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# **GBV ASSESSMENT REPORT FOR THE AGILE PROJECT**

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**Federal Ministry of Education**

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List of Acronyms	
ACLED	Armed Conflict Location and Event Data Project
CEDAW	Convention on Elimination of all forms of discrimination against women
CRC	Crisis Resolution Committee
FGD	Focus Group Discussion
GBV	Gender Based Violence
IDI	In-depth Interview
KII	Key Informant Interview
KSSSMB	Kano State Secondary School Management Board
NDHS	Nigeria Demographic and Health Survey
NSRP	Nigeria Stability and Reconciliation Program
PTA	Parents and Teachers Association
SEA	Sexual Exploitation and Abuse
SEM	Socio Ecological Model
SMOE	State Ministry of Education
SMOH	State Ministry of Health
SMWA	State Ministry of Women Affairs and Social Development
SRGBV	School Related Gender-Based Violence
UN	United Nations
VAW	Violence Against Women
WHO	World Health Organisation

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## CHAPTER 1: INTRODUCTION

Sexual and gender-based violence (SGBV) or gender-based violence (GBV) is a global public health concern that disproportionately affects women with negative consequences for health, wellbeing, human rights and development. In 1992, the Convention on Elimination of all forms of discrimination against women (CEDAW) defined GBV as *violence that is directed at a person on the basis of gender or sex*. The definition has been revised to reflect the fact that GBV affects women disproportionately (CEDAW, 2006). The five forms of violence; sexual, physical, economic, emotional and psychological, and harmful traditional practices are strongly driven by gendered power relationships and social roles ascribed to males and females in the society (Gardner, Powell, Thomas, & Millard, 2003). Violence Against Women (VAW) is rooted in unequal power relations that strengthen the social mechanisms and norms which drive women into subservient positions compared to men (UN General Assembly, 2006). This implies that although GBV affects men and women, the risk is much higher for women and this is reflected in the reference to Violence Against Women and Girls (VAWG) by the UN.

Although GBV affects men and women, it disproportionately affects women and girls; one in three women were reported in a global survey conducted by WHO to have experienced physical and/or sexual violence by an intimate partner or violence from non-sexual partner (WHO, 2013). The report also highlighted that adolescents aged 15-24 years of the sampled population had a lifetime prevalence of 30% partner violence. In Nigeria, the proportion of women aged 15-49 who have experienced physical violence increased from 28% in 2008 and 2013 to 31% in 2018 (NPC and ICF 2019). Most of the never-married women who reported physical violence mentioned mothers/stepmothers (35%) and fathers/stepfathers (26%) as perpetrators. About 17% of all women (married or unmarried) who experience physical violence reported their teachers as perpetrators. The Northwest region of Nigeria reported the least prevalence of physical violence in the country (12%) and Kano state reported 6% (NPC and ICF 2019). The proportion of women aged 15-49 who have experienced sexual violence increased from 7% in 2013 to 9% in 2018 (NPC and ICF 2019). The Northwest region also reported the lowest prevalence of sexual violence (5%) in the country and Kano State reported 3%. A review of the Nigeria Demographic and Health Survey (NDHS) data between 2013 and 2018 in Kano State showed an increase in physical violence from 1.1% to 6% and sexual violence from 0.7% to 3% (NPC and ICF 2019). The *Waraka Sexual Assault Referral Centre* in Kano was established by the state's justice sector reform team to provide technical assistance to GBV survivors; the centre reported handling 1,125 cases from February to April, 2019 (Adewale, 2019).

### **1.1 School related Gender Based Violence (SRGBV)**

SRGBV refers to *'acts or threats of sexual, physical, or psychological violence occurring in and around school, perpetrated as a result of gender norms and stereotypes, and enforced by unequal*

*power dynamics'*(UNGEI, 2017). SRGBV occurs in different forms based on their sex, specific vulnerabilities to violence and context (Leach, Dunne, & Salvi, 2014; UNGEI & UNESCO, 2013). In many societies particularly in developing countries there is a complex dynamic interaction between beliefs and cultural structures conducive to violence towards women/girls (Barasa, Wamue-Ngare, & Wanjama, 2013; Bisika, Ntata, & Konyani, 2009; Gardner et al., 2003; Wilson, 2006).

SRGBV represents a form of gender discrimination because it is an expression of gender stereotyping and gender inequality (Parkes, Heslop, Ross, Westerveld, & Unterhalter, 2016). SRGBV can occur within the school, during extracurricular activities, in school dormitories, on the way to or from school or through the use of information and communication technology (ICT) (Leach et al., 2014; Parkes et al., 2016). When young people experience SRGBV, school performance is negatively affected because it creates a school environment that is not conducive for learning and retention especially for girls. Violence experienced by adolescent girls play a major role in school attendance and also in the decision making process of parents who do not want their daughters to experience SRGBV (Mack, 2009). SRGBV is considered an important factor that prevents adolescent girls from going to school or being retained at school (Mack, 2009). SRGBV encompasses psychological, sexual and physical violence including bullying, harassment and verbal abuse. There are indications that a high degree of SRGBV occurs in the schools deserving more inquiry and attention (UNESCO, 2016). The various forms of SRGBV are prevalent in schools (Centre & Uk, 2014). In Africa, bullying, verbal and physical violence in the form of corporal punishment as well as sexual violence has been reported in schools (Bisika, Ntata, & Konyani, 2009; Dunne, Humphreys, & Leach, 2006).

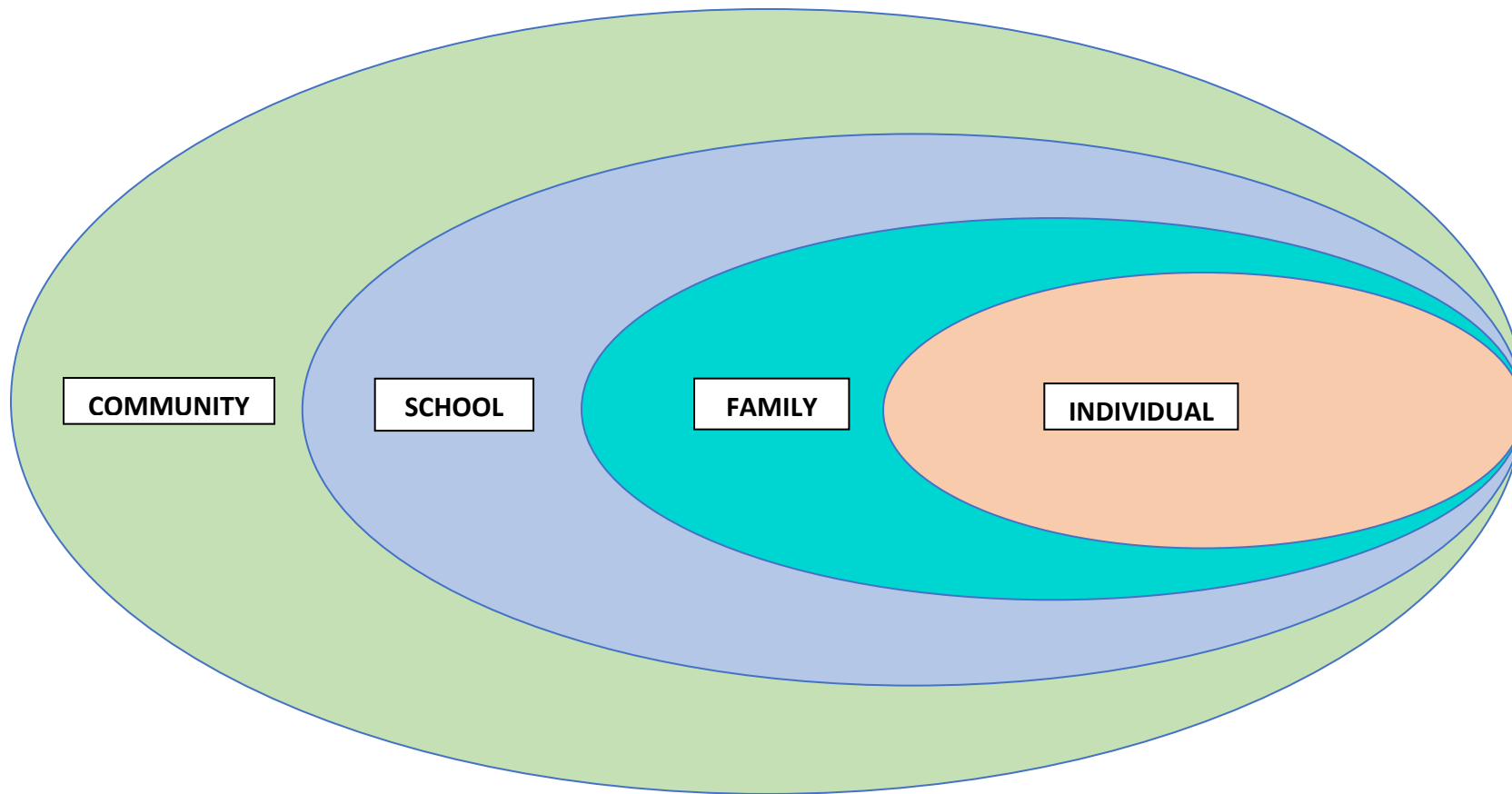
### **1.1.1 Forms/Manifestations of School Related Gender Based Violence**

