in your state, do you think the state's overall response to gender-based violence (GBV) has improved?



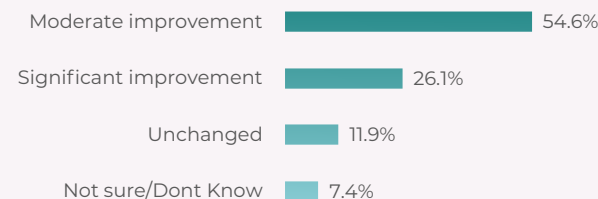
Which of the following do you think are the major barriers to implementing the VAPP Law in your state?



In your opinion, what has been the key impacts of the VAPP Law in your state and across Nigeria?







Since the VAPP Law was passed, do you think GBV survivors in your state have experienced better access to justice?



FINDINGS

- 84.4% of respondents believe Edo State's response to GBV has improved since domestication of the VAPP Act.
- 54.6% report moderate improvement, while 26.0% note significant progress in justice access.
- The Act is credited with broader GBV definitions (87.7%), stronger prosecution provisions (69.9%), and improved survivor services (60.6%).
- Major barriers include lack of awareness (82.2%), inadequate funding (71.0%), and poor law enforcement (64.3%).

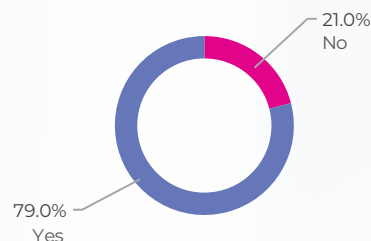
Status		
	Sex Offenders' Register <ul style="list-style-type: none">Register established and linked to national GBV database.Frequently updated with names of convicted offenders.Access restricted to judicial officers only (not public).	Operational
	Protection Orders <ul style="list-style-type: none">Courts are not authorized to issue orders.The number of orders issued in the past year is unavailable.	Operational
	Mandatory Reporting <ul style="list-style-type: none">VAPP Law mandates reporting across health, education, and social welfare sectors.Penalties exist for non-compliance.Standardized protocols for reporting and referrals are in place.	Fully Operational
	Legal Remedies <ul style="list-style-type: none">Survivors have accessed pro bono legal aid and compensation.More than 20 GBV cases have been prosecuted in the past 12 months under the VAPP Law.	Fully Operational
RECOMMENDATIONS		
<ul style="list-style-type: none">Empower designated courts to issue Protection Orders and provide specialized training to magistrates and legal officers.Launch a GBV Ambassadors in Schools Initiative to train students and teachers as peer educators to promote awareness on consent, rights, and protection.		



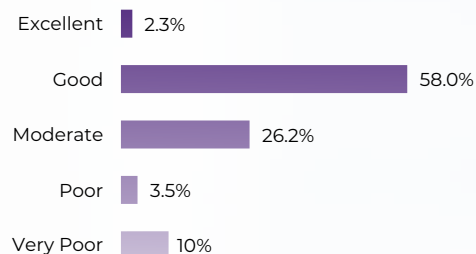
Edo State | Support Service



Are you aware of any Sexual Assault Referral Centres (SARCs), shelters, or other protective services for GBV survivors in your state?



How would you rate the availability of survivor-centered services



Status



SARCs and Shelters

- Government-owned SARC/Shelter : 1.
- Actively receiving survivors.
- Services offered: Temporary housing, Feeding, Medical services, Skills acquisition, Reintegration support, Legal aid, and Psycho-social counselling.

Functional



Free Medical Assistance

- The VAPP Law does not mandate free medical care.
- Some institutions provide free services, but cost-related barriers remain.
- Forensic services and medical reports are sometimes available for prosecution.

Not Available





Victims Support Fund

- Funding source: State budget.
- Services supported: Legal aid, medical care, Psychosocial support, SARC/Shelter upkeep, Rehabilitation and reintegration.

Established and Operational

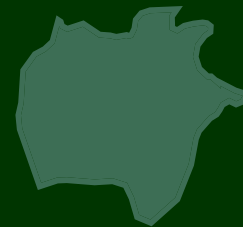
RECOMMENDATIONS

- Amend the VAPP Law to mandate free medical care for GBV survivors in all government health facilities, eliminating cost-related barriers.
- Expand forensic service availability and ensure consistent access to medical reports to strengthen prosecution outcomes.
- Sustain and diversify the Victims Support Fund by attracting donor and private sector contributions, ensuring long-term funding for comprehensive survivor services.

Status	
<div></div> <div>Regulatory Body<ul style="list-style-type: none">Formally designated body: Ministry of Women Affairs.Coordinator appointed for domestic violence prevention.Annual report: Submitted to state/federal government but not deposited with NBS.There is a state coordination mechanism between relevant MDAs and social sector actors.Protection Officers: Not yet appointed across LGAs.</div>	Established and Operational
<div></div> <div>Service Provider Registration<ul style="list-style-type: none">State-maintained register regularly updated.Operational guidelines for accredited providers exist.Register has not been circulated to key institutions (e.g., police stations, courts, Protection Officers).</div>	

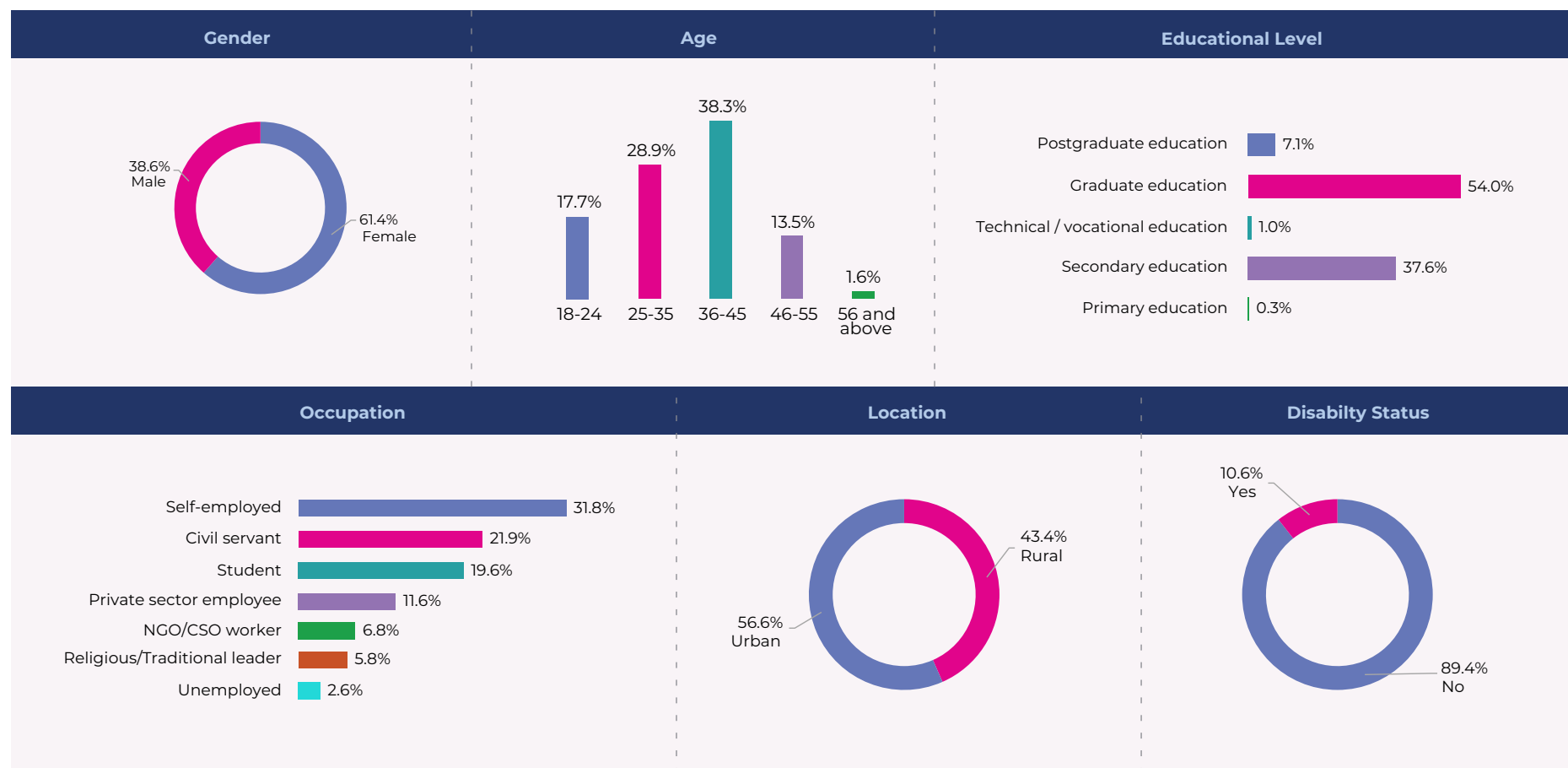
RECOMMENDATIONS
<ul style="list-style-type: none">Ensure Coordinator’s annual reports are also deposited with the NBS to strengthen national data and policy analysis.Appoint Protection Officers in all LGAs for localized implementation and survivor support.Actively circulate the updated service provider register to frontline institutions to improve referrals and coordination.Regularly update and pair register circulation with provider training to enhance survivor-centered service delivery.





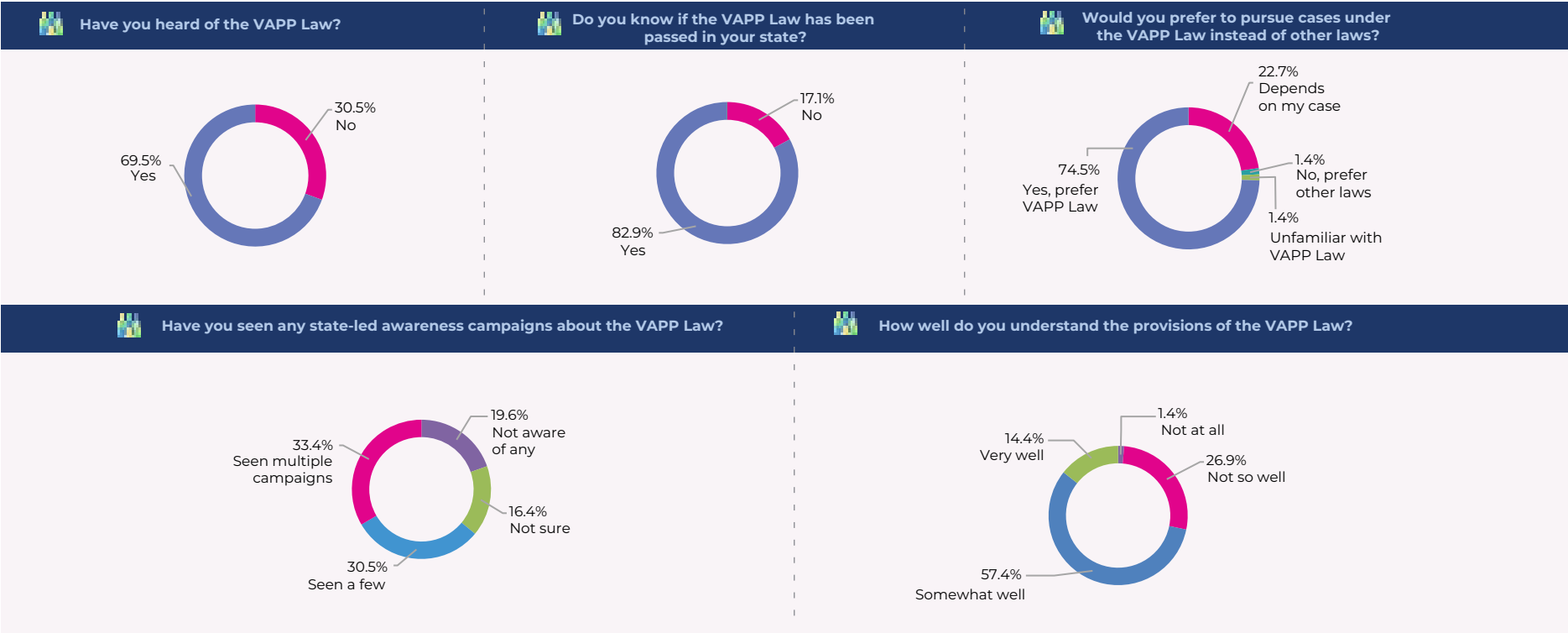
EKITI STATE

Ekiti State | Respondent Demographics (n = 311)



Sample demographics Ekiti State reflects a moderately educated, urban-leaning sample, with 61.1% having attained graduate education. A slight majority (56.6%) reside in urban areas, while 43.4% live in rural settings. The sample is predominantly female (61.4%), with adults aged 36–45 years forming the largest age group (38.3%), followed by those aged 25–35 years (28.9%). In terms of occupation, self-employed individuals are most represented (31.8%), followed by civil servants (21.9%), students (19.6%), and private sector employees (11.6%). Persons with disabilities constitute 10.6% of respondents.

Ekiti State | Public Awareness



FINDINGS

- The state government has launched VAPP Law awareness initiatives targeting various groups, including schools, health workers, and law enforcement, among others.
- 69.5% of respondents have heard of the VAPP Law, and 82.9% of them confirm it has been enacted.
- Among those aware, only 14.4% report strong knowledge of the VAPP Law’s provisions, while most (57.4%) understand it only “somewhat well.”
- Exposure to campaigns is moderate: 33.4% have seen multiple, 30.5% a few, while 36.0% have seen none or remain uncertain.

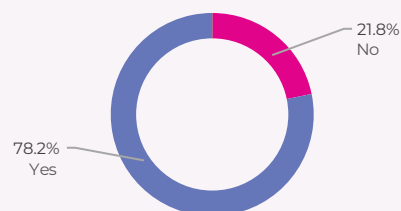
RECOMMENDATIONS

- Translate and simplify the VAPP Law into local languages for wider accessibility.
- Use radio, market drama, and community dialogues to deepen understanding beyond surface awareness.
- Launch community legal literacy fellowships and digital case simulations to build practical knowledge of the law.

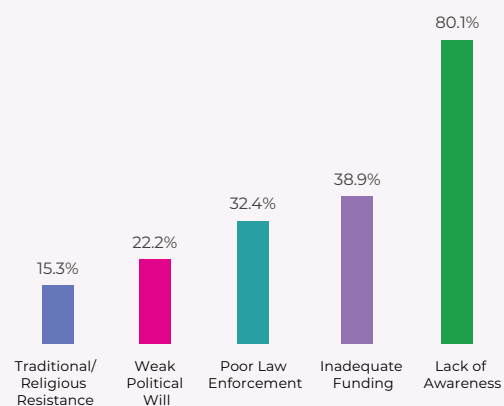
Ekiti State | Enforcement Systems



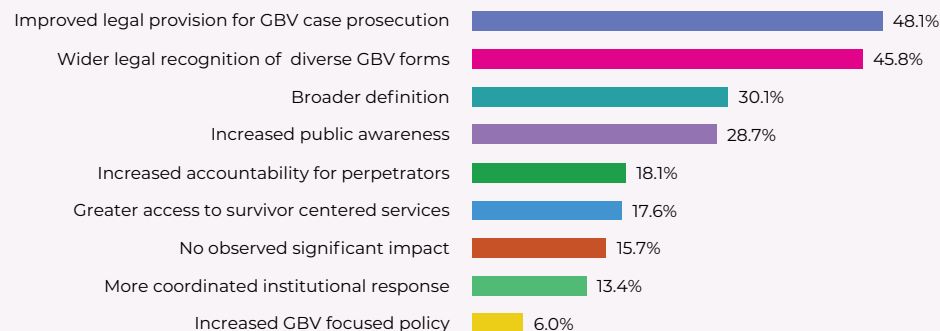
Since the VAPP Law was domesticated in your state, do you think the state's overall response to gender-based violence (GBV) has improved?



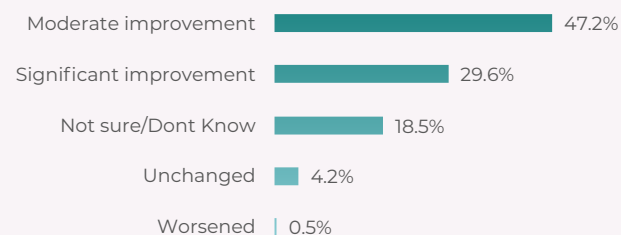
Which of the following do you think are the major barriers to implementing the VAPP Law in your state?



In your opinion, what has been the key impacts of the VAPP Law in your state and across Nigeria?







Since the VAPP Law was passed, do you think GBV survivors in your state have experienced better access to justice?



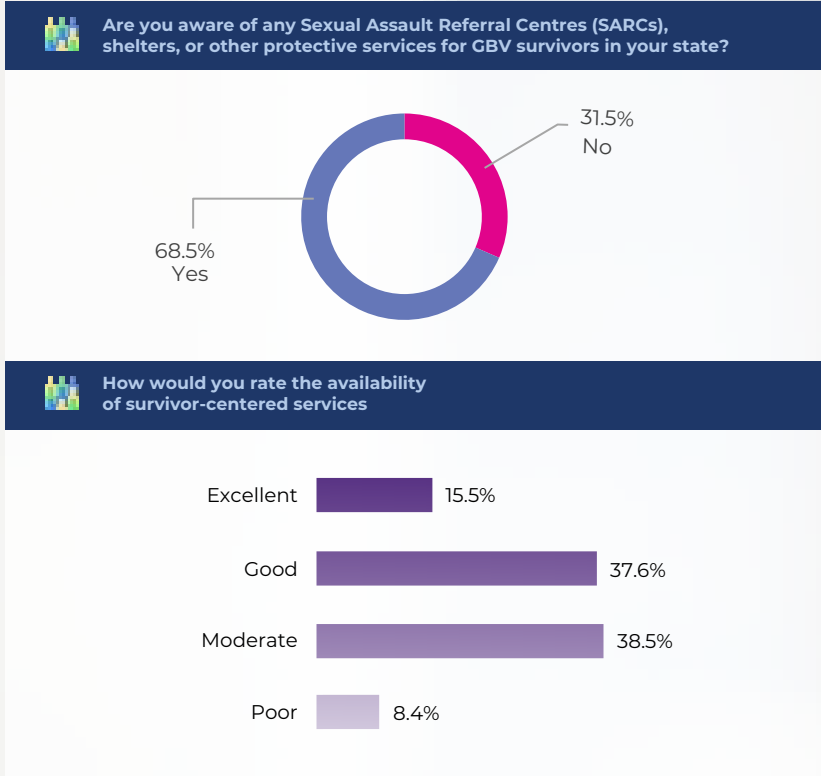
FINDINGS

- 78.2% of respondents see improvements in GBV response since VAPP domestication, though 21.8% see no change.
- 47.2% report moderate improvement and 29.6% significant progress, but 23.2% see no change, worsening, or remain unsure.
- Strongest impacts include better prosecution provisions (48.1%), wider recognition of GBV forms (45.8%), and broader GBV definition (30.1%).
- Main barriers are lack of awareness (80.1%), inadequate funding (38.9%), poor law enforcement (32.4%), weak political will (22.2%), and cultural/religious resistance (15.3%).

Status		
	Sex Offenders' Register <ul style="list-style-type: none">• Register established and functional.• Linked to national GBV database.• Regularly updated with convicted offenders.• Accessible only to law enforcement officers.	Fully Operational
	Protection Orders <ul style="list-style-type: none">• Courts are legally authorized to issue orders under VAPP.• More than 10 protection orders have been issued in the past year.• Enforcement by the police is consistent.	Operational
	Mandatory Reporting <ul style="list-style-type: none">• Professionals in health, education, and social welfare are mandated to report GBV.• Penalties for non-compliance in place.• Standardized reporting and referral protocols across institutions.	Fully Operational
	Legal Remedies <ul style="list-style-type: none">• Survivors are entitled to pro bono legal support and aid.• Legal aid agencies and pro-bono lawyers' aid.• More than 20 GBV cases prosecuted in the past year under the VAPP Law• Law effectively used to secure compensation for survivors	Fully Operational
RECOMMENDATIONS		
<ul style="list-style-type: none">• Allow vetted institutions to access the Sex Offender's Register, simplify court access for survivors, and train law enforcement on effective enforcement.• Provide continuous training on mandatory reporting for key professionals, establish monitoring mechanisms, and secure dedicated funding for documentation, referrals, and inter-agency coordination.• Improve Justice & Support for Survivors while running targeted awareness campaigns to close knowledge gaps.		





Ekiti State | Support Service



Status	
<div> <p>SARCs and Shelters</p> <ul style="list-style-type: none"> Three government-owned SARCs are available. Actively receiving survivors. Services offered: Medical care, Psycho-social counselling, Rehabilitation and reintegration support, Shelter upkeep. </div>	<div>Functional</div> <div>Available</div> <div>Established and Operational</div>
<div> <p>Free Medical Assistance</p> <ul style="list-style-type: none"> Government facilities are mandated to provide free care. Survivors do not face any cost-related barriers. Medical reports and forensic services are sometimes accessed for prosecution. </div>	
<div> <p>Victims Support Fund</p> <ul style="list-style-type: none"> Funding sources: State government budget. Services supported: Medical care, Psycho-social support, SARC/Shelter upkeep, Rehabilitation and reintegration. . </div>	

RECOMMENDATIONS

- Introduce a medical accountability tracker to ensure survivors actually receive the free medical care mandated by the VAPP Law.
- Increase the capacity of the three government-owned SARCs by adding services such as skills acquisition, economic empowerment, and legal aid.
- Establish a survivor empowerment grant program, paired with mentorship and skills training, to support long-term recovery and independence.

Status	
<div></div> <div>Regulatory Body<ul style="list-style-type: none">Formally designated body: GBV Response Committee.Coordinator appointed for domestic violence prevention.Annual report: Submitted to federal and state governments but not deposited with the National Bureau of Statistics (NBS).There is a state coordination mechanism between the relevant MDAs.Protection Officers are in place to support implementation.</div>	Established and Operational
<div></div> <div>Service Provider Registration<ul style="list-style-type: none">State-maintained register regularly updated.Register shared with selected institutions (police, Protection Officers, and courts).Operational guidelines for accredited providers are in place.Register not yet widely circulated to all relevant stakeholders.</div>	Established

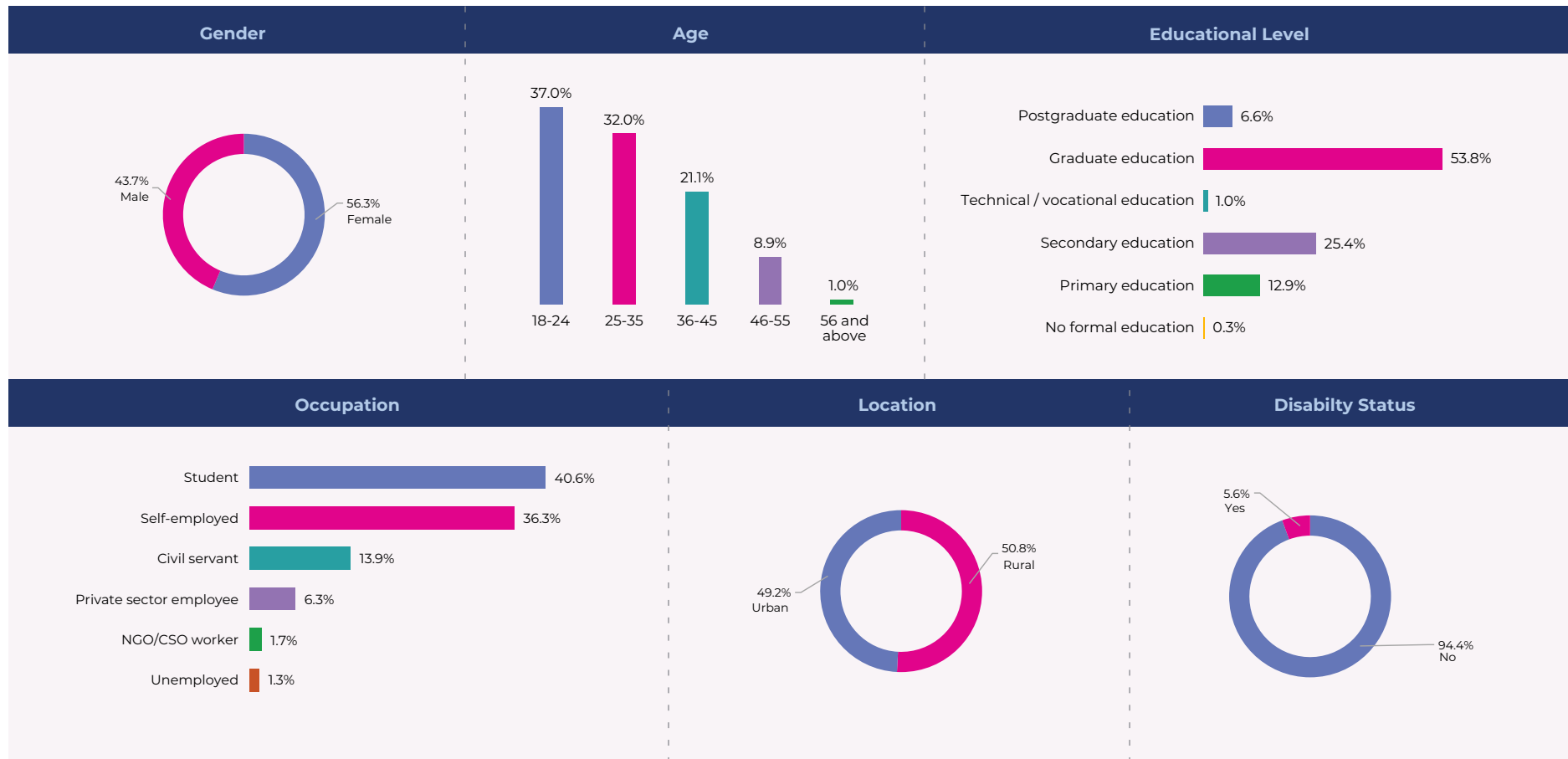
RECOMMENDATIONS
<ul style="list-style-type: none">Ensure annual implementation reports are also deposited with the NBS to strengthen national monitoring and accountability.Expand dissemination of the accredited service provider register to include health facilities, legal aid services, and community organizations.Establish a feedback mechanism for stakeholders to update and validate the register regularly, keeping information current and reliable.





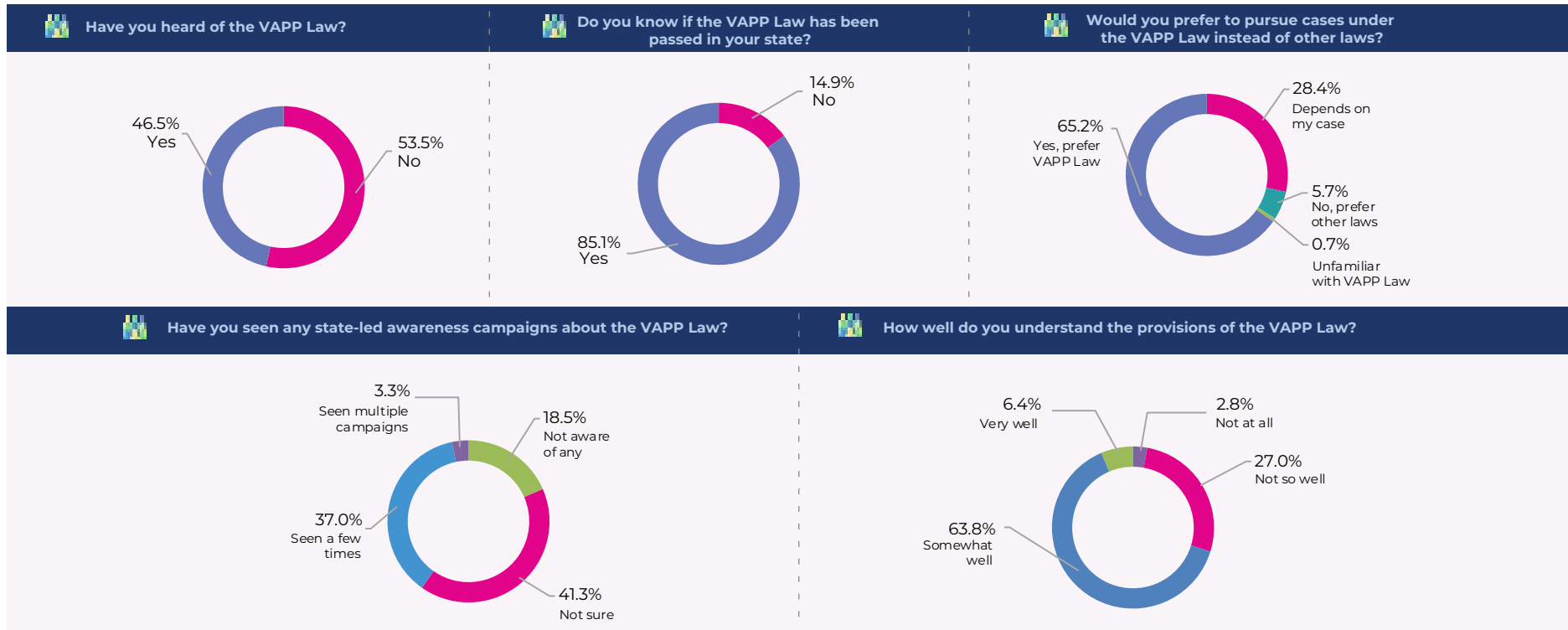
ENUGU STATE

Enugu State | Respondent Demographics (n = 303)



The respondent demographics for Enugu State indicate that females comprise 56.3% of the sample, while males account for 43.7%. Most respondents are aged between 18–24 years (37%) and 25–35 years (32%). Over half (53.8%) hold a first degree, 25.4% have completed secondary education, and only 0.3% have no formal education. Students (40.6%) and self-employed individuals (36.3%) represent the majority, followed by civil servants (13.9%) and a small proportion working with NGOs/CSOs (1.7%). The population is nearly evenly split between rural (50.6%) and urban (49.3%) dwellers. Additionally, 5.6% of respondents are persons with disabilities.

Enugu State | Public Awareness



FINDINGS

- The state government has implemented VAPP Law awareness initiatives, primarily targeting the public to increase knowledge about the law and available services.
- 46.5% of respondents in Enugu State have heard of the VAPP Law.
- Among those aware of the law, only 6.4% of respondents claim strong knowledge of the VAPP Law's provisions, while 63.8% know it only "somewhat well."
- Exposure to state-led awareness initiatives is inconsistent: just 3.3% have seen multiple campaigns, 37% recall a few, 18.5% none, and 41.3% are unsure.

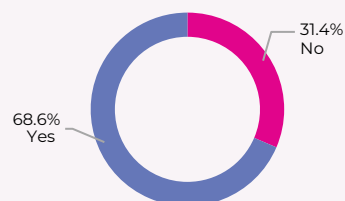
RECOMMENDATIONS

- Expand outreach to include law enforcement, healthcare workers, educators, traditional leaders, and community groups currently excluded from campaigns.
- Implement continuous campaigns using radio, mobile vans, market/community workshops, and a bilingual VAPP app to increase reach and comprehension.
- Launch survivor-led ambassador programs and quarterly "Know-Your-Rights" roadshows to build deeper understanding, confidence, and preference for VAPP cases.

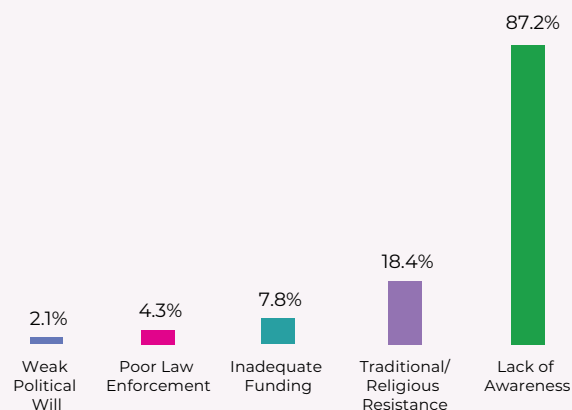
Enugu State | Enforcement Systems



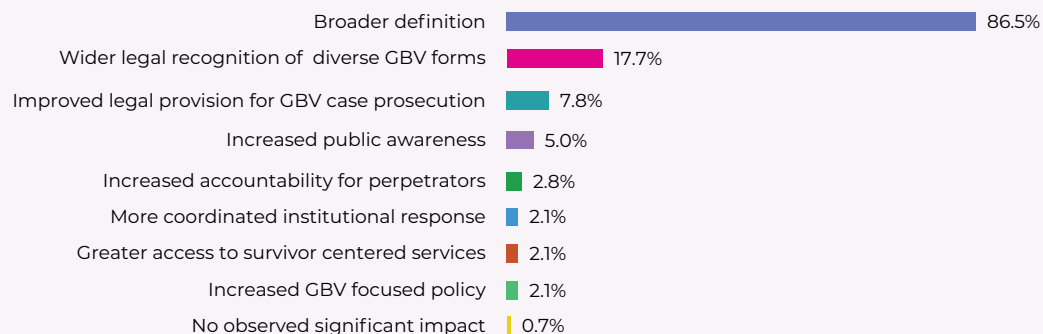
Since the VAPP Law was domesticated in your state, do you think the state's overall response to gender-based violence (GBV) has improved?



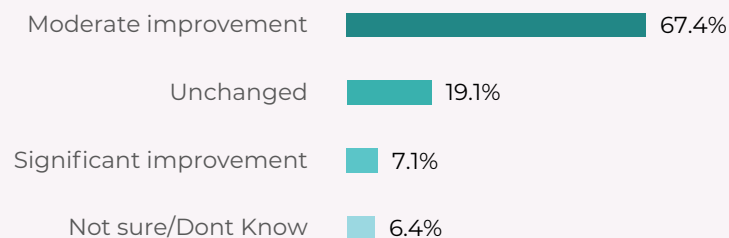
Which of the following do you think are the major barriers to implementing the VAPP Law in your state?



In your opinion, what has been the key impacts of the VAPP Law in your state and across Nigeria?



Since the VAPP Law was passed, do you think GBV survivors in your state have experienced better access to justice?



FINDINGS

- 68.6% of respondents think the state's response to GBV has improved since adopting the VAPP Law, while 31.4% see no improvement.
- The most cited impacts include a broader definition of GBV (86.5%) and recognition of diverse forms of GBV (17.7%). Other impacts such as improved prosecution (7.8%), awareness (5.0%), accountability (2.8%), and survivor-centred services (2.1%) remain very limited.
- Access to justice perceptions show 67.4% report moderate improvement, 7.3% significant improvement, 19.1% no change, and 6.4% unsure.
- Major challenges include lack of awareness (87.2%), traditional/religious resistance (18.4%), inadequate funding (7.8%), poor enforcement (4.3%), and weak political will (2.1%).

		Status
 <p>Sex Offenders' Register</p> <ul style="list-style-type: none"> • Register established and linked to national GBV database. • Updates irregular, not quarterly. • Accessible only to law enforcement and judicial officials, not the public. 		Operational
 <p>Protection Orders</p> <ul style="list-style-type: none"> • Courts are authorized to issue orders. • 6–10 orders were issued in the past year. • Enforcement by police/security agencies is inconsistent. 		Fully Operational
 <p>Mandatory Reporting</p> <ul style="list-style-type: none"> • No legal framework mandating professionals to report GBV. • No penalties for non-compliance. • No standardized reporting or referral protocols in place. 		Not Operational
 <p>Legal Remedies</p> <ul style="list-style-type: none"> • 6–10 GBV cases prosecuted in the past year under VAPP Act. • Legal aid and pro bono services available. • No survivors have successfully obtained compensation or restitution through the law. 		Available

RECOMMENDATIONS

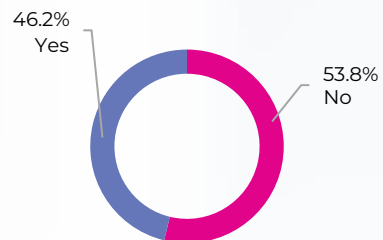
- Strengthen the Sex Offenders' Register with quarterly updates.
- Establish mandatory reporting laws with penalties, survivor-centred protocols, and compulsory training for frontline professionals.
- Improve enforcement by setting up dedicated GBV desks in police divisions, introducing monthly compliance reporting, and engaging community groups to track breaches.
- Bridge the gap between law and practice by creating a VAPP Survivors' Fund, expanding free legal representation, and training more judges, prosecutors, and legal aid providers to deliver compensation and restitution.



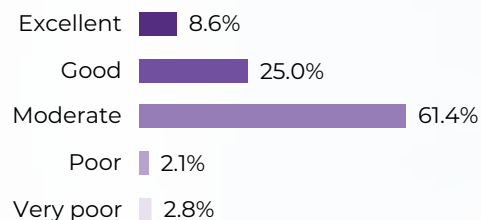
Enugu State | Support Service



Are you aware of any Sexual Assault Referral Centres (SARCs), shelters, or other protective services for GBV survivors in your state?



How would you rate the availability of survivor-centered services



Status



SARCs and Shelters

- Government-funded SARCs and shelters : 1.
- Actively receiving survivors.
- Services offered: Shelter, Medical care, Psycho-social counselling, Rehabilitation and reintegration (skills acquisition, education, micro-credit).

Functional



Free Medical Assistance

- Government facilities are not yet mandated to provide free care.
- Some facilities voluntarily offer free services, but survivors still face cost-related barriers.
- Medical reports and forensic services accessed only sometimes, leading to inconsistency in prosecutions.

Not Available





Victims Support Fund

- Funding sources: State government budget.
- Services supported: Medical services, rehabilitation and reintegration (skills acquisition, education, micro-credit), shelter upkeep.

Established and Operational

RECOMMENDATIONS

- Mandate all state-run health facilities to provide free medical and forensic services, ensuring standardized protocols and consistent access to medical reports for legal cases.
- Scale up and diversify the Victims Support Fund with private sector and donor contributions, while strengthening coordination among SARCs, shelters, health facilities, and legal aid providers to create seamless referral pathways.

Status	
 <h3>Regulatory Body</h3> <ul style="list-style-type: none"> Formally designated body: Ministry of Women Affairs. State-level coordination mechanism between MDAs is in place. Coordinator for domestic violence prevention not appointed. Annual implementation reports not submitted to state, federal government, or NBS. Protection Officers not appointed across LGAs. 	Partially Functional
 <h3>Service Provider Registration</h3> <ul style="list-style-type: none"> State-maintained register of accredited service providers exists but is not regularly updated. Register has been partially circulated (to some police stations, courts, protection officers). Operational guidelines not yet developed to standardize roles, responsibilities, and service quality. 	Established but Limited

RECOMMENDATIONS

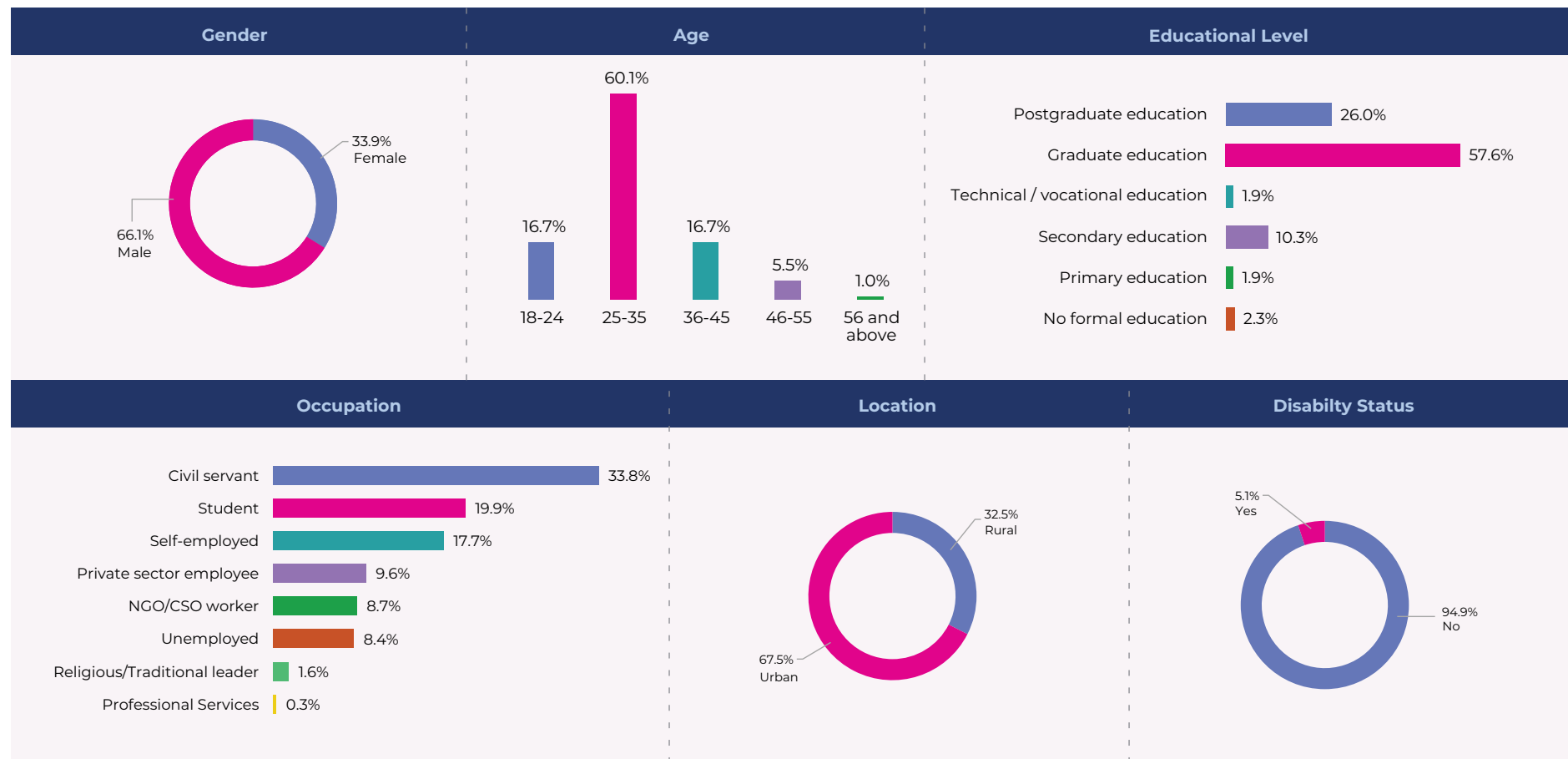
- Appoint a Coordinator for domestic violence prevention and ensure annual implementation reports are submitted to state/federal governments and NBS.
- Establish a GBV data dashboard to track case trends, service provider performance, and enhance accountability.
- Strengthen the service provider accreditation system through regular updates, audits, and clear operational guidelines.





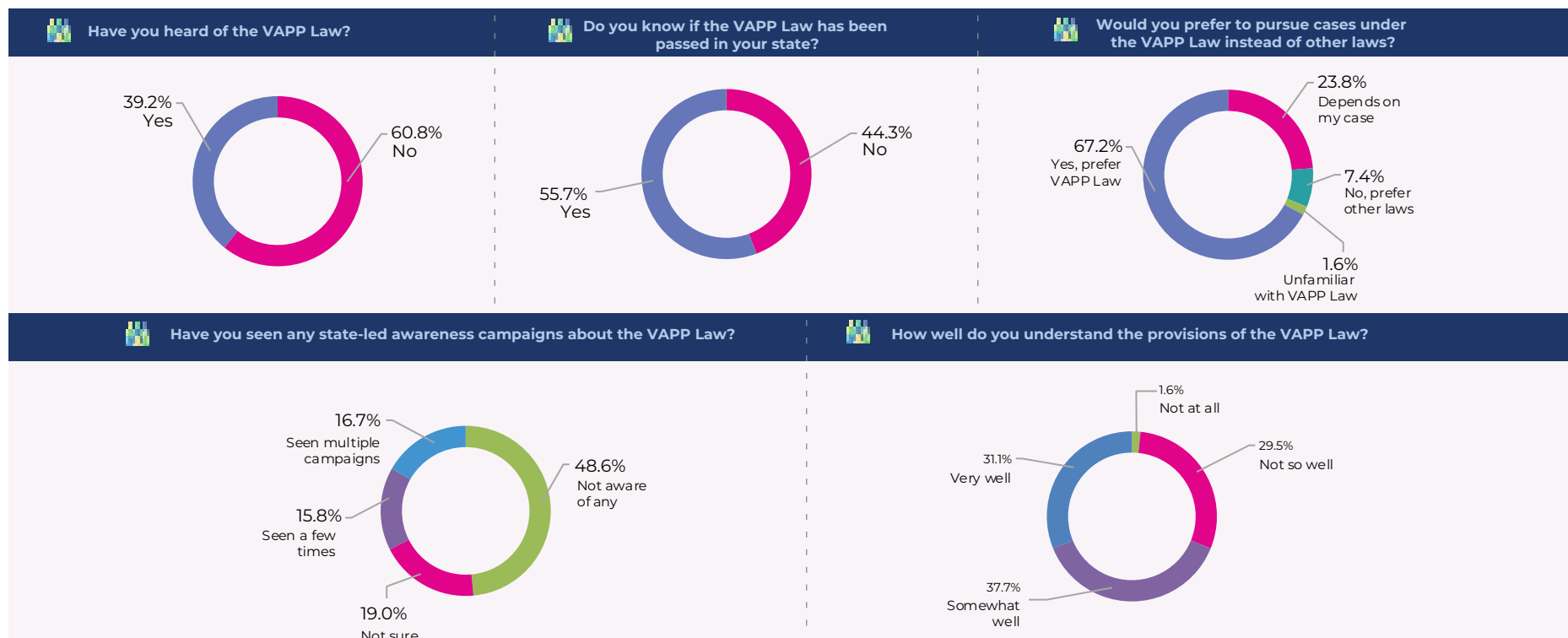
GOMBE STATE

Gombe State | Respondent Demographics (n = 311)



The demographic profile of respondents from Gombe State shows a highly educated population, with 57.6% having graduate education, 26.0% postgraduate education, and 1.9% technical/vocational education. The respondents are predominantly male (66.1%), with females making up 33.9%. The majority are young adults, with 60.1% aged 25-35, followed by 16.7% in both the 18-24 and 36-45 age groups. Most respondents (67.5%) reside in urban areas, while 32.5% are from rural areas. Occupationally, the sample is comprised of civil servants (33.8%), students (19.9%), self-employed individuals (17.7%), private sector employees (9.6%), and NGO/CSO workers (8.7%). Additionally, 5.1% of respondents reported having a disability.

Gombe State | Public Awareness



FINDINGS

- The state government has conducted sensitization campaigns on the VAPP Law, targeting traditional rulers, law enforcement, and the general public.
- Only 39.2% of respondents are aware of the VAPP Law, while 60.8% remain unaware.
- Nearly half of respondents (48.6%) report never seeing any government-led campaign on the law, and 19.0% are unsure.
- Among those aware, just 31.1% understand the law very well, while 37.7% have some understanding.

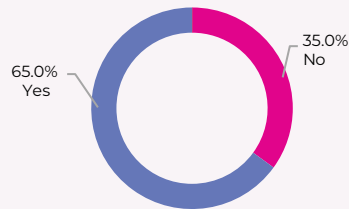
RECOMMENDATIONS

- Scale up outreach efforts by expanding awareness campaigns across LGAs, using youth-friendly platforms (e.g., social media) and translating content into local languages.
- Deepen awareness initiatives through community-based sensitization with religious leaders, traditional rulers, and local influencers to build trust and widen reach.
- Strengthen institutional capacity by training law enforcement agencies and introduce systematic monitoring and evaluation of campaigns to improve impact.

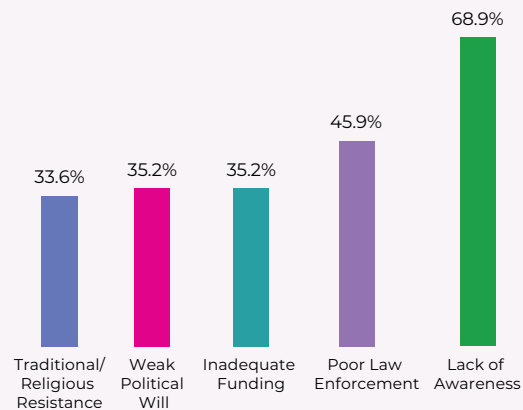
Gombe State | Enforcement Systems



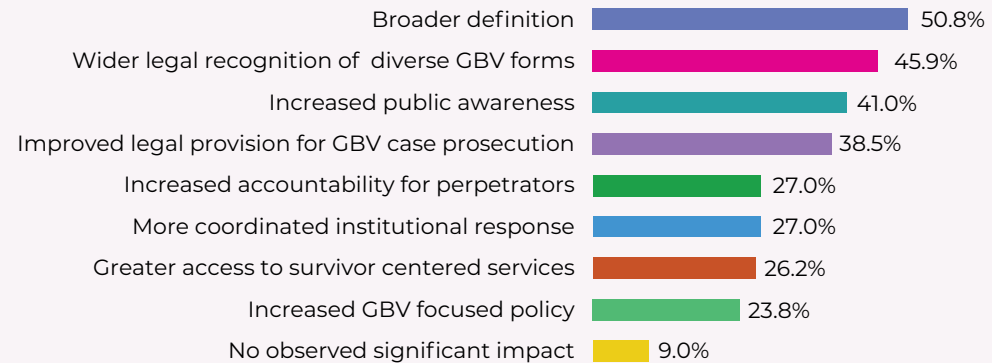
Since the VAPP Law was domesticated in your state, do you think the state's overall response to gender-based violence (GBV) has improved?



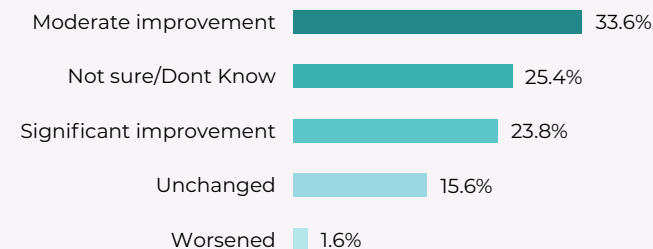
Which of the following do you think are the major barriers to implementing the VAPP Law in your state?



In your opinion, what has been the key impacts of the VAPP Law in your state and across Nigeria?



Since the VAPP Law was passed, do you think GBV survivors in your state have experienced better access to justice?



FINDINGS

- 65.0% of respondents believe Gombe State's response to GBV has improved since adopting the VAPP Law, while 35.0% perceive no change.
- The most cited impacts include a broader definition of GBV (50.8%), wider legal recognition of diverse GBV forms such as rape and sexual offenses (45.9%) and increased public awareness (41.0%).
- Access to justice perceptions show 33.6% report moderate improvement, 23.8% report significant improvement, while 15.6% see no change and 25.4% are unsure.
- Major challenges include lack of awareness (68.9%), poor law enforcement (45.9%), resistance from traditional/religious groups (33.6%), weak political will (35.2%), and inadequate funding (35.2%).

Status		
	Sex Offenders' Register <ul style="list-style-type: none">Register established and linked to national GBV database.Not consistently updated.Accessible only to law enforcement.	Functional but limited
	Protection Orders <ul style="list-style-type: none">Courts authorized to issue orders.No available data on orders issued.Police enforcement reported as infrequent.	
	Mandatory Reporting <ul style="list-style-type: none">VAPP Law mandates reporting by professionals.Standardized referral and reporting protocols exist.Penalties for non-compliance in place.	Fully Operational
	Legal Remedies <ul style="list-style-type: none">Survivors have successfully obtained compensation and restitution.Over 20 GBV cases prosecuted under VAPP Act in the past 12 months.Legal aid and pro bono services available.	Fully Operational

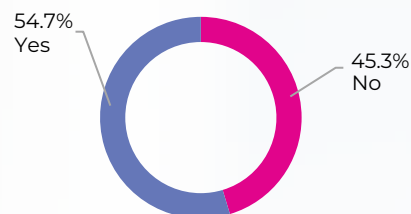
RECOMMENDATIONS
<ul style="list-style-type: none">Establish a reliable system to record and publish data on Protection Orders and ensure consistent police enforcement.Regularly update and expand access to the Sex Offenders' Register to include key vetted stakeholders for improved transparency and deterrence.Scale up survivor-centered legal support by increasing funding for legal aid, deploying mobile legal clinics to rural areas, and expanding awareness campaigns on how to access remedies under the VAPP Law.



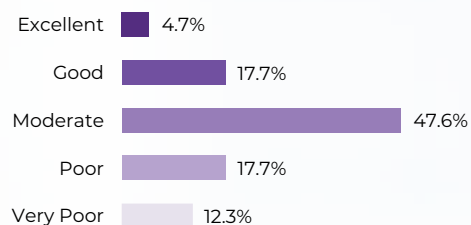
Gombe State | Support Service



Are you aware of any Sexual Assault Referral Centres (SARCs), shelters, or other protective services for GBV survivors in your state?



How would you rate the availability of survivor-centered services



Status



SARCs and Shelters

- Government-established SARCs: 1, shelters, and temporary homes exist.
- Currently lack adequate operational and functional capacity.
- Survivors face challenges accessing medical, psychological, and housing support.

Partially Functional



Free Medical Assistance

- Government health facilities provide free medical and forensic care.
- Cost-related barriers have been removed.
- Limited access to medical reports and forensic evidence for prosecution undermines legal redress.

Available




Victims Support Fund

- Actively functioning, both receiving and disbursing funds.
- Financing sources: state budget, court fines, donor and partner contributions, and private sector donations.
- Supports survivor-focused services including medical care and rehabilitation.

Established and Operational

RECOMMENDATIONS

- Fully equip SARCs and shelters with trained personnel, medical, and psychosocial services to ensure they meet survivor needs.
- Strengthen forensic documentation by training health workers and establishing standardized protocols for timely medical reporting and evidence collection.
- Expand public awareness campaigns to increase knowledge of SARCs, shelters, and protective services, and conduct regular assessments to improve quality and accessibility.

Status	
<div><p>Regulatory Body</p><ul style="list-style-type: none">No formally designated body exists to coordinate VAPP Law implementation.However, a state-level coordination mechanism exists among Women Affairs, Justice, Health, Information, Education, and Finance.Protection Officers have been appointed to assist courts.</div>	Not Established
<div><p>Service Provider Registration</p><ul style="list-style-type: none">A state-maintained register of accredited service providers is available.The register is regularly updated and circulated to police stations, protection officers, and courts.Operational guidelines for accredited service providers have been developed.</div>	Established

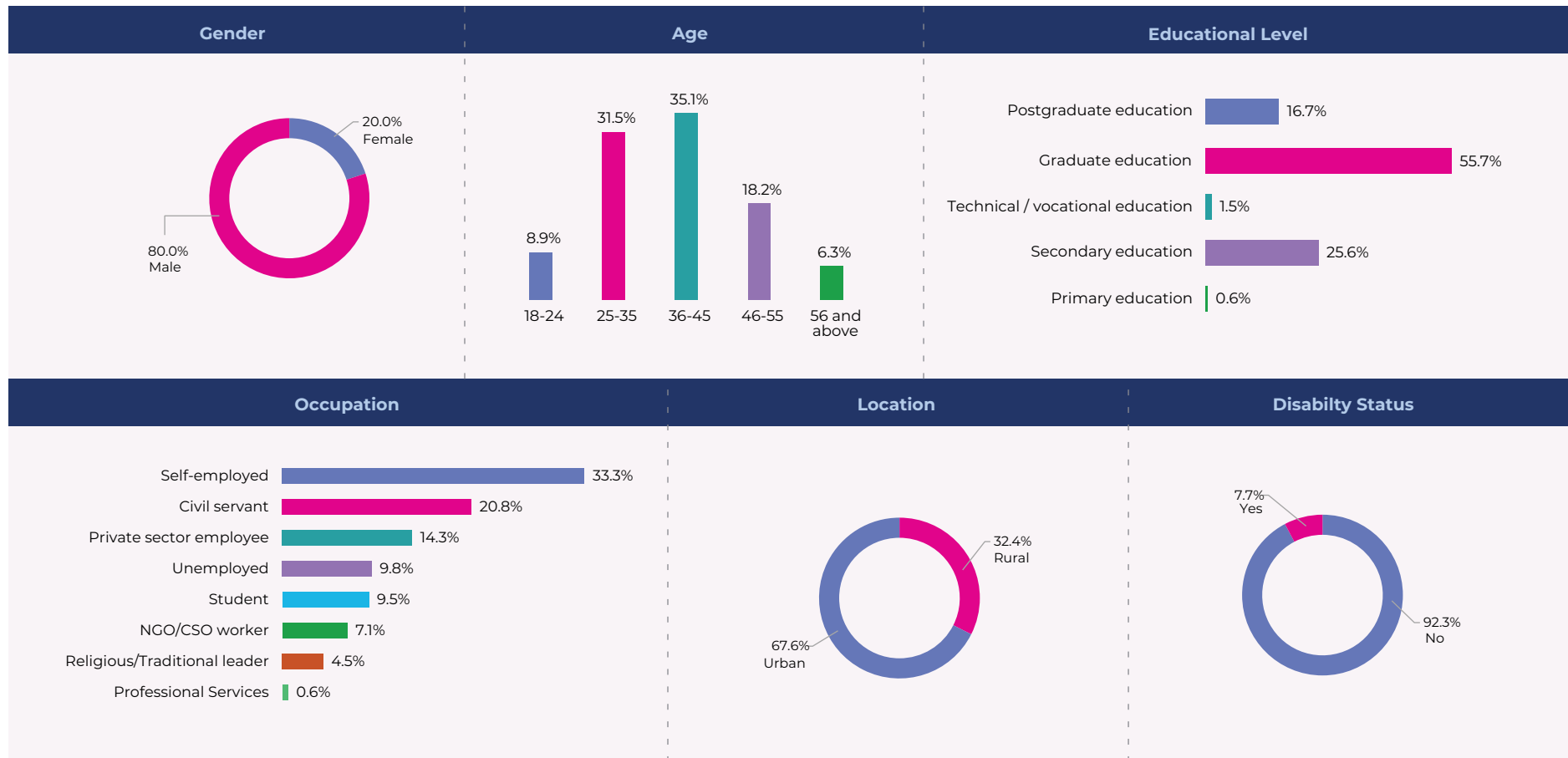
RECOMMENDATIONS
<ul style="list-style-type: none">Establish a dedicated regulatory body to strengthen VAPP Law implementation and coordination.Promote collaboration among service providers and create platforms for dialogue between government, CSOs, and community leaders.





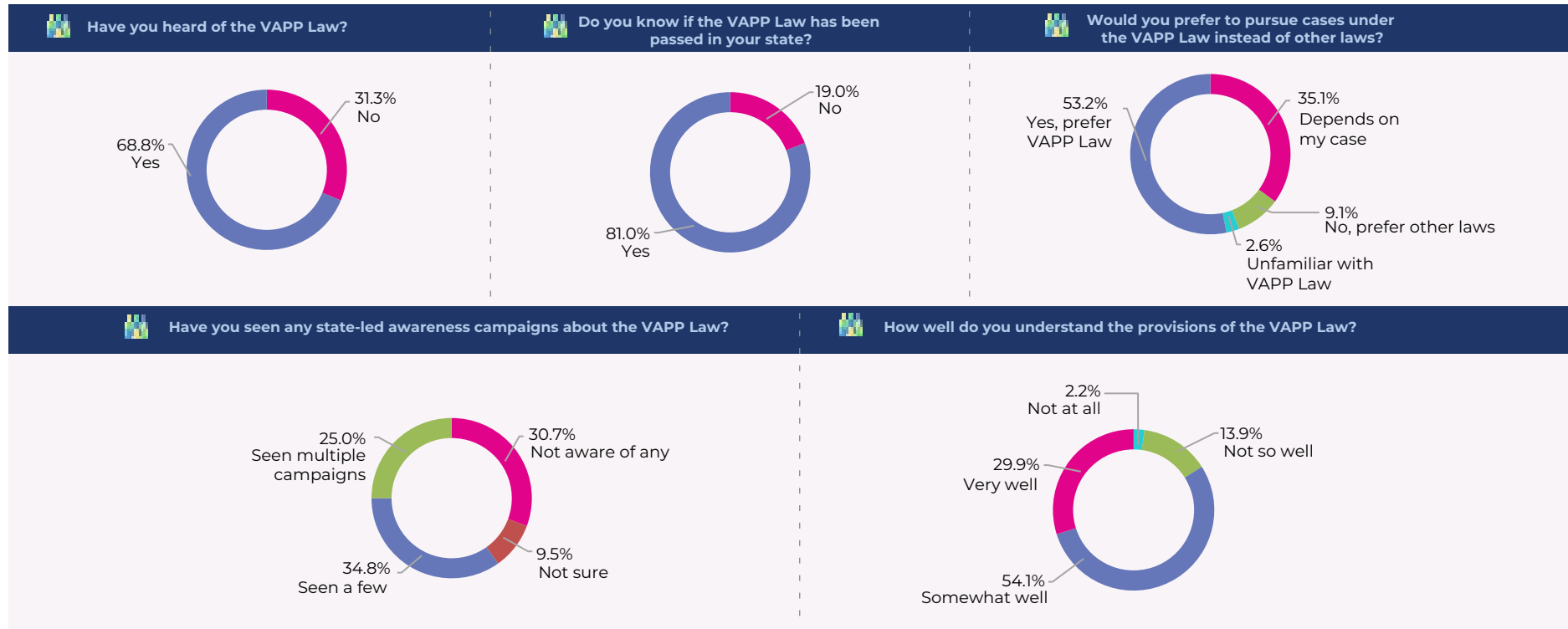
IMO STATE

Imo State | Respondent Demographics (n = 336)



The demographic profile of respondents is predominantly male (80%). The largest age groups represented are 25 - 35 at 31.5% while age 36-45 is 35.1% of respondents. More than half of the respondents (55.7%) have attained graduate education, with self-employed constituting the largest occupational group at 33.3%. Most respondents reside in urban areas, with 67.6% living in urban settings compared to 32.4% in rural locations. Additionally, majority of the respondents (92.3%) reported no disability.

Imo State | Public Awareness



FINDINGS

- The state government has conducted awareness and sensitization campaigns on the VAPP Law, targeting schools, religious institutions, traditional rulers, market associations, law enforcement agencies, and the general public.
- In Imo State, 68.8% of respondents have heard of the VAPP Law, while 31.3% remain unaware.
- 30.7% of respondents have not seen any state-led awareness campaigns, and 9.5% were uncertain.
- Among those aware of the VAPP Law, 81.0% know it has been passed, but only 29.9% reported understanding it 'very well'.

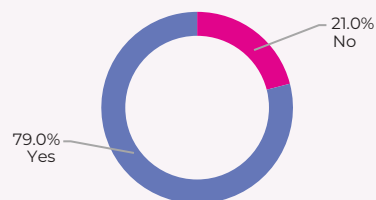
RECOMMENDATIONS

- Develop and disseminate simplified materials explaining the VAPP Law's provisions in clear, accessible language.
- Integrate local languages and culturally relevant messaging into awareness campaigns to improve reach, especially in rural areas.
- Strengthen engagement with traditional rulers and religious leaders through training and partnerships to boost advocacy and community-level ownership.

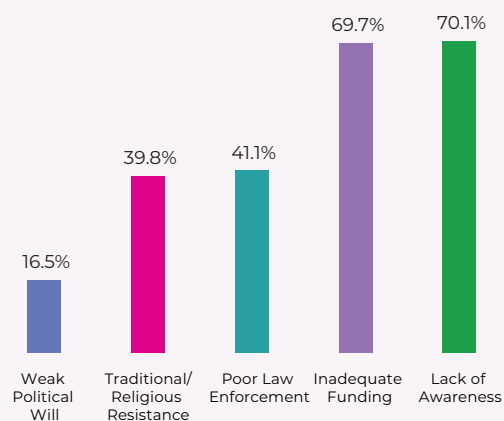
Imo State | Enforcement Systems



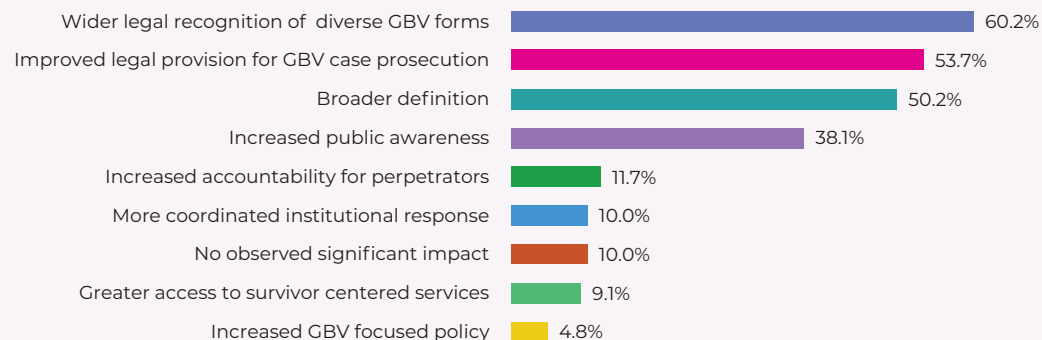
Since the VAPP Law was domesticated in your state, do you think the state's overall response to gender-based violence (GBV) has improved?



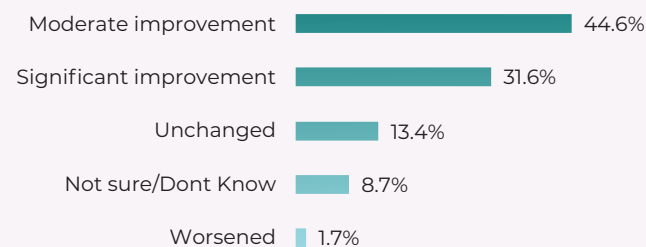
Which of the following do you think are the major barriers to implementing the VAPP Law in your state?



In your opinion, what has been the key impacts of the VAPP Law in your state and across Nigeria?



Since the VAPP Law was passed, do you think GBV survivors in your state have experienced better access to justice?



FINDINGS

- 79% of respondents think the state's response to GBV has improved since adopting the VAPP Law.
- The most cited impacts include broader legal recognition of diverse forms of GBV (60.2%), improved provisions for prosecution (53.7%), and expanded definitions of violence (50.2%).
- Access to justice perceptions show 44.6% report moderate improvement, 31.6% report significant improvement, while 13.4% see no change.
- Major challenges include lack of awareness (70.1%), inadequate funding (69.7%), poor enforcement (41.1%), resistance from traditional/religious groups (39.8%), and weak political will (16.5%).

Status	
 Sex Offenders' Register <ul style="list-style-type: none"> Register not yet functional despite legal provision. Tracking and monitoring of convicted offenders unavailable. 	Not Established
 Protection Orders <ul style="list-style-type: none"> Courts are empowered to issue orders. Number of orders issued in past 12 months unavailable. Police enforcement inconsistent. 	Partially Operational
 Mandatory Reporting <ul style="list-style-type: none"> Mandated by VAPP Law for health, education, and social welfare professionals. Penalties for non-compliance exist. Standardized reporting and referral protocols established. 	Fully Operational
 Legal Remedies <ul style="list-style-type: none"> Legal aid and pro bono support available. Several survivors have obtained compensation or restitution. More than 20 GBV cases have been prosecuted under VAPP Law in the past year. 	Fully Operational

RECOMMENDATIONS

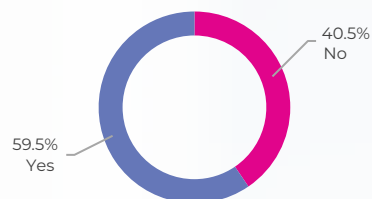
- Establish and operationalize a functional Sexual Offenders' Register to enable monitoring of convicted offenders.
- Collect and publish data on the issuance and enforcement of Protection Orders to strengthen accountability.
- Build continuous capacity of mandated reporters to ensure compliance with standardized protocols.



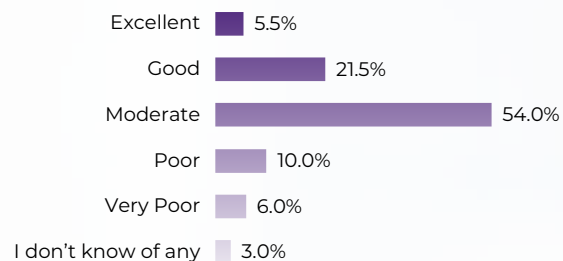
Imo State | Support Service



Are you aware of any Sexual Assault Referral Centres (SARCs), shelters, or other protective services for GBV survivors in your state?





How would you rate the availability of survivor-centered services



Status	
 SARCs and Shelters <ul style="list-style-type: none"> Government-funded SARCs, shelters : 1. Currently not receiving survivors. 	Established but Non-functional
 Free Medical Assistance <ul style="list-style-type: none"> Government health facilities mandated to provide free medical care. Survivors face no cost-related barriers. Challenges remain in accessing medical reports and forensic services for prosecution. 	Available
 Victims Support Fund <ul style="list-style-type: none"> Still in development phase. No funding sources were established. No survivor services supported in the past year. 	Not Operational

RECOMMENDATIONS

- Fully equip and operationalize SARCs and shelters with trained professionals, medical, and psychological services to ensure accessibility.
- Train healthcare providers in forensic evidence collection and documentation to improve survivors' access to medical reports for prosecution.
- Establish and operationalize the Victims Support Fund with dedicated budget lines and partnerships with NGOs/CSOs to sustainably finance survivor services.

Status	
<p>Regulatory Body</p>  <ul style="list-style-type: none"> No formally designated regulatory body for VAPP Law enforcement. A coordination mechanism exists between key MDAs (Women Affairs, Justice, Health, Information, Education, Finance, and social sectors). Protection Officers appointed across all LGAs to support the courts. 	Established
<p>Service Provider Registration</p>  <ul style="list-style-type: none"> State-maintained register of accredited service providers is regularly updated. Register circulated to relevant institutions (police stations, protection officers, courts). Operational guidelines for accredited service providers developed to support standardized service delivery. 	

RECOMMENDATIONS

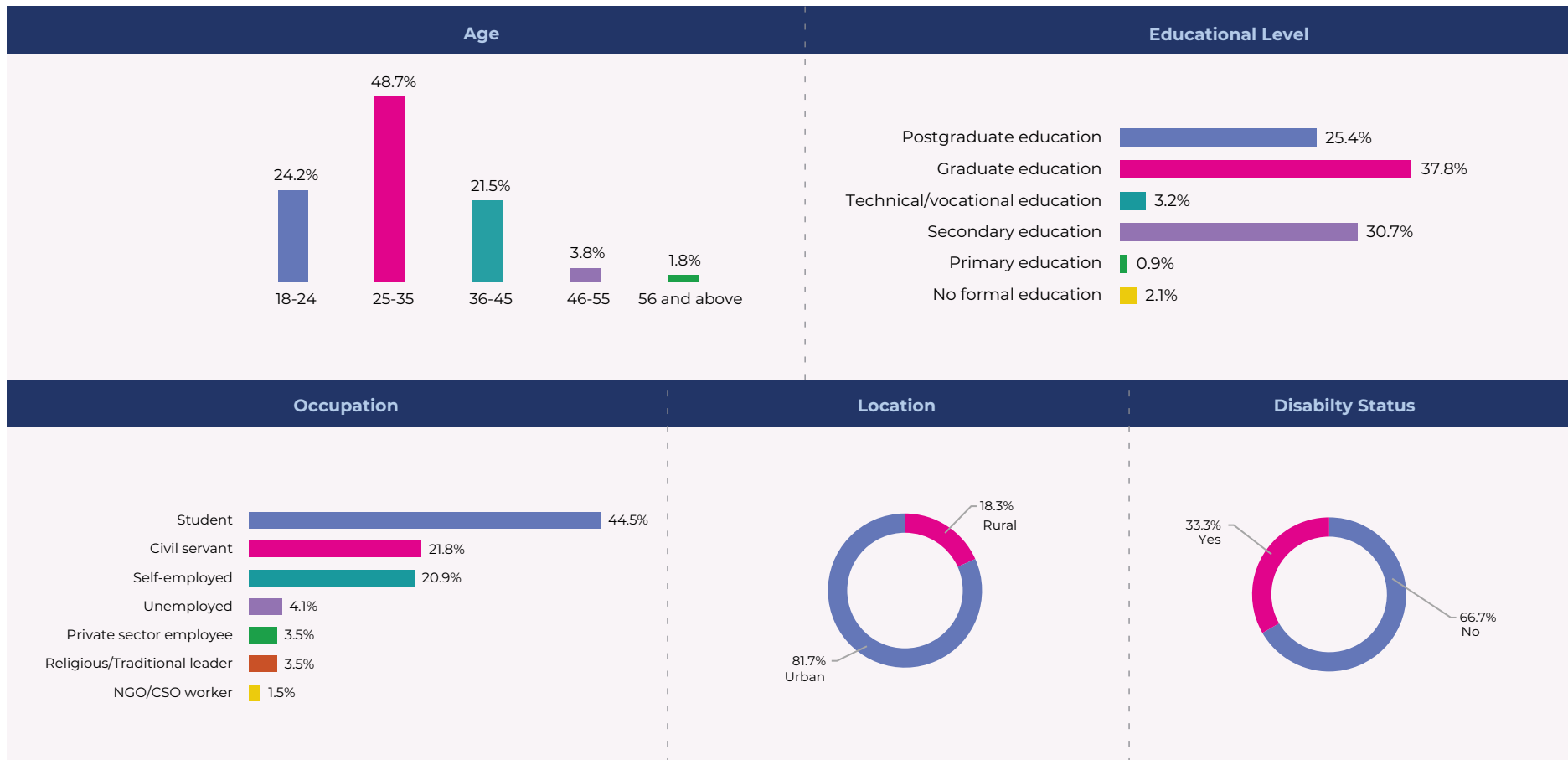
- Formally designate a regulatory body to oversee implementation and coordination of the VAPP Law in Imo State.
- Provide continuous training and adequate resources for Protection Officers across LGAs to strengthen survivor and court support.
- Regularly update and widely circulate the service provider register, alongside structured stakeholder dialogues, to enhance coordination and inclusivity in service delivery.





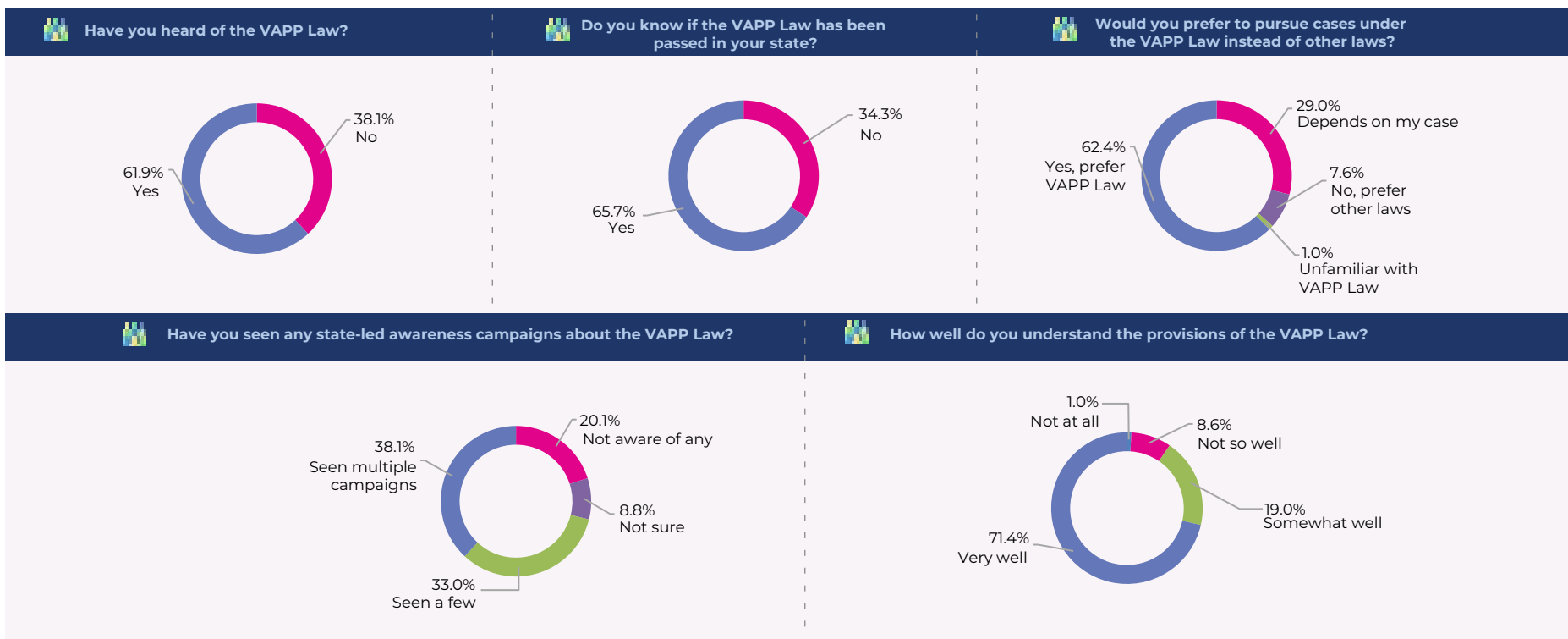
JIGAWA STATE

Jigawa State | Respondent Demographics (n = 336)



The demographic profile reflects nearly half of the respondents (48.7%) aged between 25 and 35 years and 18 to 24 years comprised 24.2% of the sample while those 36 and 45 years accounted for 21.5% forming a larger educated group with 63.2%. Notably, students formed the largest group, representing 44.5% of respondents while civil servants made up 21.8%, and self-employed individuals constituted 20.9%. Majority of the respondents (81.7%) resided in urban areas. Persons with disabilities constitute 33.3% of the sample.

Jigawa State | Public Awareness



FINDINGS

- Jigawa state has implemented VAPP Law awareness initiatives, reaching schools, health workers, the public, religious groups, traditional leaders, market associations, and law enforcement agencies.
- However, 38.1% of respondents in Jigawa State have not heard of the VAPP Law.
- Among those aware of the law, 71.4% report understanding the VAPP Law's provisions very well, while 8.6% understand it not so well, and 1.0% have no understanding.
- 20.1% of respondents have not seen any state-led awareness initiatives.

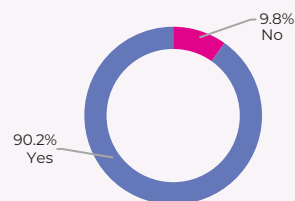
RECOMMENDATIONS

- Tailor sensitization programs to reach rural and remote populations, including translating materials into local languages to enhance comprehension.
- Train and empower traditional and religious leaders to serve as community advocates, promoting the implementation and enforcement of the VAPP Law.

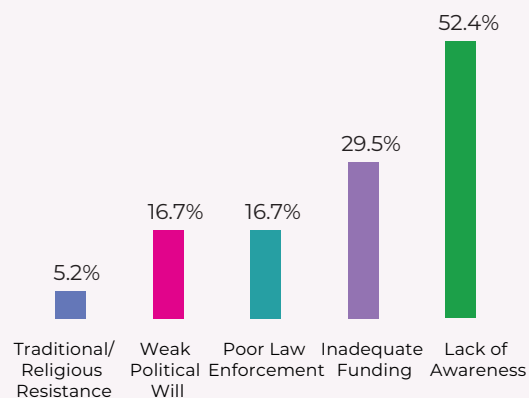
Jigawa State | Enforcement Systems



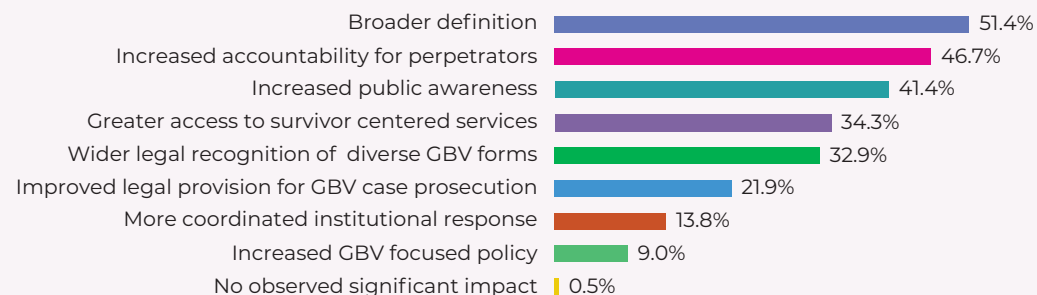
Since the VAPP Law was domesticated in your state, do you think the state's overall response to gender-based violence (GBV) has improved?



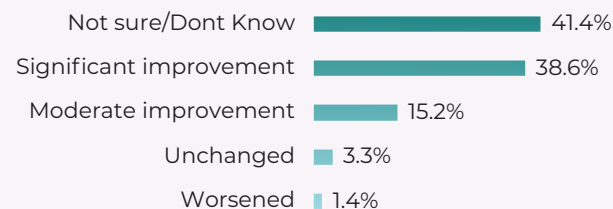
Which of the following do you think are the major barriers to implementing the VAPP Law in your state?



In your opinion, what has been the key impacts of the VAPP Law in your state and across Nigeria?




Since the VAPP Law was passed, do you think GBV survivors in your state have experienced better access to justice?



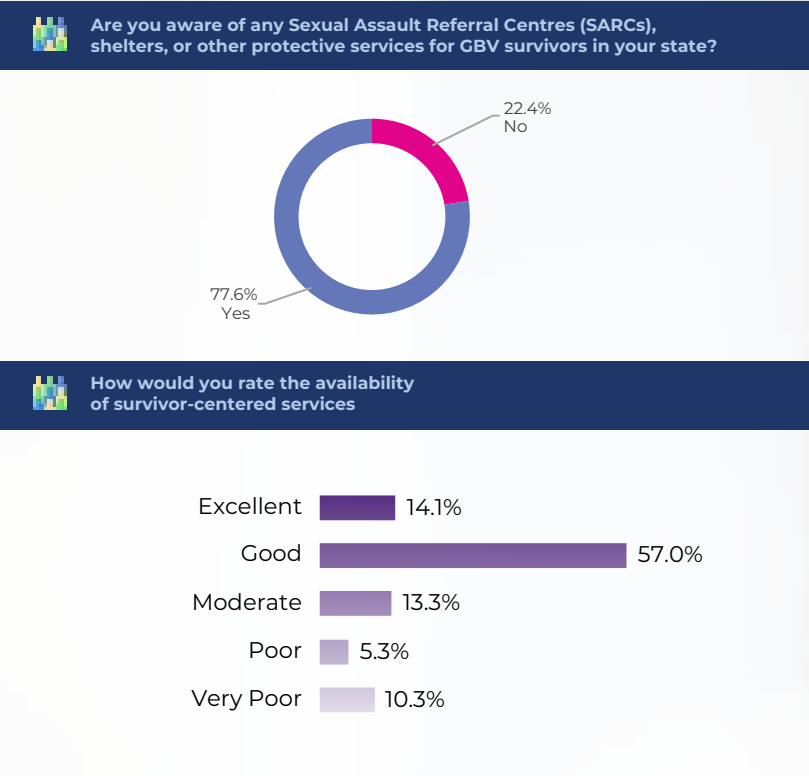
FINDINGS




- 90.2% of respondents believe the state's response to GBV has improved since the adoption of the VAPP Law.
- Key impacts of the law include a broader definition of GBV (51.4%), increased accountability for perpetrators (46.7%), and heightened public awareness (41.4%).
- Perceptions of access to justice are mixed: 38.6% report significant improvement, 15.2% report moderate improvement, and 41.4% are unsure.
- Major challenges hindering effective implementation include lack of awareness (52.4%), inadequate funding (29.5%), poor enforcement (16.7%), and weak political will (16.7%).

		Status
	Sex Offenders' Register <ul style="list-style-type: none">No register established and functional	Not Operational
	Protection Orders <ul style="list-style-type: none">Courts authorized to issue orders under the VAPP Law.Number of orders issued in the past 12 months: more than 10.Police enforcement: Consistently enforced.	Operational
	Mandatory Reporting <ul style="list-style-type: none">VAPP Law mandates reporting by health, education, and social welfare professionals.Penalties exist for non-compliance.Standardized reporting and referral protocols are in place.	Fully Operational
	Legal Remedies <ul style="list-style-type: none">Survivors have successfully obtained compensation or restitution through the provisions of the VAPP Law.More than 20 cases have been prosecuted under VAPP Act in the past 12 months.	Fully Operational
RECOMMENDATIONS		
<ul style="list-style-type: none">Establish and maintain a publicly accessible Sex Offenders Register to enhance transparency and offender tracking.Increase awareness and provide targeted training for law enforcement officers on VAPP Law provisions and enforcement mechanisms.Conduct community sensitization campaigns in local languages to improve understanding of the VAPP Law.		



Jigawa State | Support Service



Status	
<div><h3>SARCs and Shelters</h3><ul style="list-style-type: none">One government-funded SARCState-owned shelter is absentServices offered: Temporary housing, feeding, medical care, psycho-social counselling, legal aid, transportation, and skills acquisition/reintegration support.</div>	Functional but limited
<div><h3>Free Medical Assistance</h3><ul style="list-style-type: none">Government health facilities mandated to provide free medical care.Survivors face no cost-related barriers.Medical reports and forensic services routinely provided for prosecution.</div>	
<div><h3>Victims Support Fund</h3><ul style="list-style-type: none">Financing from state budget, donors, and development partners.Actively disbursing resources.Supports medical services, shelters, rehabilitation, and reintegration.</div>	Established and Operational

RECOMMENDATIONS

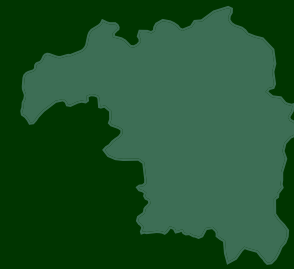
- Expand the number and capacity of SARCs, shelters, and health facilities to reach underserved areas.
- Strengthen public awareness campaigns to increase knowledge of available survivor-centered services.
- Scale up and standardize the provision of free medical and forensic services to ensure consistent survivor access across all facilities.

Status	
<p>Regulatory Body</p>  <ul style="list-style-type: none"> Formally designated body: Ministry of Justice. Coordinator for domestic violence prevention: Not appointed. Annual report: Not submitted to state, federal government, or NBS. A state-level coordination mechanism exists involving MDAs and social stakeholders. Protection Officers: Not appointed across LGAs. 	<p>Partially Operational</p>
<p>Service Provider Registration</p>  <ul style="list-style-type: none"> A register of accredited service providers exists but is not regularly updated. Shared with some relevant institutions (police stations, protection officers, courts). Operational guidelines for accredited providers still under development. 	

RECOMMENDATIONS

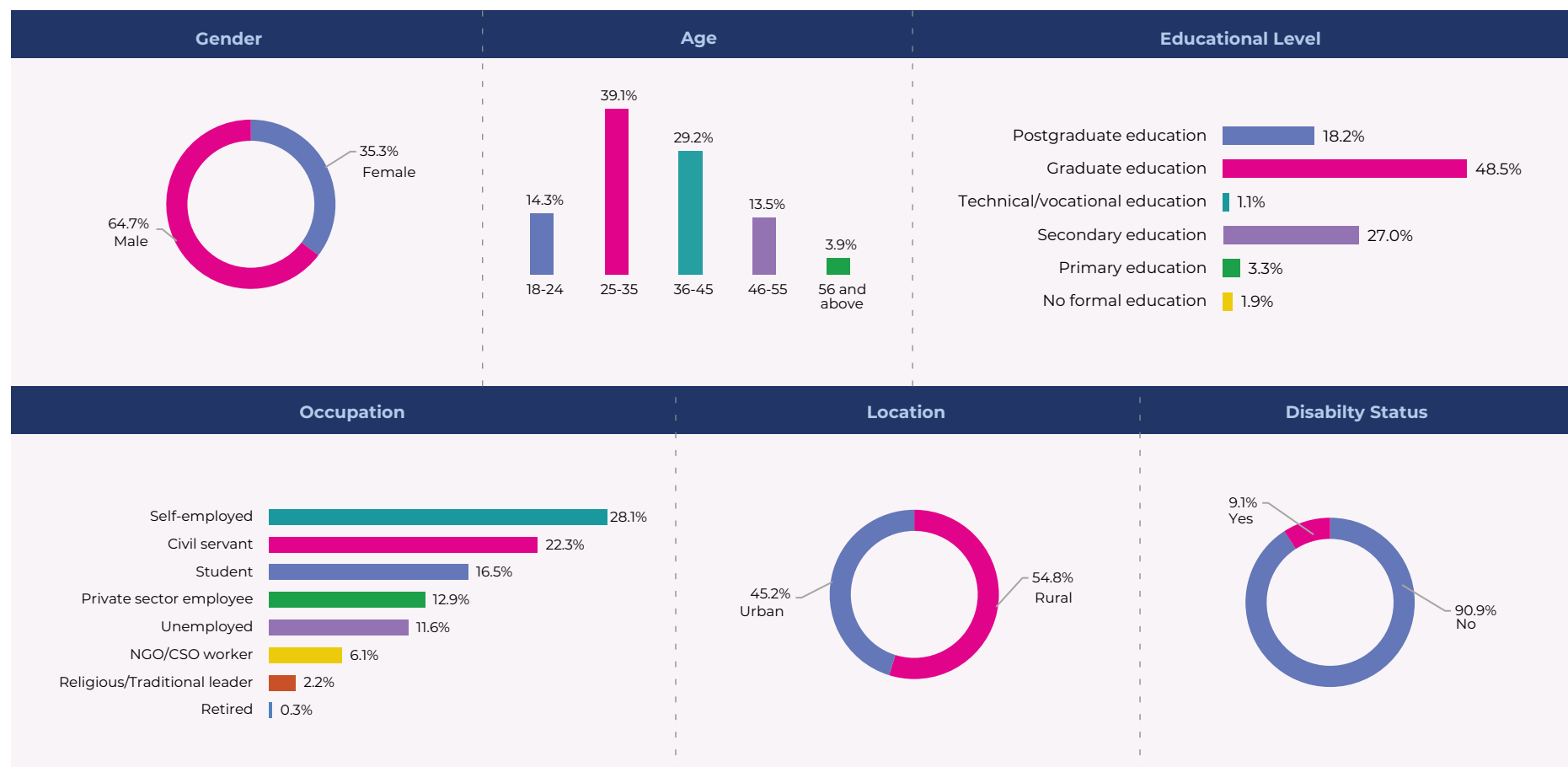
- Appoint a dedicated Coordinator for domestic violence prevention and assign Protection Officers in every LGA.
- Regularly update and widely disseminate the register of accredited GBV service providers.
- Expedite the development of operational guidelines to standardize and strengthen service delivery.





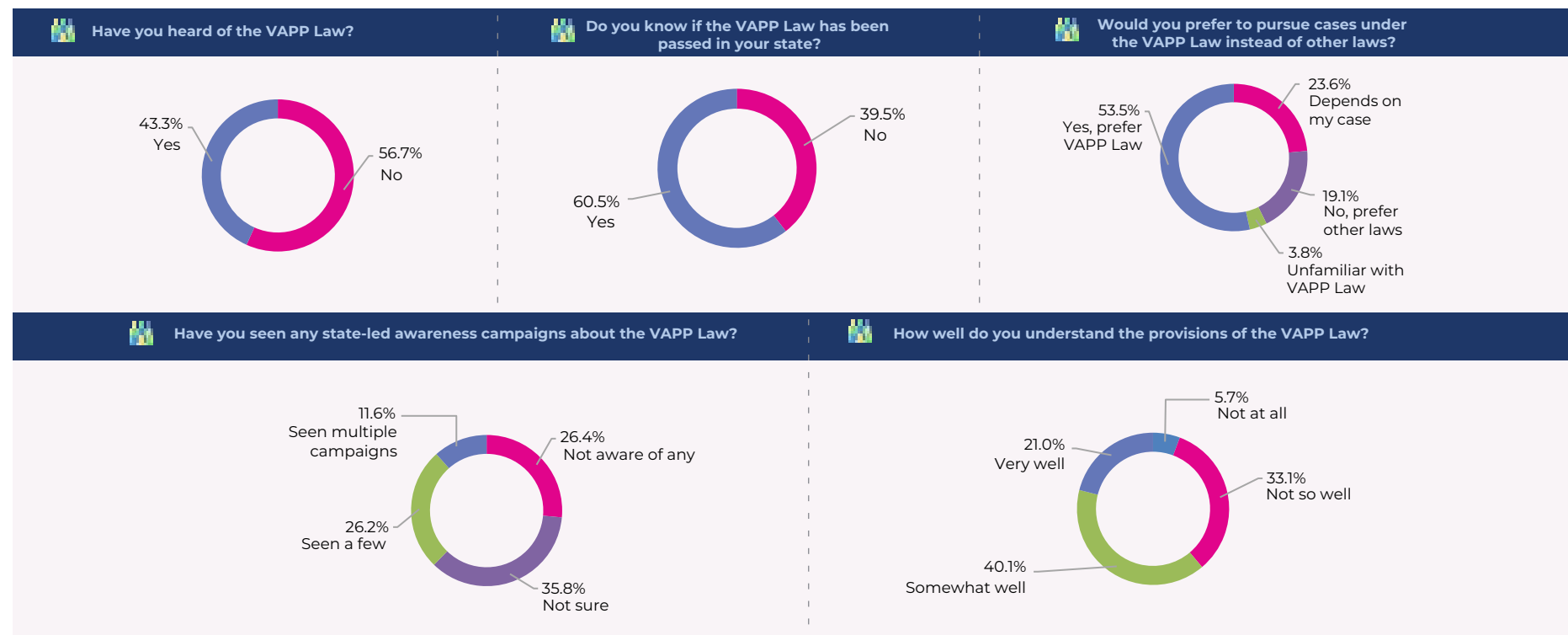
KADUNA STATE

Kaduna State | Respondent Demographics (n = 363)



The respondent demographics show a moderately educated population, with 48.5% holding graduate-level qualifications and 18.2% possessing postgraduate degrees. Male respondents dominate the sample with 64.7%. The most represented occupations are self-employed individuals (28.1%) and civil servants (22.3%), followed by students (16.5%) and private sector employees (13.9%). The age distribution is led by 25-35-year-olds (39.1%), followed by 36-45-year-olds (29.2%) and 18-24-year-olds (14.3%). More than half of the respondents (54.8%) live in rural areas, while 45.2% reside in urban locations. Additionally, 9.1% of respondents reported having a disability.

Kaduna State | Public Awareness



FINDINGS

- Kaduna State has conducted sensitization campaigns on the VAPP Law, targeting schools, religious institutions, traditional rulers, healthcare workers, law enforcement, and the public.
- Awareness remains moderate, with 43.3% aware of the law and 56.7% unaware.
- Exposure to campaigns is limited: 26.2% saw a few, 11.6% saw multiple, 26.4% saw none, and 35.8% were unsure.
- Among those aware, 60.5% know it has been passed, but only 21.0% report strong understanding of its provisions.
- Legal preferences show 53.5% favour the VAPP Law, while 23.6% are unsure and 19.1% prefer other laws.