In the United States and Western Europe, the most common forms of SRGBV are bullying, dating violence, cyberbullying and homophobic violence while in Latin America and the Caribbean, forms/manifestation of SRGBV include teacher-student rape, bullying and harassment of girls by boys at school. Psychological and physical violence are the most common forms of SRGBV in the Middle East whereas in Sub-Saharan Africa, sexual assault, sexual harassment and rape are the most common forms of SRGBV (Centre & Uk, 2014; UNGEI & UNESCO, 2013). SRGBV can be explicit SRGBV or symbolic (Wilson, 2006). Explicit SRGBV includes unwelcome and solicited physical contact such as kissing, touching, pinching, groping and verbal abuse including derogatory comments with the intention to humiliate, intimidate, ostracize or silence a student; it also includes coercion to view pornography or participate in forced sex and rape (Leach et al., 2014). Implicit or symbolic SRGBV covers actions that are less visible which are endorsed and reinforced by the everyday practices and structures that guide and regulate behaviour as well as legitimize discrimination against those who resist (Leach et al., 2014). This includes any form of physical or psychological abuse. Physical abuse includes corporal punishment, bullying, verbal,

teacher's unofficial use of students for free labour and other forms of aggressive or unauthorized behavior that is violent. On the other hand, psychological abuse include any form of threats, belittling statements, bullying and emotional manipulation (Barasa et al., 2013). SRGBV reflects social and cultural norms which reinforce gender inequality and imbalance of power between male and female. These norms legitimise GBV and make such behaviours invisible thereby reinforcing gender identities that subordinate girls. Boys also experience GBV particularly if they fail to conform to prevailing norms of masculinity (Centre & Uk, 2014; UNGEI & UNESCO, 2013). Poverty, cultural practices and the patriarchal system are also drivers of SRGBV, since SRGBV takes place in a context of gender inequality and specific cultural beliefs and attitudes about gender (Barasa et al., 2013).

The Social Ecological Model (SEM) is a theory-based framework that facilitates the understanding of the complex and multifaceted interaction between a person and environmental factors that influence behaviour and practice (Heise, 1998). An adapted SEM was organized into five (5) hierarchical levels which are the individual, family, school, community, policy and institutional level of drivers.





**Figure 1: Social Ecological Model for Understanding SRGBV**

### **1.1.2 SRGBV in School Settings**

Globally, about 246 million people experience SRGBV every year and over half live in countries where they have no legal protection from corporal punishment. In 40 low and middle-income countries, about 10% of adolescent girls reported sexual acts as a form of SRGBV (UN Women & UNESCO, 2016). A global school-based health survey reported that in developing countries, between 20 and 65% of school-aged children have been verbally or physically bullied in the previous 30 days (Leclerc, Chiu, & Cale, 2016). In some countries in Africa and South East Asia, more than 80% of students experience corporal punishment (Miller-grandvaux, 2015). A survey of public school violence in selected states in Nigeria reported 85% of physical violence and 50% psychological violence (Fawole et al., 2018). In another study among female university students in Kano State, Northern Nigeria, 51 % had experienced emotional abuse, 23% of students reported they had experienced physical abuse and 22% had experienced sexual abuse (Iliyasu, Abubakar, Aliyu, Galadanci, & Salihu, 2011). Institutional mechanisms for preventing and addressing GBV in schools are poorly documented.

## **1.2 The Whole School Approach**

The whole school approach that involves a series of participatory actions that involve building school-family-community partnerships to strengthen in-school policies and procedures and make schools safer. The local community and the government education authorities are also included in the school community and work together to create different activities aimed at making schools safer, more child-friendly, and gender-sensitive and thus foster a positive learning environment for students and educators.

### **1.2.1 Qualities of Whole School Approach**

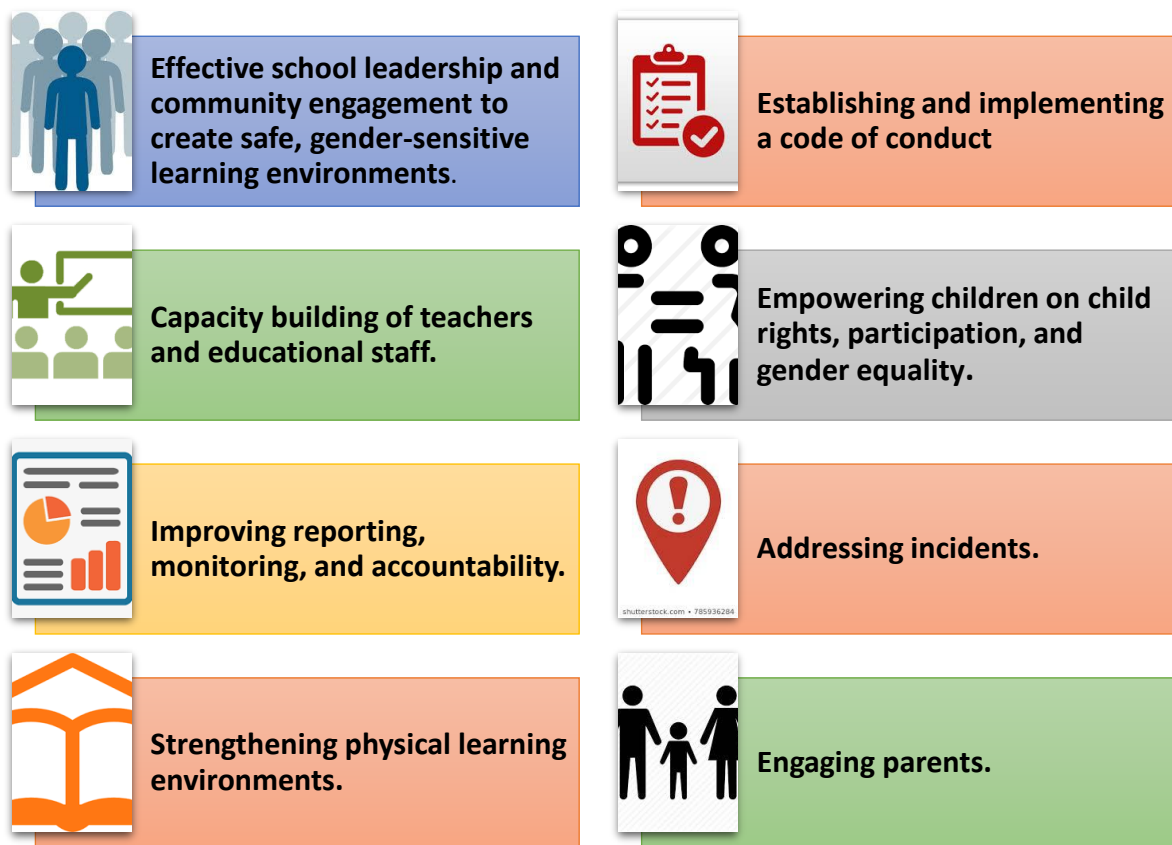
The whole school approach can be adapted to its specific situations. There are however specific qualities and elements of an effective whole school approach and these include the following:

#### **Qualities:**

- Build on existing evidence.
- Develop an agreed understanding of and response to SRGBV.
- Align the approach with any existing national policy frameworks and documents that address SRGBV.
- Address patterns of behavior over time.
- Cover all vulnerable groups: SRGBV affects students of all ages, genders, sexual orientations, levels of ability, classes, and castes in different ways
- Remain student-centred

### **1.2.2 Elements of a Whole-School Approach**

There are eight (8) key elements of a whole school approach which are meant to address the drivers of SRGBV as shown in Figure 2 (UNGEI, 2017).