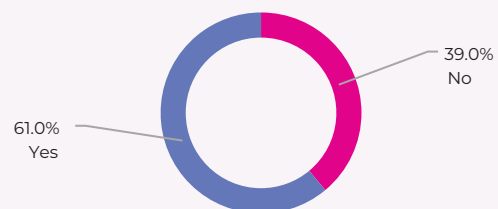
RECOMMENDATIONS

- Expand the reach and frequency of sensitization campaigns, especially in rural and hard-to-reach communities.
- Simplify and translate campaign materials into local languages to strengthen understanding.
- Train community, religious, and traditional leaders to act as advocates for the VAPP Law in their communities.

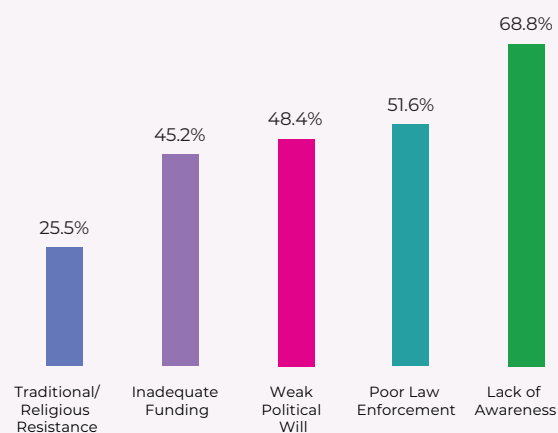
Kaduna State | Enforcement Systems



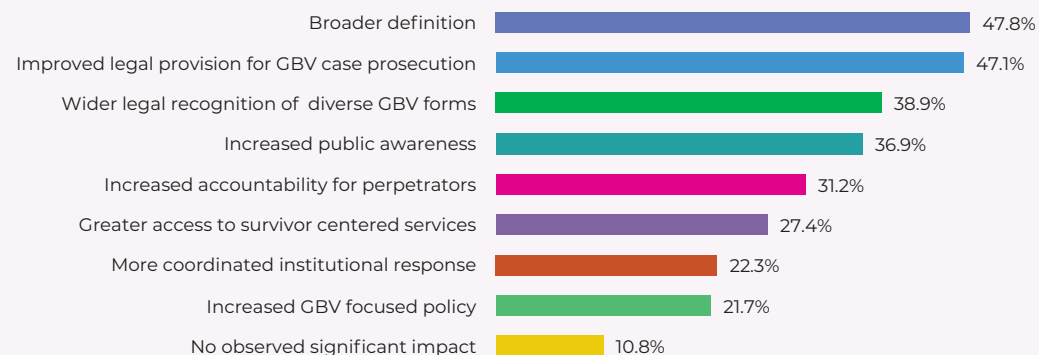
Since the VAPP Law was domesticated in your state, do you think the state's overall response to gender-based violence (GBV) has improved?



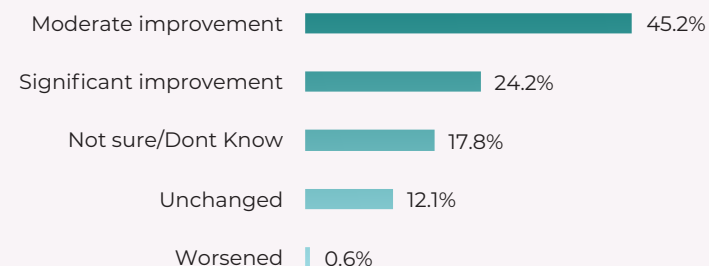
Which of the following do you think are the major barriers to implementing the VAPP Law in your state?



In your opinion, what has been the key impacts of the VAPP Law in your state and across Nigeria?



Since the VAPP Law was passed, do you think GBV survivors in your state have experienced better access to justice?



FINDINGS

- 61.0% of respondents believe the state's GBV response has improved since the passage of the VAPP Law, while 39.0% see no change.
- Access to justice perceptions: 45.2% moderate improvement, 24.2% significant improvement, 12.1% no change.
- Most cited impacts: broader definition of GBV (47.8%), improved legal provisions for prosecution (47.1%), wider recognition of diverse GBV forms (38.9%).
- Key barriers: lack of awareness (68.8%), poor law enforcement (51.6%), weak political will (48.4%), inadequate funding (45.2%), and cultural/religious resistance (25.5%).

Kaduna State | Enforcement Systems

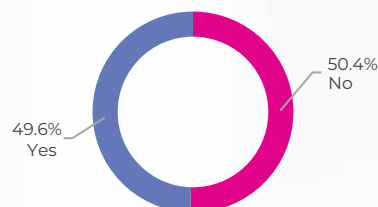
		Status
	Sex Offenders' Register <ul style="list-style-type: none"> Publicly accessible, linked to national GBV database. Regularly updated, promoting transparency and accountability. 	Fully Operational
	Protection Orders <ul style="list-style-type: none"> Courts are empowered to issue protection orders. Enforced by Police and security agencies. No public data on the number of orders issued. 	Operational
	Mandatory Reporting <ul style="list-style-type: none"> No legal obligation for health, education, or social welfare professionals to report GBV cases. No penalties for non-compliance. Standardized referral protocols exist across institutions. 	Not Operational
	Legal Remedies <ul style="list-style-type: none"> Survivors access justice through legal aid and pro bono lawyers. Between 6–10 GBV cases prosecuted under the VAPP Law in the past year. Compensation and restitution awarded in some cases. 	Functional
RECOMMENDATIONS		
<ul style="list-style-type: none"> Expand statewide awareness campaigns in local languages to close awareness gap. Train law enforcement agencies on VAPP Law enforcement and strengthen protection order implementation. Amend the VAPP Law to mandate GBV case reporting by professionals, with penalties for non-compliance. 		



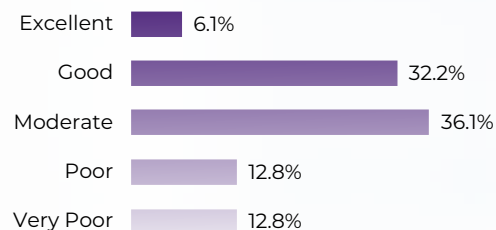
Kaduna State | Support Service



Are you aware of any Sexual Assault Referral Centres (SARCs), shelters, or other protective services for GBV survivors in your state?



How would you rate the availability of survivor-centered services



Status



SARCs and Shelters

- 4 Government-funded SARCs and 2 shelters.
- Facilities are active and receiving survivors.
- Services include temporary housing, feeding, psychosocial counselling, legal aid, and medical support.

Functional



Free Medical Assistance

- Government health facilities provide free care voluntarily, not mandated.
- Survivors still face cost-related barriers for medical and forensic services.
- Medical reports and forensic evidence are available to some survivors for prosecution.

Available but limited





Victims Support Fund

- Fund has been established but not functional.
- No resources received or disbursed in the past year.
- State budget identified as primary funding source.

Not Operational

RECOMMENDATIONS

- Expand and strengthen SARCs and shelters to ensure comprehensive, survivor-centered services.
- Institutionalize free medical and forensic services in all government health facilities.
- Expedite operationalization of the Victims Support Fund to guarantee timely survivor support.

Status	
<div></div> <div>Regulatory Body<ul style="list-style-type: none">No regulatory body currently designated to implement and enforce the VAPP Law.No Coordinator appointed for domestic violence prevention.No annual reports submitted to state/federal government or NBS.A state-level coordination mechanism exists with MDAs (Women Affairs, Justice, Health, Education, Finance, etc.) and social sector actors.Protection Officers have not been appointed across LGAs.</div>	Not Established
<div></div> <div>Service Provider Registration<ul style="list-style-type: none">A register of accredited service providers exists but is not updated regularly.Circulated to some institutions (police stations, courts, protection officers).Operational guidelines for service providers are under development.</div>	Established but limited

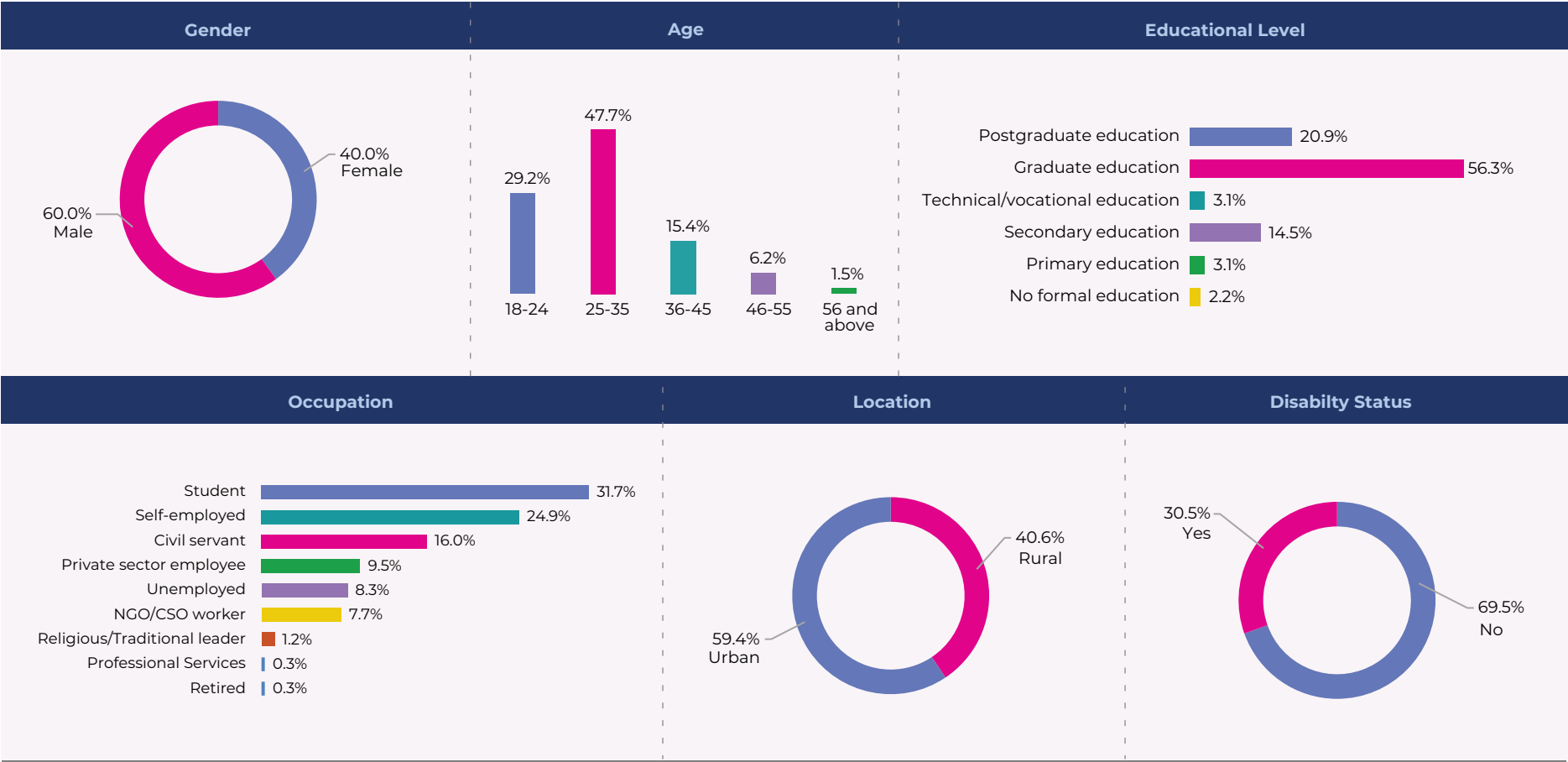
RECOMMENDATIONS
<ul style="list-style-type: none">Establish a dedicated regulatory body or assign an agency to enforce the VAPP Law.Appoint Protection Officers in all LGAs to support courts and local enforcement.Regularly update and circulate the service providers’ register with clear operational guidelines to ensure quality and consistency.





KATSINA STATE

Katsina State | Respondent Demographics (n = 325)

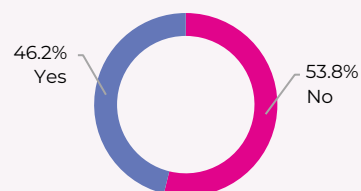


The respondent characteristics indicate that more than half (60.0%) were male, with young adults aged 25–35 years forming the largest age group (47.7%), followed by those aged 18–24 years (29.2%). The sample reflects a relatively well-educated population, with 56.3% holding graduate-level qualifications and 20.9% having postgraduate education, while only 14.5% had secondary education. Students (31.7%) and self-employed individuals (24.9%) are the largest occupational groups, followed by civil servants (16.0%). Most respondents live in urban areas (59.4%), and 30.5% identify as having disabilities.

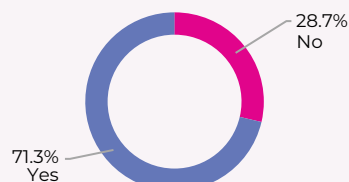
Katsina State | Public Awareness



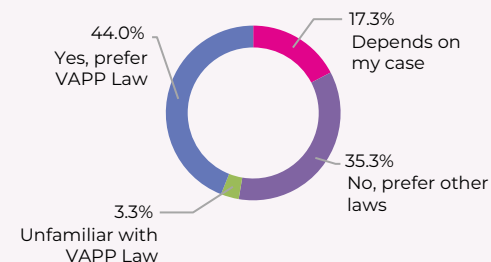
Have you heard of the VAPP Law?



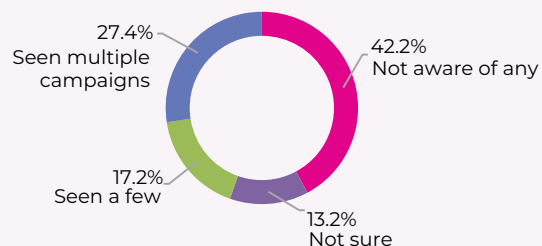
Do you know if the VAPP Law has been passed in your state?



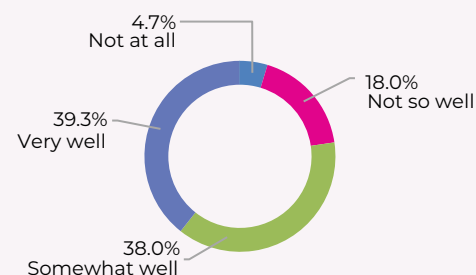
Would you prefer to pursue cases under the VAPP Law instead of other laws?



Have you seen any state-led awareness campaigns about the VAPP Law?



How well do you understand the provisions of the VAPP Law?



FINDINGS

- The state government has implemented sensitization campaigns to promote the VAPP Law, but efforts have largely focused on the general public, leaving out key stakeholders such as religious/traditional leaders and community actors.
- Less than half of respondents (46.2%) have heard of the VAPP Law, while 53.8% remain unaware.
- Awareness of state-led campaigns is low: 42.2% of respondents have not seen any campaign, 17.2% have seen only a few, and 27.4% have seen multiple.
- Among those aware of the law, 71.3% know it has been passed, but understanding of its provisions is limited: only 39.3% report very good knowledge, 38.0% somewhat good, and 18.0% poor knowledge.
- Preferences for pursuing cases vary: 44.0% prefer the VAPP Law, 35.3% prefer other laws, and 17.3% remain undecided.

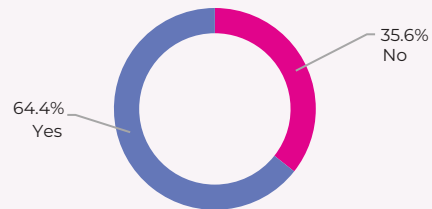
RECOMMENDATIONS

- Broaden outreach efforts to include key influencers such as traditional/religious leaders, CBOs, schools, and health workers.
- Intensify and diversify awareness campaigns through radio, community meetings, and digital platforms, especially in rural areas.
- Deepen sensitization programs to focus on clear understanding of the VAPP Law's provisions, not just its existence.

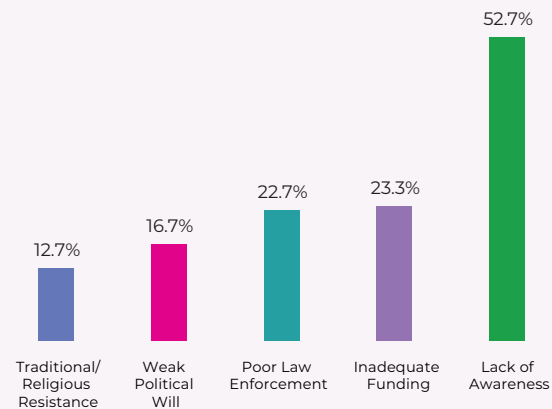
Katsina State | Enforcement Systems



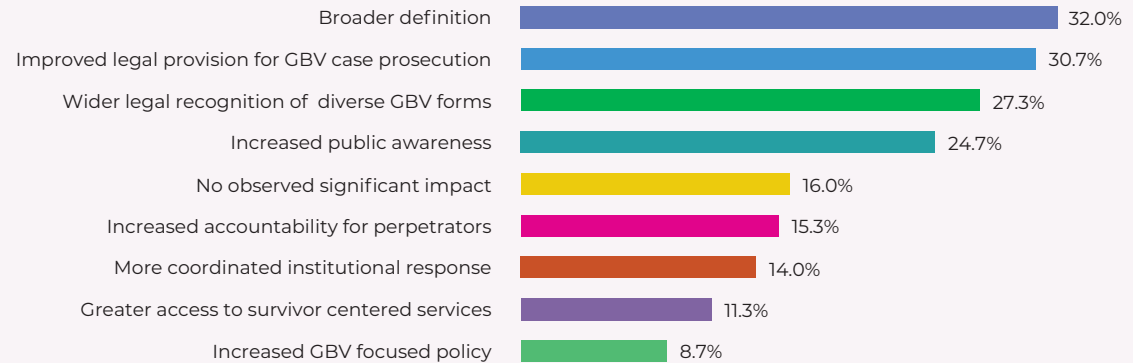
Since the VAPP Law was domesticated in your state, do you think the state's overall response to gender-based violence (GBV) has improved?



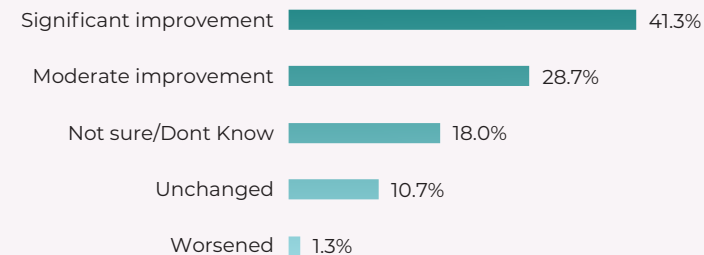
Which of the following do you think are the major barriers to implementing the VAPP Law in your state?



In your opinion, what has been the key impacts of the VAPP Law in your state and across Nigeria?



Since the VAPP Law was passed, do you think GBV survivors in your state have experienced better access to justice?



FINDINGS

- 64.4% of respondents believe the state's response to GBV has improved since adopting the VAPP Law.
- The most cited impacts include a broader definition of GBV (32.0%), improved legal provisions for prosecution (30.7%), and wider recognition of diverse forms of GBV (27.3%).
- Access to justice perceptions: 41.3% report significant improvement, 28.7% moderate improvement, and 10.7% no change.
- Major barriers include lack of awareness (52.7%), poor law enforcement (23.3%), weak political will (22.7%), and inadequate funding (16.7%).

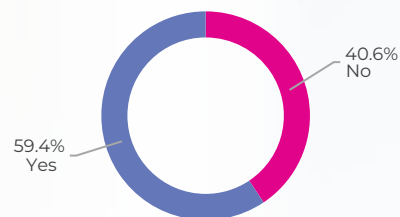
		Status
	Sex Offenders' Register <ul style="list-style-type: none">• Register not yet established.• No structured system to track convicted offenders.	Not Operational
	Protection Orders <ul style="list-style-type: none">• Courts authorized to issue orders.• No public data on orders issued in the past 12 months.• Enforcement by police occurs rarely.	
	Mandatory Reporting <ul style="list-style-type: none">• Professionals mandated to report GBV cases.• No penalties for non-compliance.• Standardized reporting and referral protocols exist.	Partially Operational
	Legal Remedies <ul style="list-style-type: none">• Survivors consistently access medical and forensic reports.• Legal aid and pro bono lawyers are available.• Survivors have obtained compensation/restitution.• More than 20 GBV cases have been prosecuted in the past 12 months under the VAPP Law.	Fully Operational
RECOMMENDATIONS		
<ul style="list-style-type: none">• Establish and operationalize a Sex Offenders' Register to track convicted offenders.• Strengthen protection order enforcement through targeted police and judicial training.• Amend the VAPP Law to include penalties for failure to report GBV cases by professionals.		



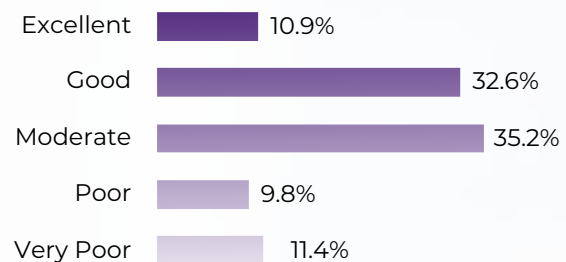
Katsina State | Support Service



Are you aware of any Sexual Assault Referral Centres (SARCs), shelters, or other protective services for GBV survivors in your state?



How would you rate the availability of survivor-centered services



Status



SARCs and Shelters

- Two government-funded SARCs
- Limited in coverage and access
- Services offered: medical, psychosocial, and legal support

Functional but limited



Free Medical Assistance

- Government facilities are mandated to provide free care.
- Survivors still face any cost-related barriers.
- Medical reports and forensic services are consistently accessed for prosecution.

Fully Available



Victims Support Fund

- No established funding mechanism or disbursement structure.
- No services supported in the past year.

Established and Operational

RECOMMENDATIONS

- Ensure all health facilities consistently provide free medical and forensic services to eliminate cost barriers.
- Establish and operationalize a Victims Support Fund with a clear funding and disbursement framework to sustain survivor services.

Status	
 <p>Regulatory Body</p> <ul style="list-style-type: none"> Formally designated body: GBV Response Committee. Coordinator appointed for domestic violence prevention. Annual report not submitted to federal/state government or NBS. No coordination mechanism among key MDAs (Women Affairs, Justice, Health, Information, Education, Finance). No Protection Officers appointed across LGAs. 	Partially Operational
 <p>Service Provider Registration</p> <ul style="list-style-type: none"> No state-maintained register of accredited service providers. No circulation to relevant institutions (police, courts, protection officers). No operational guidelines developed for service providers. 	Not Established

RECOMMENDATIONS

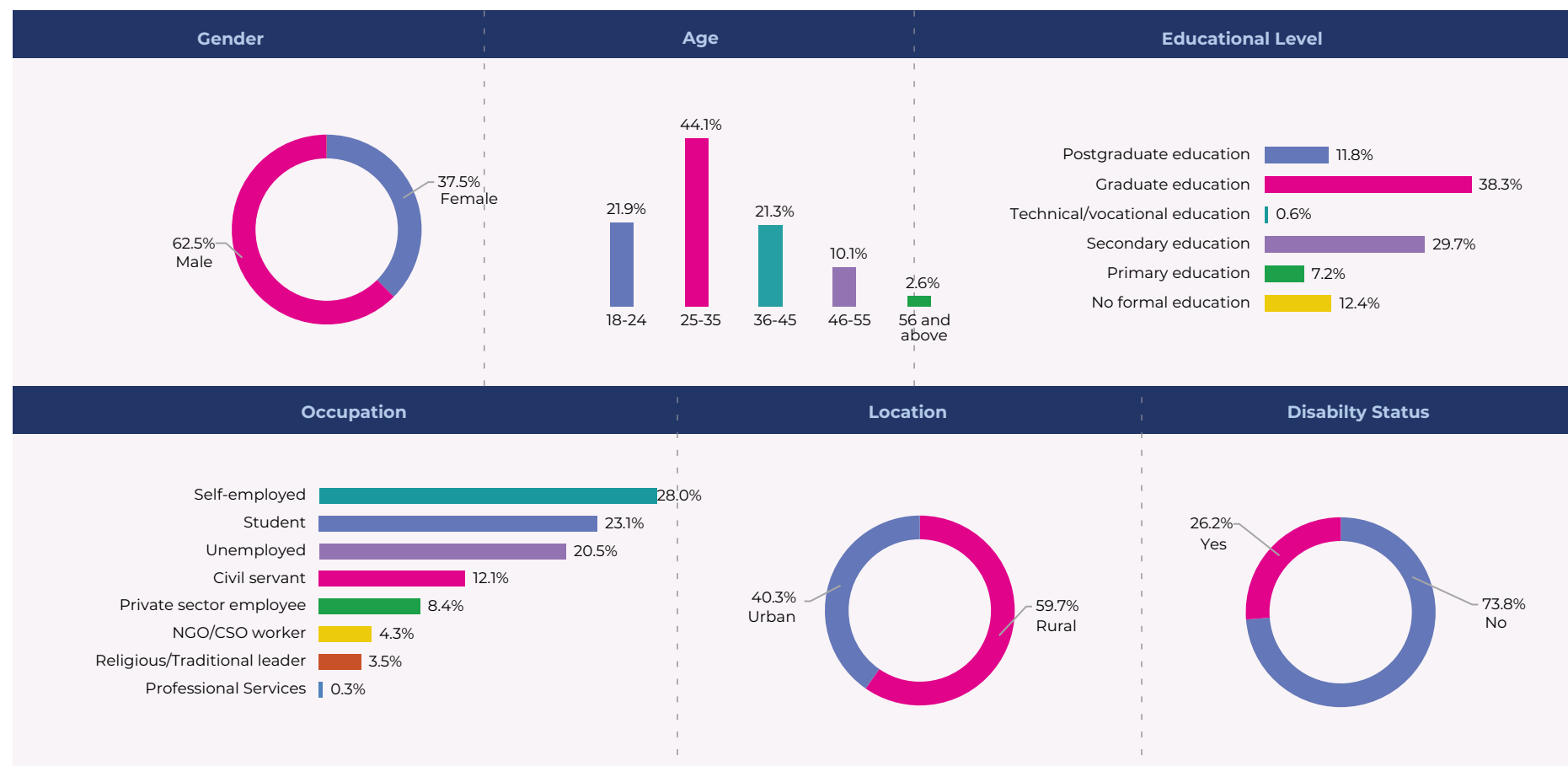
- Establish a formal reporting system and ensure coordination among key MDAs for GBV prevention and response.
- Appoint Protection Officers in every LGA to support courts in enforcing the VAPP Law.
- Develop and maintain a state register of accredited service providers with operational guidelines and circulate widely to relevant institutions.





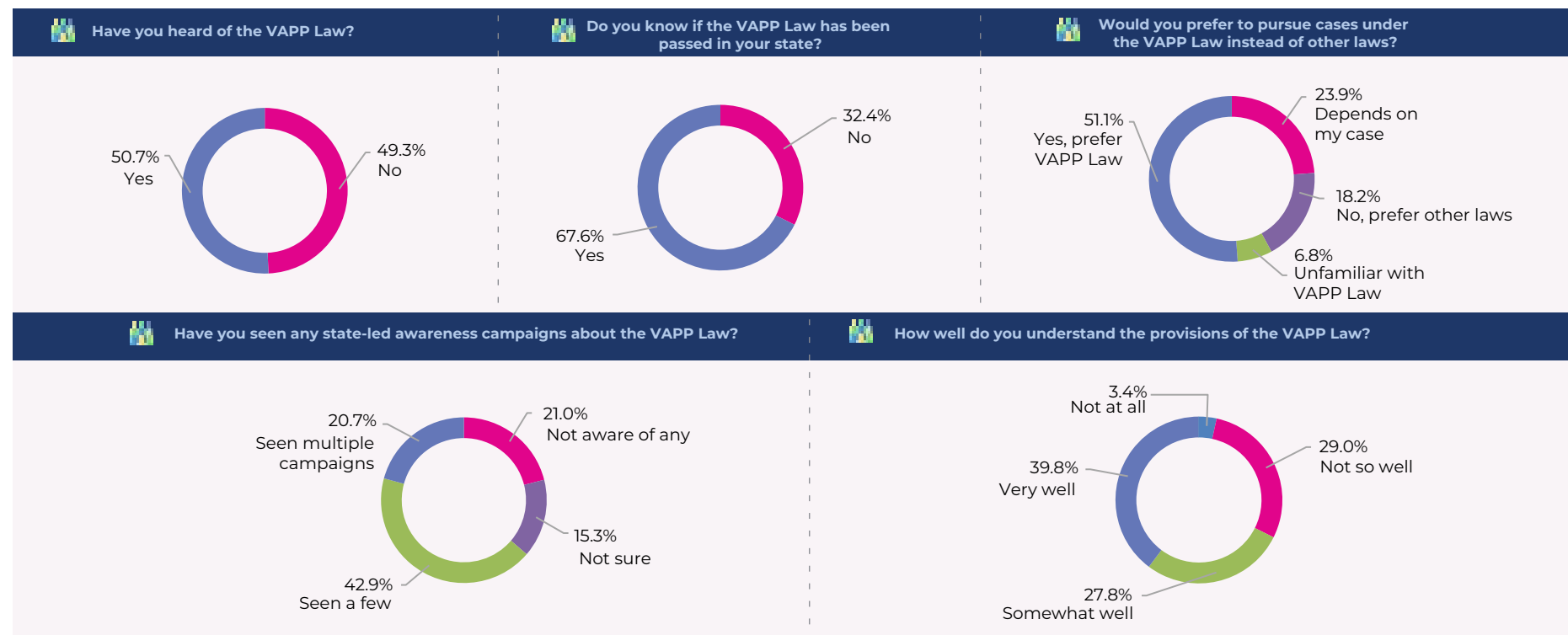
KEBBI STATE

Kebbi State | Respondent Demographics (n = 347)



The sample predominantly comprises males (62.5%) with a female representation of 37.5%. The age distribution shows 44.1% are 25-35 years old, 21.9% are 18-24, and 21.3% are 36-45, with older respondents less represented. Educational attainment is moderately high, with 38.3% having graduate education and 11.8% holding postgraduate degrees. In terms of employment, 28.0% are self-employed, 23.1% are students, 20.5% are unemployed, and 12.1% are civil servants. Most respondents (59.7%) reside in rural areas, while 40.3% live in urban areas. Additionally, 26.2% of respondents report having a disability.

Kebbi State | Public Awareness



FINDINGS

- The state government has conducted VAPP Law awareness and sensitization campaigns, reaching schools, religious institutions, traditional rulers, market associations, transport unions, health unions, law enforcement agencies, and the public.
- 50.7% of respondents in Kebbi State have heard of the VAPP Law, while 49.3% remain unaware.
- Among those aware of the law, only 39.8% report a strong understanding of its provisions, while 29.0% do not understand it well.
- Exposure to state-led campaigns is relatively low, with 42.9% seeing them a few times, 20.7% multiple times, and 21% unaware of any campaigns.

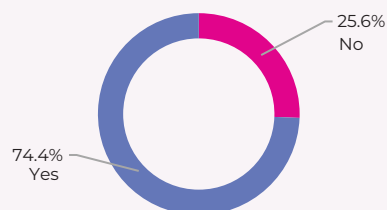
RECOMMENDATIONS

- Intensify awareness campaigns and tailor them to diverse groups across LGAs, especially in low-awareness communities.
- Translate campaign materials into local languages and use youth-friendly platforms such as social media to expand outreach.
- Partner with religious leaders, traditional rulers, and local influencers to strengthen sensitization efforts and build community trust.

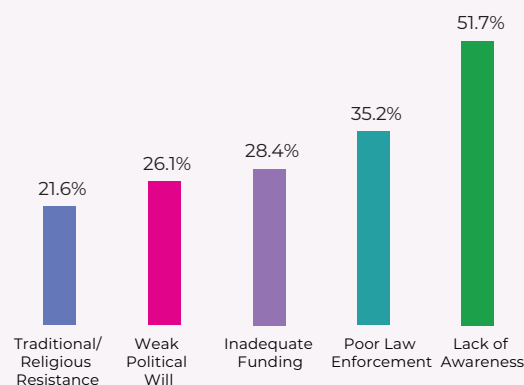
Kebbi State | Enforcement Systems



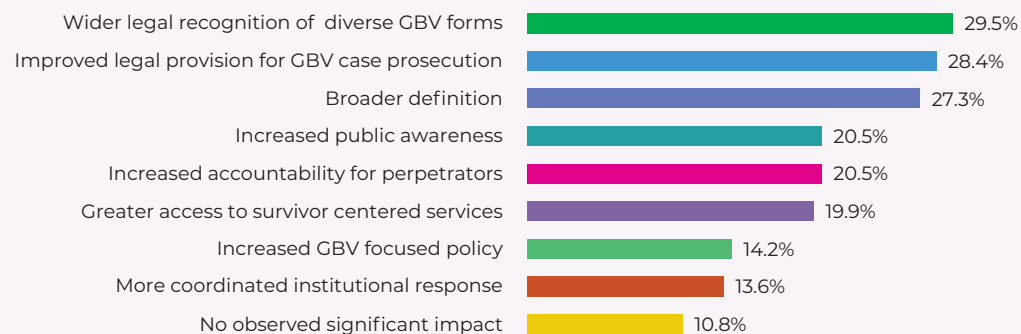
Since the VAPP Law was domesticated in your state, do you think the state's overall response to gender-based violence (GBV) has improved?



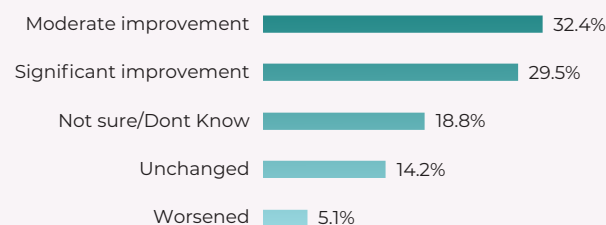
Which of the following do you think are the major barriers to implementing the VAPP Law in your state?



In your opinion, what has been the key impacts of the VAPP Law in your state and across Nigeria?



Since the VAPP Law was passed, do you think GBV survivors in your state have experienced better access to justice?



FINDINGS

- 74.4% of respondents think Kebbi State's response to GBV has improved since adopting the VAPP Law, while 25.6% see no change.
- The most cited impacts include wider legal recognition of diverse GBV forms (29.5%), improved legal provisions for prosecution (28.4%), and broader definitions of GBV (27.3%).
- Access to justice perceptions show 32.4% report moderate improvement, while only 29.5% report significant improvement.
- Major challenges include lack of awareness (51.7%), poor law enforcement (35.2%), inadequate funding (28.4%), weak political will (21.6%), and traditional/religious resistance (21.6%).

Kebbi State | Enforcement Systems

		Status
 Sex Offenders' Register <ul style="list-style-type: none"> No register exists in Kebbi State. No mechanism to track or monitor convicted offenders. 		Not Established
 Protection Orders <ul style="list-style-type: none"> Courts are authorized to issue orders. No protection orders have been issued in the past 12 months. Police enforcement rarely carried out. 		Established but Not Operational
 Mandatory Reporting <ul style="list-style-type: none"> VAPP Law does not mandate reporting by professionals. No penalties for non-compliance. Standardized referral protocols in place. 		Not Operational
 Legal Remedies <ul style="list-style-type: none"> Survivors have accessed compensation or restitution. Medical and forensic access remains limited. Number of cases prosecuted under VAPP Law in the past 12 months: 11–20. 		Operational

RECOMMENDATIONS

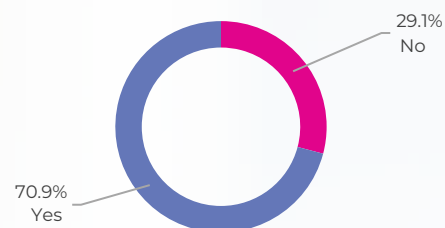
- Establish and operationalize a sex offenders' register that is regularly updated and publicly accessible.
- Strengthen issuance and enforcement of protection orders through courts and police.
- Amend the VAPP Law to mandate GBV case reporting by professionals with penalties for non-compliance.



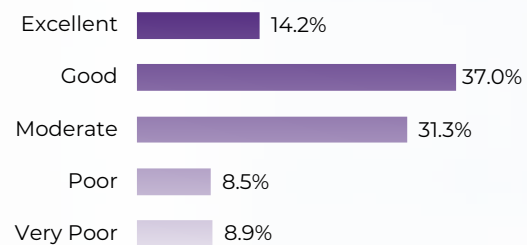
Kebbi State | Support Service



Are you aware of any Sexual Assault Referral Centres (SARCs), shelters, or other protective services for GBV survivors in your state?



How would you rate the availability of survivor-centered services



Status

SARCs and Shelters



- One government-owned functional SARC
- Three additional SARCs are undergoing construction
- Services offered: medical treatment, psychosocial counseling, transportation, feeding, and legal services

Functional but limited



Free Medical Assistance

- Government facilities are mandated to provide free care.
- Some facilities offer services at no cost, but survivors still face cost-related barriers.

Available but limited





Victims Support Fund

- No Victims Support Fund exists in Kebbi State.
- Survivors lack financial assistance for medical, shelter, or reintegration support.

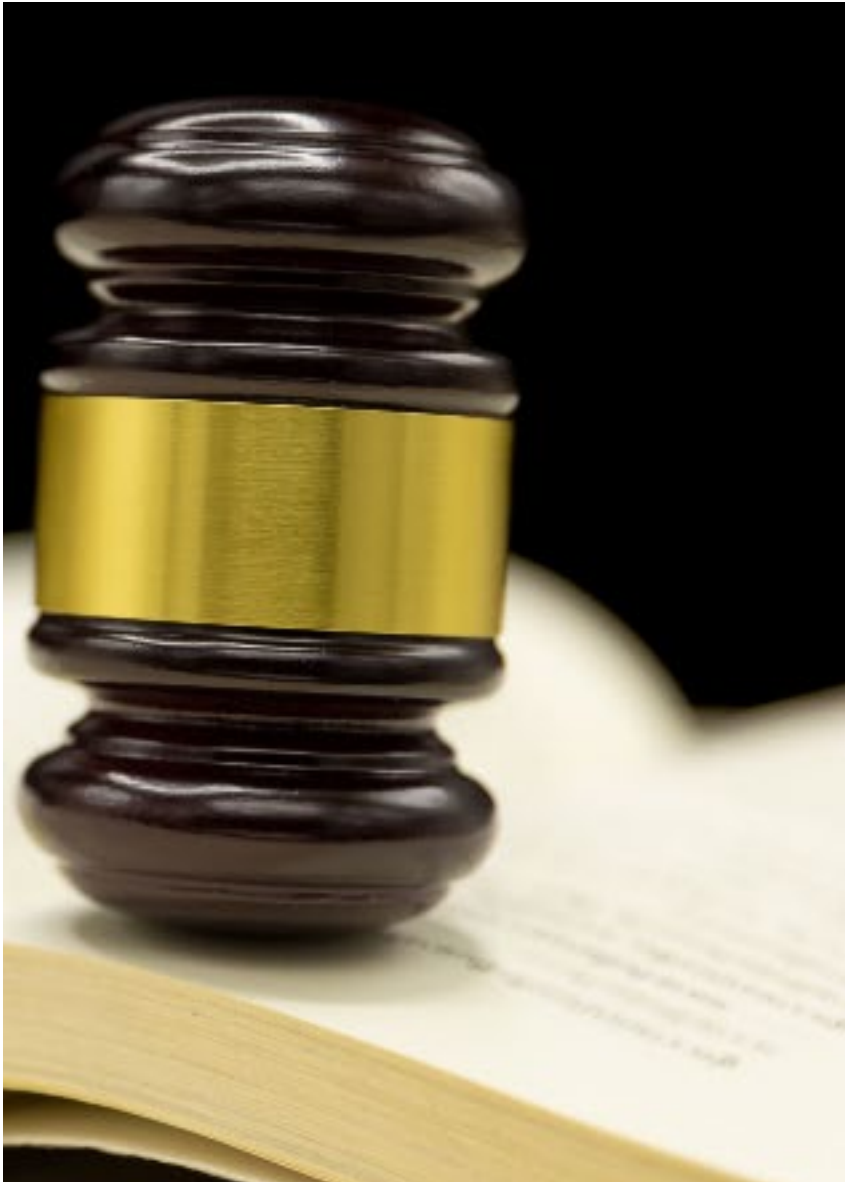
Not Established

RECOMMENDATIONS

- Ensure all government health facilities consistently provide free medical and forensic services.
- Establish a Victims Support Fund to provide dedicated financial assistance to survivors.
- Strengthen public awareness campaigns and improve the quality of survivor-centered services.

Status	
<div>Regulatory Body<ul style="list-style-type: none">No formally designated body to implement and coordinate the VAPP Law.No coordination mechanism between relevant MDAs and social sectors.Protection Officers have not been appointed across LGAs.</div>	Not Established
<div>Service Provider Registration<ul style="list-style-type: none">No register of accredited service providers in place.No mechanism to update or circulate a register to police stations, protection officers, or courts.No operational guidelines developed for service providers.</div>	

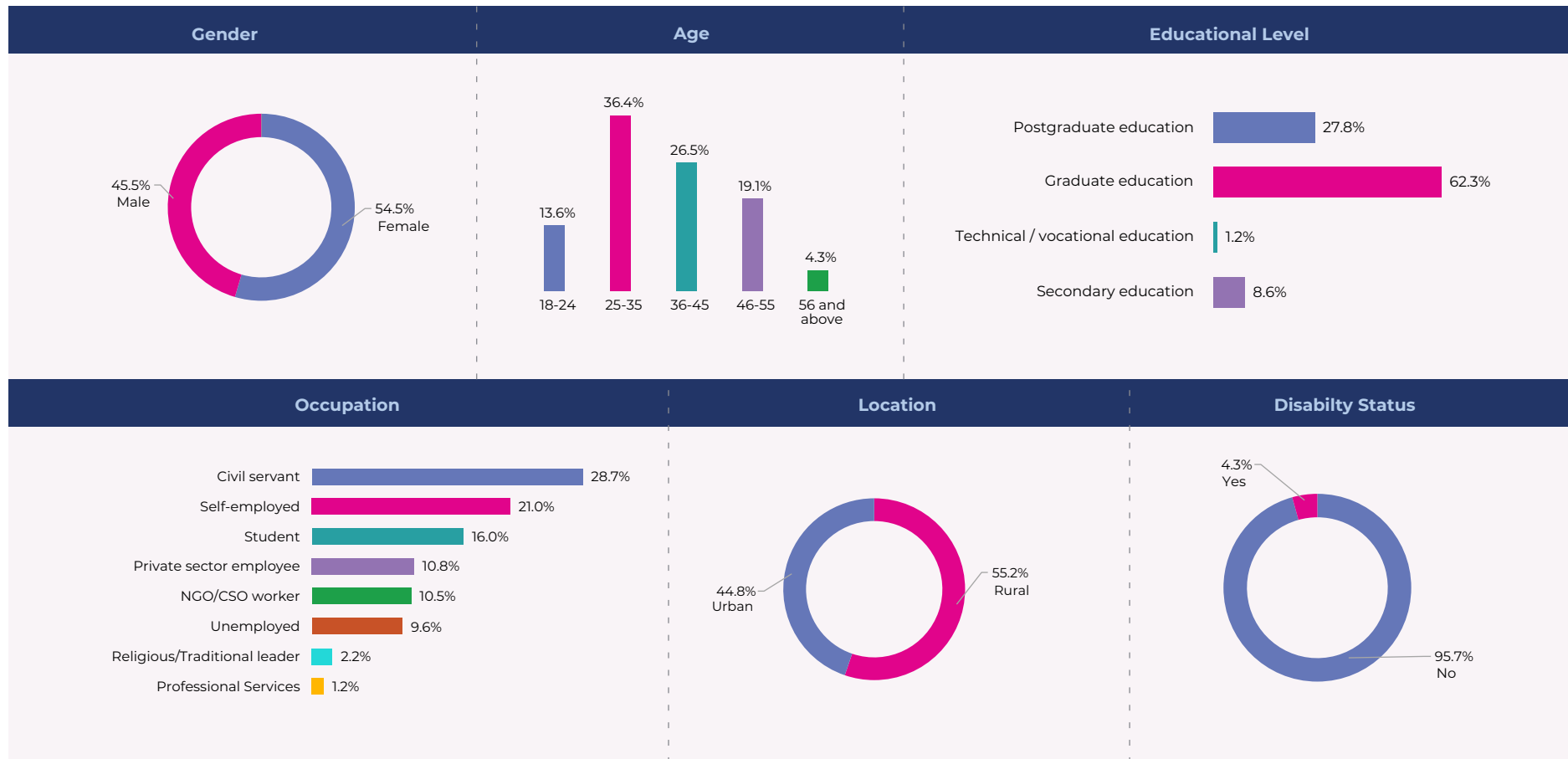
RECOMMENDATIONS
<ul style="list-style-type: none">Formally designate a regulatory body and establish a multi-sectoral coordination mechanism for VAPP implementation.Appoint Protection Officers in each LGA to support courts in fulfilling their mandates.Develop operational guidelines and maintain a regularly updated register of accredited service providers, circulated to all relevant institutions.





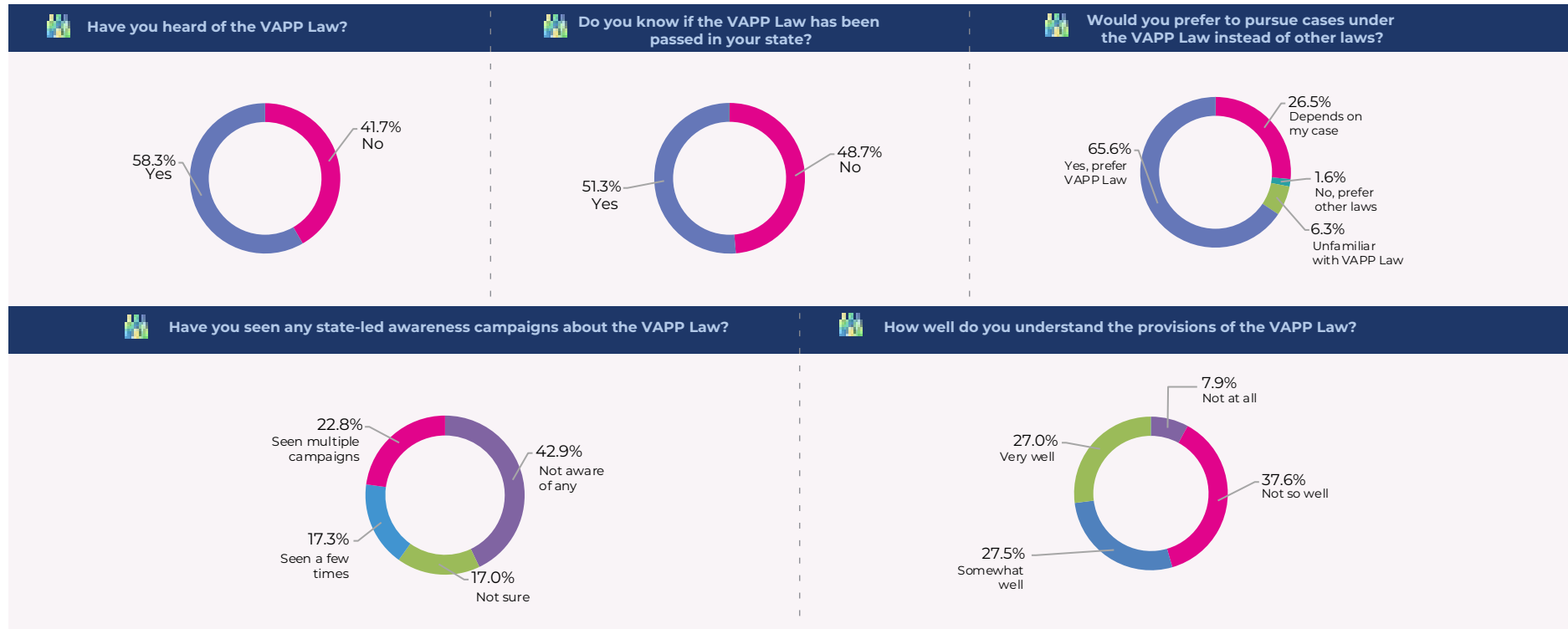
KOGI STATE

Kogi State | Respondent Demographics (n = 324)



The demographic profile of Kogi State respondents shows a slightly higher proportion of females (54.5%) and a youthful population, with most aged 25-35 years. Educational attainment is high, with 62.3% having graduate education and 27.8% holding postgraduate degrees. Occupationally, civil servants (28.7%) and self-employed individuals (21%) are prominent, while rural residents make up 55.2% of the sample. Additionally, 4.3% of respondents have disabilities.

Kogi State | Public Awareness



FINDINGS

- The state government has actively implemented VAPP Act awareness campaigns, engaging schools, religious institutions, traditional rulers, market associations, transport unions, health workers, and law enforcement agencies.
- Awareness remains moderate: 58.3% have heard of the Act, while 41.7% have no knowledge of it.
- Only 22.8% recall seeing multiple campaigns, while 42.9% report no exposure at all.
- Among those aware of the Act, just 27% report strong knowledge of its provisions, and nearly half (48.7%) are uncertain about its legal status.

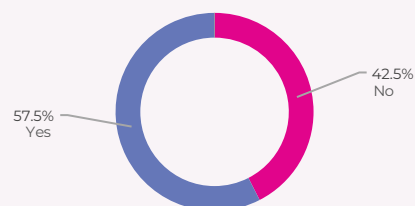
RECOMMENDATIONS

- Expand and tailor awareness campaigns to increase outreach, especially to those unaware of the Act or uncertain about its legal status.
- Deepen public understanding of the VAPP Act's provisions through targeted education, community forums, and "Know Your Rights" initiatives.
- Use culturally relevant approaches (local languages, radio, drama, digital tools) to engage rural, urban, and marginalized groups more effectively.

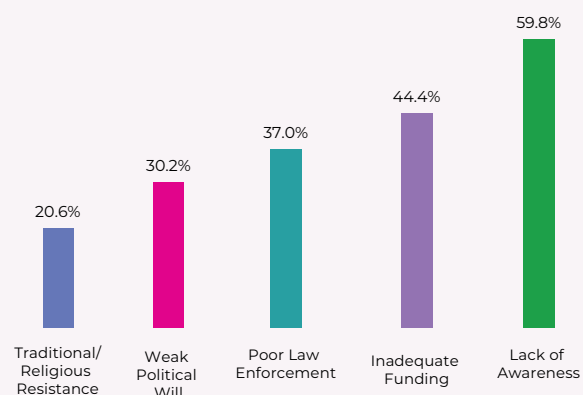
Kogi State | Enforcement Systems



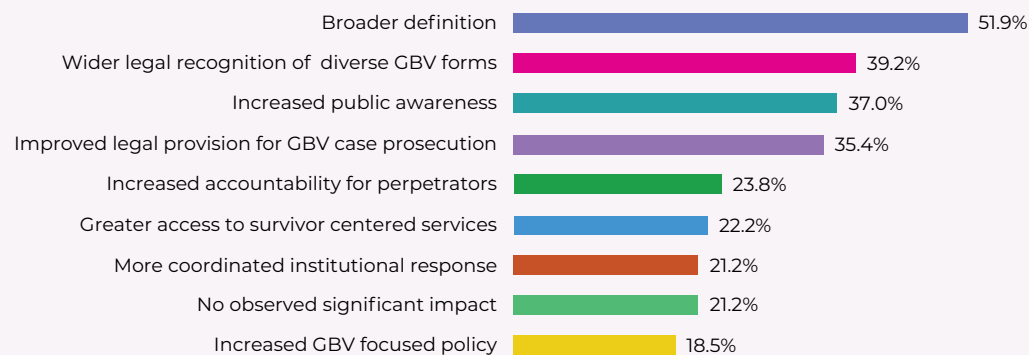
Since the VAPP Law was domesticated in your state, do you think the state's overall response to gender-based violence (GBV) has improved?



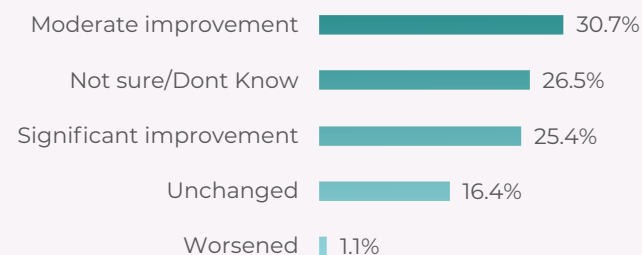
Which of the following do you think are the major barriers to implementing the VAPP Law in your state?



In your opinion, what has been the key impacts of the VAPP Law in your state and across Nigeria?





Since the VAPP Law was passed, do you think GBV survivors in your state have experienced better access to justice?



FINDINGS

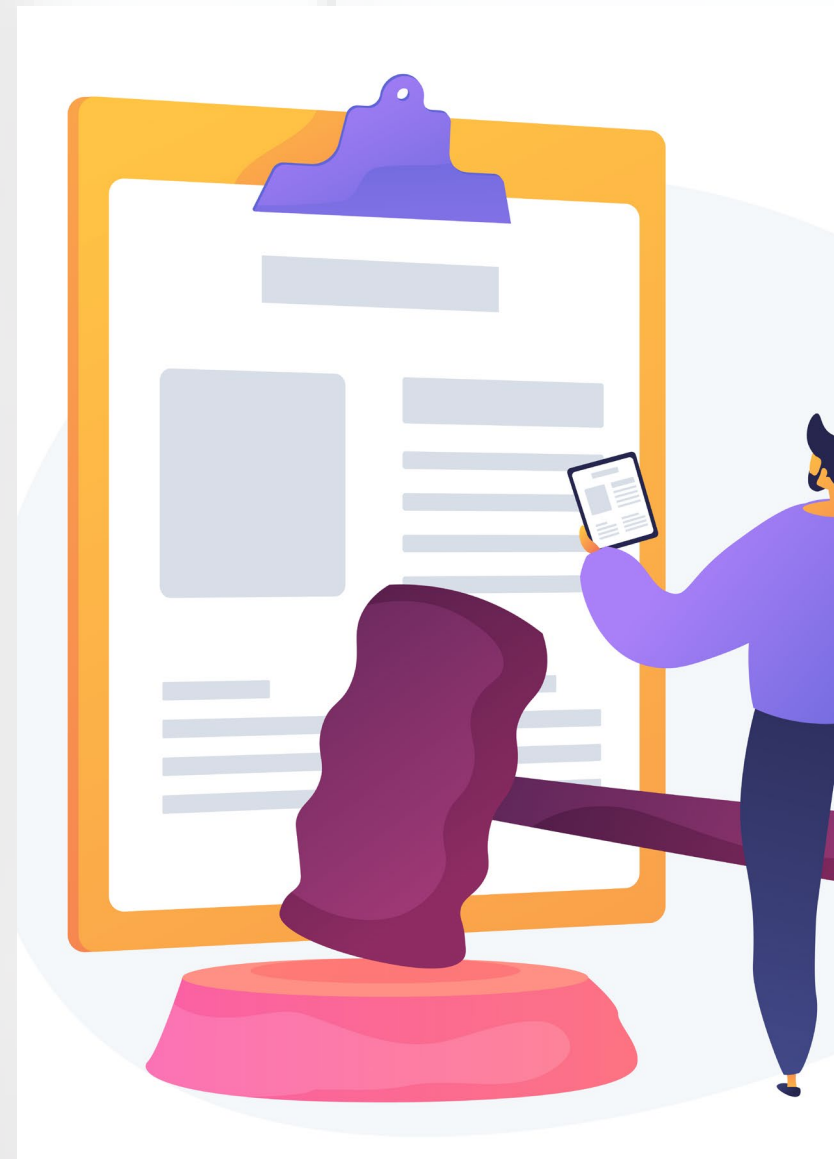
- 57.5% of respondents think the state's response to GBV has improved since adopting the VAPP Law, while 42.5% see no change.
- Key impacts cited include a broader definition of GBV (51.9%), wider legal recognition (39.2%), and stronger prosecution provisions (35.4%).
- Access to justice perceptions show 30.7% report moderate improvement, 25.4% report significant advancement, while 26.5% remain unsure.
- Major barriers include lack of awareness (59.8%), poor enforcement (44.4%), weak political will (37.0%), inadequate funding (30.2%), and cultural/religious resistance (20.6%).

Kogi State | Enforcement Systems

		Status
 Sex Offenders' Register <ul style="list-style-type: none"> No register in place to document or track convicted offenders. 		Not Established
 Protection Orders <ul style="list-style-type: none"> Courts are authorized to issue orders 6–10 orders issued in the past year. Enforcement by police is inconsistent. 		Operational but limited
 Mandatory Reporting <ul style="list-style-type: none"> VAPP Act mandates professionals to report GBV cases. Penalties exist for non-compliance. Standardized referral protocols developed. 		Fully Operational
 Legal Remedies <ul style="list-style-type: none"> Survivors have accessed pro-bono legal aid, compensation, and restitution. Over 20 GBV cases have been prosecuted under the VAPP Act in the past year. 		Fully Operational

RECOMMENDATIONS

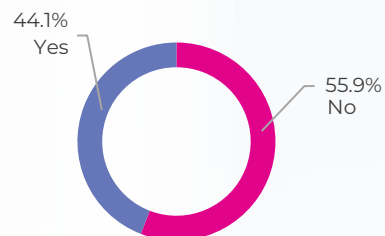
- Establish and operationalize a Sex Offenders' Register linked to the national database to improve monitoring and deterrence.
- Strengthen enforcement of Protection Orders through police compliance, oversight, and survivor-centered monitoring.
- Expand awareness campaigns and secure dedicated funding to overcome knowledge gaps, poor enforcement, and cultural resistance.



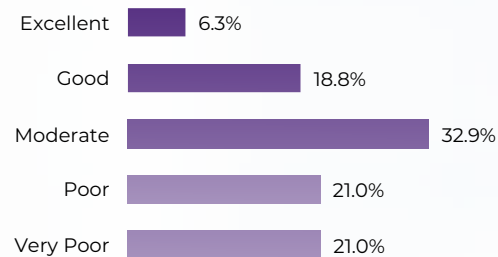
Kogi State | Support Service



Are you aware of any Sexual Assault Referral Centres (SARCs), shelters, or other protective services for GBV survivors in your state?



How would you rate the availability of survivor-centered services



Status



SARCs and Shelters

- One government-owned
- SARC exist, but non-operational
- No government-run shelter exists
- Survivors lack access to safe spaces for rehabilitation.

Available but non-functional



Free Medical Assistance

- No state mandate for free medical or forensic services.
- Survivors face financial barriers in accessing treatment.
- Forensic documentation is inconsistently available and costly.

Not Available





Victims Support Fund

- No active mechanism to receive or disburse resources.
- Survivors lack financial assistance for care, justice, or reintegration.

Not Established

RECOMMENDATIONS

- Establish SARCs and shelters across the state to ensure safe housing and comprehensive survivor-centered services.
- Mandate free medical and forensic services for GBV survivors in public health facilities to eliminate financial barriers.
- Create and operationalize a Victims Support Fund with transparent management to sustainably support survivor needs.

Status	
<div><p>Regulatory Body</p><ul style="list-style-type: none">Formally designated body: Public Defender and Citizen's Right Commission.Coordinator appointed for domestic violence prevention.Annual report: Submitted to government but not shared with National Bureau of Statistics (NBS).There is a state coordination mechanism between relevant MDAs (Women Affairs, Justice, Health, Education, Finance).Protection Officers are appointed across all LGAs.</div>	<div>Established and Operational</div> <div>Established</div>
<div><p>Service Provider Registration</p><ul style="list-style-type: none">State-maintained register exists but not regularly updated.Register partially circulated (police stations, protection officers, courts).Operational guidelines for accredited providers under development.</div>	

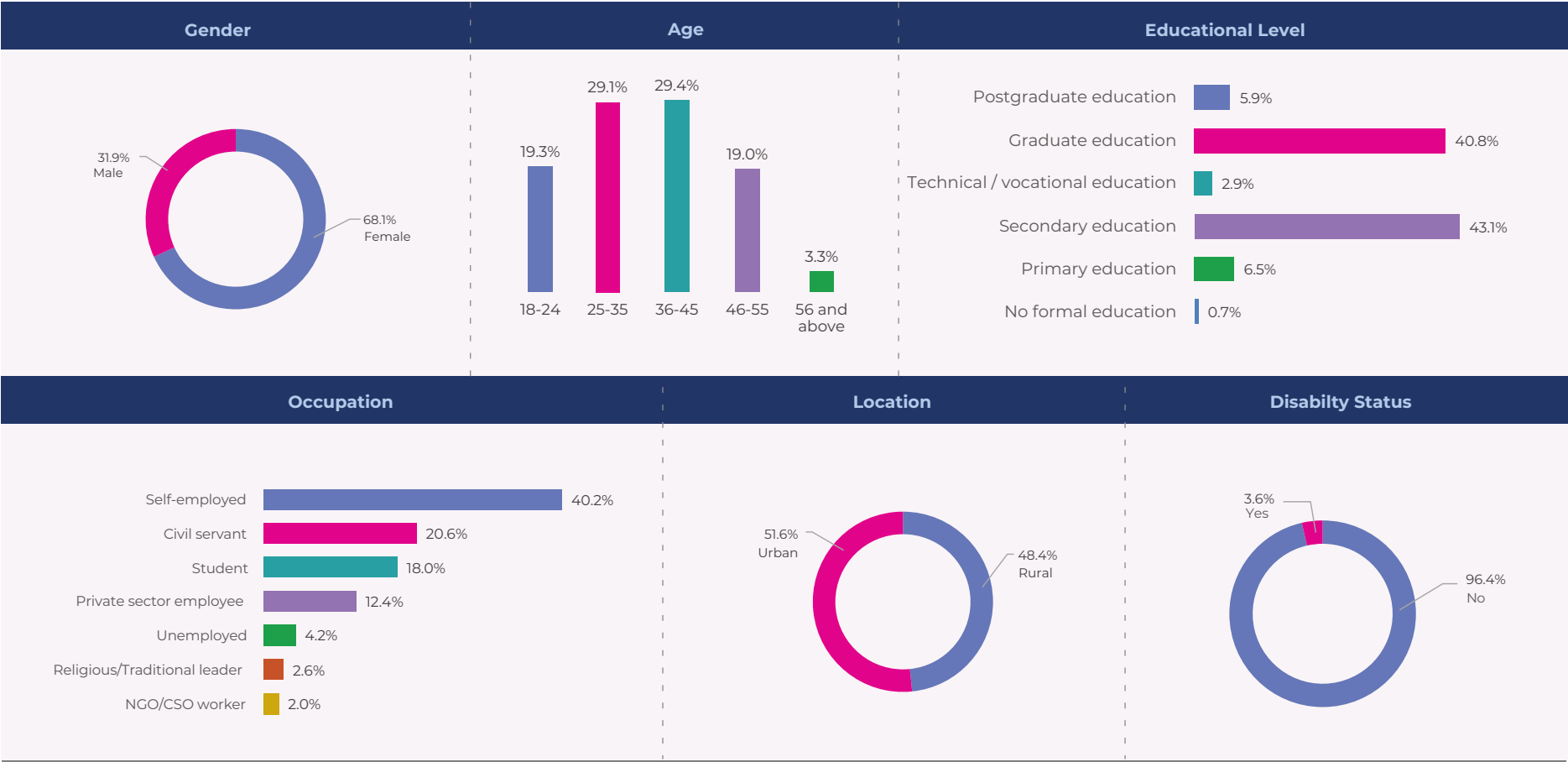
RECOMMENDATIONS
<ul style="list-style-type: none">Institutionalize the submission of annual implementation reports to NBS to strengthen compliance and national-level data aggregation.Ensure regular updating and comprehensive circulation of the service provider register.Finalize and disseminate operational guidelines to standardize service delivery and improve accountability.





KWARA STATE

Kwara State | Respondent Demographics (n = 306)

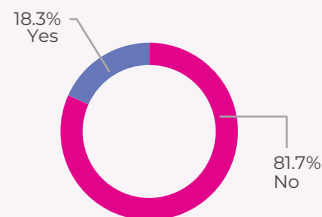


The respondent profile from Kwara State shows that 43.1% of respondents have at least secondary education, with 40.8% attaining graduate education and 5.9% postgraduate. Only 0.7% reported having no formal education. The urban-rural split is nearly balanced, with 51.6% living in urban areas and 48.4% in rural areas. The sample is predominantly female (68.1%), with young adults aged 25-35 years comprising the largest age group (58.5%). The majority are self-employed (40.2%), followed by civil servants (20.6%), and students (18.0%), while only 4.2% are unemployed. 3.6% of respondents identified as persons with disabilities.

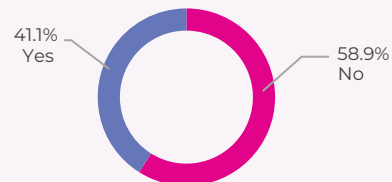
Kwara State | Public Awareness



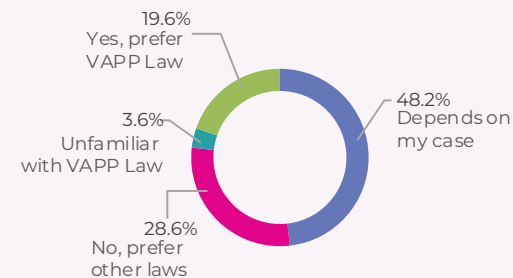
Have you heard of the VAPP Law?



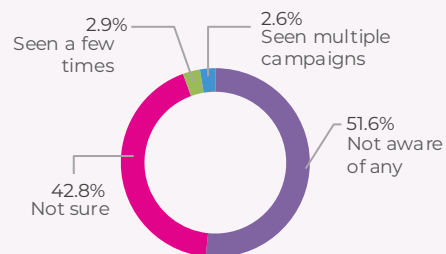
Do you know if the VAPP Law has been passed in your state?



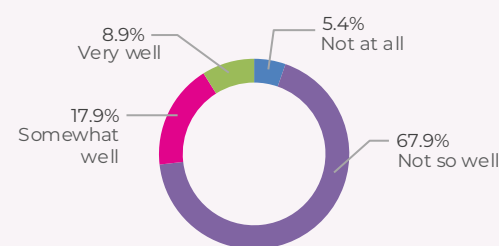
Would you prefer to pursue cases under the VAPP Law instead of other laws?



Have you seen any state-led awareness campaigns about the VAPP Law?



How well do you understand the provisions of the VAPP Law?



FINDINGS

- The state government has implemented VAPP Law awareness initiatives, reaching the public.
- Despite this, only 18.3% of respondents are aware of the VAPP Law, while 81.7% remain unaware.
- Among those aware, just 41.1% know it has been passed.
- Exposure to awareness efforts is critically low: only 5.5% report encountering campaigns, while 51.6% have never seen any, and 42.8% are uncertain.
- When considering legal recourse, only 19.6% prefer the VAPP Law.

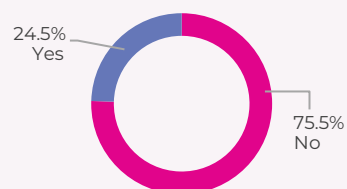
RECOMMENDATIONS

- Launch a comprehensive multi-channel sensitization campaign targeting both rural and urban populations.
- Leverage the Simplified Kwara State VAPP Law to communicate protections, remedies, and available services in accessible formats.
- Engage local leaders, women's groups, and schools to expand reach, improve understanding, and boost utilization of the VAPP Law.

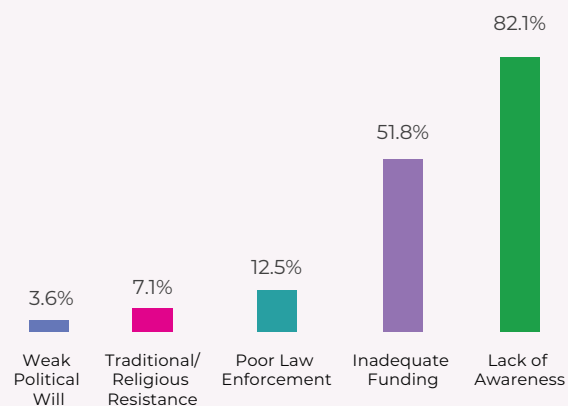
Kwara State | Enforcement Systems



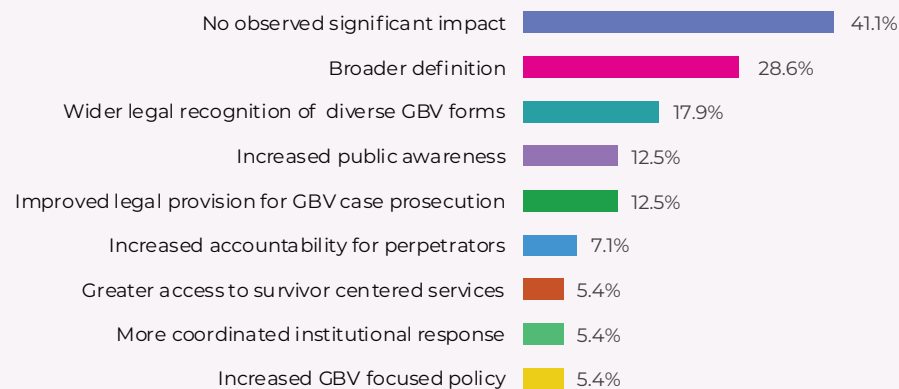
Since the VAPP Law was domesticated in your state, do you think the state's overall response to gender-based violence (GBV) has improved?



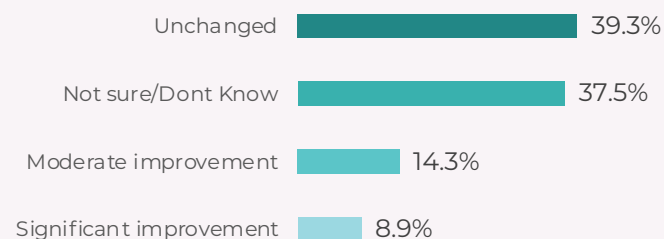
Which of the following do you think are the major barriers to implementing the VAPP Law in your state?



In your opinion, what has been the key impacts of the VAPP Law in your state and across Nigeria?



Since the VAPP Law was passed, do you think GBV survivors in your state have experienced better access to justice?



FINDINGS

- 75.5% of respondents report no improvement and only 24.5% note progress since adoption of the VAPP Law.
- Access to justice remains weak: 39.3% report no change, 37.5% are unsure, 14.3% see moderate improvement, and just 8.9% observe significant progress.
- The most cited impacts of the law include lack of significant effect (41.1%), broader GBV definition (28.6%), and expanded legal recognition of GBV forms (17.9%).
- Key barriers include lack of awareness (82.1%), inadequate funding (51.8%), poor enforcement (12.5%), traditional/religious resistance (7.1%), and weak political will (3.6%).

		Status
 Sex Offenders' Register <ul style="list-style-type: none"> Register established and linked to state/national GBV database. Updated irregularly, reducing reliability. Accessible only to select authorities, limiting public transparency. 		Partially Operational
 Protection Orders <ul style="list-style-type: none"> Courts authorized to issue orders. More than 10 orders were issued in the past year. Consistently enforced by police and security agencies. 		Fully Operational
 Mandatory Reporting <ul style="list-style-type: none"> Professionals in health, education, and social welfare are mandated to report. Strict penalties for non-compliance. Standardized reporting and referral protocols in place. 		Fully Operational
 Legal Remedies <ul style="list-style-type: none"> Survivors have obtained compensation or restitution through the VAPP Law. More than 20 cases have been prosecuted in the past 12 months using VAPP Law as the legal basis. 		Fully Operational

RECOMMENDATIONS

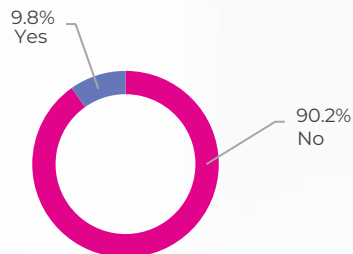
- Ensure regular updates and expand controlled public access to the Sex Offenders' Register.
- Strengthen training for law enforcement, judiciary, and service providers to improve accountability and enforcement.
- Scale up sustained awareness campaigns and increase funding to address knowledge gaps and resource barriers.



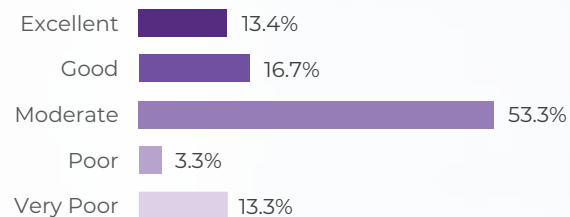
Kwara State | Support Service



Are you aware of any Sexual Assault Referral Centres (SARCs), shelters, or other protective services for GBV survivors in your state?



How would you rate the availability of survivor-centered services



Status



SARCs and Shelters

- Two government-owned SARCs exist, but only one is fully functional
- Two state-run shelter exist, but only one is operational
- Services offered: medical, legal, psychosocial, economic

Functional but limited



Free Medical Assistance

- Government facilities are not mandated to provide free care.
- Private facilities also do not offer free medical services.
- Survivors can access medical reports and forensic services for prosecution without cost-related barriers.

Not Available





Victims Support Fund

- Framework not yet operational for consistent mobilization and disbursement of funds.
- Identified funding sources include court fines and private donations.
- Some services like legal aid, medical care, and psychosocial support have been facilitated, showing strong potential once functional.

Partially Operational

RECOMMENDATIONS

- Establish and fund state-run SARCs, shelters, and temporary homes to provide comprehensive survivor-centered services.
- Mandate free medical treatment for GBV survivors in public health facilities to remove financial barriers to care and justice.
- Fully operationalize the Victims Support Fund with a clear framework to consistently support medical, psychosocial, and legal services.

Status	
<p>Regulatory Body</p>  <ul style="list-style-type: none"> Formally designated body: Ministry of Justice. Coordinator appointed for domestic violence prevention. State coordination mechanism established between relevant MDAs. Protection Officers appointed across LGAs. Annual report not submitted to the state, federal government, or National Bureau. 	<p>Established and Operational</p>
<p>Service Provider Registration</p>  <ul style="list-style-type: none"> No state-maintained register of GBV service providers. No accreditation system or quality assurance framework. Service delivery lacks standardization, transparency, and consistency. 	

RECOMMENDATIONS

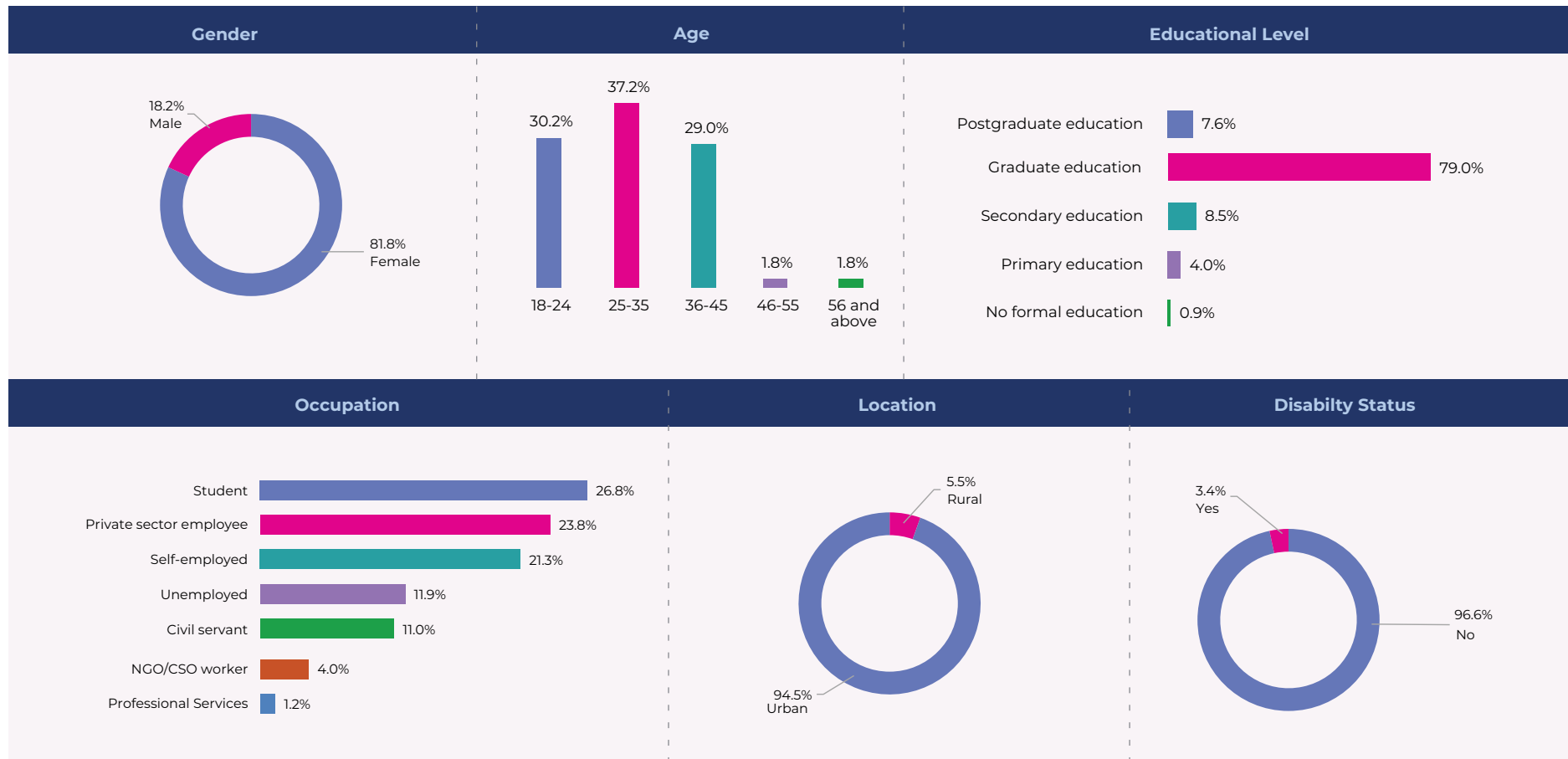
- Mandate the Ministry of Justice Coordinator to submit annual VAPP enforcement reports to strengthen accountability and transparency.
- Establish a state-managed registry and accreditation system for GBV service providers.
- Develop and enforce clear operational guidelines to ensure standardized, survivor-centered services.





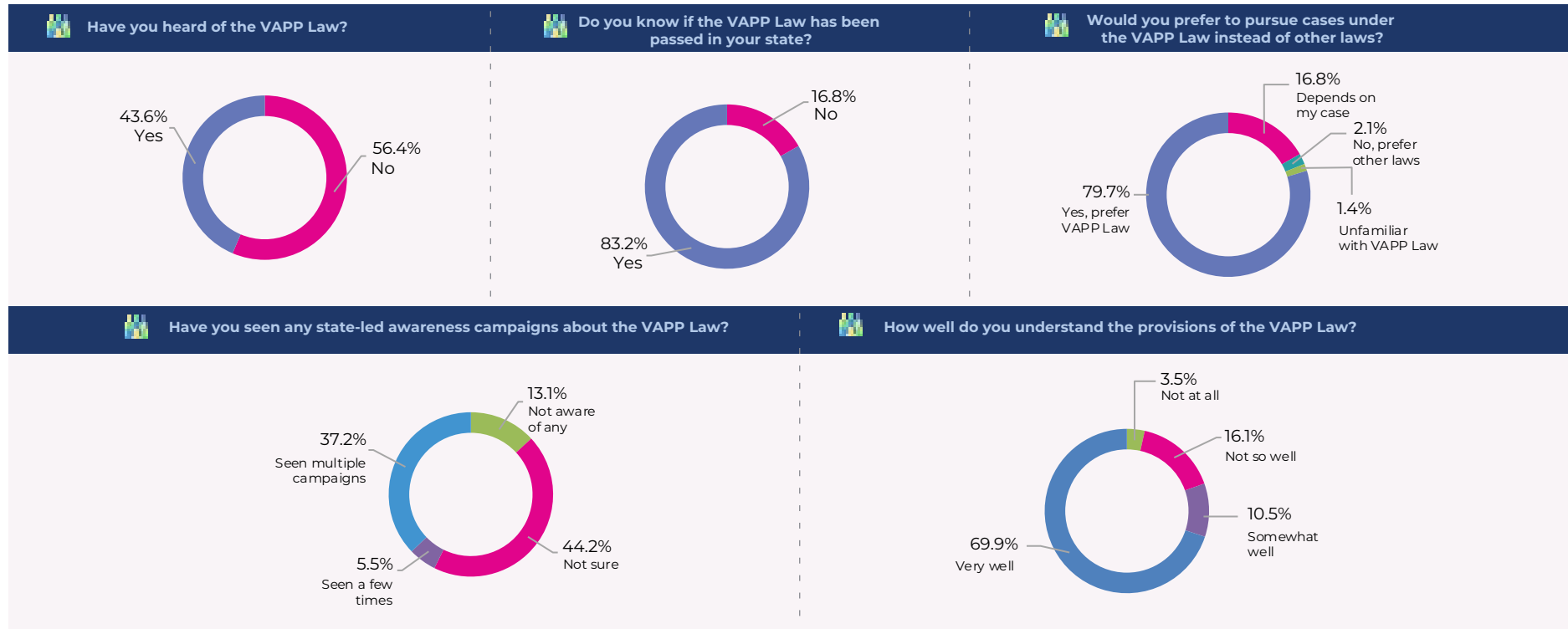
LAGOS STATE

Lagos State | Respondent Demographics (n = 328)



The respondent profile is characterized by a highly educated and urban population, with 79% holding graduate education and residing in urban areas. The sample is predominantly female (81.8%) and young, with 37.2% aged 25-35 and 30.2% aged 18-24. Students (26.8%), private sector employees (23.8%), and self-employed individuals (21.3%) are the most represented occupational groups, while 3.4% of respondents have disabilities.

Lagos State | Public Awareness



FINDINGS

- The state government has implemented comprehensive VAPP Law awareness initiatives, engaging market associations, transport unions, healthcare workers, schools, religious institutions, and law enforcement.
- 56.4% of respondents in Lagos State have never heard of the VAPP Law.
- Only 37.2% recall seeing multiple state-led awareness campaigns, while 44.2% are unsure and 13.1% report no exposure.
- Among those aware of the law, 69.9% claim strong knowledge of its provisions, and 83.2% know it has been passed in Lagos.
- 79.7% of respondents prefer the VAPP Law over older legal systems, indicating confidence in its applicability.

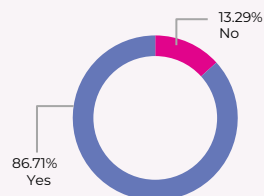
RECOMMENDATIONS

- Expand sensitization campaigns beyond urban centers, targeting informal settlements and underserved areas.
- Translate and simplify educational materials into local languages and spread them via radio, TV, and digital platforms.

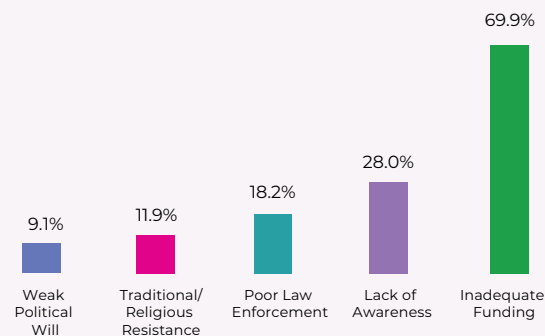
Lagos State | Enforcement Systems



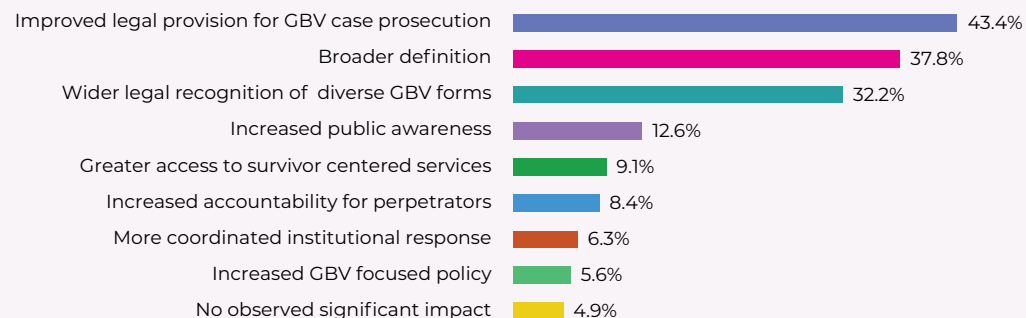
Since the VAPP Law was domesticated in your state, do you think the state's overall response to gender-based violence (GBV) has improved?



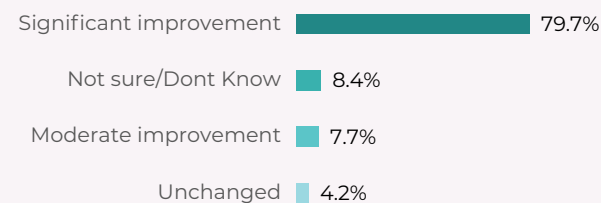
Which of the following do you think are the major barriers to implementing the VAPP Law in your state?



In your opinion, what has been the key impacts of the VAPP Law in your state and across Nigeria?







Since the VAPP Law was passed, do you think GBV survivors in your state have experienced better access to justice?



FINDINGS

- 86.7% of respondents believe Lagos State's response to GBV has improved since adopting the VAPP Law.
- The most cited legal impacts include improved prosecution procedures (43.4%), broader definitions of sexual offenses (37.8%), and wider recognition of diverse GBV forms (32.2%).
- Key challenges include inadequate funding (69.9%), low public awareness (28.0%), weak political will, cultural resistance, and enforcement gaps.

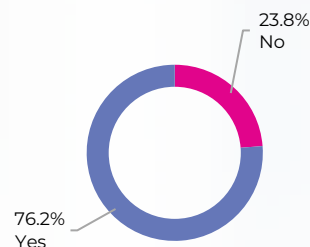
Status		
	Sex Offenders' Register <ul style="list-style-type: none">• Linked to state and national GBV databases.• Updated quarterly with information on convicted offenders.• Publicly accessible.	Fully Operational
	Protection Orders <ul style="list-style-type: none">• Courts are authorized to issue orders under the VAPP Act.• Police and security agencies enforce orders robustly.• Data on the number of orders issued remains unavailable.	
	Mandatory Reporting <ul style="list-style-type: none">• Health, education, and welfare professionals are legally required to report GBV cases.• Penalties for non-compliance ensure accountability.• Standardized referral and reporting protocols established.	
	Legal Remedies <ul style="list-style-type: none">• Survivors have accessed compensation and restitution under the VAPP Act.• Over 20 GBV cases have been prosecuted using the Act in the past 12 months.• Pro bono lawyers and legal aid providers actively support survivors.	
RECOMMENDATIONS <ul style="list-style-type: none">• Increase budgetary allocations to strengthen survivor services, legal aid, and law enforcement capacity.• Establish independent monitoring systems and ensure regular reporting of Protection Orders issued.• Intensify community-based sensitization campaigns to raise awareness, challenge cultural resistance, and expand legal literacy.		



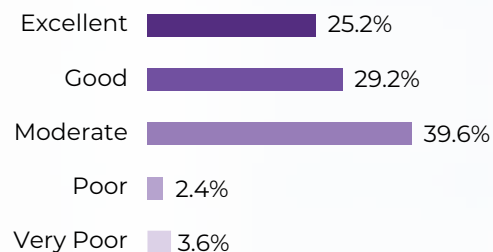
Lagos State | Support Service



Are you aware of any Sexual Assault Referral Centres (SARCs), shelters, or other protective services for GBV survivors in your state?



How would you rate the availability of survivor-centered services



Status



SARCs and Shelters

- Government-funded SARCs and Shelters : 1.
- Actively receiving survivors.
- Services offered: Temporary housing, Feeding, Medical services, Skills acquisition or reintegration support, Legal aid, and Psychosocial counselling.

Fully Functional



Free Medical Assistance

- Government facilities are mandated to provide free care.
- Survivors face no cost-related barriers.
- Medical reports and forensic services are routinely accessed for prosecution.

Available





Victims Support Fund

- Funding sources: State budget (primary), with partner support contributions.
- Services supported: Medical Services, SARC/Shelter operations, Legal aid, Psychosocial support, Rehabilitation, Reintegration (skills acquisition, micro-credit).

Established and Operational

RECOMMENDATIONS

- Expand outreach through community-based, culturally sensitive, and digital platforms to enhance accessibility.
- Establish independent monitoring and feedback systems to ensure accountability and build public trust.

Status	
<div></div> <div>Regulatory Body<ul style="list-style-type: none">Formally designated body: GBV Response Committee.Coordinator appointed for domestic violence prevention.Annual report: Submitted to federal and state governments and deposited at the National Bureau of Statistics.Multi-sectoral coordination mechanism in place (Women Affairs, Justice, Health, Information, Education, Finance).Protection Officers appointed across all LGAs/Area Councils.</div>	<div>Established and Operational</div> <div>Established and Functional</div>
<div></div> <div>Service Provider Registration<ul style="list-style-type: none">State-maintained register is comprehensive and regularly updated.Register circulated to police stations, Protection Officers, and courts.Operational guidelines for accredited providers developed and in use.</div>	

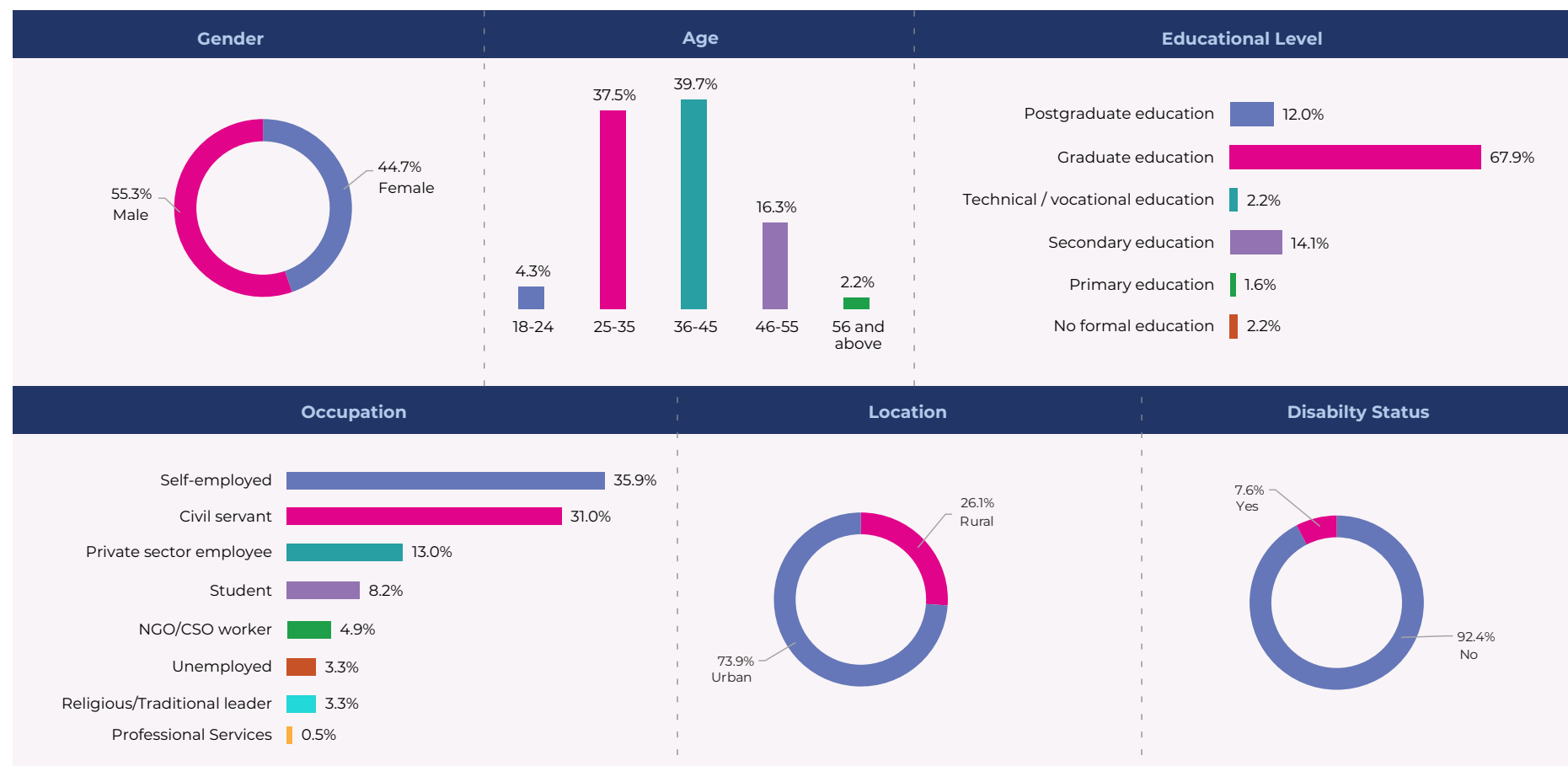
RECOMMENDATIONS
<ul style="list-style-type: none">Develop an integrated digital system to link GBV actors for real-time data sharing, case tracking, and transparency.Institutionalize regular training on survivor-centered, trauma-informed approaches for all stakeholders.