**Figure 2: Whole School Approach to Prevent SRGBV**

### **1.3 The Adolescent Girls Project**

The proposed project aims at addressing key constraints - the low human capital indicators in health and education, particularly in northern Nigeria and rural areas for the Nigerian Government. Addressing these gaps and disparities, by investing in the health and education of girls and by expanding their economic opportunities will be critical for the Nigerian Government to revitalize the economy and put the country on a path towards sustainable development (Nigeria SCD, 2018). Achieving sustained results in improving girls' education will be particularly important as it can be a powerful transformative force for the girls, their communities, and the economy. Girls' education, especially at secondary level, is a consistent factor that has been found to positively influence not only the girls' lives, but also improve numerous other development outcomes, including reducing child and maternal mortality, improving educational outcomes of offspring, reducing poverty and achieving equitable growth (WDR, 2012). The project will be implemented in seven states in Nigeria (Kano, Kaduna, Ekiti, Plateau, Katsina, Borno and Kebbi).

#### **1.4 Objectives of the GBV Assessment**

This assessment will identify and analyse SRGBV risks that negatively impact on school enrolment and retention for adolescent girls as well as recommend actionable strategies that can be adopted to aid project design, mitigate multilevel risks, improve monitoring, reporting and prevention. Findings from the GBV risk assessment will be utilized to develop an action plan that will serve as a road map for implementation, integrate GBV monitoring and build capacity of stakeholders to recognize and address GBV concerns. The assessment will also identify existing programmes (if they are available) at community and school level, their coverage, access and use by girls and their families. In addition, identify policies, program resources/policy framework and guidelines at state and local level to support.

##### **The objectives of the GBV Assessment include:**

- To provide the government and project team with an analysis that identifies major risks that the project may create with regard to GBV; the drivers of, norms that underpin these risks; the institutional environment as it pertains to laws, codes etc, that refer to prevention and responses to GBV in project areas; protocols and norms regarding the identification and care of violence survivors (esp. adolescent school girls), and ongoing and/or planned government/ school initiatives to prevent GBV or create awareness about it;
- To provide tentative recommendations on possible means to address the major risks identified that the project is likely to create; and
- To provide an indication of resources required to implement risk mitigation measures.
- To develop an action plan to address GBV risks identified during the assessment.

##### **The objectives of the GBV Action plan include:**

- A conceptual framework for understanding and addressing multilevel drivers and power dynamics for GBV.
- Development of simple actionable strategies that address GBV in school and community to create safe environments for girls and reduce vulnerability to violence.
- Development of training curriculum, codes of conduct, guidelines, handbooks and procedures required in schools and in the education sector to address GBV based on the training needs assessment that identified stakeholders, school teams and service providers who require capacity strengthening.
- Strategies to develop culturally competent awareness initiatives on understanding and mitigating GBV risk utilizing existing structures identified.
- Detail an ongoing GBV monitoring and evaluation framework related to programming, policies and communication.

- Detail linkages between community, school and institutional actors and to create opportunities for advocacy and collective action to address GBV.

### 1.5 Research/Assessment Questions

The assessment should seek to address the following questions:

- Who are the main perpetrators of GBV in secondary schools? (These might include other students, teachers/staff, or others.) What power structures enable or allow the main perpetrators to target girls?
- Are there any traditional practices, norms, or dynamics that may increase girls' vulnerability to violence in the school context?
- Are there institutional codes of conduct for teachers/administrative staff? Do these provide definitions of violence and harassment and specify sanctions for these behaviors?
- What obligations do teachers, administrative staff, and the Ministry of Education personnel have with regard to situations of GBV?
- What are the current protocols and norms regarding the identification and care of violence survivors, particularly students? Are there training programs on GBV response for education sector personnel?
- Is the education sector participating in any inter-institutional coordination mechanisms for addressing GBV?
- What initiatives are being implemented in schools to prevent GBV? Are there GBV awareness-raising and violence prevention activities for students? For Parent Teacher Associations (PTAs)?
- Do community members, and girls in particular, view schools as safe environments? Where project sites are known, are the routes to school safe?

The assessment utilised the socio-ecological model (SEM) to explore the multilevel factors that contribute to GBV. An ecological approach is useful in understanding the interaction of individual, school, community and institutional factors in GBV. The ecological model helps to explain risk or protective mechanisms at different levels that can be explored during action plan development contributing to a structured approach to responding and mitigating GBV. This will provide an opportunity to explore multilevel risk factors and gendered structures that increase girls' vulnerability to violence in schools, and the protective measures available for girls in schools. A key focus in this assessment is also to understand how empowered survivors (especially students) feel about their capacity to seek help and factors that constrain the capacity of girls to achieve their full potential. (Wingood, DiClemente, DiClemente, Crosby, & Kegler, 2002).

The assessment consists of a comprehensive desk review and a qualitative field assessment involving stakeholder consultations, interviews, observations and audits in Kano state. The desk

review provides a comprehensive overview of the GBV situation in Nigeria, the policy context and implications for the adolescent girl and this project.

### 2.1 Legislative and Policy Framework

**International and regional:** Nigeria has adopted several international and regional instruments, including Protocol to the African Charter on Human and People's Rights on the Rights of Women in Africa (2003), African Charter on the rights and welfare of child, 2005, The African Protocol on the rights of women (2004), Convention on all forms of Discrimination Against Women (CEDAW, 1979), International Conference on the Population and Development (1994), and The Child Rights Act (2003). The sustainable development goal 4 (SDG) was set to achieve equal access to quality education for boys and girls and to 'provide safe, non-violent, inclusive and effective environment learning for all'. These international documents recognised general issues such as poverty, inequality, and vulnerability that disproportionately affect women and girls, these are, however, not specific to SRGBV.

**Table 1: Review of International Instruments on SRGBV**

Components and Contents Related to SRGBV	CEDAW (1979)	International Conference on the Population and Development	Sustainable Development Goals (SDG)	Child Right Act (CRA)
<b>School Leadership and Community Engagement</b>				
Right to parental care protection and maintenance			Yes	Yes
<b>For SDG</b> , adopt and strengthen sound policies and enforceable legislation for the promotion of gender equality and the empowerment of women and girls at all levels				
Government should enforce laws concerning the minimum legal age of consent and the minimum age at marriage.		Yes		
Government should generate social support for the enforcement of laws on the minimum legal age at marriage, in particular by providing educational opportunities		Yes		
<b>Teachers and Educational Support</b>				
Gender Equality and human rights are mainstreamed in teacher education			Yes	
<b>Child Right, Participation and Gender Equality</b>				
Ensure the elimination of any stereotyped concept of the roles of men and women at all levels and in all forms of education by encouraging coeducation and other types of education which will help to achieve this aim and, in particular, by the revision of textbooks and school programmes and the adaptation of teaching methods	Yes	Yes	Yes	



Components and Contents Related to SRGBV	CEDAW (1979)	International Conference on the Population and Development	Sustainable Development Goals (SDG)	Child Right Act (CRA)
<p><b>For SDG</b>, the extent to which education for sustainable development, including gender equality and human rights are mainstreamed in the curricula</p>				
<p><b>a)</b> To eliminate all forms of discrimination against the girl child.  <b>b)</b> Increase public awareness of the value of the girl child, and concurrently, to strengthen the girl child’s self-image, self-esteem and status;  <b>c)</b> To improve the welfare of the girl child, especially in regard to health, nutrition and education  <b>d)</b> To ensure the reduction of female drop-out rates.</p> <p><b>For SDG</b>, to achieve gender equality and empower all women</p>	Yes	Yes	Yes	Yes
<p>The betrothal and the marriage of a child shall have no legal effect, and all necessary action, including legislation, shall be taken to specify a minimum marriage.</p> <p><b>For SDG</b>, to achieve gender equality and empower all women</p>	Yes		Yes	Yes