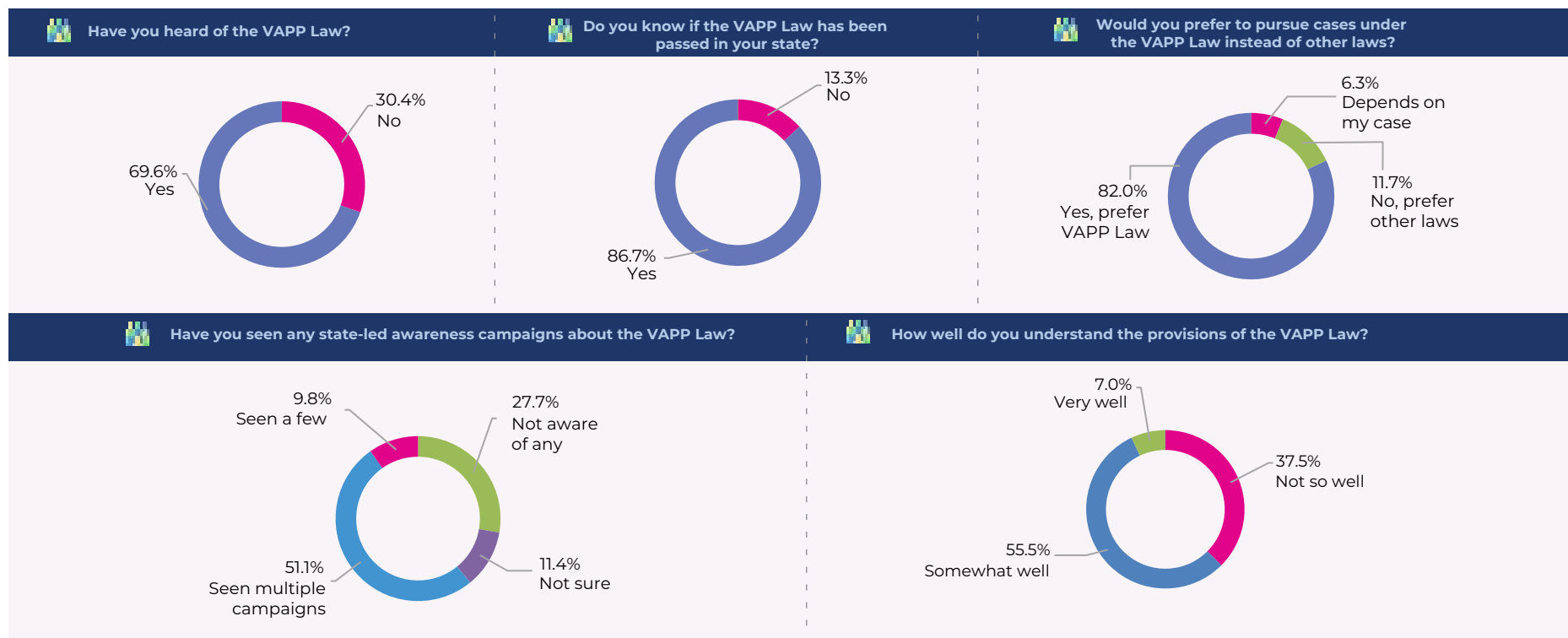
NASARAWA STATE

Nasarawa State | Respondent Demographics (n = 184)



In Nasarawa State, the respondent profile shows an educated and predominantly urban sample, with 67.9% having graduate education and 73.9% residing in urban areas. Males make up 55.3% of the sample, and the largest age groups are 36-45 years (39.7%) and 25-35 years (37.5%). The most represented occupations are self-employed (35.9%), civil servants (31%), and private sector employees (13%). Additionally, 7.6% of respondents have disabilities, indicating a relatively inclusive sample.

Nasarawa State | Public Awareness



FINDINGS

- The state government has implemented awareness campaigns on the VAPP Law, engaging religious institutions, traditional rulers, health workers, law enforcement, schools, market associations, and the public.
- 69.6% of respondents in Nasarawa State have heard of the VAPP Law.
- 51.1% recall seeing multiple campaigns, while 27.7% have not encountered any, and 11.4% are unsure.
- 86.7% of those aware know the law has been passed, and 82.0% prefer using it over other legal options.
- Understanding remains moderate; 55.5% know it somewhat well, 7.0% very well, and 37.5% have limited knowledge.

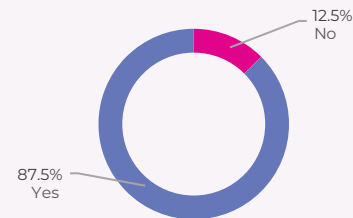
RECOMMENDATIONS

- Use culturally relevant messaging in local languages through trusted community channels.
- Strengthen capacity-building for law enforcement, health workers, and community groups to ensure accurate dissemination.

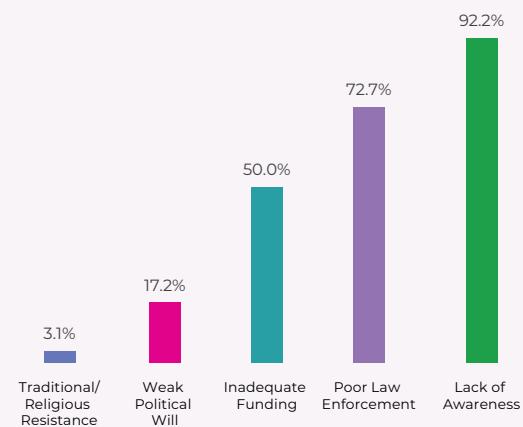
Nasarawa State | Enforcement Systems



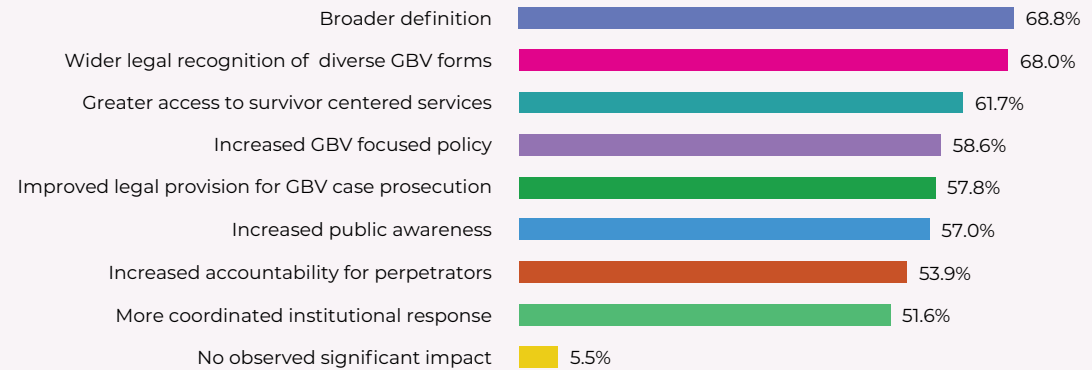
Since the VAPP Law was domesticated in your state, do you think the state's overall response to gender-based violence (GBV) has improved?



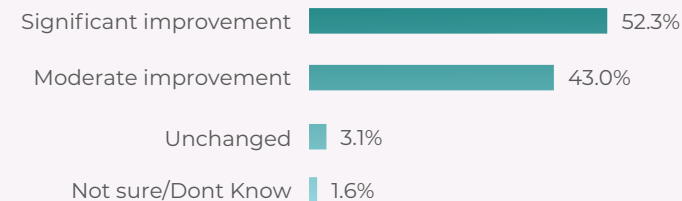
Which of the following do you think are the major barriers to implementing the VAPP Law in your state?



In your opinion, what has been the key impacts of the VAPP Law in your state and across Nigeria?



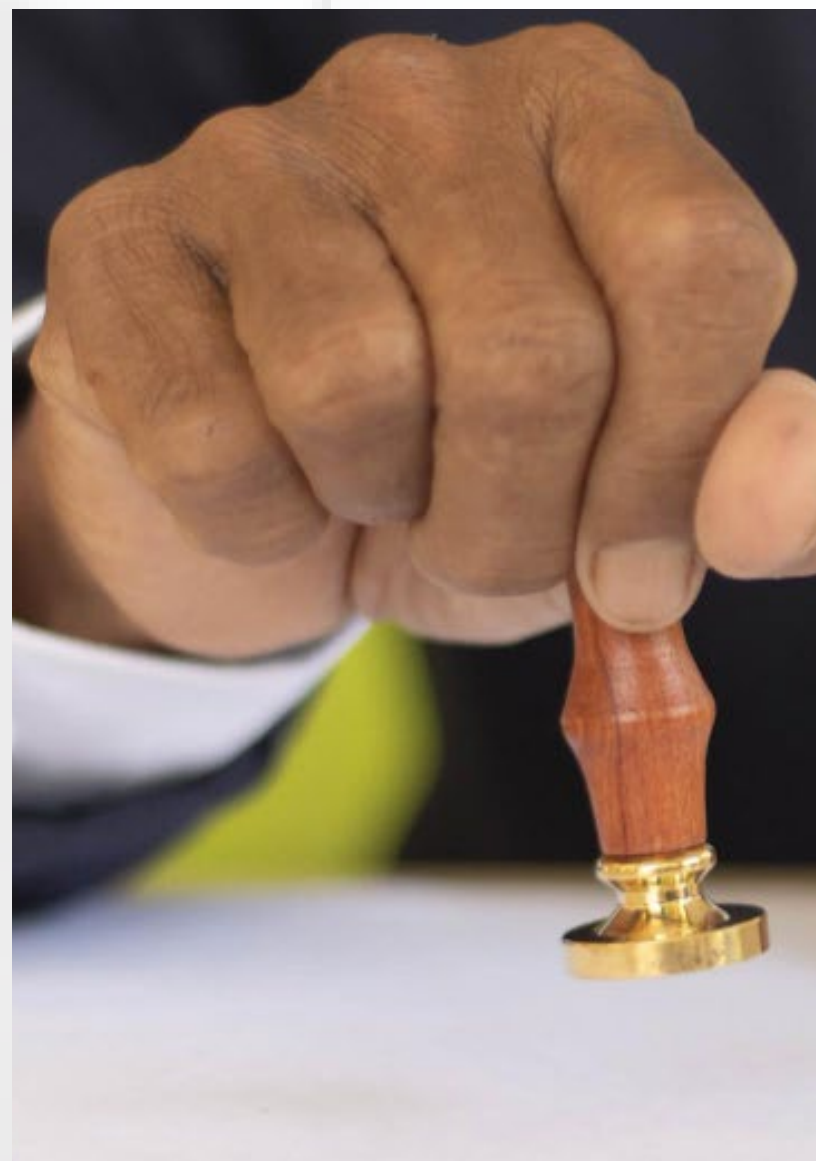
Since the VAPP Law was passed, do you think GBV survivors in your state have experienced better access to justice?



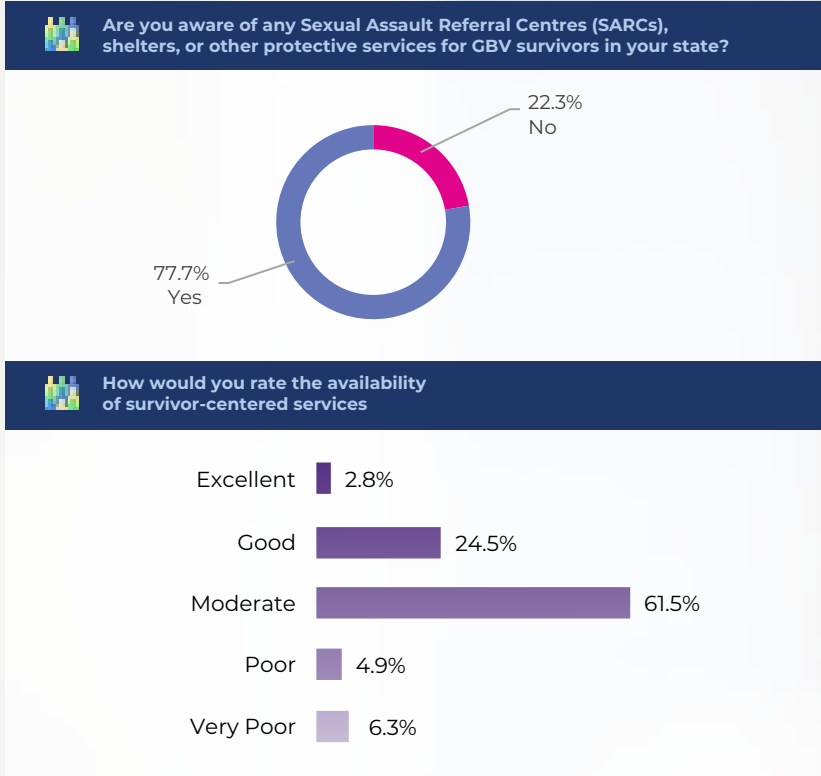
FINDINGS




- 87.5% of respondents believe Nasarawa State's response to GBV has improved since adopting the VAPP Law, while 12.5% see no change.
- Access to justice has strengthened, with 52.3% reporting significant improvement and 43.0% noting moderate progress.
- The most cited legal impacts include expanded definitions of GBV (68.8%), broader recognition of GBV forms (68.0%), improved survivor services (61.7%), increased reporting (58.6%), stronger prosecution (57.8%), and coordinated institutional responses (51.6%).
- Key challenges include lack of awareness (92.2%) and weak law enforcement/judiciary knowledge of the VAPP Law (72.7%).

		Status
	Sex Offenders' Register <ul style="list-style-type: none"> Established and updated quarterly with names of convicted offenders. Not linked to state/national GBV databases. Restricted to law enforcement and judicial officers only. 	Partially Operational
	Protection Orders <ul style="list-style-type: none"> Courts authorized to issue orders under the VAPP Law. 6–10 orders issued in the past 12 months. Consistently enforced by police and security agencies. 	Operational
	Mandatory Reporting <ul style="list-style-type: none"> Health, education, and welfare professionals legally required to report GBV cases. No penalties for non-compliance. Absence of standardized referral and reporting protocols. 	Operational but limited
	Legal Remedies <ul style="list-style-type: none"> Legal aid providers and pro bono lawyers available. No survivor accessed compensation or restitution in the past year. Only 6–10 GBV cases prosecuted under the VAPP Law. 	Fully Operational
RECOMMENDATIONS		
<ul style="list-style-type: none"> Link the Sex Offenders' Register to state/national GBV tracking systems and expand accessibility. Establish penalties for non-compliance with mandatory reporting and introduce standardized referral protocols. Expand training for law enforcement, judiciary, and legal aid providers to improve prosecution, compensation, and survivor support. 		





Nasarawa State | Support Service



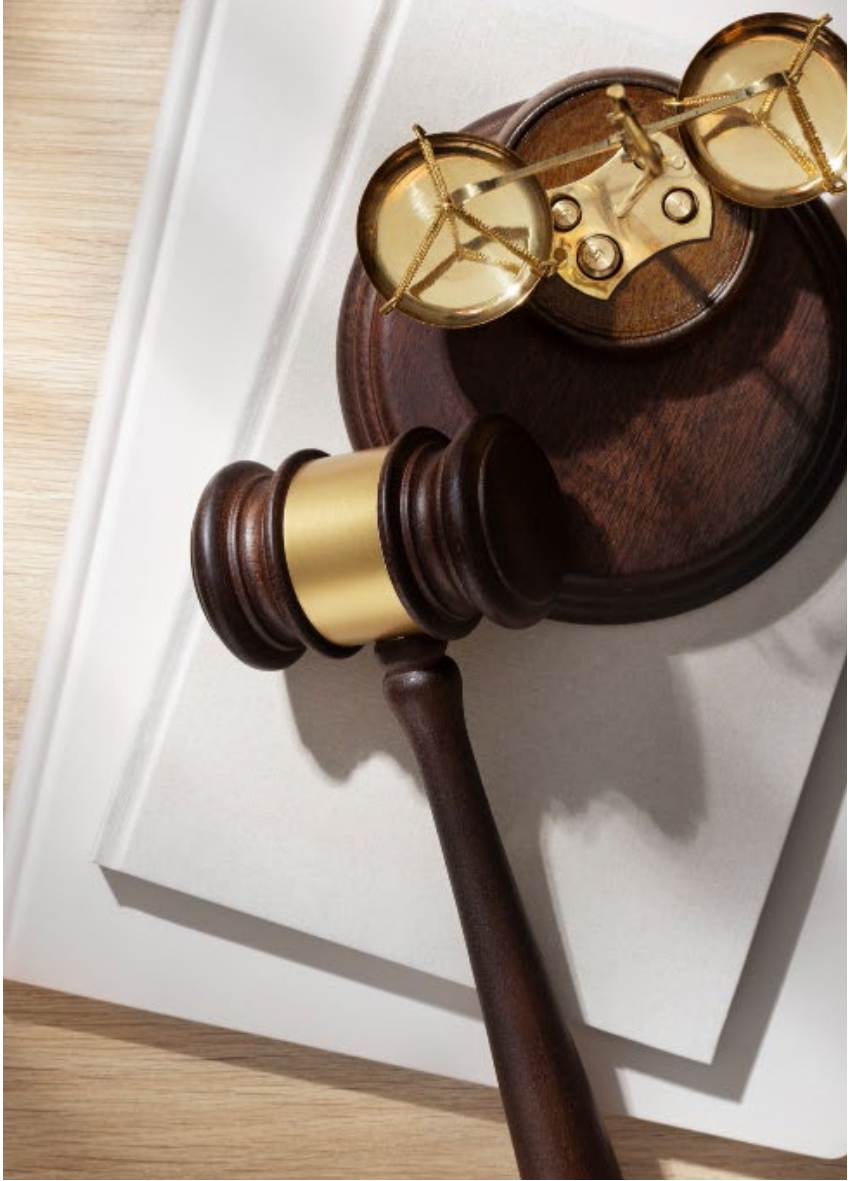
		Status
	SARCs and Shelters <ul style="list-style-type: none">One fully functional government-owned SARCs existOne state-run shelter exist, and is operationalServices offered: medical, legal, and psychosocial.	Functional but limited
	Free Medical Assistance <ul style="list-style-type: none">Health facilities mandated under the VAPP Law to provide free medical care.No facility currently offers free medical services.Survivors rarely obtain medical reports or forensic evidence, limiting prosecution.	
	Victims Support Fund <ul style="list-style-type: none">Framework established with identified funding sources (court fines and state budget allocations).Not yet operational; no funds disbursed for survivor services.No coverage of medical, legal, psychosocial, or shelter support in the past year.	Established but Not Operational

RECOMMENDATIONS

- Establish and operationalize government-funded SARCs, shelters, and temporary homes to provide comprehensive survivor care.
- Equip health facilities to deliver free medical services, including routine medical reports and forensic evidence for prosecutions.
- Activate the Victims Support Fund to sustainably finance medical, psychosocial, legal aid, and shelter services.

Status	
<div><p>Regulatory Body</p><ul style="list-style-type: none">Formally designated body: Ministry of Justice.No Coordinator appointed for domestic violence prevention.No annual report submitted to federal or state governments.Multi-sectoral coordination mechanism in place (Women Affairs, Justice, Health, Information, Education, Finance).Protection Officers appointed across all LGAs.</div>	Partially Operational
<div><p>Service Provider Registration</p><ul style="list-style-type: none">No system for registering or accrediting service providers.No state-maintained register circulated to institutions.No operational guidelines developed for accredited providers.</div>	

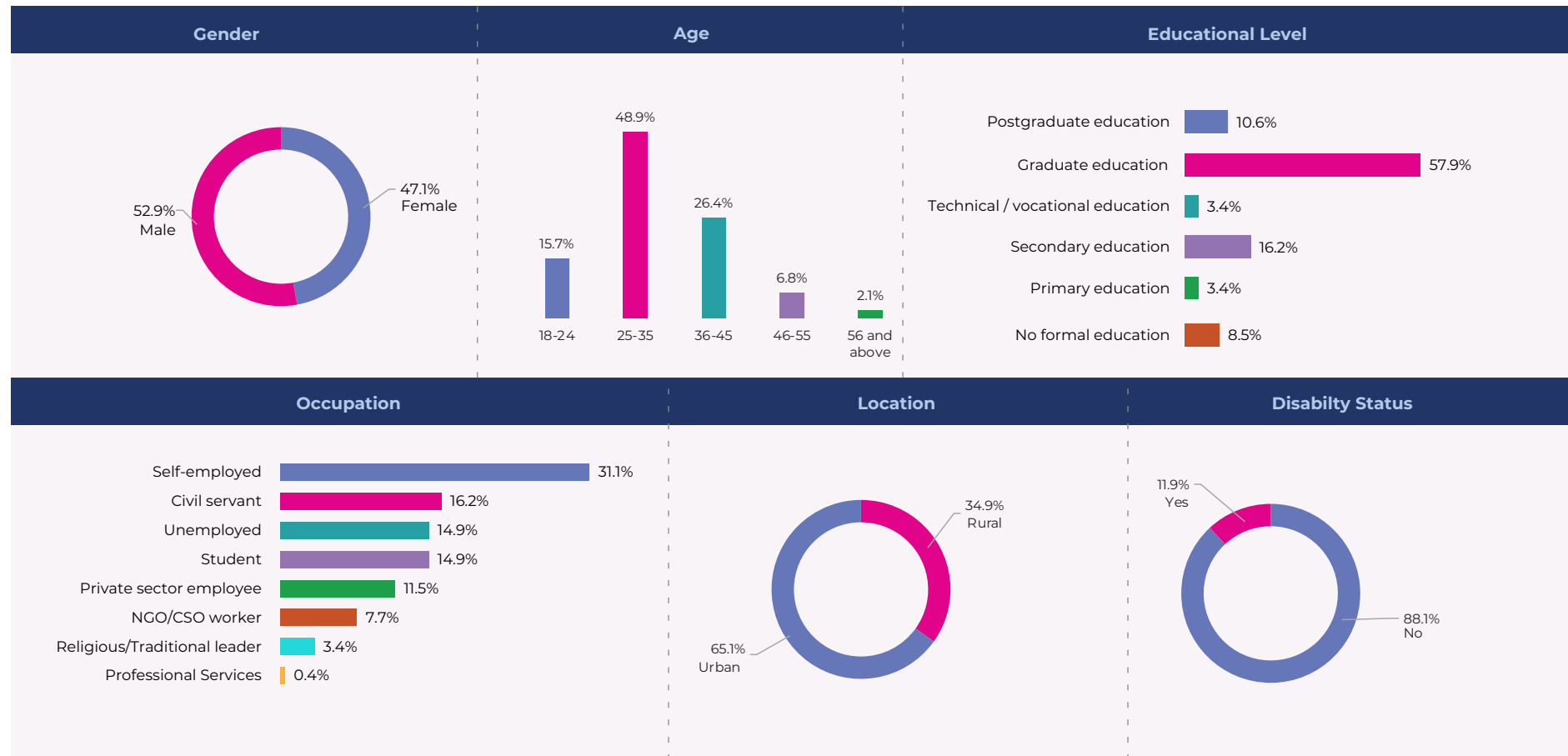
RECOMMENDATIONS
<ul style="list-style-type: none">Appoint a dedicated Coordinator and institute mandatory annual reporting to strengthen oversight and accountability.Establish and maintain a register of accredited service providers with clear operational guidelines.Expand and resource Protection Officers' roles to enhance survivor protection and effective legal enforcement.





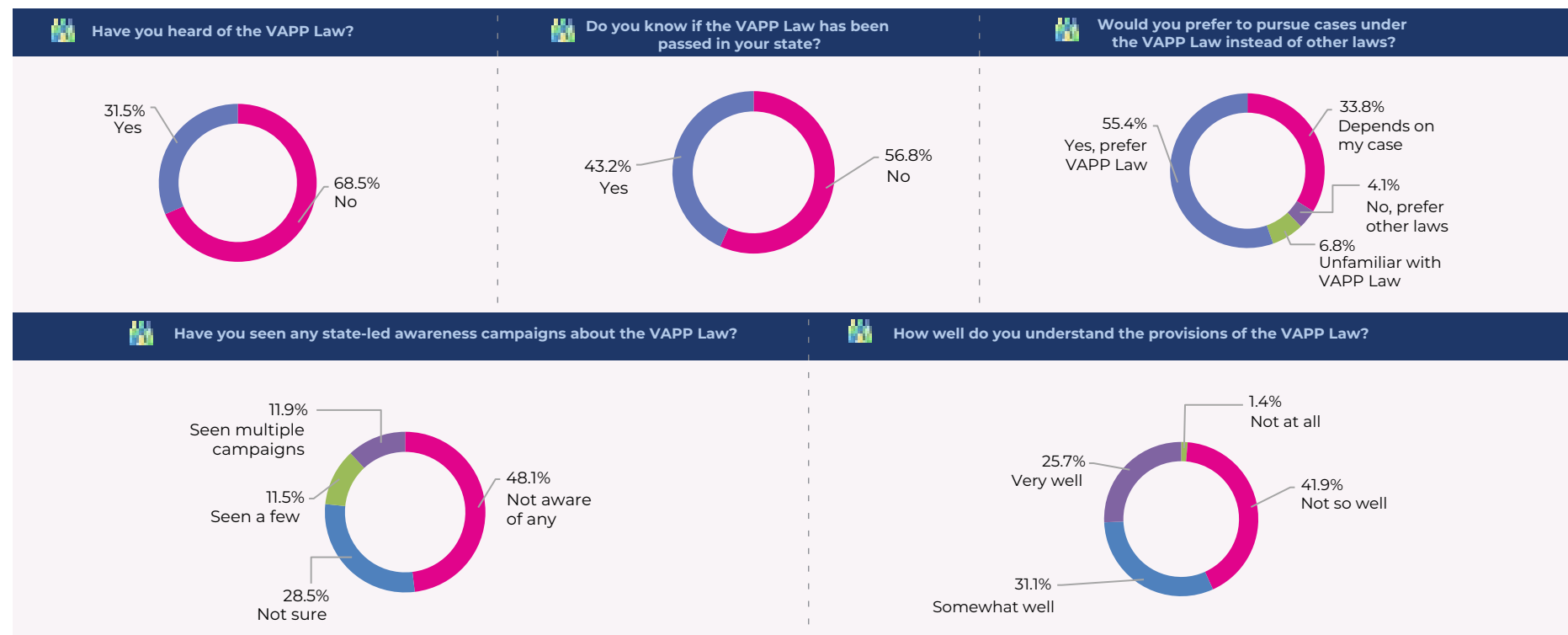
NIGER STATE

Niger State | Respondent Demographics (n = 235)



The respondent profile shows a relatively balanced gender distribution (52.9% male, 47.1% female) and a youthful population, with 48.9% aged 25-35. Education levels are high, with 57.9% having graduate education. Self-employed individuals dominate (31.1%), followed by civil servants, students, and the unemployed. The sample has a rural lean, with 65.1% residing in rural areas, and 11.9% of respondents identifying as persons with disabilities.

Niger State | Public Awareness



FINDINGS

- The state government has conducted extensive VAPP Law awareness campaigns, engaging schools, religious institutions, traditional rulers, transport unions, health workers, law enforcement, artisans, farmers, and affinity groups.
- Despite these efforts, only 31.5% of respondents are aware of the VAPP Law, while 68.5% remain unaware.
- Just 23.4% recall encountering state-led campaigns, with 48.1% never seeing any and 28.5% unsure.
- Among those aware, only 43.2% know the law has been passed in Niger State.
- Comprehension of the law's provisions is weak, as only 25.7% understand it "very well," while 41.9% say "not so well."

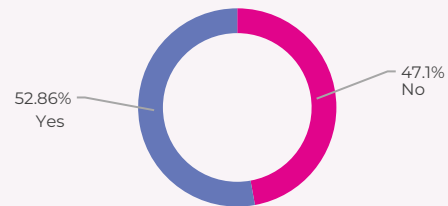
RECOMMENDATIONS

- Scale up awareness campaigns using local radio, social media, schools, and community town halls to broaden reach.
- Simplify and translate VAPP Law information into local languages with culturally resonant messaging.
- Empower women's groups, disability organizations, and rural networks to promote understanding and confidence in accessing justice.

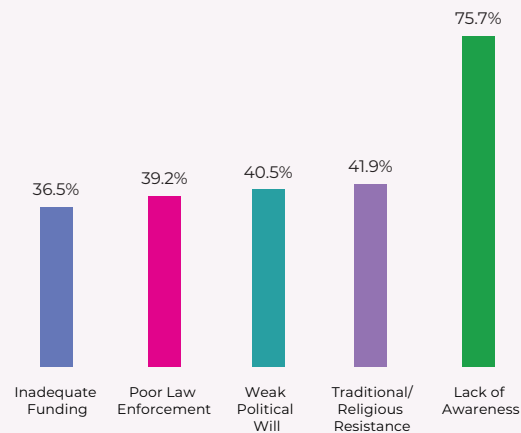
Niger State | Enforcement Systems



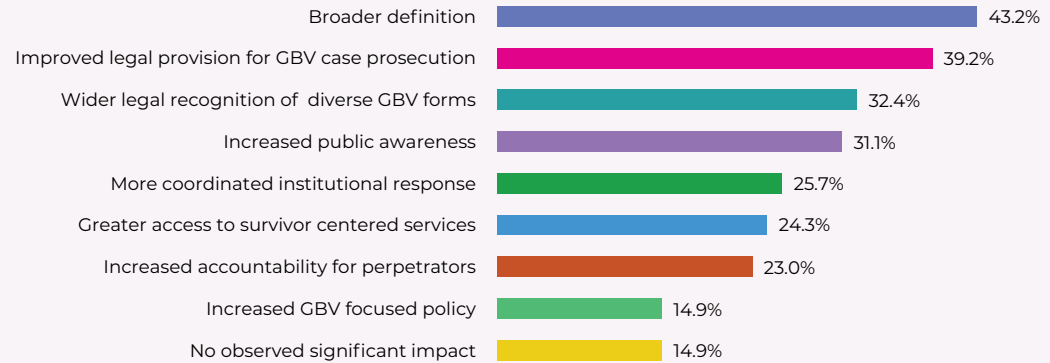
Since the VAPP Law was domesticated in your state, do you think the state's overall response to gender-based violence (GBV) has improved?



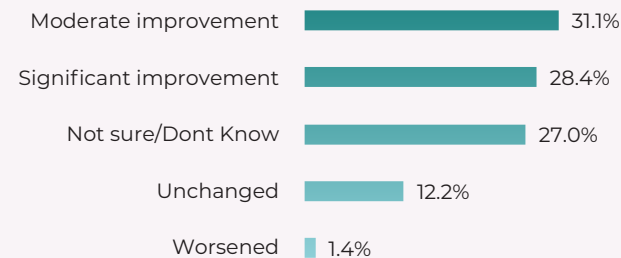
Which of the following do you think are the major barriers to implementing the VAPP Law in your state?



In your opinion, what has been the key impacts of the VAPP Law in your state and across Nigeria?



Since the VAPP Law was passed, do you think GBV survivors in your state have experienced better access to justice?



FINDINGS

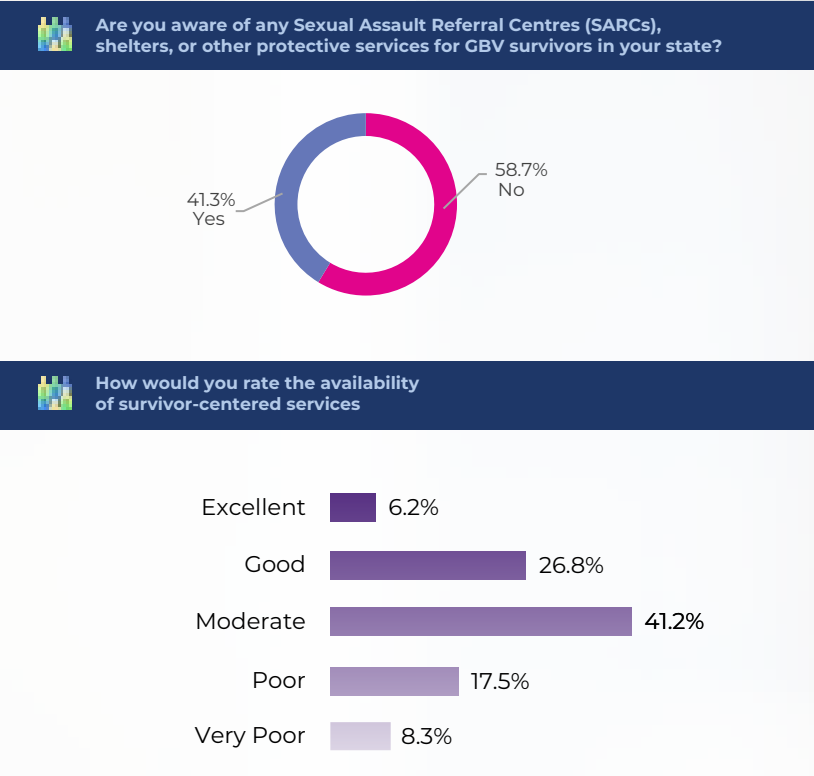
- 52.9% of respondents believe Niger State's response to GBV has improved since adopting the VAPP Law, while 47.1% see no change.
- The most cited legal impacts include higher penalties (43.2%), stronger legal defense provisions (39.2%), and broader recognition of GBV forms (32.4%).
- Key challenges include low public awareness (75.7%), traditional/religious resistance (41.9%), weak political will (40.5%), and poor law enforcement/corruption (39.2%).




Niger State | Enforcement Systems

Status	
<div></div> <div>Sex Offenders' Register<ul style="list-style-type: none">No dedicated state register.Not linked to national GBV tracking systems.Currently inaccessible to the public.</div>	Not Established
<div></div> <div>Protection Orders<ul style="list-style-type: none">Courts are authorized to issue orders under the VAPP Act.Over 10 Protection Orders issued in the past 12 months.Consistently enforced by police and security agencies.</div>	Fully Operational
<div></div> <div>Mandatory Reporting<ul style="list-style-type: none">Professionals in health, education, and welfare sectors required to report GBV.No penalties for non-compliance.Standardized referral and reporting protocols in place.</div>	Operational
<div></div> <div>Legal Remedies<ul style="list-style-type: none">Pro bono lawyers and legal aid providers available.Survivors have accessed compensation and restitution.Over 20 GBV cases have been prosecuted using the VAPP Law in the past year.</div>	Fully Operational
RECOMMENDATIONS	
<ul style="list-style-type: none">Establish a state Sex Offenders' Register aligned with NAPTIP for transparency and community safety.Strengthen survivor-centered services and expand legal aid to improve access to justice.Scale up culturally sensitive, community-driven sensitization campaigns to address low awareness and resistance.	





Niger State | Support Service



Status	
<div>SARCs and Shelters<ul style="list-style-type: none">Government-funded SARCs/shelters : 6.Actively receiving survivors.Services offered: Temporary housing, feeding, medical services, skills acquisition/reintegration support, legal aid, and psychosocial counselling.</div>	Fully Functional
<div>Free Medical Assistance<ul style="list-style-type: none">Government health facilities mandated to provide free care.Survivors face no cost-related barriers.Medical and forensic services actively delivered and accessed for prosecution.</div>	
<div>Victims Support Fund<ul style="list-style-type: none">No dedicated fund currently in place.No defined financing mechanisms or disbursements.Absence limits sustained rehabilitation and reintegration support.</div>	Not Established

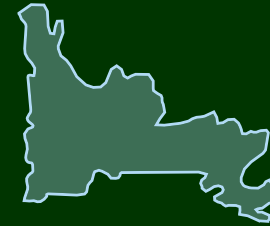
RECOMMENDATIONS

- Establish a Victims Support Fund with sustainable financing for holistic survivor rehabilitation and reintegration.
- Expand awareness campaigns using local languages and multi-channel platforms (radio, social media, community outreach).
- Strengthen service quality and partnerships with NGOs and community leaders to build confidence and ensure consistent survivor-centered care.

Status	
<div></div> <div>Regulatory Body<ul style="list-style-type: none">Formally designated body: Ministry of Women Affairs.Coordinator appointed for domestic violence prevention.Annual report: Submitted to state government but not deposited with the National Bureau of Statistics.Multi-sectoral coordination mechanism in place (Justice, Health, Information, Education, Finance, Social sectors).Protection Officers appointed across all LGAs.</div>	Established
<div></div> <div>Service Provider Registration<ul style="list-style-type: none">State-maintained register is comprehensive and regularly updated.Register circulated to police stations, Protection Officers, and courts.Operational guidelines for accredited providers developed and in use.</div>	

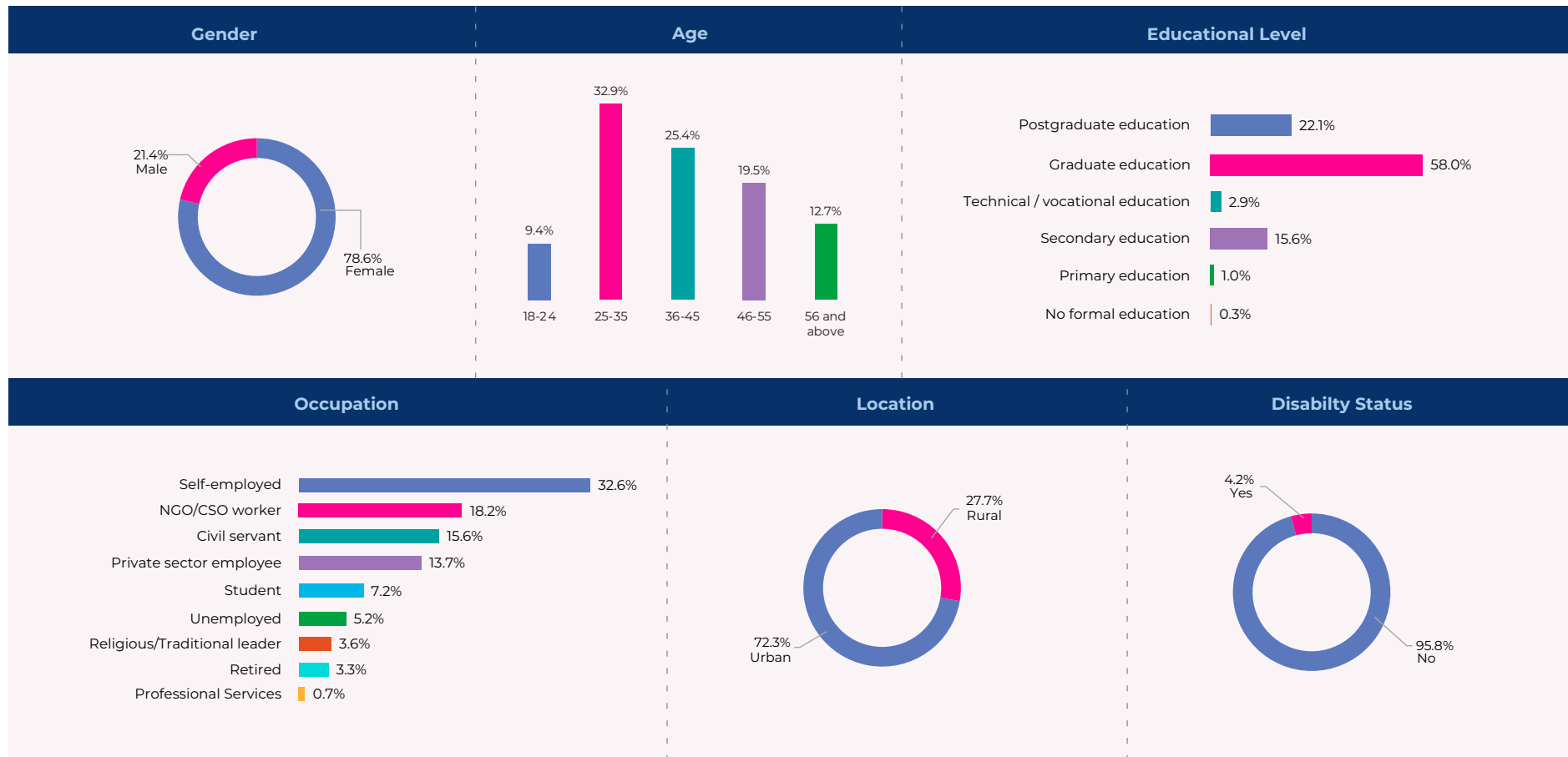
RECOMMENDATIONS
<ul style="list-style-type: none">Ensure annual implementation reports are legally submitted to the National Bureau of Statistics for national-level accountability.Strengthen the capacity of Protection Officers with standardized tools and survivor-centered training.Expand the service provider register onto digital platforms for wider accessibility and transparency.





OGUN STATE

Ogun State | Respondent Demographics (n = 307)

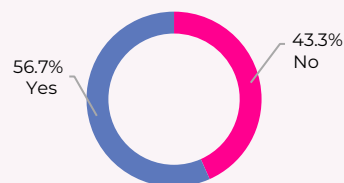


In Ogun State, the respondent profile reveals a well-educated sample, with 58% holding graduate education and 22.1% having postgraduate degrees. The majority (72.3%) reside in urban areas, and the sample is predominantly female (78.6%). Young adults aged 25-35 dominate (32.9%), and the most represented occupations are self-employed (32.6%), NGO/CSO workers, and religious/traditional leaders. Additionally, 4.2% of respondents identified as persons with disabilities.

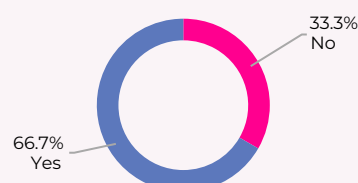
Ogun State | Public Awareness



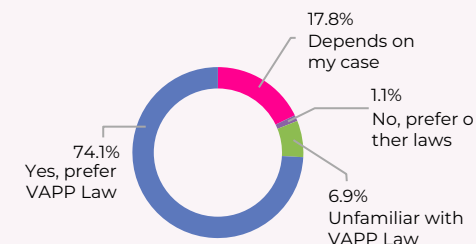
Have you heard of the VAPP Law?



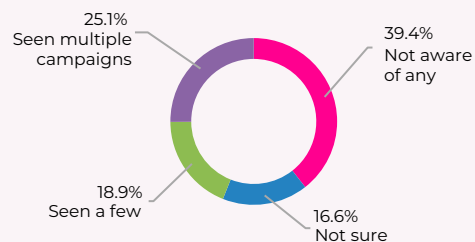
Do you know if the VAPP Law has been passed in your state?



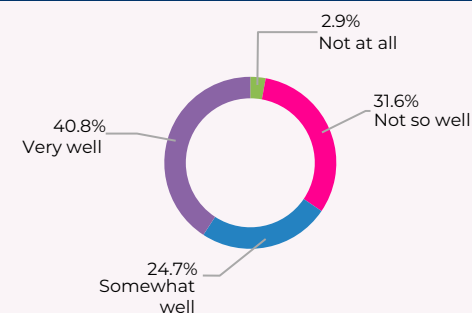
Would you prefer to pursue cases under the VAPP Law instead of other laws?



Have you seen any state-led awareness campaigns about the VAPP Law?



How well do you understand the provisions of the VAPP Law?



FINDINGS

- Ogun State has rolled out comprehensive VAPP Law awareness initiatives targeting schools, worship centers, traditional leaders, markets, transport unions, medical professionals, and law enforcement.
- 56.7% of respondents are aware of the VAPP Law, while 43.3% remain completely unaware.
- 39.4% have never encountered state-led campaigns, 16.0% are uncertain, 18.9% recall a few, and only 25.1% recall multiple campaigns.
- Among those aware, 66.7% know the law has been enacted, but only 40.8% understand it very well, while 31.6% report weak understanding.
- 74.1% prefer the VAPP Law for legal redress, though 17.8% remain undecided.

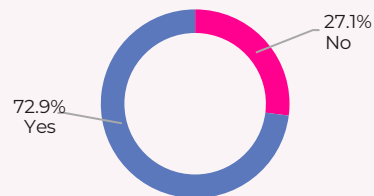
RECOMMENDATIONS

- Intensify localized and culturally sensitive awareness campaigns using traditional leaders, religious institutions, schools, and markets.
- Provide regular training for law enforcement and healthcare workers to deepen knowledge and strengthen early intervention.

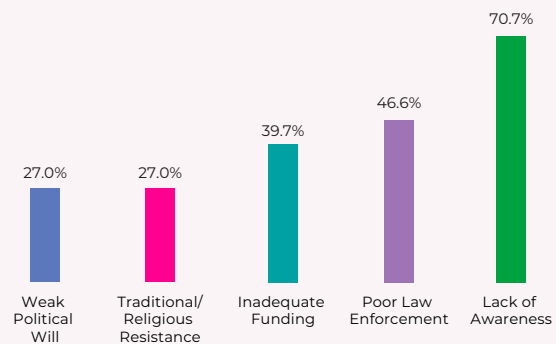
Ogun State | Enforcement Systems



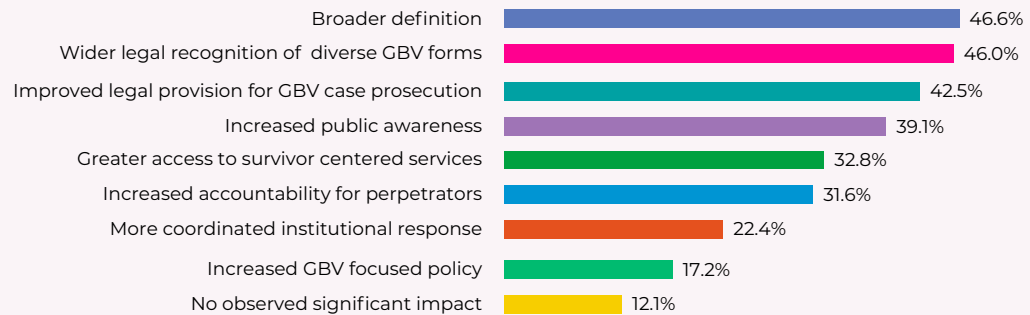
Since the VAPP Law was domesticated in your state, do you think the state's overall response to gender-based violence (GBV) has improved?



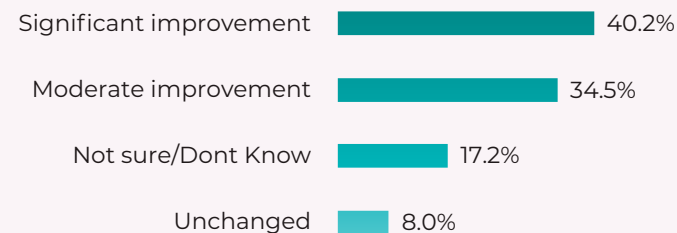
Which of the following do you think are the major barriers to implementing the VAPP Law in your state?



In your opinion, what has been the key impacts of the VAPP Law in your state and across Nigeria?





Since the VAPP Law was passed, do you think GBV survivors in your state have experienced better access to justice?



FINDINGS

- 72.9% of respondents believe Ogun State's response to GBV has improved since adopting the VAPP Law, while 27.1% perceive no significant change.
- The most cited impacts include increased confidence in GBV response systems (46.6%), broader recognition of diverse GBV forms (46.0%), and enhanced legal protections for prosecution (42.5%).
- Key challenges remain low awareness (70.7%), weak law enforcement (46.6%), inadequate funding (39.7%), and cultural or religious resistance (27.0%).

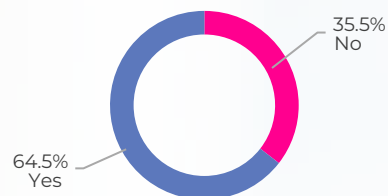
Status	
<div></div> <div>Sex Offenders' Register<ul style="list-style-type: none">Exists under the VAPP Law but not linked to the national GBV database.Not updated since creation.Not publicly accessible, limiting accountability and prevention.</div>	Established but Non-functional
<div></div> <div>Protection Orders<ul style="list-style-type: none">Courts authorized to issue orders under the VAPP Law.Enforcement by police and security agencies remains inconsistent.No publicly available data on orders issued in the past year.</div>	
<div></div> <div>Mandatory Reporting<ul style="list-style-type: none">Professionals are legally required to report GBV cases.Standardized referral and reporting protocols exist.No penalties for non-compliance, undermining accountability.</div>	Operational
<div></div> <div>Legal Remedies<ul style="list-style-type: none">Survivors are legally entitled to compensation and restitution.Supported by pro bono services (FIDA, Legal Aid Council).Few survivors secured compensation in the past year despite 20+ GBV cases prosecuted and convicted under the VAPP Law.</div>	Operational but limited
RECOMMENDATIONS	
<ul style="list-style-type: none">Regularly update and integrate the Sex Offenders' Register with the national GBV database and make it publicly accessible.Introduce penalties for non-compliance with mandatory reporting to strengthen accountability.Improve data transparency and enforcement by publishing regular reports on protection orders and GBV prosecutions.	