Components and Contents Related to SRGBV	CEDAW (1979)	International Conference on the Population and Development	Sustainable Development Goals (SDG)	Child Right Act (CRA)
<p>Right of a child to free, compulsory and universal education, etc. Every parent or guardian shall ensure that his child or ward attends and completes his-</p> <p>(a) primary school education; and (b) junior secondary education</p> <p>A female child who becomes pregnant, before completing her education shall be given the opportunity, after delivery, to continue with her education, on the basis of her individual ability</p>			Yes	Yes
<p>Prohibition of child labour. Prohibition of buying, selling, hiring or otherwise dealing in children for the purpose of hawking or begging for alms or prostitution, etc. Prohibits unlawful sexual intercourse with a child.</p> <p>Article 32 of CRA criminalizes all forms of sexual abuse and exploitation</p>				Yes
<b>Safe and Secure Physical Environments in and around Schools</b>				
<p>Rights of child in need of special protection measure</p> <p>Build and upgrade education facilities that are child, disability and gender sensitive and provide safe, non-violent, inclusive and effective learning environments for all</p>			Yes	Yes
<b>Reporting, Monitoring, and Accountability</b>				
<p>Protective measures should, as appropriate, include effective procedures for the establishment of social programmes to provide necessary support</p>			Yes	Yes

<b>Components and Contents Related to SRGBV</b>	<b>CEDAW (1979)</b>	<b>International Conference on the Population and Development</b>	<b>Sustainable Development Goals (SDG)</b>	<b>Child Right Act (CRA)</b>
for the child and for those who have the care of the child, as well as for other forms of prevention and for reporting of child maltreatment				
<b>Incident Response</b>				
Such protective measures should, as appropriate, include effective procedures for the establishment of social programmes to provide necessary support for the child and for those who have the care of the child, as well as for other forms of prevention and for identification, referral, investigation, treatment and follow-up on instances of child maltreatment				
Punishment for child marriage and betrothal				Yes

**Table 2: Review of Regional Instruments on SRGBV**

<b>Components and Contents Related to SRGBV</b>	<b>Protocol to the African Charter on Human and People’s Rights on the Rights of Women in Africa. (2003)</b>	<b>African Charter on the rights and welfare of the Child</b>	<b>The African Protocol on the rights of Women. (2004)</b>
<b>Code of Conduct</b>			

Components and Contents Related to SRGBV	Protocol to the African Charter on Human and People's Rights on the Rights of Women in Africa. (2003)	African Charter on the rights and welfare of the Child	The African Protocol on the rights of Women. (2004)
State Parties shall ensure that a child who is subjected to schools or parental discipline shall be treated with humanity and with respect for the inherent dignity of the child	No	Yes	No
<b>Child Right, Participation and Gender Equality</b>			
Eliminates all forms of discrimination against women and guarantee equal opportunity and access in the sphere of education and training	Yes	No	Yes
Eliminates all stereotypes in textbooks, syllabuses and the media, that perpetuate such discrimination	Yes	No	No
Integrate gender sensitisation and human right education curricula including teachers training	Yes		Yes
Article 11: education; <b>a)</b> Provide free and compulsory basic education		Yes	
<b>b)</b> Take special measures in respect of female, gifted and disadvantaged children, to ensure equal access to education for all sections of the community		Yes	
C) take measures to encourage regular attendance at schools and the reduction of drop-out rates		Yes	
Children should be protected from all from sexual exploitation, abuse and violence in schools	Yes	Yes	Yes

<b>Components and Contents Related to SRGBV</b>	<b>Protocol to the African Charter on Human and People's Rights on the Rights of Women in Africa. (2003)</b>	<b>African Charter on the rights and welfare of the Child</b>	<b>The African Protocol on the rights of Women. (2004)</b>
Children should be protected from harmful traditional practices such as forced marriage and female genital mutilation	Yes	Yes	Yes
Protect women, especially the girl child from all forms of abuse, including sexual harassment in schools and educational institutions			Yes
<b>Incident Response</b>			
Provide sanctions against perpetrators of all forms of abuse including sexual harassment in schools and educational institutions	Yes	No	Yes
Establish mechanisms and accessible services for rehabilitation and reparation for victims of violence			
Protect the reproductive rights of women by authorising medical abortion in cases of medical abortion, rape, and sexual assault	Yes		
<b>Implementation and monitoring</b>			
State parties shall ensure implementation of the protocol at national level and also document periodic reports	Yes	Yes	Yes

## 2.2 Health Policy and Guidelines

The national guidelines and referral standards on GBV in Nigeria, national gender policy strategic development result framework and School health policies have provisions that are related to SRGBV.

**Table 3: Review of National Strategic Framework and Guidelines related to SRGBV**

Components and Contents Related to SRGBV	National Guidelines and referral standards on GBV in Nigeria	National Gender Policy Strategic Development Result Framework (2008-2013)	School health Policy	Implementation Strategies
<b>School Leadership and Community Engagement</b>				
Ensure collaboration between relevant stakeholders, community health committees and other community initiatives projects			Yes	Nil
<b>Teachers and Educational Staff Support</b>				
Provide gender awareness and GBV training for service providers in health, education and social service sectors  Training gender experts for instructions in schools	Yes	Yes	Yes	
<b>Child Right, Participation and Gender Equality</b>				
Child Rights approaches integrated into curricula	Yes	Yes		Captures that the FMoE should collaborate with FMWASD and other stakeholders to integrate peace education and gender awareness training in the school curricula at primary and secondary levels

Components and Contents Related to SRGBV	National Guidelines and referral standards on GBV in Nigeria	National Gender Policy Strategic Development Result Framework (2008-2013)	School health Policy	Implementation Strategies
To review and change school curricula (primary and secondary) to reflect changing and empowering gender roles for women and men	No	Yes		Nil
Ensure equal access to Primary and Secondary education by all children irrespective of gender, physical condition, geographical location, and socio-economic status of parents:	No	Yes		<ul style="list-style-type: none"> <li>a) Implementation of the UBE Act, since basic education is seen as a fundamental human right of boys, and girls</li> <li>b) Implementation of the Child Right Act Sexuality Education Curriculum, UBE.</li> <li>c) Advocacy and sensitization on the importance of education, especially for the girl child</li> <li>d) Reduce the rate of girl -child and boy-child school drop-out</li> <li>e) Physical access to school should be within a 3 kilometres radius, to facilitate increase in female enrolment figures</li> </ul>
Mainstream gender into school curricula, and research (i.e. at Primary, Secondary and Tertiary level)				<ul style="list-style-type: none"> <li>a) Institute sexuality and leadership skills training in schools at all levels</li> <li>b) Development of gender resource materials</li> </ul>

Components and Contents Related to SRGBV	National Guidelines and referral standards on GBV in Nigeria	National Gender Policy Strategic Development Result Framework (2008-2013)	School health Policy	Implementation Strategies
Improve the demand and supply factors that hamper the girl child Education		Yes		<ul style="list-style-type: none"> <li>a) Prohibiting child labour</li> <li>b) Removing religious inhibitions</li> <li>c) Legislating against early marriages</li> <li>d) Allowing girls who dropped out of school because of pregnancies to continue their education</li> <li>e) Providing role models for female students in schools</li> </ul>
<b>Incident Response</b>				
GBV Referral standard and guidelines Provides multisectoral GBV referral guidelines on how to identify GBVA cases, what to do where GBV has occurred	Yes			
<b>Reporting, Monitoring, and Accountability</b>				
To ensure that monitoring and evaluation activities are used as a veritable tool for ensuring quality control at every level of organisational structure and linked with school inspection	No	No	Yes	
<b>Safe and Secure Physical Environments in and around Schools</b>				



Components and Contents Related to SRGBV	National Guidelines and referral standards on GBV in Nigeria	National Gender Policy Strategic Development Result Framework (2008-2013)	School health Policy	Implementation Strategies
Ensure Infrastructural development such as Toilets and waste disposal facilities etc. Safety shall be provided by relevant organs of government at all levels in school to promote healthy practices among learners	No	No	Yes	

### 2.3 The Criminal Justice System and Laws

The Criminal Justice System (Criminal codes and Penal Code, for the Northern Nigeria), NAP TIP bill and VAPP Act have provisions to protect the rights and dignity of women, boys and girls mostly at household and community levels. The codes and acts have substantial provisions for sexual violence. The penal code does not criminalise an act of discipline given by an individual who is entrusted the care of a child if the discipline does not amount to infliction of grievous harm and if it is done with the purpose of correcting the child.