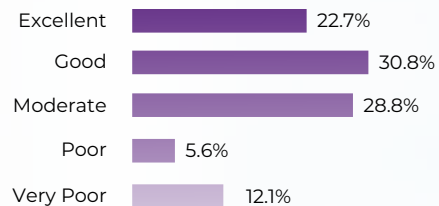
Ogun State | Support Service



Are you aware of any Sexual Assault Referral Centres (SARCs), shelters, or other protective services for GBV survivors in your state?



How would you rate the availability of survivor-centered services



Status

SARCs and Shelters



- Number of government-funded SARCs/Shelters: 4
- Actively receiving survivors and staffed with trained professionals.
- Services offered: Temporary housing, Feeding, Medical services, Forensic exams, Skills reintegration, Legal aid, and Psychosocial counselling.

Fully Functional

Free Medical Assistance



- State facilities mandated to provide free medical and forensic services.
- Survivors still face cost-related barriers.
- Medical reports and forensic services are not accessible for prosecution.

Available but limited

Victims Support Fund





- The Victims Support Fund is yet to be operational.
- Designed to pool resources from state budgets, court fines, and donor contributions.
- Intended to support: SARCs, Shelters, Reintegration, Psychosocial services, Legal aid, and medical care.

Not Operational

RECOMMENDATIONS

- Activate the Victims Support Fund to secure sustainable financing for survivor services.
- Subsidize transportation and indirect medical costs to remove financial barriers to access.

Status	
<div></div> <div>Regulatory Body<ul style="list-style-type: none">Ministry of Women Affairs designated as coordinating body.State Coordinator for Domestic Violence appointed to oversee operations and reporting.Protection Officers appointed across all LGAs.Multi-sectoral coordination mechanism in place (Justice, Health, Information, Education, Finance).Annual reports submitted to state government but not deposited with National Bureau of Statistics, limiting national accountability.</div>	<div>Established and Operational</div> <div>Established but Limited</div>
<div></div> <div>Service Provider Registration<ul style="list-style-type: none">System for registering and accrediting GBV service providers exists.Register is not frequently updated or widely circulated to courts, police, or Protection Officers.Operational guidelines for accredited providers are still under development, causing inconsistencies in service delivery.</div>	

RECOMMENDATIONS

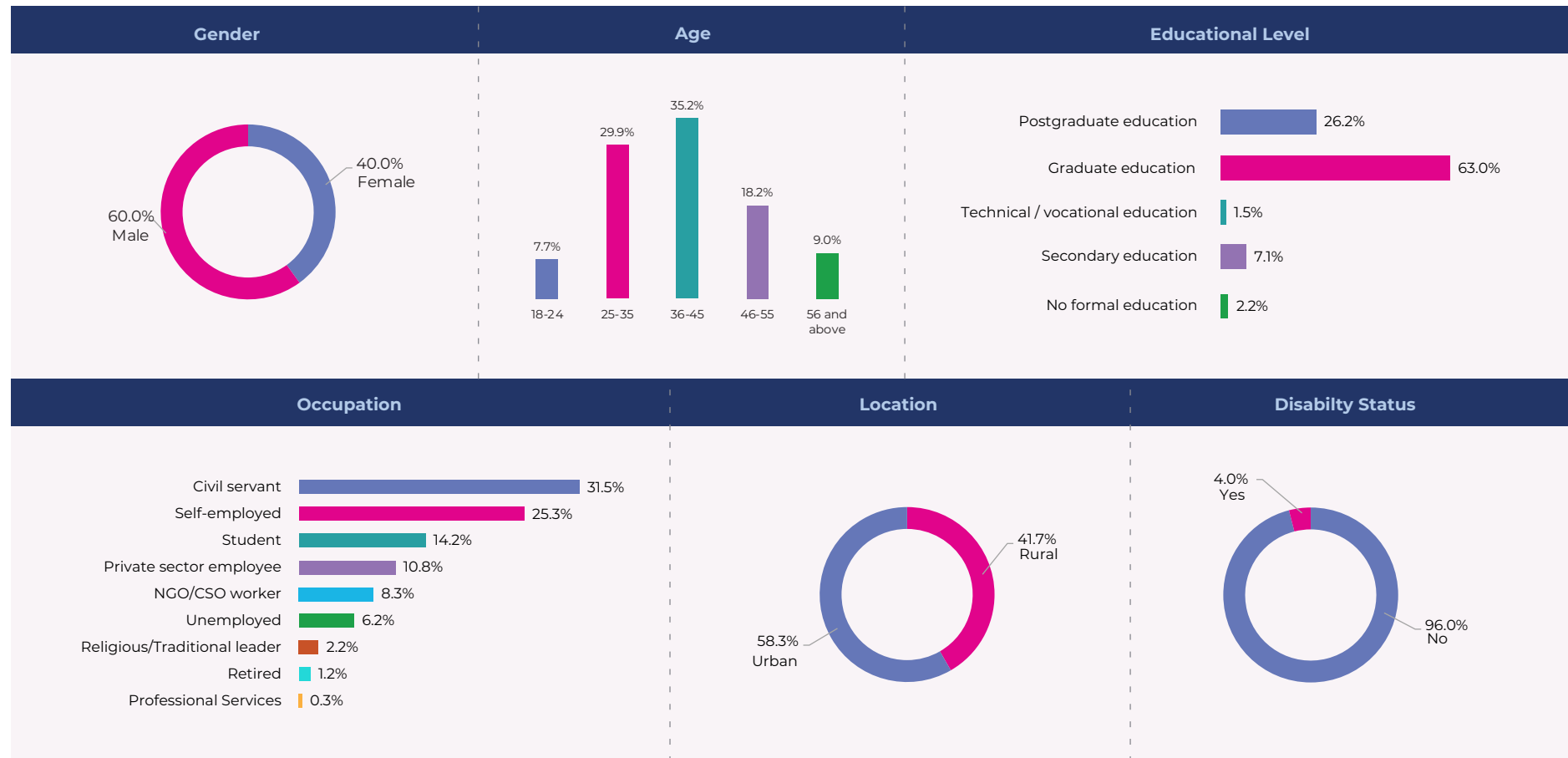
- Finalize and enforce operational guidelines for accredited GBV service providers.
- Update and circulate the service provider registry regularly to all critical institutions.
- Ensure systematic submission of annual reports to the National Bureau of Statistics for transparency and accountability.





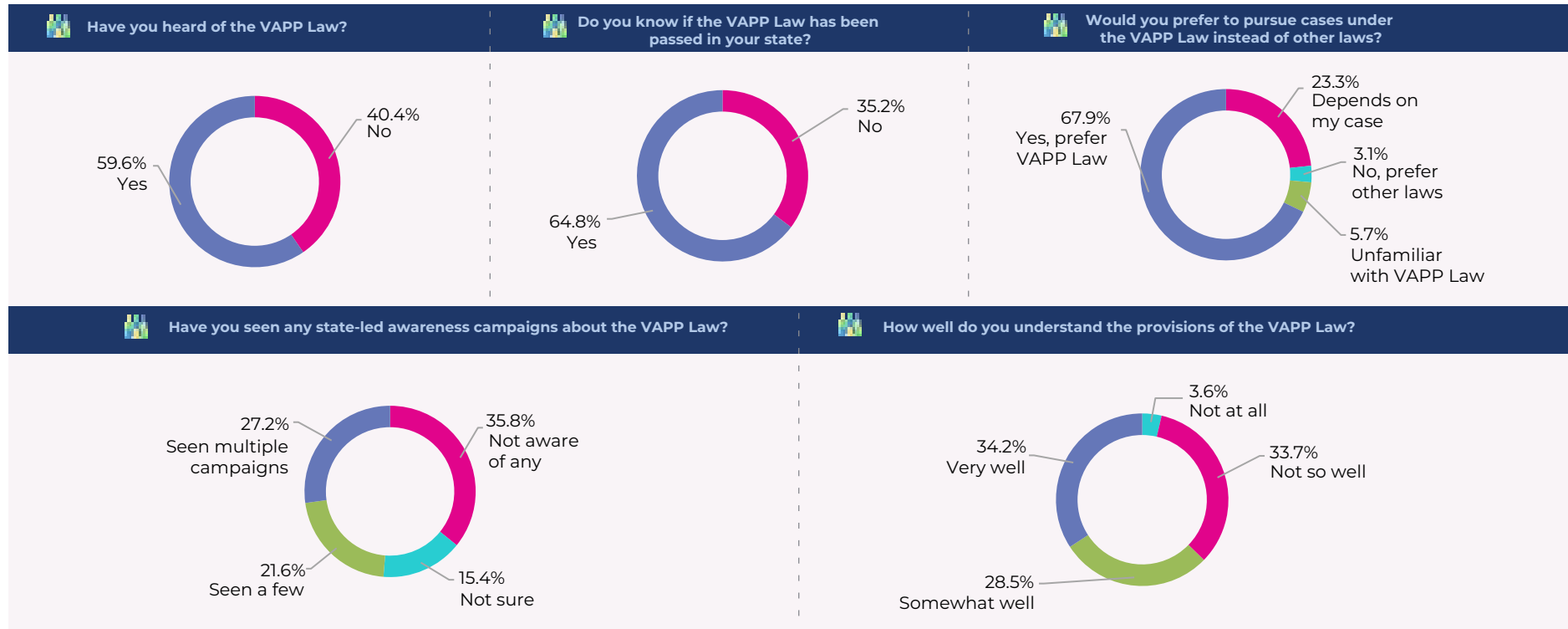
ONDO STATE

Ondo State | Respondent Demographics (n = 324)



The respondent profile shows a population with 60% males and 40% females, and a moderately urbanized distribution (58.3% urban, 41.7% rural). The age range is varied, with 35.2% aged 36-45 and 29.9% aged 25-35. Education levels are high, with no reported lack of formal education. Occupationally, respondents are diverse, with civil servants (31.5%), self-employed (25.3%), and students (14.2%) being prominent, and 4% identifying as persons with disabilities.

Ondo State | Public Awareness



FINDINGS

- The state government has implemented VAPP Law awareness initiatives, including Braille versions, e-learning for school counselors, and grassroots multilingual campaigns across senatorial districts.
- 48.8% of respondents reported exposure to state-led awareness campaigns, while 35.8% had not seen any, and 15.4% were uncertain.
- 40.4% of respondents are unaware of the VAPP Law's existence in the state.
- 67.9% prefer pursuing cases under the VAPP Law, though 23.3% say preference depends on the case.

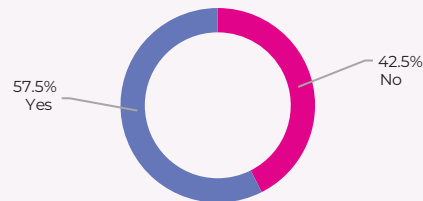
RECOMMENDATIONS

- Intensify community-based campaigns in local languages through religious leaders, traditional rulers, and local radio.
- Expand integration of VAPP Law education into schools and youth programs to build long-term legal literacy.
- Provide focused training for law enforcement, healthcare workers, and judiciary, particularly in rural areas.

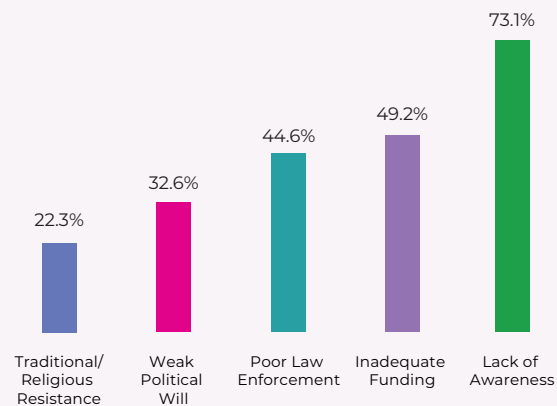
Ondo State | Enforcement Systems



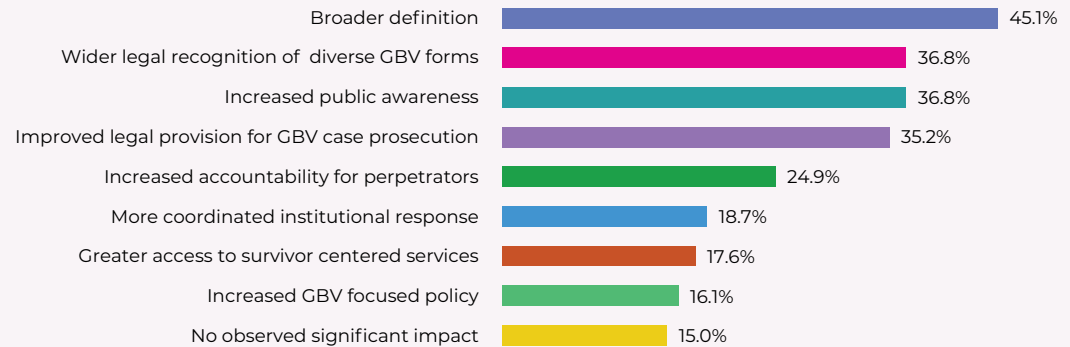
Since the VAPP Law was domesticated in your state, do you think the state's overall response to gender-based violence (GBV) has improved?



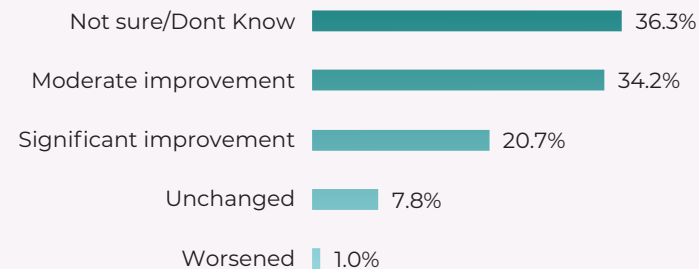
Which of the following do you think are the major barriers to implementing the VAPP Law in your state?



In your opinion, what has been the key impacts of the VAPP Law in your state and across Nigeria?





Since the VAPP Law was passed, do you think GBV survivors in your state have experienced better access to justice?



FINDINGS

- 57.5% of respondents believe the state's response to GBV has improved since adopting the VAPP Law.
- The most cited impacts include broader definition (45.1%), improved legal provisions for GBV prosecution (35.2%), and increased recognition of diverse GBV forms and public awareness (36.8% each).
- Access to justice perceptions show 34.2% report moderate improvement, 20.7% report significant improvement, while 36.3% remain uncertain.
- Major challenges include inadequate knowledge and training on the VAPP Law (73.1%), insufficient funding (49.2%), poor law enforcement (44.6%), and low political will/resistance (32.6%).

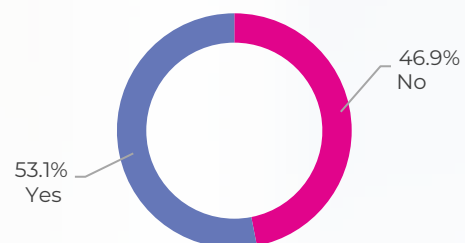
Status	
<div></div> <div>Sex Offenders' Register<ul style="list-style-type: none">• No state-specific register created.• Not linked to the national GBV database.• No updates or public accessibility.</div>	<div>Not Established</div> <div>Operational but limited</div> <div>Fully Operational</div> <div>Fully Operational</div>
<div></div> <div>Protection Orders<ul style="list-style-type: none">• Courts are authorized to issue orders.• No data available on orders issued in the past year.• Enforcement by police/security agencies inconsistent.</div>	
<div></div> <div>Mandatory Reporting<ul style="list-style-type: none">• Health, education, and welfare professionals are mandated to report.• Penalties exist for non-compliance.• Standardized referral and reporting protocols in place.</div>	
<div></div> <div>Legal Remedies<ul style="list-style-type: none">• Survivors accessed compensation and restitution in the past year.• Over 20 GBV cases prosecuted under the VAPP Law.• Legal aid supported by FIDA, Legal Aid Council, and pro bono lawyers.</div>	
RECOMMENDATIONS	
<ul style="list-style-type: none">• Establish a state Sex Offenders' Register linked to the national GBV database with regular updates.• Strengthen enforcement of Protection Orders through training and resourcing of courts, police, and prosecutors.• Expand legal aid and survivor-centered services, including mobile legal clinics and wider restitution mechanisms.	



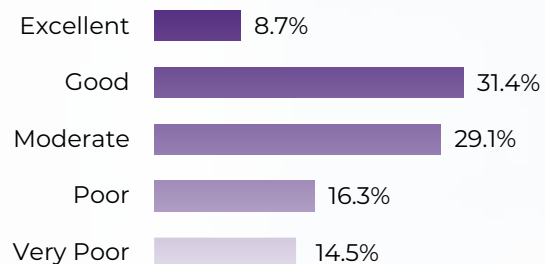
Ondo State | Support Service



Are you aware of any Sexual Assault Referral Centres (SARCs), shelters, or other protective services for GBV survivors in your state?



How would you rate the availability of survivor-centered services



Status

SARCs and Shelters



- Government-funded SARCs and Shelters : 2.
- Actively receiving survivors.
- Services offered: Temporary housing, Feeding, Medical services, Skills acquisition or reintegration support, Legal aid, and Psychosocial counselling.

Established and Functional

Free Medical Assistance



- Government facilities are not mandated to provide free care.
- Survivors continue to face cost-related barriers.
- Medical reports and forensic services are sometimes accessed for prosecution.

Not Available

Victims Support Fund





- No funding sources identified.
- Inactive with no resources disbursed.
- No services supported in the past year.

Not Established

RECOMMENDATIONS

- Mandate free medical and forensic services for survivors in all state health facilities.
- Establish and operationalize a Victims Support Fund with government, donor, and private sector contributions.
- Expand outreach and awareness campaigns to improve survivor access and public confidence in services.

Status	
<div></div> <div>Regulatory Body<ul style="list-style-type: none">Formally designated body: Ondo State Agency Against Gender-Based Violence (OSAA-GBV).Coordinator appointed for domestic violence prevention.Annual report: Submitted to state government but not deposited with NBS.There is a state coordination mechanism between the relevant MDAs.Protection Officers are appointed across LGAs to support courts.</div>	Established and Operational
<div></div> <div>Service Provider Registration<ul style="list-style-type: none">State-maintained register regularly updated.Register partially circulated to police stations, protection officers, and courts (dissemination ongoing).Operational guidelines for accredited providers are in place, ensuring compliance and survivor-centered care.</div>	

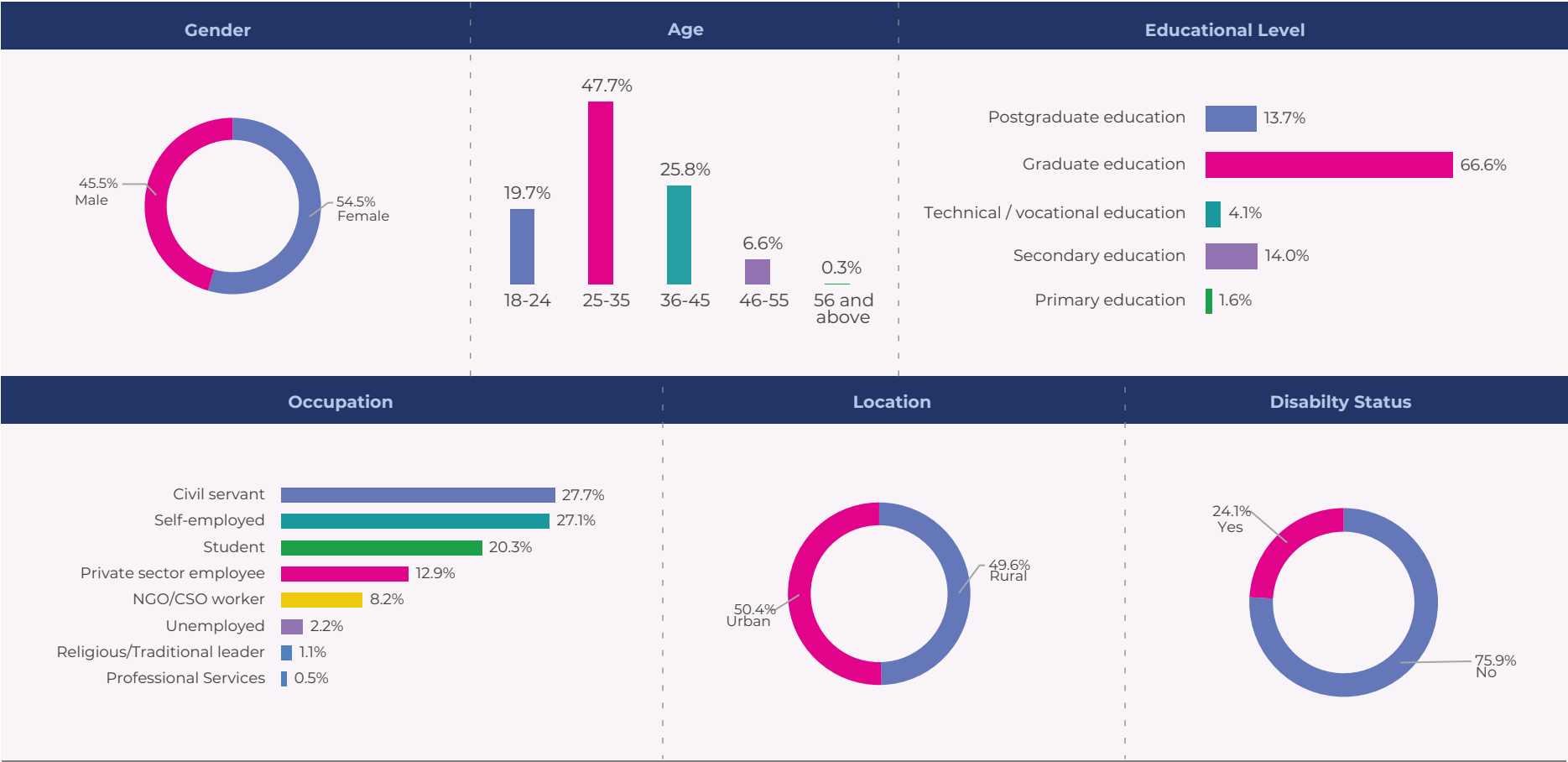
RECOMMENDATIONS
<ul style="list-style-type: none">Ensure OSAA-GBV fully fulfills its mandate by strengthening inter-agency collaboration and improving data-driven reporting, including submission to the NBS.Fully appoint, train, and deploy Protection Officers across all LGAs, with a clear framework linking judiciary, police, and service providers.Expand dissemination of the accredited service providers' register to all relevant institutions to strengthen referrals and survivor support.





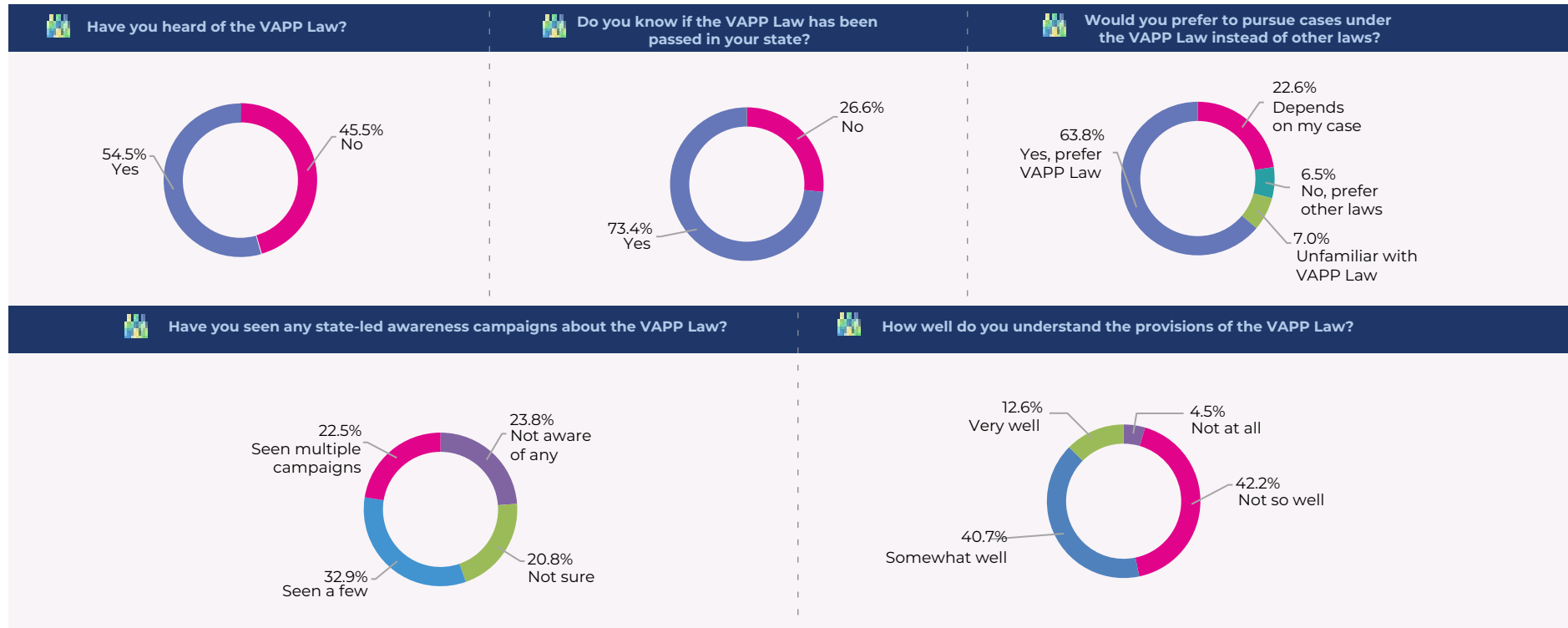
OSUN STATE

Osun State | Respondent Demographics (n = 365)



In Osun State, the study demographics show a relatively balanced gender distribution with females slightly outnumbering males (54.5%). Most respondents are young to mid-career adults, aged 25-35 (47.7%) and 36-45 (25.8%). Educational attainment is high, with 66.6% holding graduate qualifications. Civil servants (27.7%) and self-employed individuals (27.1%) dominate occupational groups, with a near-equal split between urban (50.4%) and rural (49.6%) residents. Notably, 24.1% of respondents identify as persons with disabilities.

Osun State | Public Awareness



FINDINGS

- The state government has implemented VAPP Law awareness initiatives targeting diverse groups including schools, religious institutions, and the general public.
- 54.5% of respondents in Osun State have heard of the VAPP Law, while 45.5% remain unaware.
- Among those aware, 73.4% know it has been passed, and 63.8% prefer seeking justice under its provisions, but only 12.6% report strong knowledge, while 42.2% admit they do not understand it well.
- Nearly a quarter (23.8%) of respondents report seeing no awareness campaigns at all.

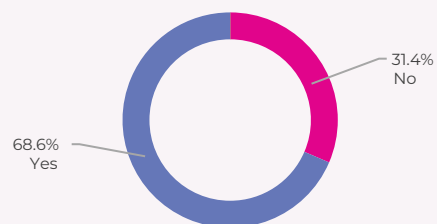
RECOMMENDATIONS

- Expand community-based and school-based awareness campaigns to increase overall reach and coverage.
- Deepen awareness initiatives to improve comprehension of the law's provisions beyond basic exposure.
- Sustain education by integrating VAPP content into schools, training programs, and stakeholder platforms.

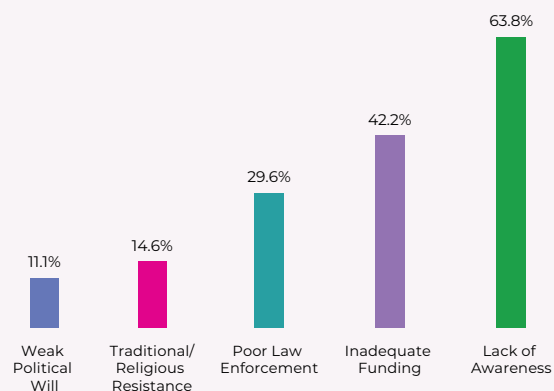
Osun State | Enforcement Systems



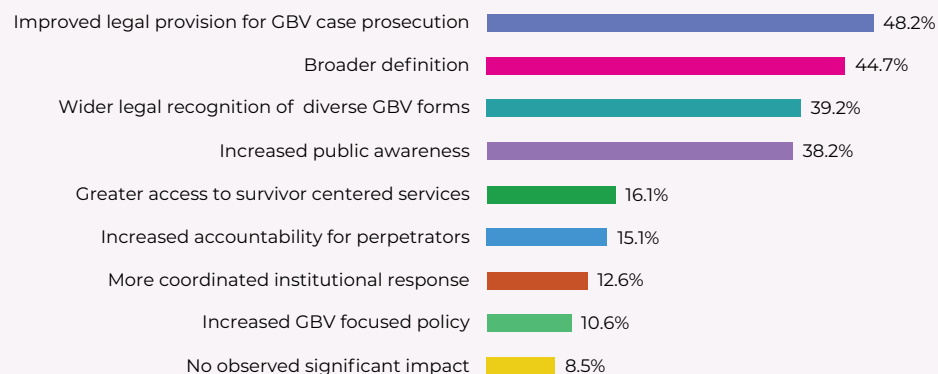
Since the VAPP Law was domesticated in your state, do you think the state's overall response to gender-based violence (GBV) has improved?



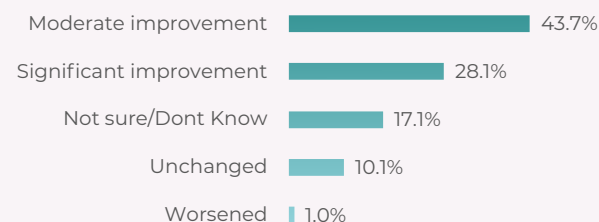
Which of the following do you think are the major barriers to implementing the VAPP Law in your state?



In your opinion, what has been the key impacts of the VAPP Law in your state and across Nigeria?







Since the VAPP Law was passed, do you think GBV survivors in your state have experienced better access to justice?



FINDINGS

- 68.6% believe the state's GBV response has improved since the domestication of the VAPP Law.
- Perceptions of access to justice: 43.7% report moderate progress, 28.1% significant improvement, while 11.1% cite no change or deterioration.
- Key impacts include stronger legal frameworks (48.2%), wider recognition of diverse GBV forms (44.7%), and greater legal visibility (39.2%).
- Persistent challenges include low awareness (63.8%), inadequate funding (42.2%), weak law enforcement (29.6%), cultural/religious resistance (14.6%), and low political will (11.1%).

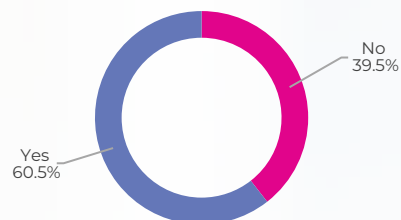
		Status
	Sex Offenders' Register <ul style="list-style-type: none">• Register established under VAPP Law.• Updated quarterly.• Access restricted to law enforcement only.• Not linked to national GBV databases.	Operational
	Protection Orders <ul style="list-style-type: none">• Courts authorized to issue orders.• Only 1–5 orders issued in past year.• Police Enforcement is consistent.	
	Mandatory Reporting <ul style="list-style-type: none">• Professionals mandated to report GBV.• Penalties exist for non-compliance.• Standardized reporting and referral protocols enforced.	
	Legal Remedies <ul style="list-style-type: none">• Legal aid and pro bono services available.• 11–20 GBV cases prosecuted in the past year.• Limited survivor compensation secured.	
RECOMMENDATIONS <ul style="list-style-type: none">• Expand access to the Sex Offenders' Register and link it with national databases to strengthen monitoring.• Scale up awareness and legal aid for survivors to improve uptake of Protection Orders and compensation remedies.• Increase funding and capacity building for justice, health, and welfare institutions, while engaging traditional/religious leaders to reduce resistance.		



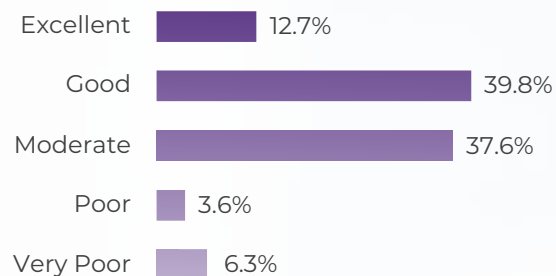
Osun State | Support Service



Are you aware of any Sexual Assault Referral Centres (SARCs), shelters, or other protective services for GBV survivors in your state?



How would you rate the availability of survivor-centered services



Status

SARCs and Shelters



- Only one fully functional government-run SARC exist
- Actively receiving survivors and facilitating reporting
- No state-run shelter exist
- Services offered: Temporary accommodation, Psychosocial counselling, Legal aid, medical care (injury treatment, forensic examinations).

Functional but limited



Free Medical Assistance

- Public facilities are not mandated to provide free care.
- Survivors face financial barriers to emergency treatment, PEP, psychological assessments, and forensic exams.

Not Available





Victims Support Fund

- The Victims Support Fund is not available.
- Not yet receiving or disbursing resources.

Not Established

RECOMMENDATIONS

- Fully operationalize and fund the Victims Support Fund to guarantee free medical and forensic services.
- Mandate cost-free treatment and forensic exams in public health facilities to eliminate access barriers.
- Strengthen coordination between SARCs, shelters, and legal aid providers, supported by survivor-centered awareness campaigns.

Status	
<div></div> <div>Regulatory Body<ul style="list-style-type: none">Formally designated body: Ministry of Justice.Coordinator for Domestic Violence Prevention appointed.Annual implementation reports submitted to state government (not yet to NBS).Multi-sectoral platform in place for coordination among MDAs and social sector actors.Monitoring and evaluation primarily carried out by CSOs/CBOS.</div>	Established and Operational
<div></div> <div>Service Provider Registration<ul style="list-style-type: none">Centralized register of accredited service providers (medical, psychosocial, shelter, legal).Register periodically updated and partially circulated to justice and protection institutions.Operational guidelines developed to standardize roles and ensure quality service delivery.</div>	

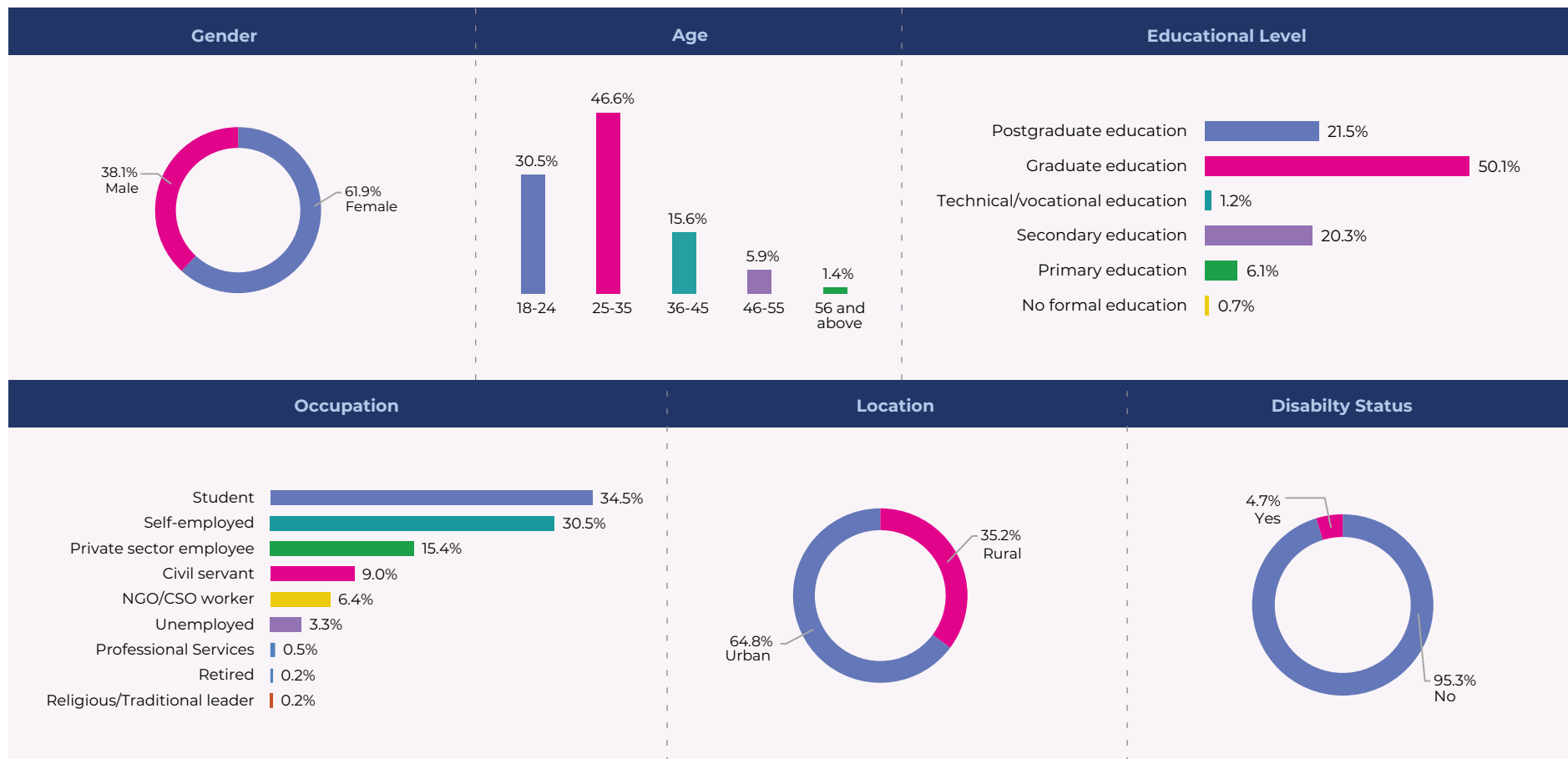
RECOMMENDATIONS
<ul style="list-style-type: none">Submit annual implementation reports to NBS to strengthen national data integration.Fully operationalize and widely disseminate the service provider register to all key institutions.Equip the Coordinator’s office and provide ongoing training to improve oversight, monitoring, and survivor-centered service delivery.





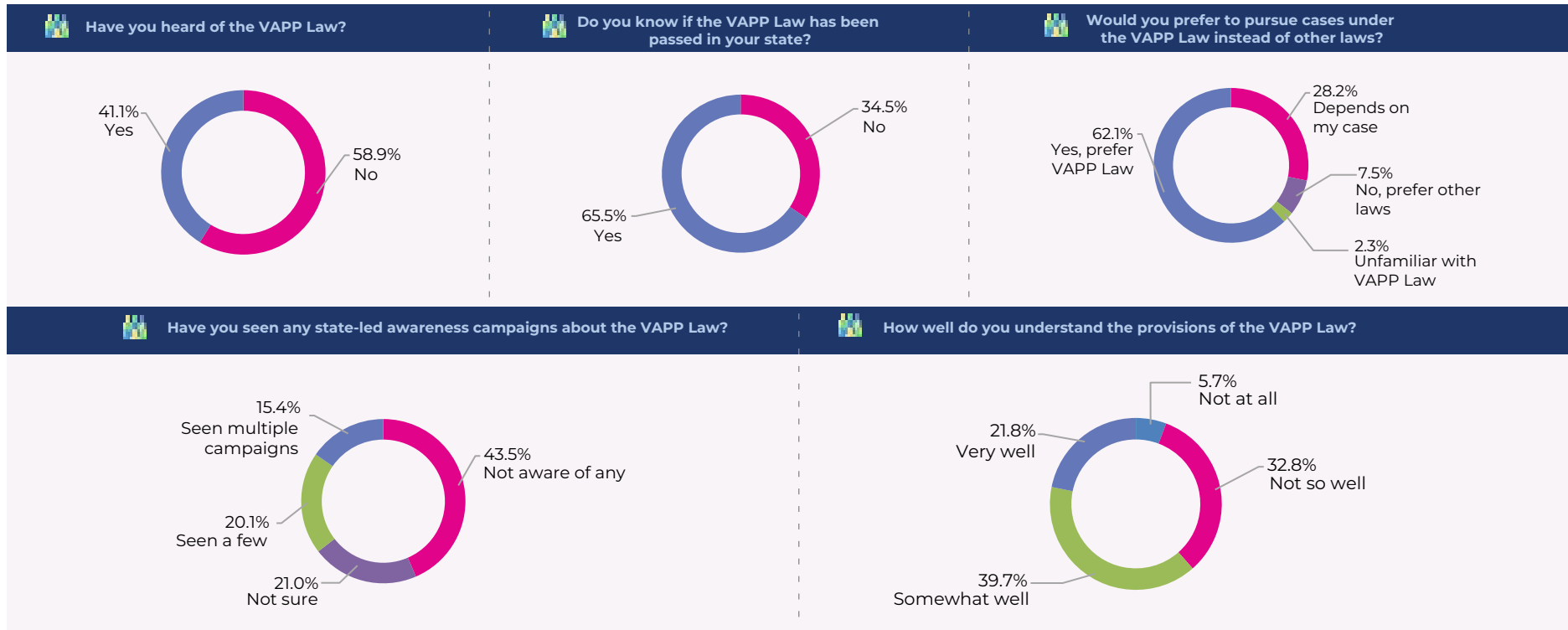
OYO STATE

Oyo State | Respondent Demographics (n = 423)



Demographic breakdown shows a predominantly educated, urban sample, with most having attained higher education (71.6%). About two-thirds (64.8%) live in urban areas. The sample is mostly female (61.9%), with young adults aged 25–35 years (46.6%) forming the largest age group, followed by those aged 18–24 years (30.5%). Students make up the largest occupational group (34.5%), followed closely by self-employed individuals (30.5%), private sector employees (15.4%), and civil servants (9.0%). Persons with disabilities account for 4.7% of respondents.

Oyo State | Public Awareness



FINDINGS

- The Oyo State government has implemented awareness and sensitization campaigns on the VAPP Law, targeting religious institutions, market associations, and the general public.
- 41.1% of respondents have heard of the VAPP Law, leaving 58.9% unaware.
- Among those aware, 65.5% know it has been passed, and 62.1% prefer it for legal redress.
- Understanding of provisions is mixed: 21.8% understand it “very well,” 39.7% “somewhat well,” while 32.8% “not so well,” and 5.7% “not at all.”

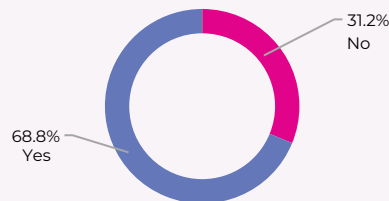
RECOMMENDATIONS

- Boost awareness through low-cost, grassroots campaigns using short videos, radio jingles, market loudspeakers, and WhatsApp sharing.
- Combine awareness efforts with practical community events, such as health checks, legal aid, and vocational training, to increase engagement.
- Create simple, accessible messages to clearly communicate key protections under the VAPP Law.

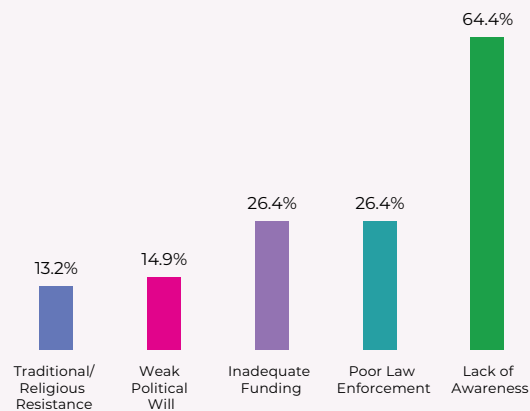
Oyo State | Enforcement Systems



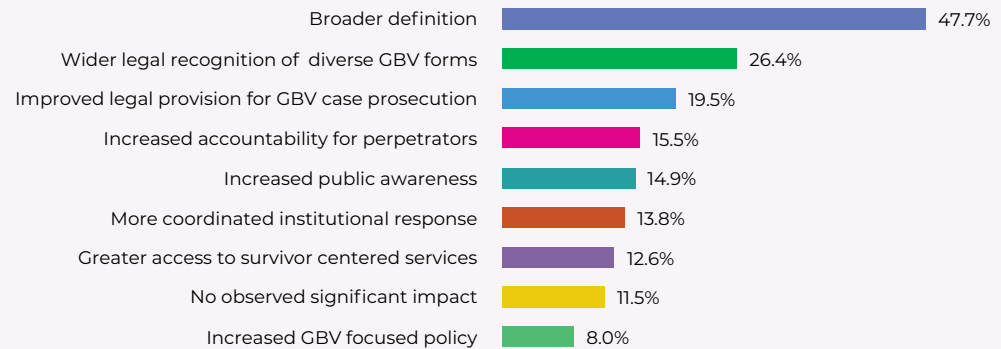
Since the VAPP Law was domesticated in your state, do you think the state's overall response to gender-based violence (GBV) has improved?



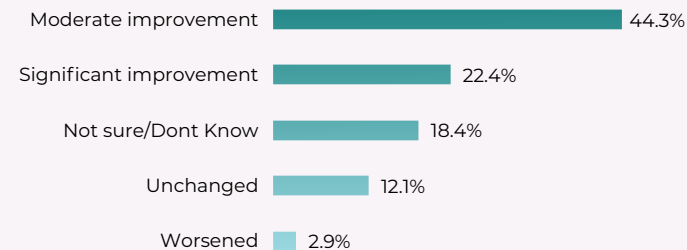
Which of the following do you think are the major barriers to implementing the VAPP Law in your state?



In your opinion, what has been the key impacts of the VAPP Law in your state and across Nigeria?







Since the VAPP Law was passed, do you think GBV survivors in your state have experienced better access to justice?



FINDINGS

- 68.8% of respondents think the state's response to GBV has improved since adopting the VAPP Law, while 31.2% see no meaningful change.
- The most cited impacts include broader definition of GBV (47.7%), wider legal recognition of diverse GBV forms (26.4%), and improved legal provisions for prosecution (19.5%).
- Access to justice perceptions show 44.3% report moderate improvement, 22.4% significant improvement, while 12.1% see no change.
- Major challenges include lack of awareness (64.4%), poor law enforcement (26.4%), inadequate funding (26.4%), and weak political will (14.9%).

		Status
	Sex Offenders' Register <ul style="list-style-type: none"> Register established and linked to national GBV database. Names of convicted offenders occasionally added. Accessible only to judicial officers. 	Operational
	Protection Orders <ul style="list-style-type: none"> Courts legally authorized to issue Protection Orders. Six to ten orders have been issued in the past year. Enforcement by law enforcement is inconsistent. 	Operational
	Mandatory Reporting <ul style="list-style-type: none"> Mandatory reporting required for health, education, and social welfare professionals. No penalties for non-compliance. No standardized protocols for reporting and referrals. 	Operational but limited
	Legal Remedies <ul style="list-style-type: none"> No active legal aid agencies or pro-bono lawyers for VAPP-related cases. No records of cases prosecuted under the VAPP Law in the past year. 	Not Operational

RECOMMENDATIONS

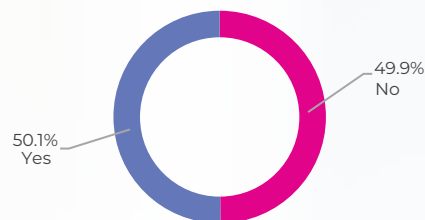
- Make the Sex Offenders' Register publicly accessible in a regulated format to enhance accountability and deterrence.
- Strengthen mandatory reporting systems with penalties and standardized digital protocols for case reporting across institutions.
- Fully operationalize VAPP Law legal aid provisions, ensuring survivors' access to free representation and increasing prosecution rates.



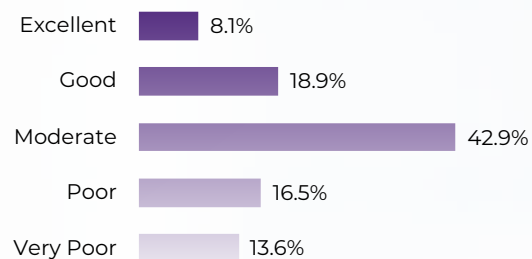
Oyo State | Support Service



Are you aware of any Sexual Assault Referral Centres (SARCs), shelters, or other protective services for GBV survivors in your state?



How would you rate the availability of survivor-centered services



Status



SARCs and Shelters

- Only one fully functional government-run SARC exist
- Services are limited and largely urban-centered
- No state-run shelter exist
- Services offered: Psychosocial counselling, Legal aid and medical care .

Functional but limited



Free Medical Assistance

- No legal requirement for free medical treatment in state-owned facilities.
- Survivors sometimes access medical reports and forensic services for prosecution, but inconsistently.

Not Available



Victims Support Fund

- Actively funded through the state government budget.
- Supports rehabilitation and reintegration, including skills acquisition and education.

Established and Operational

RECOMMENDATIONS

- Mandate free, comprehensive medical and forensic services in all state-owned facilities.
- Broaden awareness of shelters, SARCs, and protective services through targeted community campaigns.
- Strengthen the Victims Support Fund by expanding outreach, conducting regular evaluations, and leveraging private sector partnerships.

Status	
 <p>Regulatory Body</p> <ul style="list-style-type: none"> • No legally designated agency exists to oversee VAPP Law implementation. • No Coordinator appointed to prepare annual implementation reports. • No Protection Officers assigned to support courts. • A basic coordination mechanism exists between MDAs and social sector actors, but with limited scope. 	<p>Established and Operational</p>
 <p>Service Provider Registration</p> <ul style="list-style-type: none"> • No legally designated agency exists to oversee VAPP Law implementation. • No Coordinator appointed to prepare annual implementation reports. • No Protection Officers assigned to support courts. • A basic coordination mechanism exists between MDAs and social sector actors, but with limited scope. 	

RECOMMENDATIONS

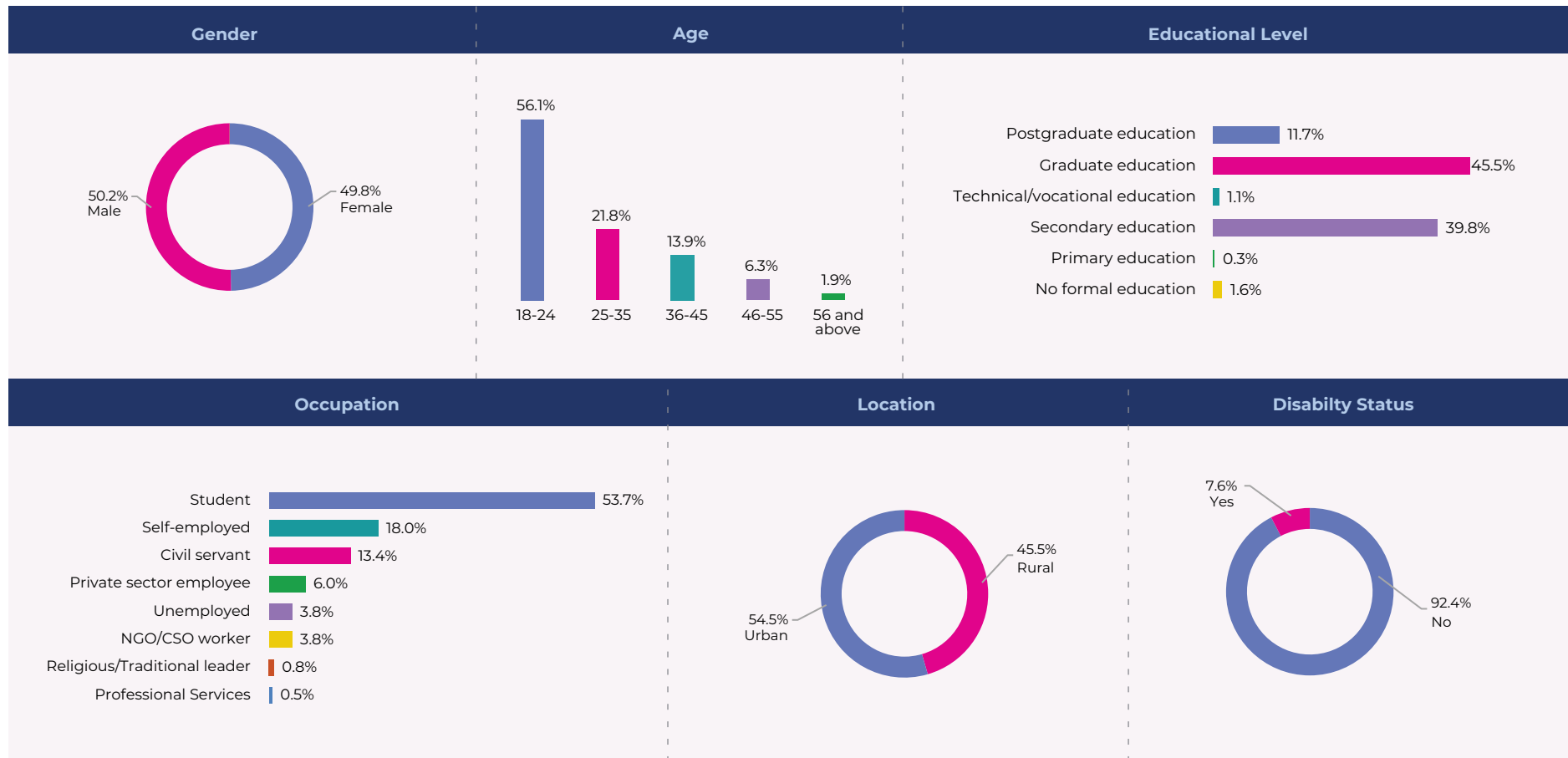
- Establish a legally recognized agency with a Coordinator to oversee VAPP Law implementation and ensure annual reporting to NBS.
- Appoint trained Protection Officers across LGAs to support courts and survivors.
- Introduce an accreditation and audit system for GBV service providers to standardize quality and enforce survivor-centered standards.





PLATEAU STATE

Plateau State | Respondent Demographics (n = 367)

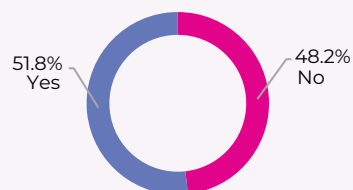


The Plateau State respondent profile is youthful and educated, with most aged 18–24 (56.1%) and a large share holding graduate (45.5%) or secondary (39.8%) education. Over half are students (53.7%), and the sample is almost evenly split by gender (50.2% male, 49.8% female). Slightly more respondents live in urban areas (54.5%) than rural (45.5%), and 7.6% report having a disability.

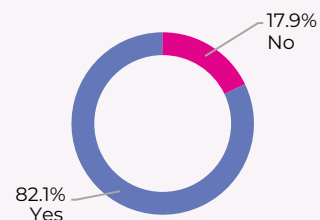
Plateau State | Public Awareness



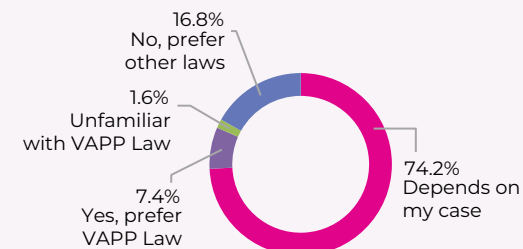
Have you heard of the VAPP Law?



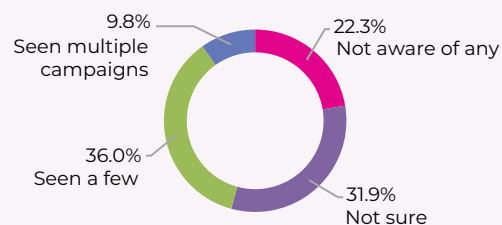
Do you know if the VAPP Law has been passed in your state?



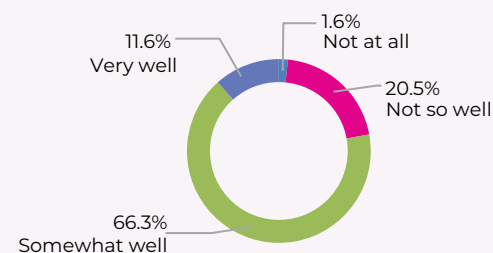
Would you prefer to pursue cases under the VAPP Law instead of other laws?



Have you seen any state-led awareness campaigns about the VAPP Law?



How well do you understand the provisions of the VAPP Law?



FINDINGS

- VAPP Law awareness initiatives targeting schools, religious institutions, traditional rulers, health workers, law enforcement agencies, and the public have been carried out in the state.
- 51.8% of respondents have heard of the VAPP Law.
- Among those aware of the law, only 11.6% of respondents claim they understand the law very well.
- 9.8% of respondents have seen multiple state-led awareness campaigns.

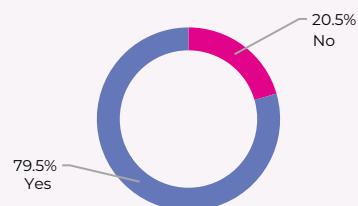
RECOMMENDATIONS

- Use community platforms and media to expand outreach and sustain sensitization on the VAPP Law.
- Enhance awareness initiatives to provide more in-depth information about the VAPP Law's provisions, beyond just raising awareness.
- Identify and target specific groups or areas that have been missed by current awareness efforts to increase overall awareness and understanding of the VAPP Law.

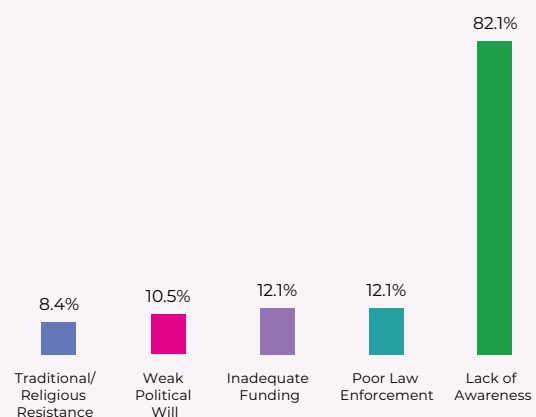
Plateau State | Enforcement Systems



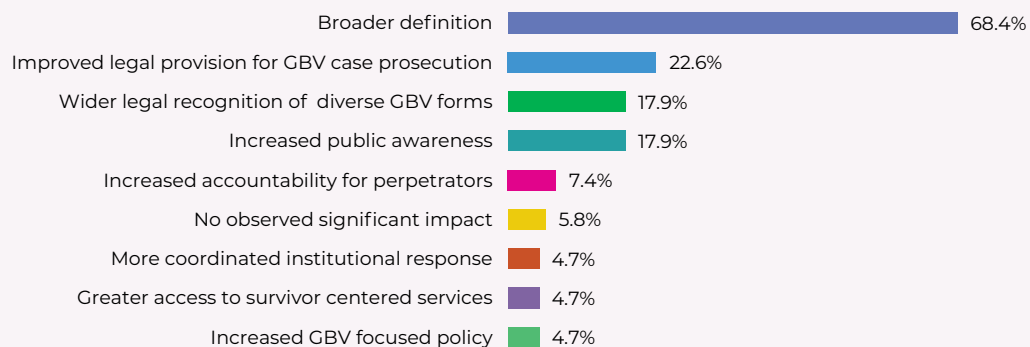
Since the VAPP Law was domesticated in your state, do you think the state's overall response to gender-based violence (GBV) has improved?



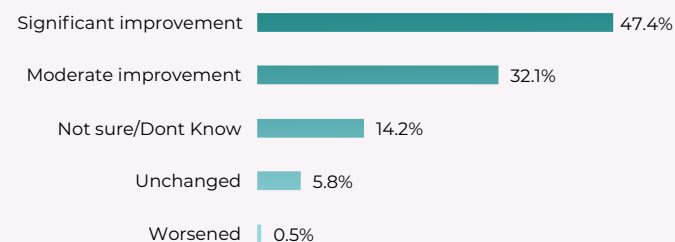
Which of the following do you think are the major barriers to implementing the VAPP Law in your state?



In your opinion, what has been the key impacts of the VAPP Law in your state and across Nigeria?







Since the VAPP Law was passed, do you think GBV survivors in your state have experienced better access to justice?



FINDINGS

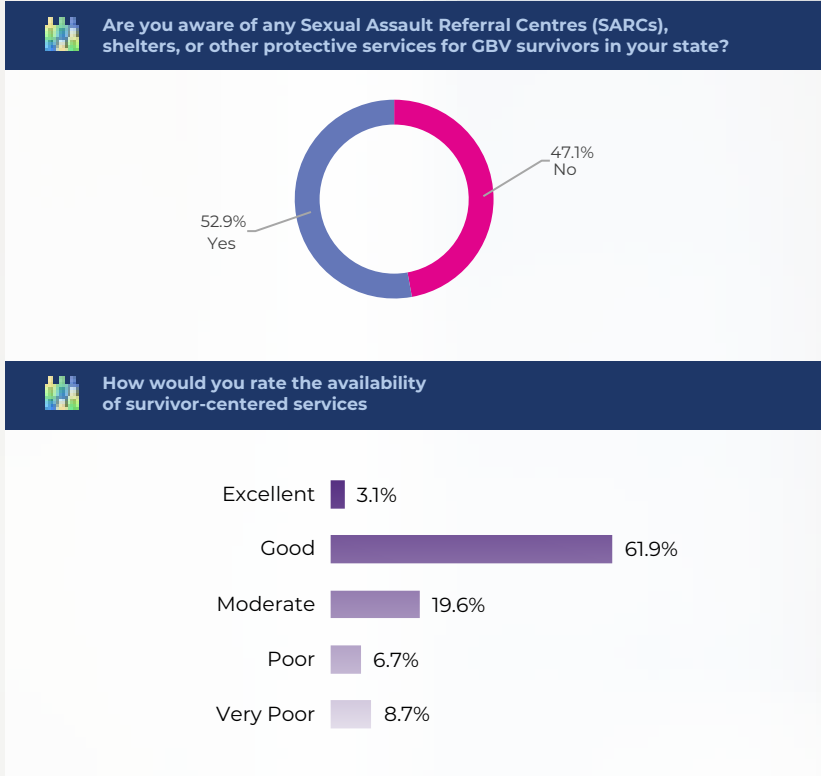
- 79.5% of respondents think the state's response to GBV has improved since adopting the VAPP Law.
- The most cited impacts include a broader definition of GBV (68.4%), improved provision (22.6%), and wider legal recognition alongside increased public awareness (17.9%).
- Access to justice perceptions shows 47.4% report significant improvement while 32.1% report moderate improvement.
- Despite these, lack of awareness (82.1%) was mentioned as the major barrier to VAPP law implementation in Plateau state.

Status	
 Sex Offenders' Register <ul style="list-style-type: none">• Register established and functional• Linked to national GBV database• Updated regularly.• Accessible to Law enforcement only.	Fully Operational
 Protection Orders <ul style="list-style-type: none">• Courts are authorized to issue orders• Number of orders issued in the past year is unavailable• Police Enforcement is inconsistent.	
 Mandatory Reporting <ul style="list-style-type: none">• VAPP Law mandates reporting.• Penalties exist for non-compliance.• Standardized protocols in place.	Fully Operational
 Legal Remedies <ul style="list-style-type: none">• Survivors have successfully obtained compensation or restitution through the provisions of the VAPP Law.• Number of cases prosecuted under VAPP Act in the past 12 months: more than 20 cases.	Fully Operational

RECOMMENDATIONS
<ul style="list-style-type: none">• Strengthen enforcement of Protection Orders by ensuring consistent police compliance and tracking issued orders.• Improve transparency of the Sex Offenders' Register by expanding controlled access beyond law enforcement to relevant justice and protection actors.





Plateau State | Support Service



Status	
<div>SARCs and Shelters<ul style="list-style-type: none">Only one fully functional government-run SARC existOne state-run shelter existActively receiving survivorsServices offered: Temporary housing, Feeding, Medical services, and Psycho-social counselling.</div>	Functional but limited
<div>Free Medical Assistance<ul style="list-style-type: none">Government facilities are mandated to provide free care. However, there are no facilities offering these services for free.Survivors face any cost-related barriers.Medical reports and forensic services are sometimes accessed for prosecution.</div>	
<div>Victims Support Fund<ul style="list-style-type: none">Funding sources: State budget.Services supported: Medical Services.</div>	Established and Operational

RECOMMENDATIONS

- Operationalize free medical care in government facilities to remove financial barriers for GBV survivors.
- Expand SARC and shelter services to include skills acquisition and legal aid for holistic survivor recovery.
- Diversify and strengthen funding for the Victims Support Fund to ensure sustainability and broader service coverage.

Status	
<div></div> <div>Regulatory Body<ul style="list-style-type: none">Formally designated body: Ministry of Women Affairs.Coordinator appointed for domestic violence prevention.Annual report: Submitted to government and National Bureau of StatisticsThere is a state coordination mechanism between the relevant MDAs.Protection Officers are appointed across LGAs.</div>	Established and Operational
<div></div> <div>Service Provider Registration<ul style="list-style-type: none">State-maintained register regularly updatedRegister NOT circulated to all relevant institutions (e.g., police stations, protection officers, and courts)Operational guidelines for accredited providers are in progress.</div>	Established but limited

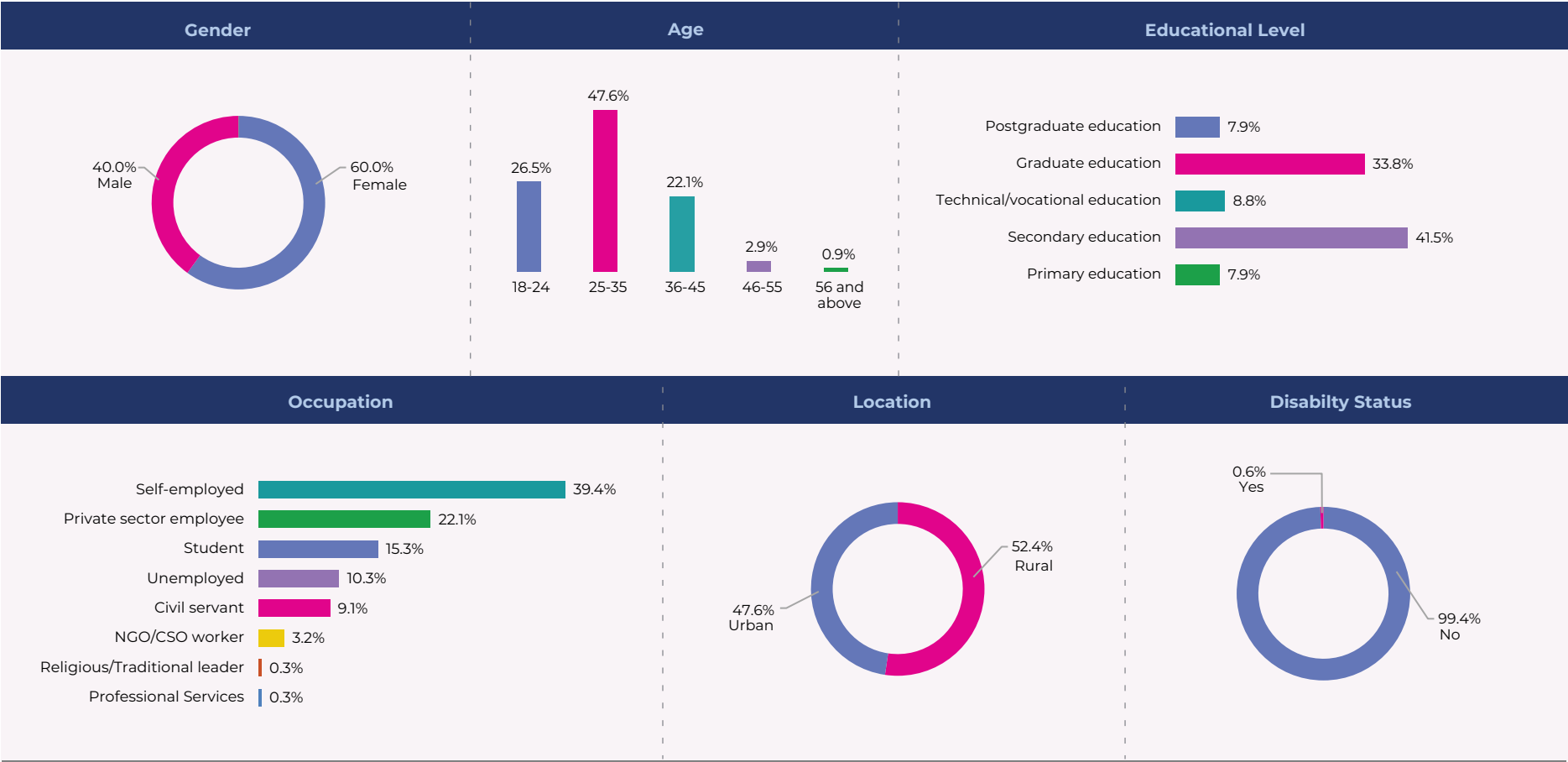
RECOMMENDATIONS
<ul style="list-style-type: none">Ensure wider dissemination of the service provider register to police stations, courts, and protection officers to strengthen referrals and collaboration.Finalize and enforce operational guidelines for accredited providers to standardize service delivery and improve accountability.Strengthen monitoring and reporting systems within the Ministry of Women Affairs to track the effectiveness of coordination mechanisms across LGAs.





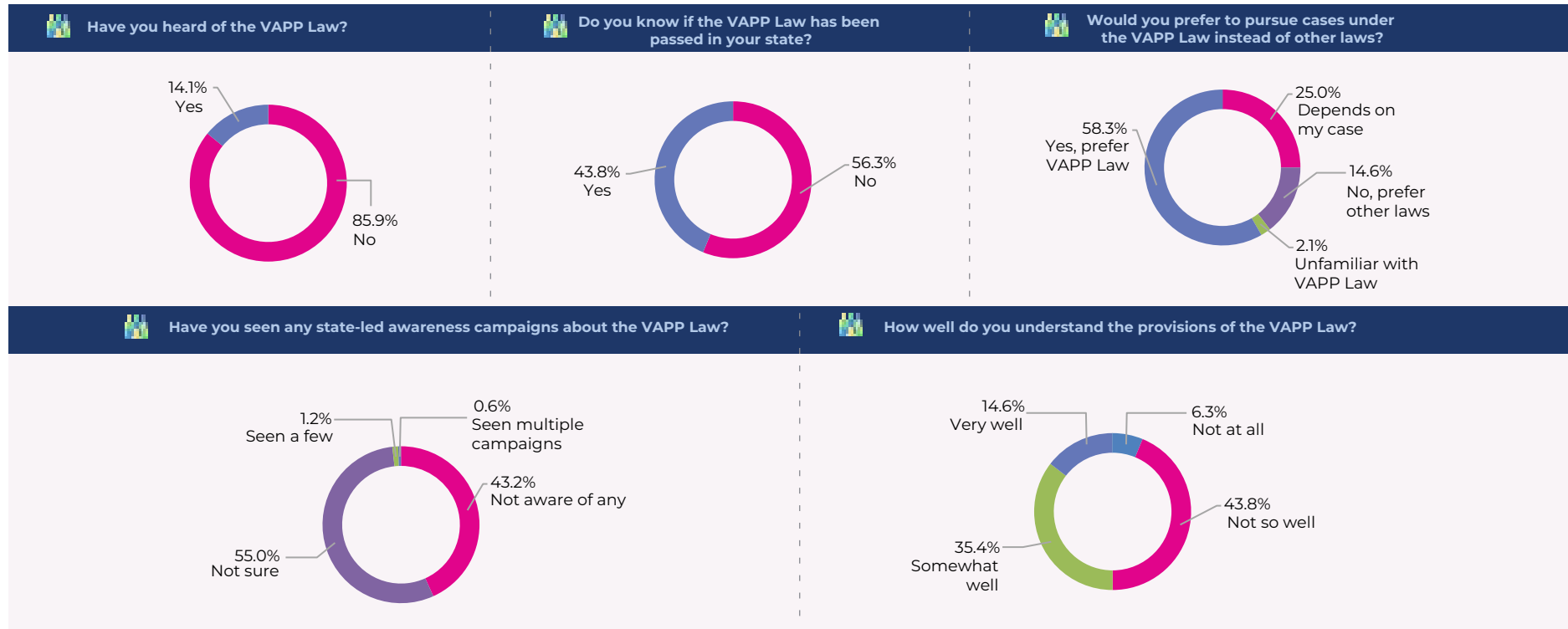
RIVERS STATE

Rivers State | Respondent Demographics (n = 340)



The respondent profile from Rivers state shows a diverse group with 60% females and 40% males, predominantly aged 25-35 (47.6%). Educational backgrounds vary, with 41.5% having secondary education and 33.8% holding graduate degrees. Occupations are diverse, including self-employed, private sector workers, students, and civil servants. Slightly over half (52.4%) reside in rural areas, while 47.6% live in urban areas, with a small percentage (0.6%) reporting disability.

Rivers State | Public Awareness



FINDINGS

- The state government has rolled out campaigns targeting schools, religious institutions, traditional leaders, market associations, transport unions, health workers, law enforcement agencies, and the general public.
- However, 85.9% of respondents have never heard of the VAPP Law.
- Among those aware, 56.3% are unsure if it has been passed in the state.
- Understanding of the law is poor, with only 14.6% understanding it very well.

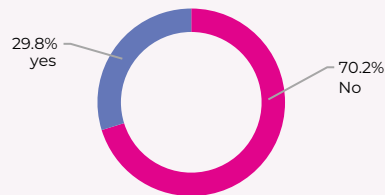
RECOMMENDATIONS

- Launch culturally sensitive, community-driven awareness campaigns using trusted local channels and influencers.
- Disseminate clear, accessible information on available legal, health, and social services under the VAPP Law.
- Intensify targeted outreach to bridge critical awareness and knowledge gaps, especially in underserved communities.

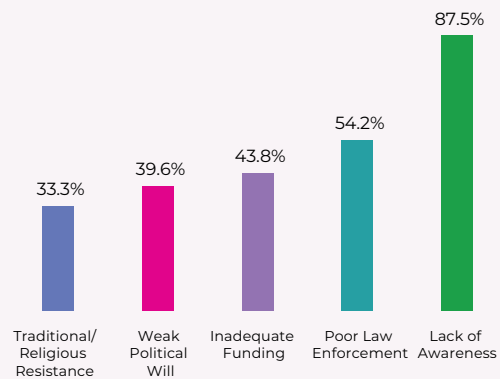
Rivers State | Enforcement Systems



Since the VAPP Law was domesticated in your state, do you think the state's overall response to gender-based violence (GBV) has improved?



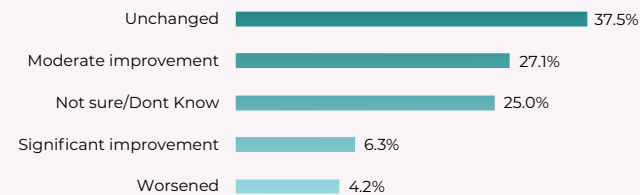
Which of the following do you think are the major barriers to implementing the VAPP Law in your state?



In your opinion, what has been the key impacts of the VAPP Law in your state and across Nigeria?





Since the VAPP Law was passed, do you think GBV survivors in your state have experienced better access to justice?



FINDINGS

- Only 29.8% of respondents think the state's response to GBV has improved.
- Specific impacts cited include stronger legal protections (27.1%) and better access to survivor-centered services (27.1%).
- Access to justice shows mixed perceptions: 27.1% report moderate progress, 25% are uncertain, and 7.5% say there has been no improvement.
- Major obstacles include weak enforcement capacity (87.5%), poor law enforcement practices, limited funding (43.8%), and lack of political will (39.6%).

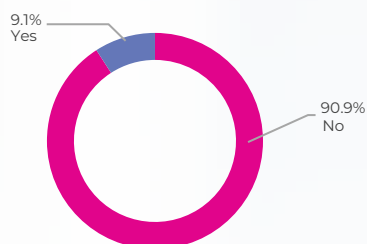
Status		
	Sex Offenders' Register <ul style="list-style-type: none">• Register established.• Not linked to national GBV database.• Not updated since creation.• Access limited to select authorities	Partially Operational
	Protection Orders <ul style="list-style-type: none">• Courts authorized to issue orders.• No data on the number of orders issued in the past 12 months.• Enforcement by police is inconsistent.	
	Mandatory Reporting <ul style="list-style-type: none">• Mandatory reporting provisions exist.• No penalties for non-compliance.• No standardized referral protocols.	Operational but limited
	Legal Remedies <ul style="list-style-type: none">• Legal aid and pro bono services available.• Survivors successfully obtained compensation/restitution.• Over 20 GBV cases prosecuted in past 12 months under VAPP.	Fully Operational
RECOMMENDATIONS		
<ul style="list-style-type: none">• Link and regularly update the Sex Offenders' Register within state and national GBV databases.• Strengthen mandatory reporting with penalties for non-compliance and introduce standardized referral protocols.• Improve enforcement capacity by equipping courts and training police/security agencies to track and enforce Protection Orders consistently.		



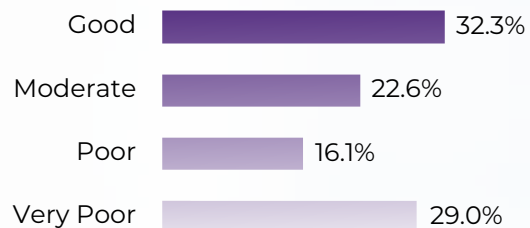
Rivers State | Support Service



Are you aware of any Sexual Assault Referral Centres (SARCs), shelters, or other protective services for GBV survivors in your state?



How would you rate the availability of survivor-centered services



Status



SARCs and Shelters

- One operational government-owned SARC exist
- Actively receiving survivors.
- Services offered: Temporary housing, feeding, psychosocial counselling, legal aid, medical care, skills acquisition/reintegration.

Functional but limited



Free Medical Assistance

- Government facilities are NOT mandated to provide free care.
- Only a few facilities currently offer free or partial services.
- Survivors face financial barriers for medical and forensic care.
- Access to medical reports and forensic evidence is inconsistent.

Not Available





Victims Support Fund

- No dedicated state fund in place
- Survivors lack structured financial safety nets
- Absence limits long-term rehabilitation and recovery options

Not Established

RECOMMENDATIONS

- Legally mandate free medical and forensic services in all public health facilities.
- Formally establish a Victims Support Fund to sustain rehabilitation and reintegration support.
- Expand and strengthen SARCs, coupled with community-based awareness campaigns to increase survivor access and service utilization.

Status	
<div><div>Regulatory Body<ul style="list-style-type: none">Formally designated body: Criminal Justice Monitoring Committee.State-level Coordinator for domestic violence prevention appointed.Annual reports not submitted to state/federal government or NBS.Protection Officers are not appointed across LGAs.</div></div>	Established
<div><div>Service Provider Registration<ul style="list-style-type: none">State-maintained register in place and regularly updated.Circulated to relevant actors (police stations, protection officers, courts).Operational guidelines developed to standardize provider practices.</div></div>	

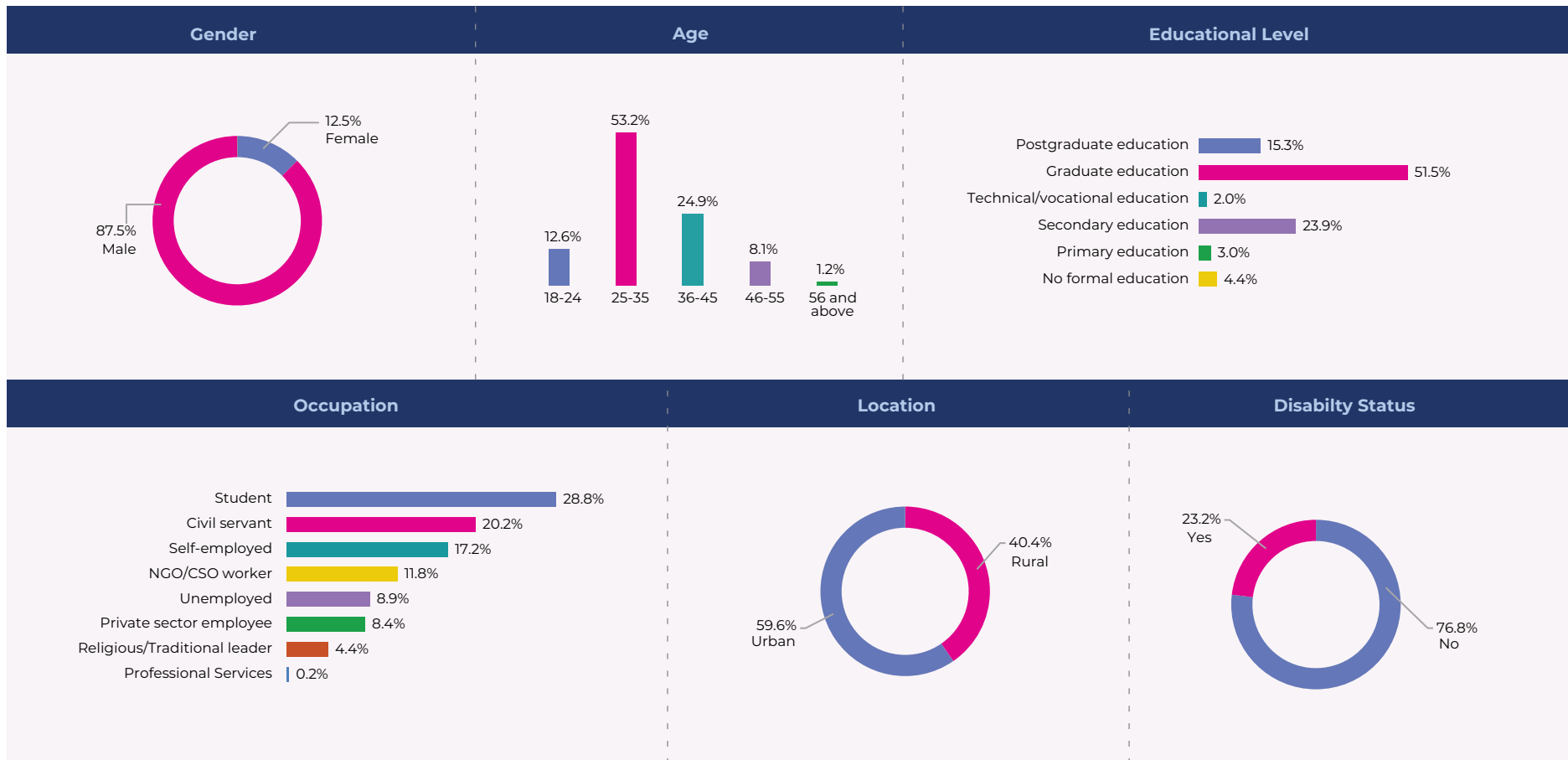
RECOMMENDATIONS
<ul style="list-style-type: none">Appoint and train Protection Officers across all LGAs to strengthen survivor protection and court processes.Mandate annual VAPP implementation reports by the Criminal Justice Monitoring Committee to improve accountability.Enhance inter-agency coordination and awareness campaigns to close gaps in service delivery and public trust.





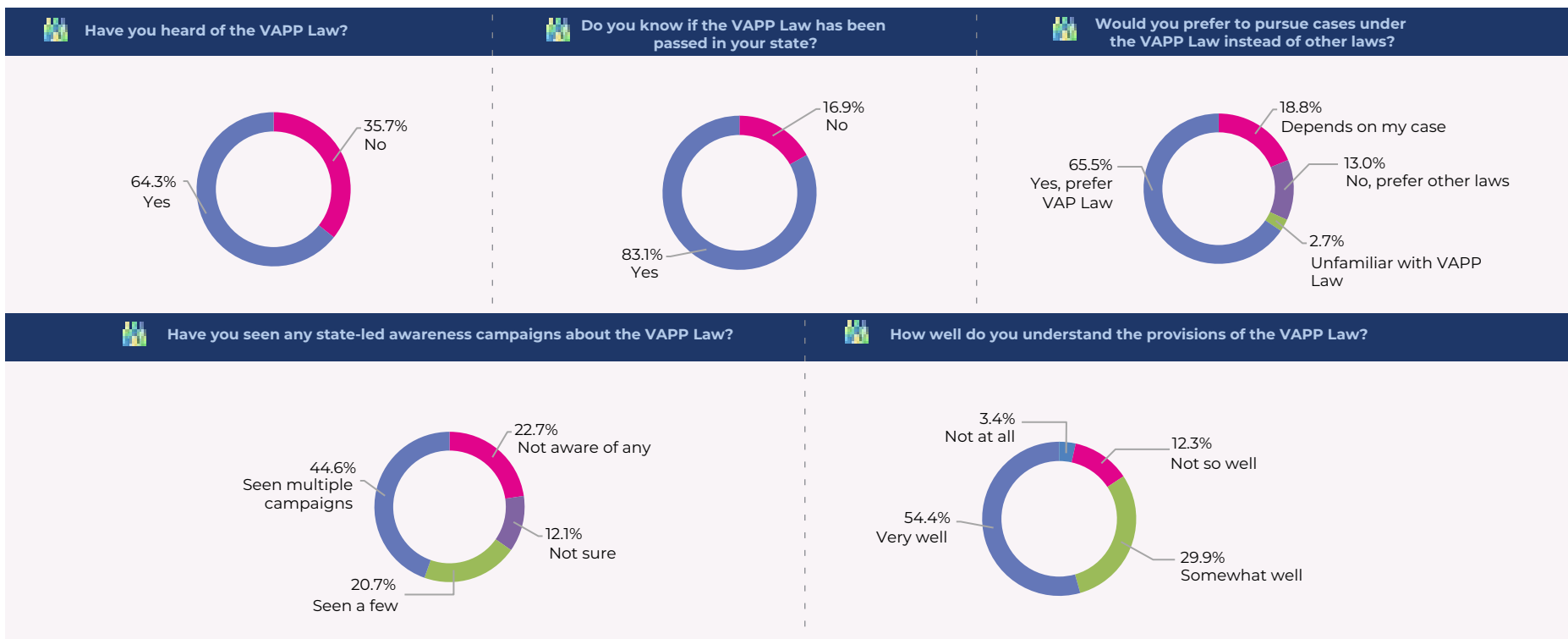
SOKOTO STATE

Sokoto State | Respondent Demographics (n = 201)



In Sokoto State, the respondent demographics show a predominantly male population (87.5%), with a youthful skew: 53.2% aged 25-35 and 24.9% aged 36-45. Educational levels are high, with 51.5% holding graduate degrees and 15.3% having postgraduate qualifications. Students (28.8%) and civil servants (20.2%) dominate occupational groups, while 59.6% reside in urban areas and 40.4% in rural areas. Notably, 23.2% of respondents report living with a disability.

Sokoto State | Public Awareness



FINDINGS

- The state government has implemented VAPP Law awareness initiatives, reaching traditional rulers and the public.
- 64.3% of respondents have heard of the VAPP Law, while 35.7% remain unaware.
- Only 44.6% have seen multiple campaigns, and 22.7% have seen none.
- Among those aware, 83.1% know the law has been passed in the state.
- 65.5% prefer to seek legal redress under the VAPP Law.

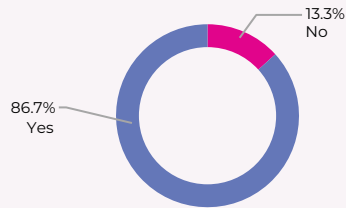
RECOMMENDATIONS

- Expand awareness campaigns to cover more groups, including religious institutions, market associations, and law enforcement.
- Intensify targeted education in rural areas.
- Use multiple communication channels (community meetings, local media, and social platforms) to reinforce public trust and the preference for the VAPP Law.

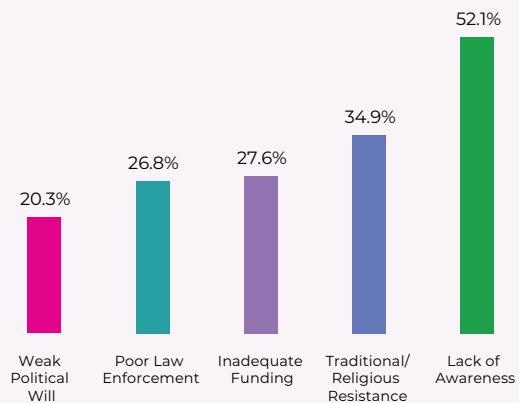
Sokoto State | Enforcement Systems



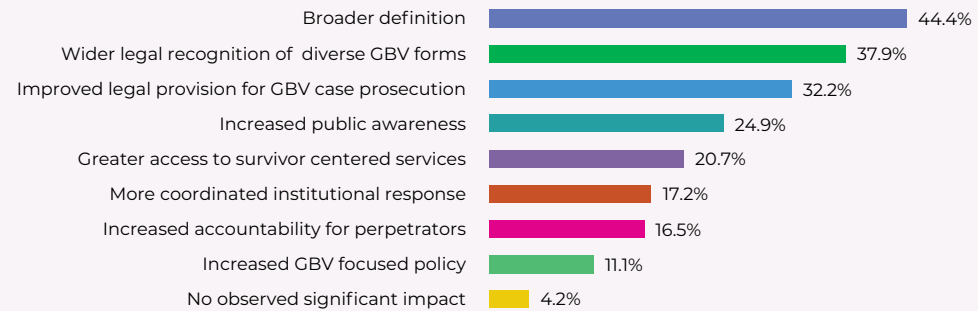
Since the VAPP Law was domesticated in your state, do you think the state's overall response to gender-based violence (GBV) has improved?



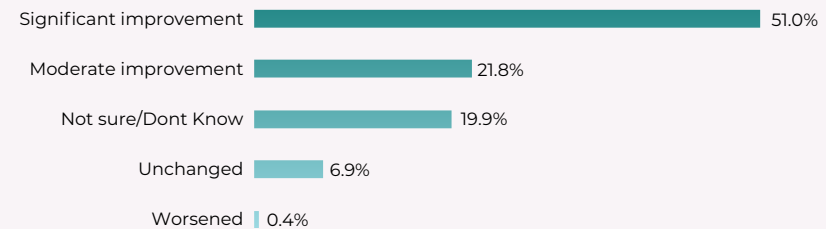
Which of the following do you think are the major barriers to implementing the VAPP Law in your state?



In your opinion, what has been the key impacts of the VAPP Law in your state and across Nigeria?







Since the VAPP Law was passed, do you think GBV survivors in your state have experienced better access to justice?



FINDINGS

- 86.7% of respondents believe Sokoto State's response to GBV has improved since the domestication of the VAPP Law, while 13.3% see no change.
- The most cited impacts include a broader definition of GBV (44.4%), wider legal recognition of diverse GBV forms (37.9%), and improved legal provision for GBV prosecution (32.2%).
- Access to justice shows progress, with 51.0% reporting significant improvement and 21.8% noting moderate improvement, though 19.9% remain unsure of its impact.
- Major challenges include lack of awareness (52.1%), traditional/religious resistance (34.9%), inadequate funding (27.6%), and poor law enforcement (26.8%).

Sokoto State | Enforcement Systems

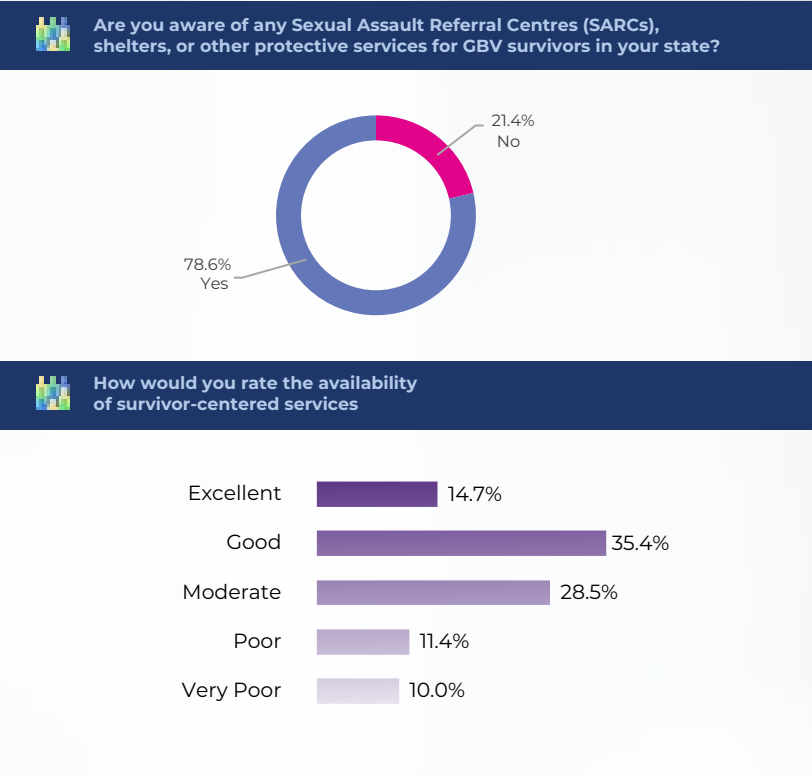
Status	
 Sex Offenders' Register <ul style="list-style-type: none"> No Register created in Sokoto State. Not linked to state or national GBV databases. No updates or tracking of convicted offenders. Survivor protection and accountability limited. 	<p>Not Established</p> <p>Not Operational</p> <p>Not Operational</p> <p>Established but limited</p>
 Protection Orders <ul style="list-style-type: none"> Courts lack authorization to issue Protection Orders. No Protection Orders issued in the past 12 months. No evidence of police or security enforcement. Survivors remain unprotected from repeat abuse. 	
 Mandatory Reporting <ul style="list-style-type: none"> VAPP Law mandates reporting by health, education, and social welfare professionals. Standardized referral protocols exist. No penalties for non-compliance, risking weak enforcement. Compliance remains inconsistent. 	
 Legal Remedies <ul style="list-style-type: none"> Legal aid providers and pro-bono lawyers available Survivors have secured compensation and restitution Over 20 GBV cases prosecuted under the VAPP Law in the past year 	




RECOMMENDATIONS

- Establish a Sex Offenders' Register and integrate it with state and national GBV databases for real-time tracking.
- Authorize courts to issue and enforce Protection Orders, supported by police monitoring protocols.
- Introduce penalties for non-compliance with mandatory reporting to strengthen survivor protection and accountability.





Sokoto State | Support Service



Status	
<div>SARCs and Shelters<ul style="list-style-type: none">One functional government-owned SARC existState-owned shelters are non-functionalServices offered: medical, legal, and social services.</div>	Functional but limited
<div>Free Medical Assistance<ul style="list-style-type: none">No legal provision mandating free medical care in government facilities.Survivors face cost-related barriers to treatment.Inconsistent access to medical reports and forensic services.</div>	
<div>Victims Support Fund<ul style="list-style-type: none">No Victims Support Fund in place.Survivors lack financial resources for medical, legal, and psychosocial support.Gaps in recovery and reintegration persist.</div>	Not Established

RECOMMENDATIONS

- Mandate free medical care and forensic services for GBV survivors in government facilities.
- Establish a Victims Support Fund to finance medical, legal, psychosocial, and reintegration services.
- Strengthen systemic response through training for healthcare providers and improved survivor-centered service delivery.