**Table 4: Review of Criminal and Justice System Laws**

SECTIONS RELATED TO SEXUAL VIOLENCE AND PHYSICAL ABUSE	CRIMINAL CODE	PENAL CODE	NAPTIP ACT (2015)	VAPP ACT (2015)
Criminalises unlawful carnal knowledge of a girl under the age of thirteen years	Yes			
Criminalises defilement of girls under sixteen and above thirteen, and of idiots	Yes			

SECTIONS RELATED TO SEXUAL VIOLENCE AND PHYSICAL ABUSE	CRIMINAL CODE	PENAL CODE	NAPTIP ACT (2015)	VAPP ACT (2015)
Criminalises conspiracy of defilement				
Criminalises indecent treatment of girls under sixteen	Yes			
Criminalises the procurement of a girl or woman who is under the age of eighteen years to have unlawful carnal connection with any other person or persons...	Yes	Yes	Yes	
Criminalises the abduction of girl under eighteen with intent, to have carnal knowledge, or commit other forms sexual exploitation	Yes	Yes	Yes	Yes (did not specify age)
Criminalises the employment of child as domestic worker and inflicting grievous harm			Yes	
Criminalises rape or attempt to commit rape (for penal code, when she is under 14 years of age)	Yes	Yes		Yes (but did not specify age)
Criminalises indecent assaults on females	Yes			
Criminalises unlawful taking of an unmarried girl under the age of sixteen years out of the custody or protection of her father or mother or other person having the lawful care or charge of her, and against the will of such father or mother or other person	Yes			
Criminalises gross indecency upon a person without his consent or by the use of force or threats compels a person to join with him in the commission of that act...provided that a consent given by a person below the age of sixteen years to such an act when done by his teacher, guardian or a person entrusted with his care or education shall not be deemed to be a consent within the meaning of this section.		Yes		
<b>“Nothing is an offence which does not amount to the infliction of child, pupil, grievous hurt upon a person and which is done;</b>		Yes		

SECTIONS RELATED TO SEXUAL VIOLENCE AND PHYSICAL ABUSE	CRIMINAL CODE	PENAL CODE	NAPTIP ACT (2015)	VAPP ACT (2015)
a) by a school master for the purpose of correcting a child under eighteen years of age entrusted to his charge				
Criminalises emotional, verbal and psychological abuse				Yes
Criminalises child marriage and human trafficking	Yes	Yes	Yes	Yes

#### 1.4 National and State Code of Conduct for Teachers

**Table 5: Review of National and State Code of Conduct for Teachers**

COMPONENTS AND CONTENTS RELATED TO SRGBV	KANO STATE CODE OF CONDUCT FOR TEACHERS	NATIONAL CODE OF CONDUCT
<b>Code of Conduct for teachers and students</b>		
<b>Code of conduct for Teachers;</b> Disciplinary measures for offence committed by the student include; fatigue duties, verbal, corporal punishment (Corporal punishment should only be administered by the principal or any other teacher assigned by the principal in her presence	Yes	Yes
It is a serious offence in school and Islamic rules for a teacher to have with any student, any form of friendship	Yes	
No teacher is expected to enter into any kind of love affair with a student either in school or during holidays. Specifically, friendship by any guise is prohibited between a teacher and a student	Yes	
Spells out the type of relationship that should exist between the teachers on one hand and severally their colleagues, students and other persons who will interact with them from time to time to clarify teachers' rights, privileges, and obligations and their legal bases.	No	Yes

COMPONENTS AND CONTENTS RELATED TO SRGBV	KANO STATE CODE OF CONDUCT FOR TEACHERS	NATIONAL CODE OF CONDUCT
Student should not be invited to the staffroom; it is out of bounds to all students at all times. Only class monitor should be seen around the staff room	Yes	
Students' hostels are strictly out of bound. A teacher on duty is however permitted to visit the kitchen at mealtimes but should be accompanied by any other staff. Similarly, the kitchen master is permitted to carry out kitchen duties around the kitchen area	Yes	
Hostel master/mistress are also allowed to visit their hostel for hostel duties but should not be accompanied by any other staff	Yes	
Senior masters of the school are also permitted to enter the hostel for special duties so also the school Imam and school nurse. It is only by making the hostel out of bound that the privacy of the students can be ensured and guarded	Yes	
Both male and female teachers are not allowed to take students to their houses for any reasons		
Sexual misconduct and related abuse of office: Teachers should not use their position to humiliate, threaten, intimidate, harass or blackmail any learner to submit to selfish motives or to engage in sexual misconduct, drug addiction and trafficking, cultism, human trafficking and other related offences.		Yes
Teachers should not ask or receive gifts, or gratification for themselves or for others in any kind whatsoever for selfish motive. Corrupt practice here		Yes

COMPONENTS AND CONTENTS RELATED TO SRGBV	KANO STATE CODE OF CONDUCT FOR TEACHERS	NATIONAL CODE OF CONDUCT
includes having canal knowledge of a learner, bribery, and indecent relationship with a learner, etc.		
<b>Code of Conduct for Students;</b> No student is allowed to visit any teacher	Yes	
Students are prohibited from going to staff quarters unless by permission and under the escort of school matron	Yes	

## 2.5 Kano State Education Strategic Plan (2009-2018)

**Table 6: Review of Kano State Education Strategic Plan (2009-2013)**

POLICY OBJECTIVE RELATED TO SRGBV	MAIN STRATEGIES	TIMELINE
<b>EQUITABLE ACCESS</b> <b>Eliminate gender disparities in basic education and narrow gender gaps in senior secondary schools and tertiary education access</b>	Design and implement IEC public awareness programme to raise awareness of the importance of girls' education	2009
	Ensure school infrastructure plans include adequate facilities for girls (e.g. toilets/sanitation facilities)	2009 -2018
	Develop a plan for the training, recruitment and deployment of female teachers by mid-2009, including sponsorship and incentive packages	2009 -2018
	Undertake a feasibility study and introduce a targeted in-kind/cash transfer programme to encourage girls, poor boys and disadvantaged groups to enrol in Junior Secondary Schools	2009 -2018
	Maintain fee free secondary schooling for female students	2009 -2018

POLICY OBJECTIVE RELATED TO SRGBV	MAIN STRATEGIES	TIMELINE
	Provide more spaces for girls in senior secondary schools and science colleges by building more girls schools and expanding girls' streams in existing schools.	2009 -2018

## CHAPTER 3: METHODOLOGY OF THE ASSESSMENT

### 3.1 Design of the assessment

The assessment included Key Informant Interviews (KII) with key officials at the State Ministry of Education (SMOE), State Ministry of Women Affairs and Social Development (SMWA) and selected secondary school administrators. The KII and Focus Group Discussions (FGD) focused on exploring stakeholder perspectives about GBV/SEA documentation, school protection mechanisms for girls, monitoring systems for existing institutional arrangements in schools, capacity building for teachers on GBV/SEA as well as the initiatives available to prevent GBV in schools and strengthen the protection of girls. The assessment involved school mapping exercises and causal flow analysis (participatory methods) with girls in secondary school.

### 3.2 Location and population for the Assessment

The assessment was conducted in Kano State in the North West zone of Nigeria. Consideration was given to achieving a mix of rural-urban areas, day and boarding schools, girls only and mixed (co-exist) schools.