		Status
 <p>Regulatory Body</p> <ul style="list-style-type: none"> Formally designated body: GBV Response Committee. Coordinator appointed for domestic violence prevention. Annual reports: Not regularly submitted, limiting transparency and accountability. A state coordination mechanism between relevant MDAs is in place. No Protection Officers appointed in Area Councils/LGAs. 		Established but limited
 <p>Service Provider Registration</p> <ul style="list-style-type: none"> No registration or accreditation system in place. Operational guidelines for accredited providers are not available. 		

RECOMMENDATIONS

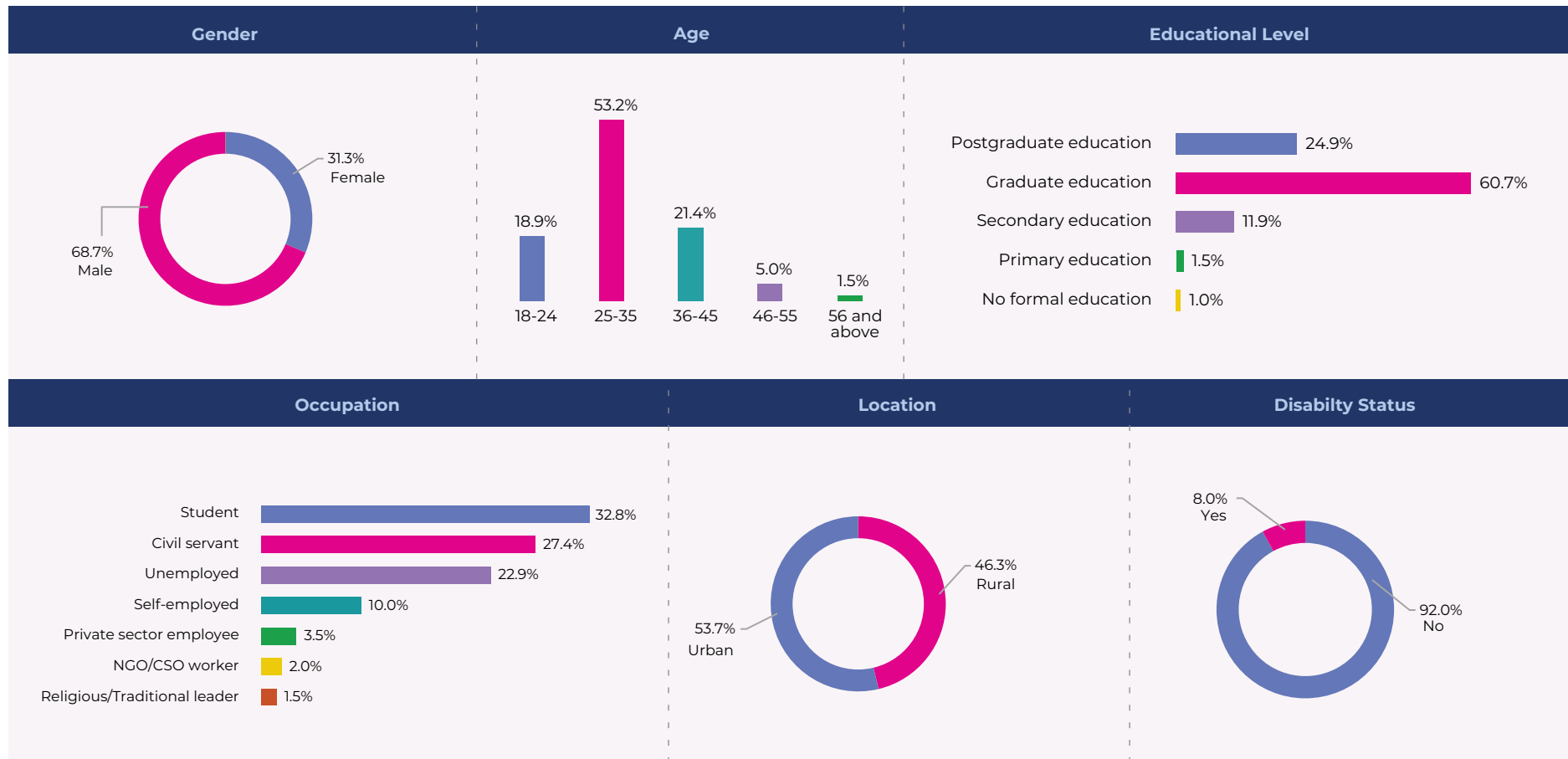
- Institutionalize regular annual reporting to improve transparency, monitoring, and accountability.
- Appoint Protection Officers in all LGAs/Area Councils to strengthen enforcement and localized survivor support.
- Establish a service provider registration and accreditation system to ensure standardization, trust, and better coordination.





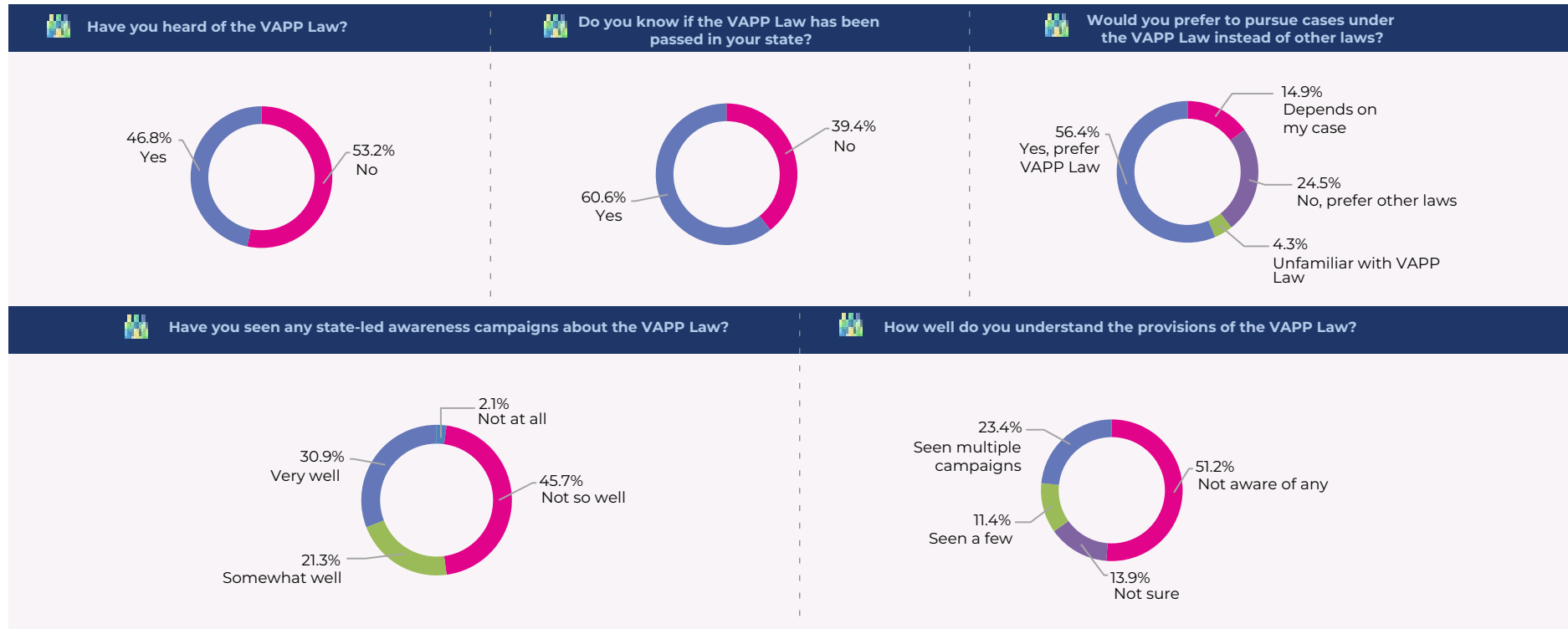
TARABA STATE

Taraba State | Respondent Demographics (n = 201)



The survey population is highly educated (85.6% with graduate education) and fairly distributed between urban (53.7%) and rural areas. Males dominate (68.7%), with young adults aged 25-35 (53.2%) and 36-45 (21.4%) making up the majority. The sample consists of students (32.8%), civil servants (27.4%), unemployed individuals (22.9%), and self-employed (10%), with 8% identifying as persons with disabilities.

Taraba State | Public Awareness



FINDINGS

- In the past year, VAPP Law awareness campaigns in Taraba State focused exclusively on religious institutions, leaving out schools, health facilities, law enforcement, and the broader public.
- 46.8% of respondents are aware of the VAPP Law, while a slight majority (53.2%) remain unaware.
- Only 11.4% recall few campaigns, 23.4% report multiple exposures, while 51.2% have never seen any campaigns.
- Among those aware, 60.6% know it has been passed in the state, but knowledge depth and clarity remain low.

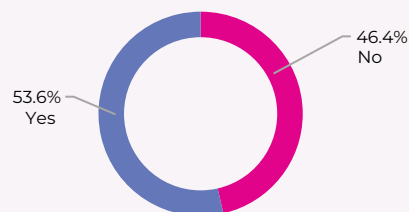
RECOMMENDATIONS

- Expand outreach beyond religious groups to include schools, healthcare facilities, markets, youth groups, and law enforcement agencies.
- Use simple, multilingual formats (brochures, posters, radio jingles, digital media) to deepen understanding of the law's provisions.
- Conduct regular state-wide campaigns with monitoring and evaluation to track progress and refine strategies.

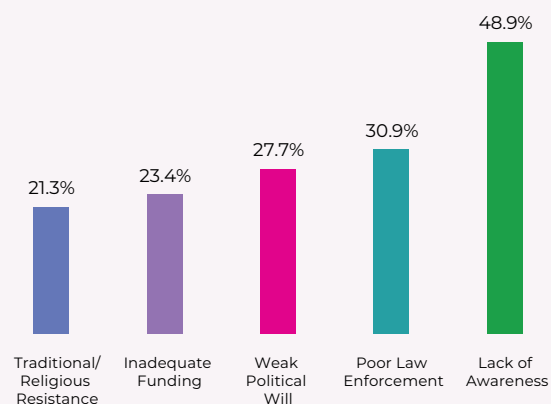
Taraba State | Enforcement Systems



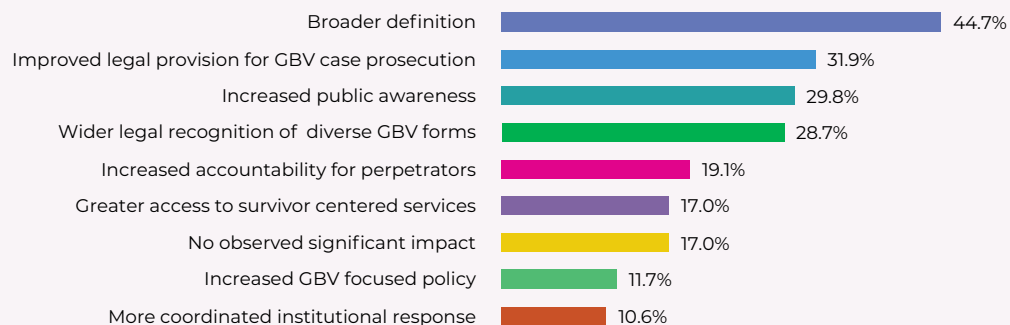
Since the VAPP Law was domesticated in your state, do you think the state's overall response to gender-based violence (GBV) has improved?



Which of the following do you think are the major barriers to implementing the VAPP Law in your state?



In your opinion, what has been the key impacts of the VAPP Law in your state and across Nigeria?



Since the VAPP Law was passed, do you think GBV survivors in your state have experienced better access to justice?



FINDINGS

- 53.6% of respondents think Taraba's response to GBV has improved since adopting the VAPP Law.
- Access to justice remains weak: only 16.0% report significant improvement, and 28.7% moderate improvement.
- Recognized impacts include broader definitions of rape/sexual offenses (44.7%), improved prosecution provisions (31.9%), and increased awareness (29.8%).
- Major barriers include lack of awareness (48.9%), poor enforcement (30.9%), weak political will (27.7%), inadequate funding (23.4%), and cultural/religious resistance (21.3%).

Taraba State | Enforcement Systems

Status	
 Sex Offenders' Register <ul style="list-style-type: none"> No register in place. Not linked to national GBV database. No updates or public access mechanisms. 	Not Established
 Protection Orders <ul style="list-style-type: none"> Courts are not empowered to issue orders. No orders have been issued in the past year. Police lack enforceable instruments. 	
 Mandatory Reporting <ul style="list-style-type: none"> No legal obligation for professionals in health, education, or social welfare sectors. No penalties for failure to report. No standardized referral or reporting protocols. 	
 Legal Remedies <ul style="list-style-type: none"> Legal aid is available but limited and underutilized. Survivors did not access compensation or restitution. Only 1–5 GBV cases have been prosecuted under the VAPP Law in the past year. 	

RECOMMENDATIONS

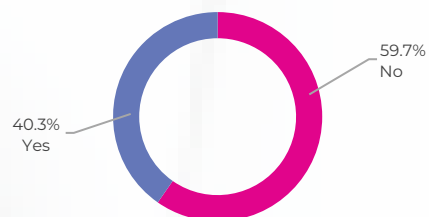
- Establish a Sex Offenders' Register linked to national databases and accessible for monitoring repeat offenders.
- Empower courts to issue and enforce Protection Orders to safeguard survivors.
- Mandate reporting and referral protocols for health, education, and welfare professionals, with clear penalties for non-compliance.



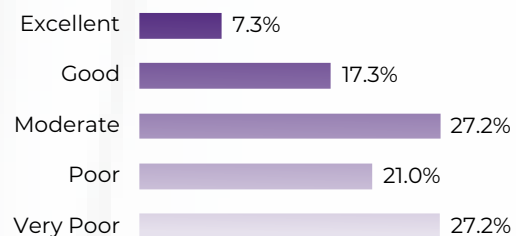
Taraba State | Support Service



Are you aware of any Sexual Assault Referral Centres (SARCs), shelters, or other protective services for GBV survivors in your state?



How would you rate the availability of survivor-centered services



Status



SARCs and Shelters

- One government-run SARC exist
- Operational capacity limited by funding constraint

Available but non-functional



Free Medical Assistance

- Government health facilities are not mandated to provide free medical or forensic services.
- Survivors face financial barriers when seeking medical reports or forensic evidence for prosecution.
- No standardized protocols for evidence collection.

Not Available





Victims Support Fund

- No dedicated fund to cover survivor medical treatment, legal aid, psychosocial support, or rehabilitation.
- Survivors did not access compensation or restitution in the past year.
- Only 1–5 GBV cases were prosecuted under the VAPP Law.

Not Established

RECOMMENDATIONS

- Establish SARCs and shelters to provide immediate medical, legal, psychosocial, and safe housing support.
- Mandate free medical and forensic services in government health facilities, with dedicated funding.
- Create a Victims Support Fund with sustainable financing to cover survivor services and rehabilitation.

Status	
<div><ul style="list-style-type: none">No formally designated body to coordinate VAPP Law enforcement.No Coordinator appointed for domestic violence prevention.Annual implementation reports are not submitted to the state or federal government.No state-level coordination mechanism across MDAs.No Protection Officers appointed in any LGA.</div>	Not Established
<div><ul style="list-style-type: none">No system for registering or accrediting GBV service providers.No state-maintained register to guide law enforcement, courts, or service providers.No operational guidelines in place, leading to unregulated and inconsistent service delivery.</div>	Not Established

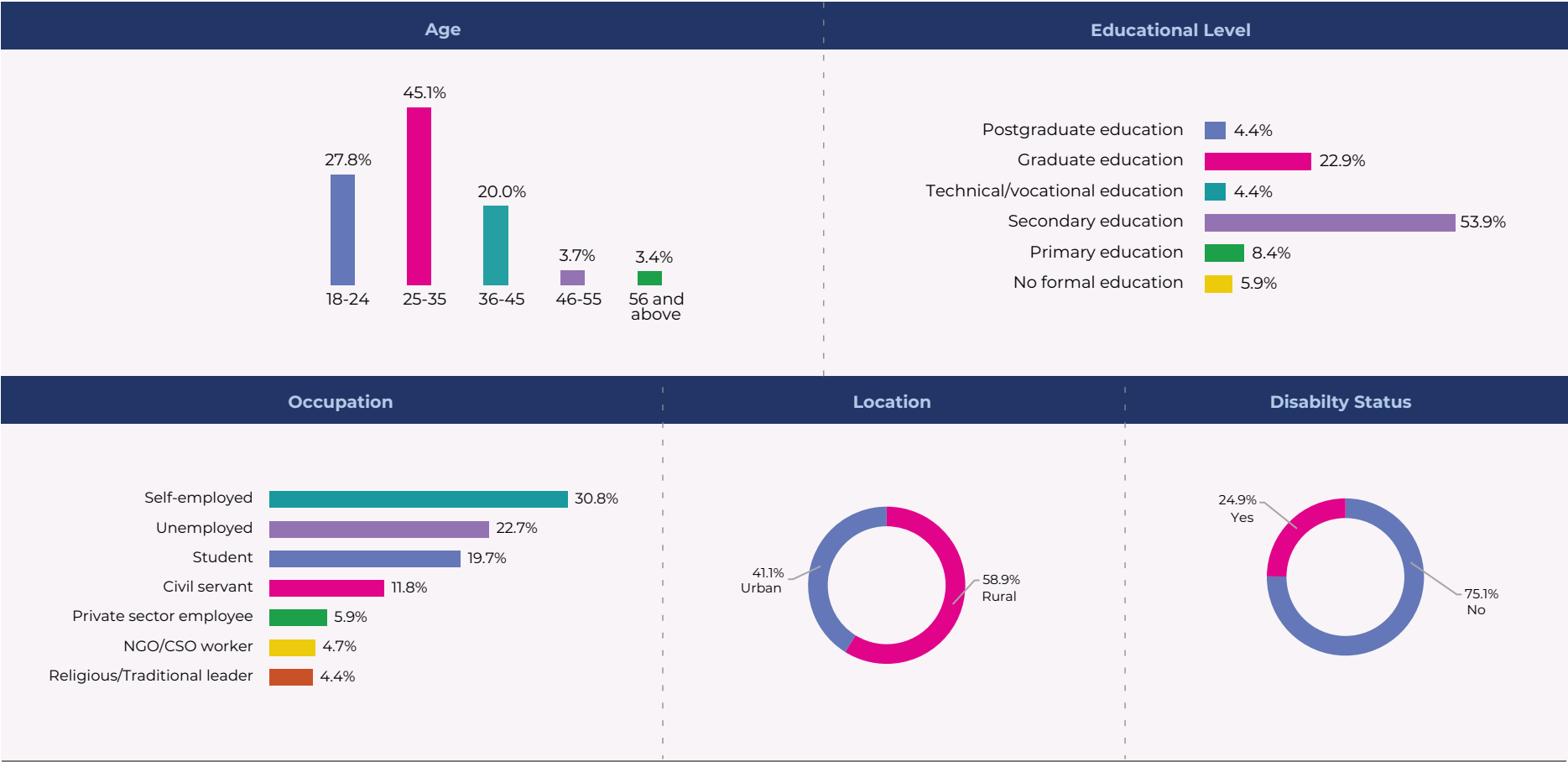
RECOMMENDATIONS
<ul style="list-style-type: none">Establish a regulatory body and state-level coordination mechanism, with a Coordinator to oversee VAPP Law enforcement.Appoint Protection Officers in all LGAs to strengthen survivor support and court linkages.Develop and maintain a register of accredited service providers, with clear operational guidelines to standardize service delivery.





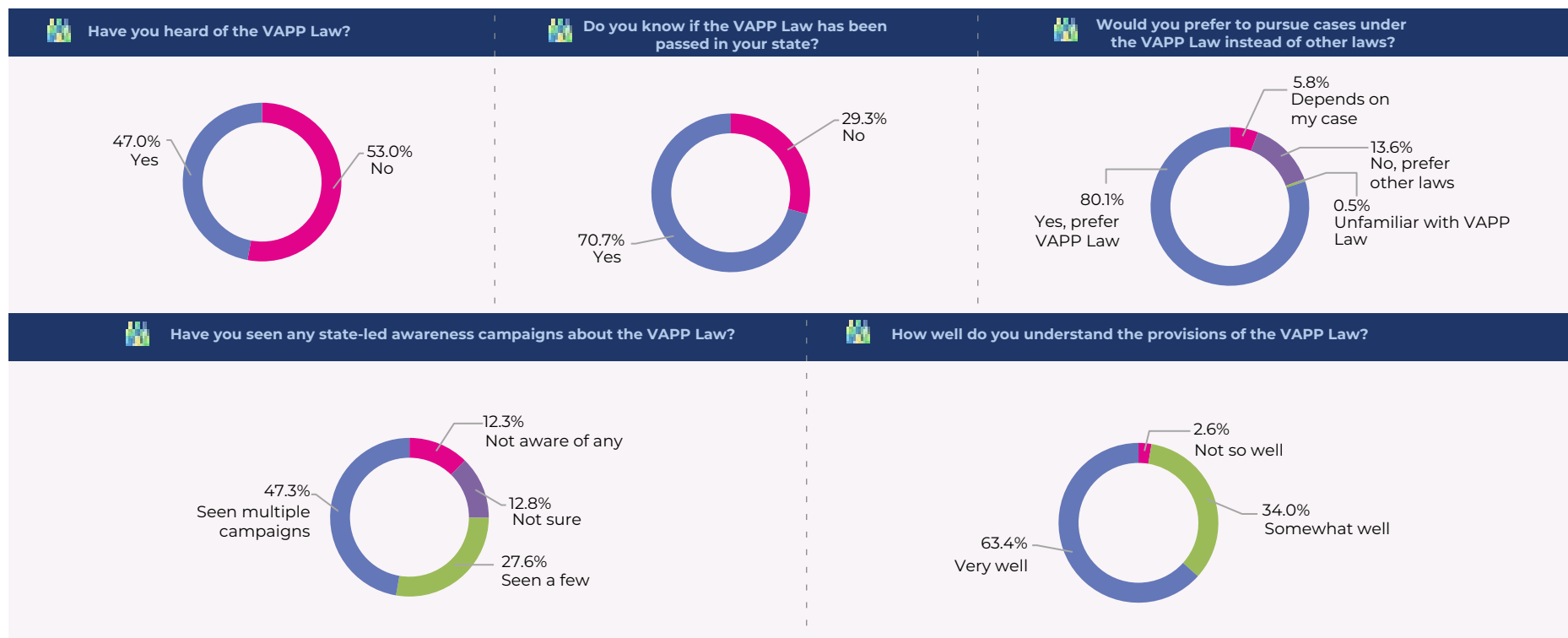
YOBE STATE

Yobe State | Respondent Demographics (n = 406)



The respondent profile is predominantly rural (58.9%) with the largest age group being 25-35 years (45.1%). Educational attainment shows 53.9% with secondary education and 27.3% with graduate-level education. The sample is occupationally diverse, with self-employed individuals (30.8%), unemployed (22.7%), and students (19.7%) being prominent. Notably, 24.9% of respondents identify as persons with disabilities, indicating significant inclusivity.

Yobe State | Public Awareness



FINDINGS

- Yobe State has implemented awareness and sensitization campaigns on the VAPP Law, engaging religious leaders, traditional rulers, and the general public.
- Awareness of the VAPP Law remains modest, with 47.0% of respondents aware of the law, while 53.0% remain unaware.
- Among those aware, 63.4% report strong understanding of the law's provisions, and 80.1% prefer pursuing cases under the VAPP Law, showing high trust in its application.

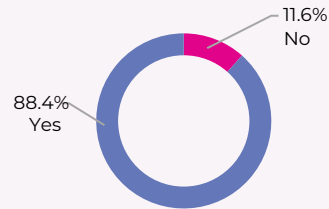
RECOMMENDATIONS

- Expand outreach to professional sectors such as teachers, healthcare workers, and law enforcement.
- Ensure training for police, courts, and legal practitioners so public trust in the VAPP Law translates into effective justice.

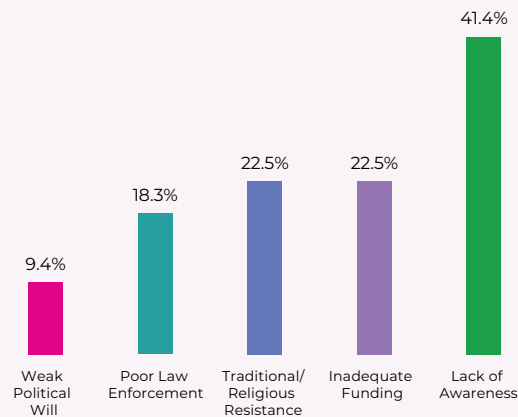
Yobe State | Enforcement Systems



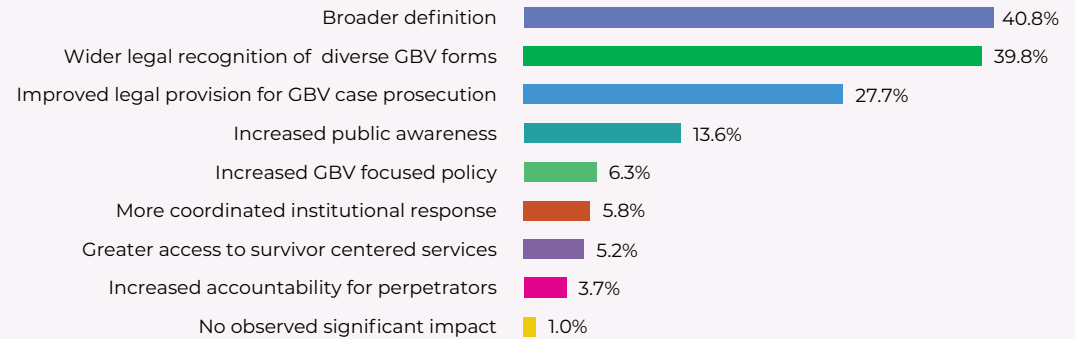
Since the VAPP Law was domesticated in your state, do you think the state's overall response to gender-based violence (GBV) has improved?



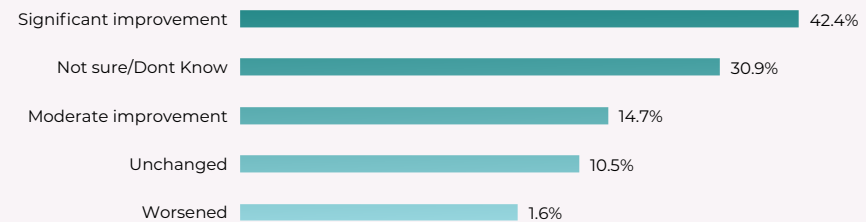
Which of the following do you think are the major barriers to implementing the VAPP Law in your state?



In your opinion, what has been the key impacts of the VAPP Law in your state and across Nigeria?



Since the VAPP Law was passed, do you think GBV survivors in your state have experienced better access to justice?



FINDINGS

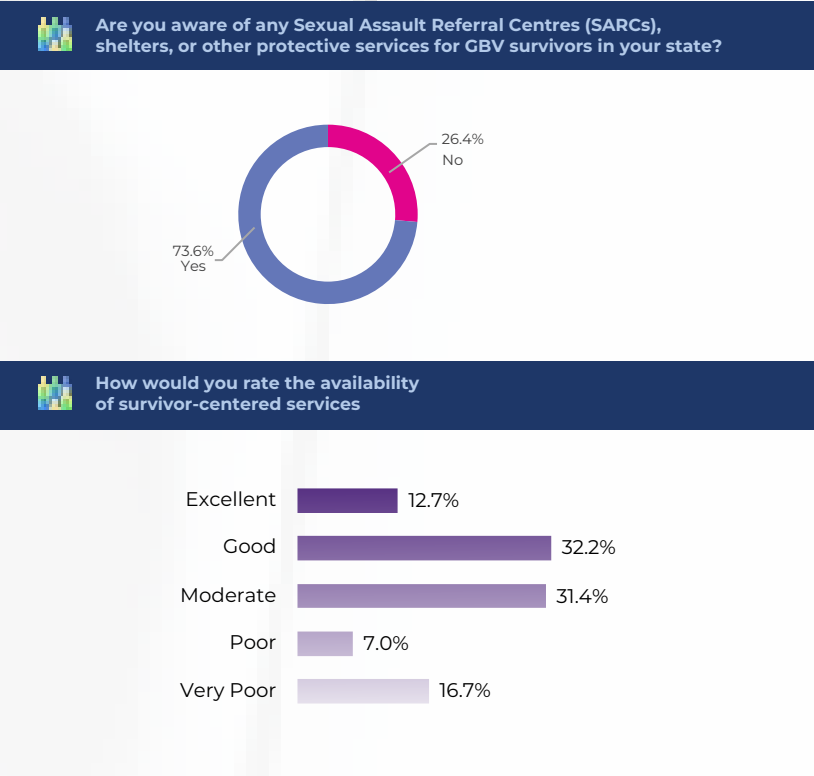
- 88.4% of respondents believe Yobe State's response to GBV has improved since adopting the VAPP Law, while 11.6% see no change.
- The most cited impacts include a broader definition of rape and sexual offenses (40.8%), wider legal recognition of diverse GBV forms (39.8%), and stronger provisions for prosecuting GBV cases (27.7%).
- Access to justice perceptions show 42.4% report significant improvement, 14.7% moderate improvement, while 30.9% remain uncertain and 10.5% see no change.
- Major challenges include lack of awareness (41.4%), traditional/religious resistance and inadequate funding (22.5% each), poor enforcement (18.3%), and weak political will (9.4%).




Yobe State | Enforcement Systems

		Status
 Sex Offenders' Register <ul style="list-style-type: none"> • Register established but not updated. • Not linked to databases. • Not accessible to the public or authorities. 		Operational but limited
 Protection Orders <ul style="list-style-type: none"> • Courts authorized to issue orders • Enforcement by police and security agencies is inconsistent. 		Operational but limited
 Mandatory Reporting <ul style="list-style-type: none"> • VAPP Law mandates reporting. • Penalties exist for non-compliance. • Standardized protocols in place. 		Fully Operational
 Legal Remedies <ul style="list-style-type: none"> • Legal aid and pro bono lawyers available. • No survivors received compensation or restitution in the past year. • Number of cases prosecuted under VAPP Law in the past 12 months: 11–20. 		Fully Operational
RECOMMENDATIONS		
<ul style="list-style-type: none"> • Update and maintain the Sex Offenders' Register, linking it to state and national GBV databases. • Strengthen enforcement of Protection Orders by police through training and clear operational guidelines. • Ensure survivor remedies by implementing compensation and restitution provisions and scaling up prosecutions under the VAPP Law. 		





Yobe State | Support Service



Status	
 SARCs and Shelters <ul style="list-style-type: none">Government-funded SARCs : 6 and 1 shelter are available.Actively receiving survivors.Services offered: Temporary housing, Psychosocial counselling, and medical services.	Functional
	Available
 Free Medical Assistance <ul style="list-style-type: none">Government facilities are mandated to provide free care.Survivors still face cost-related barriers for medical reports and forensic services.Limited access to forensic evidence undermines prosecution.	
 Victims Support Fund <ul style="list-style-type: none">Funding sources: State budget, donor/partner support, and private sector contributions.Fund has supported services in the past year, but no specific services identified.Operational guidelines and disbursement processes remain unclear.	Established

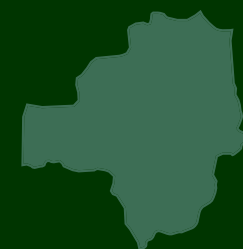
RECOMMENDATIONS

- Expand SARC and shelter capacity while standardizing access to psychosocial, medical, and housing support.
- Cover costs of medical reports and forensic services to remove barriers that hinder prosecution.
- Strengthen the Victims Support Fund with clear guidelines, transparent disbursement, and targeted use for survivor services.

Status	
<div></div> <div>Regulatory Body<ul style="list-style-type: none">Formally designated body: Ministry of Justice.Coordinator appointed for domestic violence prevention.Annual report: Not submitted to state, federal authorities, or the National Bureau of Statistics.There is a state coordination mechanism between relevant MDAs.Protection Officers have not been appointed across all LGAs.</div>	Partially Operational
<div></div> <div>Service Provider Registration<ul style="list-style-type: none">State-maintained register exists and is regularly updated.The register has not been circulated to police stations, courts, or Protection Officers.Operational guidelines for accredited providers are in progress but not finalized.</div>	Established

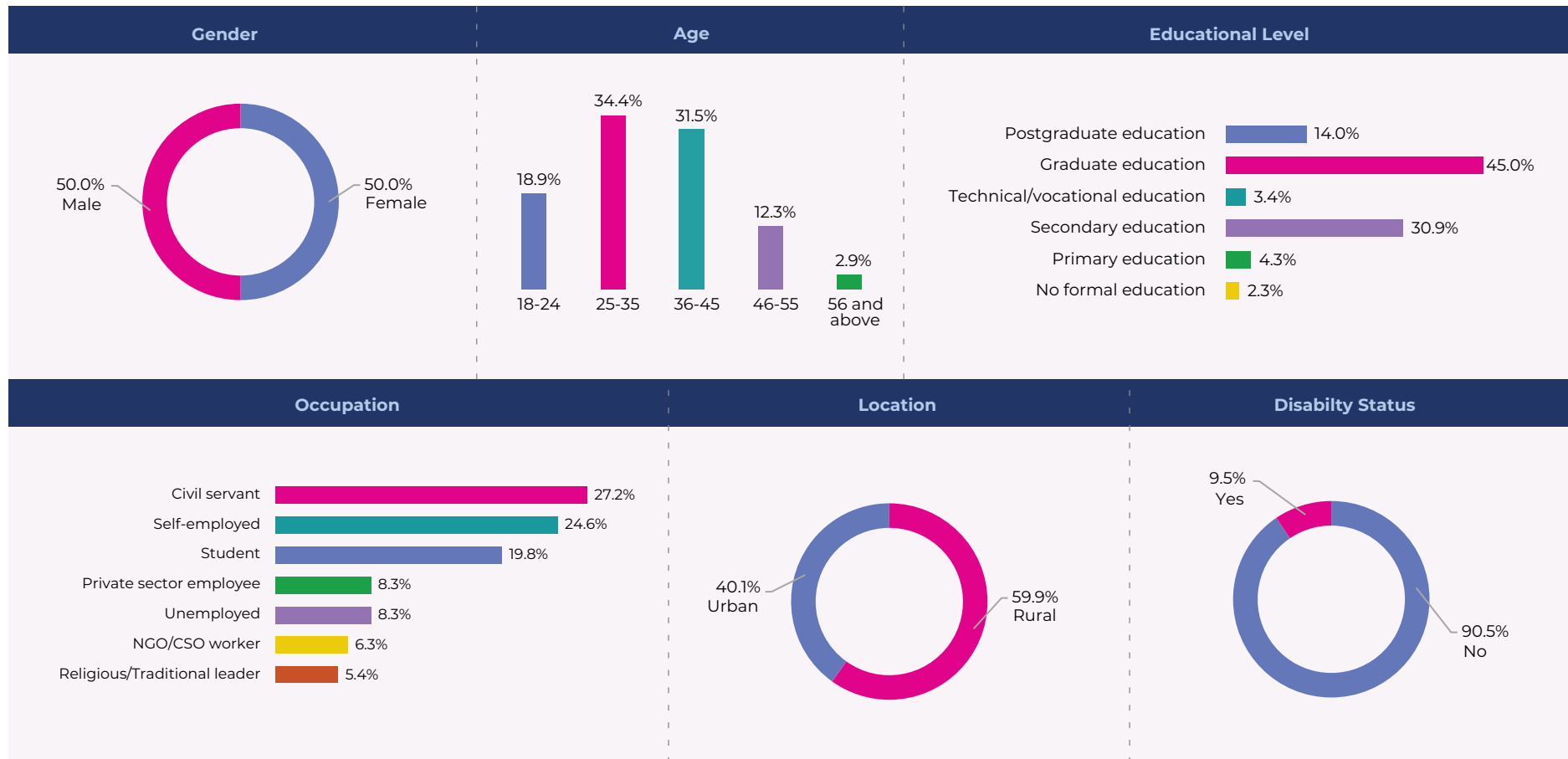
RECOMMENDATIONS
<ul style="list-style-type: none">Ensure the Coordinator submits annual reports to state, federal authorities, and the NBS to strengthen accountability.Appoint Protection Officers in all LGAs to localize enforcement and support GBV case handling.Circulate the register of accredited service providers to relevant institutions and finalize operational guidelines to standardize practices.





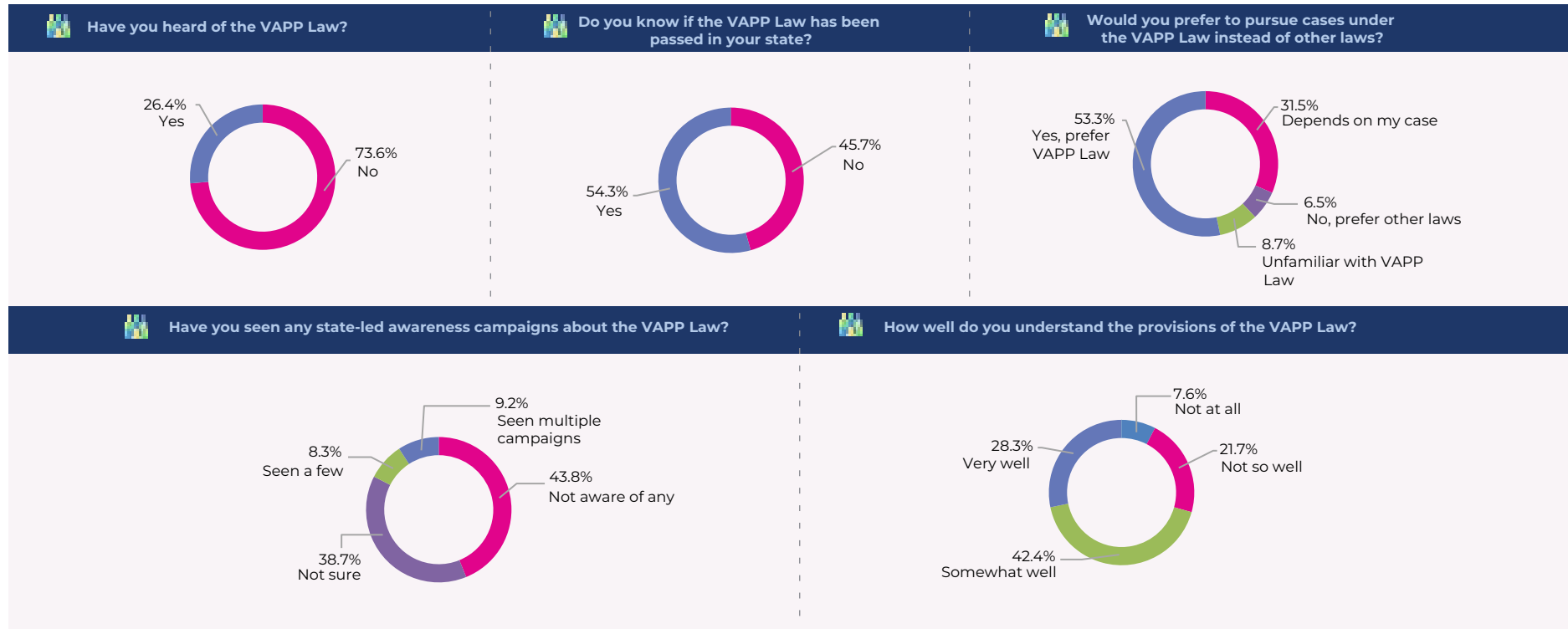
ZAMFARA STATE

Zamfara State | Respondent Demographics (n = 309)



The demographic profile of respondents is largely rural (59.9%), with a youthful population dominated by young adults aged 25-35 (34.4%) and 18-24 (18.9%). Most have completed graduate education (45%), while 30.9% hold secondary qualifications. The largest occupational groups are civil servants (27.2%), self-employed (24.6%), and students (19.7%), with 19.8% being civil servants. Notably, 9.5% of respondents identify as persons with disabilities.

Zamfara State | Public Awareness



FINDINGS

- Awareness campaigns is generally low.
- 26.4% of respondents in Zamfara State have heard of the VAPP Law, while 73.6% remain unaware.
- Among those aware of the law, 28.3% report strong understanding of its provisions, while 42.4% have some understanding and 29.3% have limited knowledge or do not understand it completely.
- 53.3% prefer pursuing cases under the VAPP Law compared to 6.5% preferring other laws and 31.5% depending on the case.

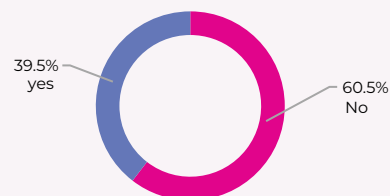
RECOMMENDATIONS

- Tailor awareness campaigns to specific groups—schools for prevention, traditional/religious leaders for advocacy, and law enforcement for enforcement guidance.
- Expand outreach beyond urban centers to rural and hard-to-reach communities to reduce the awareness gap.
- Train legal practitioners, judges, and police to match strong public preference for the VAPP Law with consistent application in prosecutions.

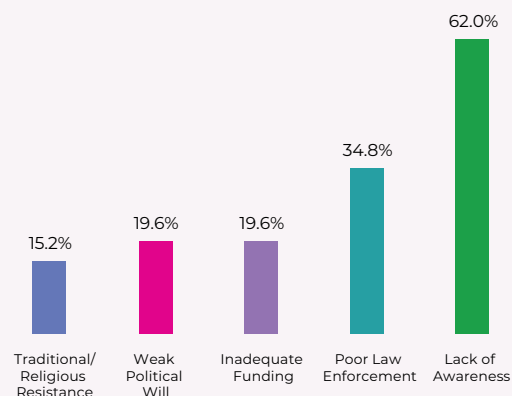
Zamfara State | Enforcement Systems



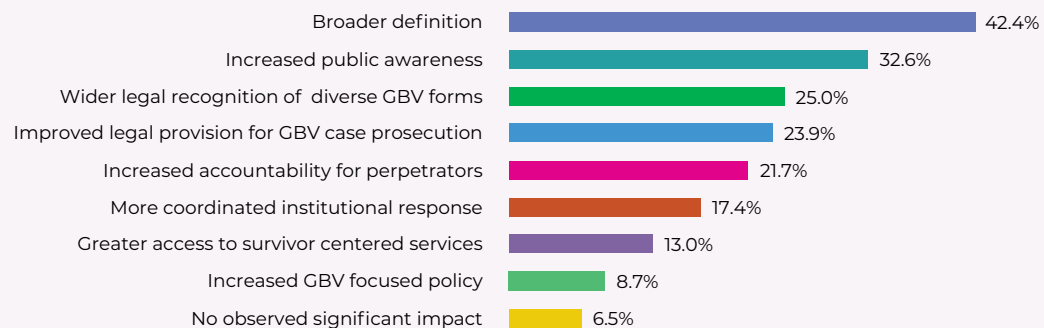
Since the VAPP Law was domesticated in your state, do you think the state's overall response to gender-based violence (GBV) has improved?



Which of the following do you think are the major barriers to implementing the VAPP Law in your state?



In your opinion, what has been the key impacts of the VAPP Law in your state and across Nigeria?



Since the VAPP Law was passed, do you think GBV survivors in your state have experienced better access to justice?



FINDINGS

- 39.5% of respondents think Zamfara State's response to GBV has improved since the domestication of the VAPP Law, while 60.5% report no change.
- Access to justice perceptions show 42.4% report significant progress, 14.7% moderate progress, 30.9% remain unsure, 10.5% see no change, and 1.6% believe it has worsened.
- The most cited impacts include a broader definition of GBV (40.8%), wider legal recognition of diverse GBV forms (39.8%), and improved legal provisions for prosecution (27.7%).
- Major challenges include lack of awareness (62%), poor law enforcement (34.8%), inadequate funding (19.6%), Traditional/Religious resistance (15.2%), and weak political will (19.6%).

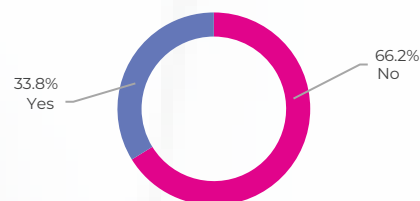
		Status
	Sex Offenders' Register <ul style="list-style-type: none">• Register established and updated quarterly.• Publicly accessible.• Not linked to state or national GBV databases.	Operational
	Protection Orders <ul style="list-style-type: none">• Courts authorized to issue orders.• Between 6–10 issued in the past year.• Police enforcement is in place.	Operational
	Mandatory Reporting <ul style="list-style-type: none">• Legal mandate across health, education, and social welfare sectors.• Penalties exist for non-compliance.• Standardized referral and reporting protocols in use.	Fully Operational
	Legal Remedies <ul style="list-style-type: none">• Access to legal aid and pro bono services available.• Only 1–5 survivors obtained compensation/restitution in the past year.• Between 6–10 cases prosecuted using the VAPP Law.	Fully Operational
RECOMMENDATIONS		
<ul style="list-style-type: none">• Link the Sex Offenders' Register to state and national GBV databases for stronger coordination.• Strengthen survivor support and enforcement so that legal remedies translate into real access to justice.		



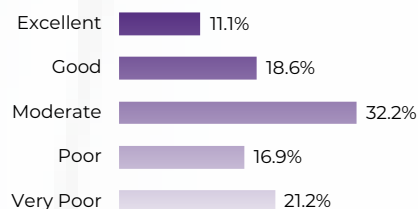
Zamfara State | Support Service



Are you aware of any Sexual Assault Referral Centres (SARCs), shelters, or other protective services for GBV survivors in your state?



How would you rate the availability of survivor-centered services



Status

SARCs and Shelters



- One government-funded SARC exist
- Actively receiving survivors.
- No state-run shelter exist
- Services offered: Medical, forensic, counselling, referral services, and skills acquisition for reintegration.

Functional but limited

Free Medical Assistance



- Government facilities are mandated to provide free medical care.
- Some survivors still face cost-related barriers in accessing medical and forensic services.
- Medical reports and forensic services are being accessed for prosecutions.

Not Available

Victims Support Fund





- Funded through the state budget.
- Supports legal aid, medical services, psychosocial support, shelter, and rehabilitation (skills acquisition and education).
- Active in disbursing resources, though sustainability remains a challenge.

Established and Operational

RECOMMENDATIONS

- Eliminate hidden cost barriers to ensure free medical and forensic services are fully accessible.
- Secure long-term, sustainable funding mechanisms for the Victims Support Fund to guarantee continuity.
- Expand outreach and improve service quality to rebuild trust and increase survivor confidence in SARCs and shelters.

Status	
<div></div> <div>Regulatory Body<ul style="list-style-type: none">Formally designated body: Ministry of Women Affairs.Coordinator appointed for domestic violence prevention.Annual reports submitted to the state government and the National Bureau of Statistics.There is a state coordination mechanism between relevant MDAs (Women Affairs, Justice, Health, Information, Education, and Finance).Protection Officers appointed across all LGAs.</div>	Established and Operational
<div></div> <div>Service Provider Registration<ul style="list-style-type: none">State-maintained register regularly updated.Register circulated to relevant institutions (police stations, Protection Officers, and courts).Operational guidelines developed for accredited providers, promoting accountability and standardization.</div>	

RECOMMENDATIONS
<ul style="list-style-type: none">Strengthen monitoring of Protection Officers across LGAs to ensure timely and survivor-centered responses.Enhance the usefulness of the service provider register through regular training for police, health workers, and court officials.Expand accreditation to include trusted community-based and informal networks, and foster deeper joint action among MDAs.





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