**Table 7: Key objectives of the assessment and data collection method**

S/N	Key Objectives	Primary Data		Secondary Data Tools
		Methods of Data Collection	Informant	
1.	To understand girls perception about SRGBV in secondary schools and facilitators of GBV.	School mapping and causal flow analysis	Secondary school girls	
2.	To understand the traditional practices, norms or school factors that may increase girls' vulnerability to violence in the school context.	KIIs and FGD	School Administrators (Principal and vice principals) and Teachers	

3.	To explore institutional mechanisms, content and implementation of institutional code of conduct for teachers and administrative staff.	KII, IDI and FGD	School Administrators (Principal and vice principals), Teachers, SMOH, SMWA, SMOE	Protocols, Policies and code of conduct
4.	To understand protocols regarding the reporting, care and follow-up of survivors. To ascertain the availability of training programs on GBV for education sector personnel	KII, IDI and FGD	School Administrators (Principal and vice principals), Teachers, SMOH, SMWA, SMOE	Protocols, Policies and code of conduct
5.	To understand the level of participation of the education sector in inter-institutional coordination mechanisms for addressing GBV. To explore initiatives being implemented in schools to raise awareness and prevent GBV.	KII, IDI and FGD	School Administrators (Principal and vice principals), Teachers, SMOH, SMWA, SMOE	

### 3.3 Selection of schools and stakeholders

Schools were selected with considerations for a balanced representation across rural and urban areas to understand the dynamics and nuanced issues in both areas. Ten schools were visited with a mix of day and boarding schools, girls only and mixed (co-exist) schools. Participants from the relevant state agencies were purposively selected based on their positions and experience. A total of forty-four (44) interviews were conducted (7 stakeholder KIIs, 22 IDIs among Principals and 15 FGDs among students, teachers and parents).

### 3.4 Development of assessment tools

The tools for the assessment were developed drawing from components of the conceptual framework and guidance documents for understanding SRGBV (UNGEI, 2017). The interview guides and tools for this assessment and school mapping can be found in Appendix I, II, III and IV. They include:

- 1) The student FGD session includes a free listing exercise on the causes and effects of GBV based on their perspectives and experiences in school. The school mapping exercise entailed asking students to collectively draw a map of their school and identify areas that they consider as unsafe and discuss the reasons why.
- 2) Safety audit checklist for boarding and day schools.



- 3) KII with stakeholders (state ministry of education, state ministry of women affairs and social development, school management board and sexual assault referral representative)
- 4) IDI with school administrators (Principals, Guidance and Counselling Teachers, Vice Principal.)

### **3.5 Data Management and Analysis**

All the qualitative data from the recordings and notes were transcribed verbatim and stored securely. NVivo 12 software was used to organise the data for analysis. Thematic analysis was used to explore patterns and themes within the data; findings were triangulated to develop the final report.

### **3.6 Ethical Considerations**

The assessment team obtained permission from the Kano SMOE to visit the schools and conduct the assessment. The team explained the voluntary nature of participation to all stakeholders and they were assured that there will be no negative consequences if they choose not to participate. Verbal consent was sought and participants were assured of confidentiality.

In line with the WHO's recommendation on putting women first, the following measures were taken to minimize risk:

- No personal identifiers were used.
- The assessment did not elicit personal experience or probe for under any circumstance.
- Trained interviewers (in research ethics and conduct of sensitive interviews) were used.
- The research team will be made aware of the importance of absolute confidentiality. Interviews and FGDs will be conducted in private, safe and conducive settings.
- Referral services were identified prior to the interviews to ensure that participants can get support if necessary, during or after the interviews.

### **3.7 Conceptual Framework**

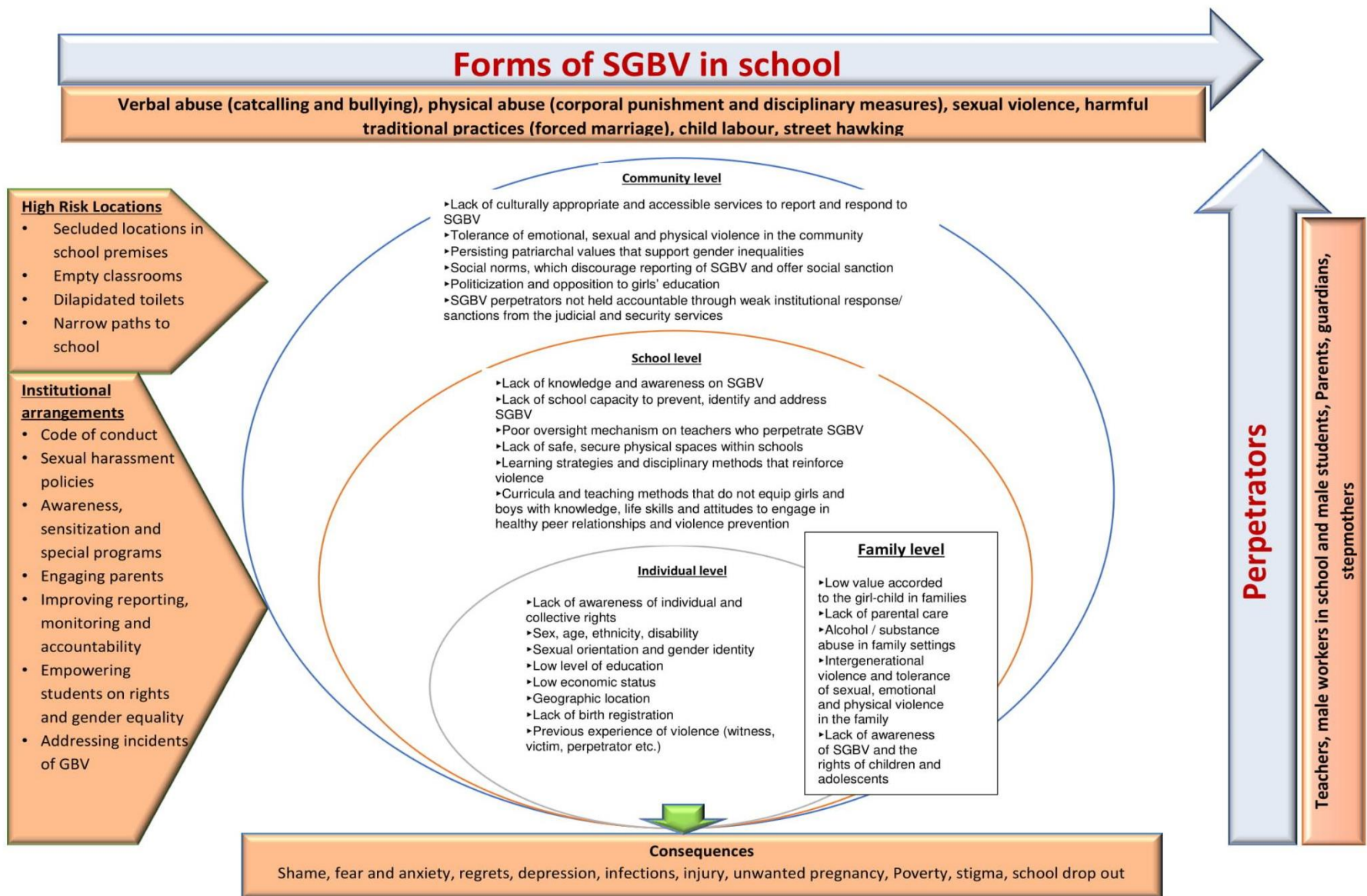
The conceptual framework (Figure 3 below) as previously described in the methodology utilizes the SEM. The framework facilitates an understanding of multilevel risk factors for GBV and gaps in institutional arrangements for addressing GBV. The framework was adapted from the SEM and the global guidance for addressing school related GBV (Bandura, 1989; UNESCO, 2016)

### **3.8 Data Collection**

The assessment team conducted a scoping visit to Kano from December 17-21, 2019 to commence fieldwork due to the urgency of the assignment as schools closed for the year on December 20, 2019. The team went back to Kano from January 15-18, 2020 to conclude data collection for the assessment. A total of ten (10) schools were visited during the assessment. A breakdown of data collection activities are presented below.

**Table 8: Breakdown of IDIs and FGDs conducted among stakeholders/schools visited during the assessment**

Stakeholders/ School Participants	Method	Study location		Total
		Urban	Rural	
State Ministry of Women Affairs and social development	KII	2		2
State Ministry of Education Officials and School Management Board	KII	4		4
School Girls	FGD	3	2	5
School Boys	FGD	1		1
Female Teachers	FGD	1		1
Male Teachers	FGD	2	2	4
PTA (Men)	FGD		2	2
PTA (Women)	FGD		2	2
G&C/Discipline Masters	IDI	4	5	9
School Administrators	IDI	9	4	13
Safety Audit	Observation checklist	3	5	8
Sexual Assault Referral Centre	KII	1		1



**Figure 3: Conceptual Framework for the Assessment**

## CHAPTER 4: ASSESSMENT FINDINGS

### 4.1 Summary of Assessment Findings:

The findings of the assessment are summarized in Table 9 below:

**Table 9: Summary of assessment findings**

GBV ISSUES	PARENTS	HEAD OF SCHOOLS (HOS)	G & Cs	STAKEHOLDERS	TEACHERS	STUDENTS
<b>Knowledge, risk, roles and perception about GBV in schools</b>	<ul style="list-style-type: none"> <li>- Limited understanding of GBV and its negative impact on girls school enrollment.</li> <li>- GBV occurs in mainly in the community and only a few are school related</li> </ul>	<ul style="list-style-type: none"> <li>- GBV occurs in mainly in the community and only a few are school related.</li> <li>- GBV cases reported from outside the school are followed-up by the HOS.</li> <li>- Some HOS highlighted potential risks of teacher interest in marrying female students</li> </ul>	<ul style="list-style-type: none"> <li>- Most G &amp; C follow up with parents on issues related to forced marriage reported by students.</li> <li>- Lack of capacity and training to handle GBV/ documentation is poor</li> </ul>	<ul style="list-style-type: none"> <li>- Gaps in training and capacity building for GBV.</li> <li>- Poor enforcement</li> <li>- Poor coordination between stakeholders.</li> <li>- Lack of funds to train or monitor</li> </ul>	<ul style="list-style-type: none"> <li>- SRGBV does not occur within the school premises.</li> <li>-Lack of capacity and training on GBV</li> <li>- Bullying of female students by males in co-exist schools</li> </ul>	<ul style="list-style-type: none"> <li>- Students find it difficult to report and speak out when they experience GBV.</li> <li>- Bullying occurs between male &amp; female (in co-exists schools), and senior female to junior female students</li> </ul>

GBV ISSUES	PARENTS	HEAD OF SCHOOLS (HOS)	G & Cs	STAKEHOLDERS	TEACHERS	STUDENTS
<b>Vulnerable groups</b>	- Adolescent girls under the care of stepmothers. - Students involved in hawking	Out of school girls; girls from dysfunctional homes.	- Adolescents girls under the care of stepmothers. - Out of school girls. - Girls involved in hawking.	- Girls involved in hawking, - Adolescent girls	- Out of school girls; - Girls from dysfunctional homes.	
<b>Perpetrators</b>	Male teachers; elderly men, drug users	Male teachers Okada riders; unemployed youths	Male relatives, elderly men, unemployed youths	Drug users, family relatives,	Elderly men, male relatives, unemployed youths	Male teachers, drug users, relatives, male youths in the community
<b>Reporting channels</b>	Head of community; district head; <i>Hisbah</i> (Local religious police force); Police	Teachers; suggestion boxes; G&C	G&C, prefects assigned to dormitories, school matrons,	G&C, Head of Schools, Zonal office for KSSSMB.	Teachers, prefects, G&Cs	Teachers; suggestion boxes; G&C; parents
<b>Process of addressing GBV cases</b>	District heads/ resolution committee Confirmation of GBV, to police, <i>Hisbah</i> , court (limited)	Suspension of perpetrator, disciplinary committee, investigation by HOS, KSSMB, school board, action taken (transfer, dismissal, or reinstatement)	Suspension of perpetrator, Investigation, Zonal Director's office, Education board, dismissal if found guilty	Confirmation of GBV, counselling, referral, follow up (documentation process not stated)	Refer to G&C and head of school	Parents District heads G&C

GBV ISSUES	PARENTS	HEAD OF SCHOOLS (HOS)	G & Cs	STAKEHOLDERS	TEACHERS	STUDENTS
<b>Code of conduct for teachers or students (verbal or documented)</b>		- There is a code of conduct for teachers. Communication about this is mainly verbal.	Communication about code of conduct is mainly verbal	Mentioned the existence of a documented code of conduct for teachers and students,	Communication about code of conduct is mainly verbal	Communication about code of conduct is mainly verbal
<b>Measures to prevent GBV in schools/referral/ Provisions made for the disabled</b>		- Prohibition of teacher/student relationship. - Ensuring punitive measures are meted out to perpetrators. - Complete separation of boys and girls in mixed schools	- Sensitize female students on self-care and personal safety - Referrals to hospitals after GBV incident	- Provide step-down G&C training in zonal offices - Sensitization of teachers on the negative impact of GBV - Ministry of Women Affairs offers Psychosocial support and refer girls to the hospital after reported GBV.	Ensuring female students in local communities go home in clusters.	Create enabling environment for them to speak out more
<b>Challenges</b>	- Poverty drives hawking which increases vulnerability to GBV.	- The need for better understanding of the negative impact of GBV on student	Lack of professional G& C training and training on GBV;	- Lack of GBV cases documentation process	- Undocumented code of conduct	

GBV ISSUES	PARENTS	HEAD OF SCHOOLS (HOS)	G & Cs	STAKEHOLDERS	TEACHERS	STUDENTS
	<ul style="list-style-type: none"> <li>- Parental negligence and ignorance of GBV</li> <li>- Culture of silence and cover up</li> </ul>	<ul style="list-style-type: none"> <li>enrolment in school</li> <li>- Lack of GBV step down training for teachers and education support staff (G&amp;Cs)</li> </ul>		<ul style="list-style-type: none"> <li>- Lack of funds, and manpower for SARC.</li> </ul>	<ul style="list-style-type: none"> <li>- The need for more female teachers.</li> </ul>	

## 4.2 Community risk factors and response to GBV

### 4.2.1 Awareness of GBV in the community

Awareness about GBV is essential to addressing related issues in the community and its impact on school enrolment. Parents in this assessment were asked about forms of GBV in the community, some of them highlighted issues such as parents' maltreatment, rape and hawking. For school related GBV, they mentioned the potential risk of male teachers targeting female students because of the underlying interest in marrying them. Specifically, they discussed the forms of sexual and physical violence girls were exposed as hawking, beating, sexual assault (rape) and forced marriage. Some influence factors reported include poor socio-economic status of parents, lack of understanding of the potential benefits of education of the girl child, little understanding of GBV and the impact on school enrolment. When parents were asked about what they understood as GBV, some mentioned lack of money, fights among students and divorce as forms of GBV. Parents mentioned that violence against girls in the community was exacerbated by hawking in the community.

*Yes, those that are hawking... yes exactly! Because somebody will come and say I will buy this thing, but come to my house, then she or somebody will say ok this girl what are you selling, I am selling mango or orange, ok I will sell it all if it is five hundred naira, he will give her, tomorrow he will give her next tomorrow and he will say come and meet me in my room...*

**IDI\_Principal**

*What I understand is that gender violence, what causes it is that sometimes there's lack of money because you find that where there's no money, some of the girls parent will ask them to know sell things for them, so may be by the time they go to sell things such violence occur to them, through the male guys that want to buy something from the girl. She will say I want to sell, I need the money to take to my parents, then sometimes they get raped or beaten up by the guys...*

**FGD\_Parents**

*...the issues of this school that our daughters are doing, I want before they are married off, they should complete the school and I want it to be announced to the people that will marry them if the time of marriage come and he marry her, will he permit her to continue with the school? Because most of our daughter leave school because of the issue of marriage...*

**FGD\_Parents**

Perpetrators of GBV ranged from elderly men, commercial motorcyclists, unemployed youths, male relatives, foster mothers, step-mothers to substance users while the most vulnerable groups were children and adolescent girls particularly the out of schoolgirls. Parents reported



GBV hotspots in the community to be isolated and unsafe paths to school for students and construction sites, for girls who hawk.

*...most of these perpetrators of rape issues are among those using drugs, because when any of those arrested is begin investigated then you see that he is a drunkard, or those doing drugs or Indian hemp, now these are most of those that perpetrate rape in =KANO= anywhere you hear this story the perpetrators are usually not good people at all. because most the time the take these substances they don't think well except to rape a girl... **FGD\_Parents***

*project where you will see girls inside unfinished buildings or where people are building you know that's where they go to sell, construction sites... maybe a child is going to one door begging for food, for over thirty minutes, the child will be begging, begging, for food, nobody has come to address the person or where the child will be begging and maybe an adult, a paedophile, you know that's how they get them you know and use them for all those things... **FGD\_Parents***

#### **4.2.2 Community Mechanisms for preventing GBV**

Some parents reported that the mechanisms used to protect their children particularly girls were to commute them in their cars or motorcycles to and from school and use security personnel to accompany students' home. In addition, some participants mentioned that community policing was effective in preventing GBV as they organised themselves in groups to monitor the activities of youths in the community. Finally, some non-governmental organisations create awareness about GBV in schools and communities. Although the participants believed that the community policing was effective, they, however, noted that GBV persisted in the community particularly hawking and forced marriage.

*...the parents transport their children in their cars, some on motorcycles...the father or the mother will bring the child to the school... **FGD\_Parents***

*It's only this NGO, they go to villages, communities, nukes and crannies they go there for awareness, they go too far places even the chief houses and children use to come, even schools they go there to do their programs... **FGD\_Parents***

### 4.2.3 Community mechanisms for responding to GBV issues

Parents in this assessment mentioned different ways they responded to GBV issues, some reported using the community mechanisms such as going to the District Head but in serious situations, they involved both the police and the court. Other ways the community responds to GBV issues particularly rape is to refer the survivor to a health facility for care. Parents were, however, unclear about the standard or documented pathway for responding to GBV and ensuring survivors get the critical care they need. The culture of silence influences the inclination to cover up rape when it occurs due to fear of stigmatisation and victim blaming among other factors. Some parents in the assessment highlighted that the underlying factor affecting a robust and effective response to GBV issues is the culture of silence.

*They are part of the community security like =AGAJIN SHARIA= but they resolve violence against women in the house, between her and her husband; including rape and all these problem of hawking... FGD\_Parents*

*Yes, normally there is a committee of dialogue of the village, which comprises elders and different people put together, to resolve such kind of problem, almost every area has this committee... FGD\_Parents*

*There is a program in the community we have groups are group called =SA IDO (Keep an eye) we keep eye on children to see what they are doing, if it's bad we take immediate action on it, we have this kind of groups here and the second one is that, we have elders, village heads, community leaders and religious leaders, anything that is done they use to receive report, that this area has a problem and they will not but will sent a message to call that person, even the mother or father they will call them and ask them what is happening, this why this things that happening are not much in our place... FGD\_Parents*

## 4.3 School level factors

### 4.3.1 School Participatory Methods

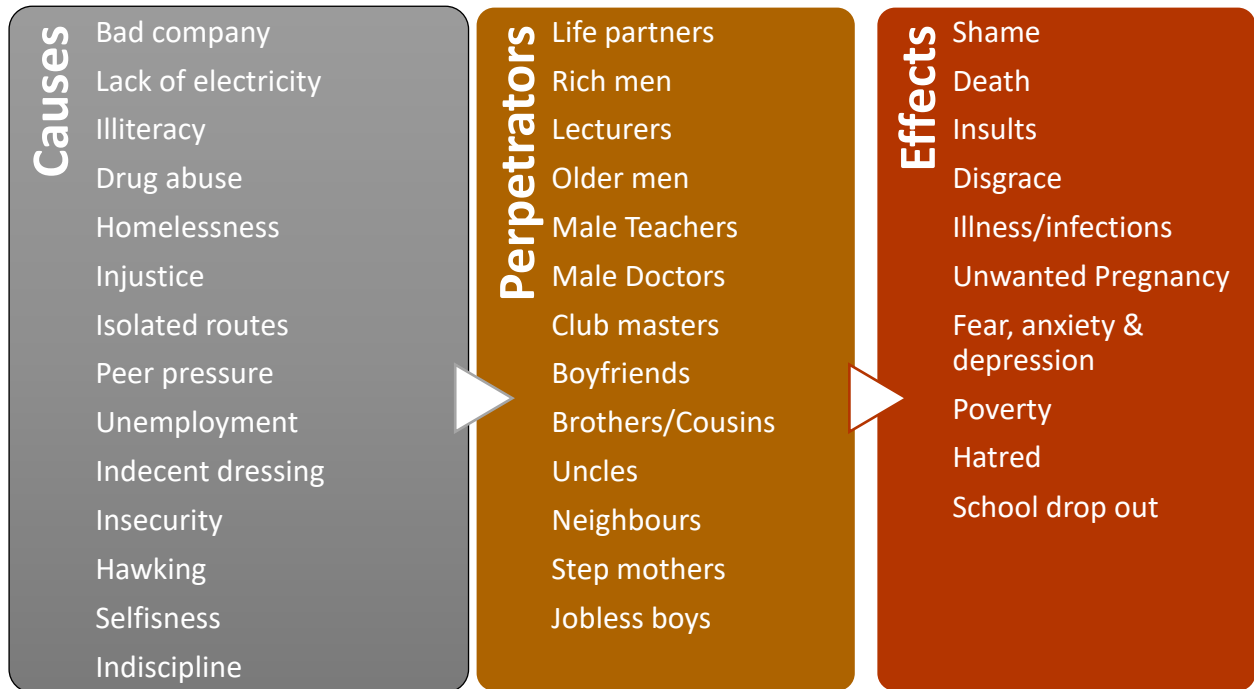
This assessment utilised participatory exercises to understand and document the students' perception on the SRGBV related risks. The exercises included school mapping, free-listing and causal flow analysis.

#### 3.4.1.1 School Mapping Exercise

Participants (students) drew the map of their schools and identified areas where they felt unsafe. As shown in annex A, this included empty classrooms, staff room, spaces around the fence, dilapidated toilets with broken doors and windows, broken fence around the hostel, bushy areas and pathways to the school.

### 3.4.1.2 Free Listing and Causal Flow

Participants (students) highlighted perceived causes, perpetrators and effects of GBV at school and on the community. This exercise was carried out to understand their perception about GBV as the findings are useful for programming and SRGBV education to address some of the misconceptions expressed. For example, some girls felt that dressing inappropriately could result in a girl being raped. They listed them as follow:



**Figure 4: Causal flow diagram showing causes, perpetrators and effects of SRGBV**

### 4.3.2 Awareness about GBV

The level of awareness about the elements that constitute SRGBV was low in schools among teachers and students. Although some participants mentioned that they had attended workshops, their understanding of GBV was low. Other participants mentioned varied situations that they felt was GBV such as harassing a person based on gender, discrimination against girls, making girls hawk, bullying, forcing student/girls into relationship and raping of girls in the community.

*Well to me gender- based violence is... let's say harassing a person on the basis of her gender and it usually refers to girls because you know girls, girls are the weaker sex.*

**IDI\_Teacher**

Some of the awareness activities included jingles on radio and television as well as sensitization workshops on GBV. There were also programmes organized by NGOs to create awareness not only in schools but also within the community. Students who participated in workshops where they learnt about GBV were expected to stepdown to others and pioneer clubs in the school to teach other girls.

*we attended workshop for two days that trained our student on this gender-based violence last term. Or that is introducing the concept in various subjects so that students will be aware of all this violence that are happening in the environment here in the community.*

**IDI\_School G&C**

#### **4.3.3 Teachers Code of Conduct**

Findings from focus group discussions, key informant interviews and in-depth interviews showed that a written code of conduct existed for teachers. There was, however, no documented code of conduct or guidelines for disciplinary measures or GBV response in school. Although there was no written documentation for such codes and regulations, there was a consensus on how teachers are expected to relate with students. Disciplinary committees were also set up to investigate cases of GBV in schools when they occur. There were no clear mechanisms for follow-up of disciplinary issues or enforcement of sanctions.

*...there is code of conduct; in the first place, they don't allow a student, teachers to have any relationship with the student if it's not in relation to school activities, their relationship is based on their studies*

**FGD\_Teachers**

#### **4.3.4 Measures to prevent SRGBV.**

Some of the measures identified by participants to prevent GBV in schools include separation of male and female students, provision of security and appropriate stakeholder's coordination. This was not viewed as a problem in Kano state as boarding schools were strictly either boys or girls' school while for day schools, the boys' and girls' section of the school was demarcated. The School Based Management Committee (SBMC) which comprises representatives from PTA (PTA Chairman) school (Principal and Vice Principal), community and management committee also played an important role. This committee was responsible for linking the schools with NGOs and religious organisations that provided support for GBV prevention. A recent initiative by the education board was to ensure that students enrolled in secondary schools were within the catchment area to prevent them from travelling or walking long distances to school. Community policing was also a strategy used to ensure students are escorted to school especially through

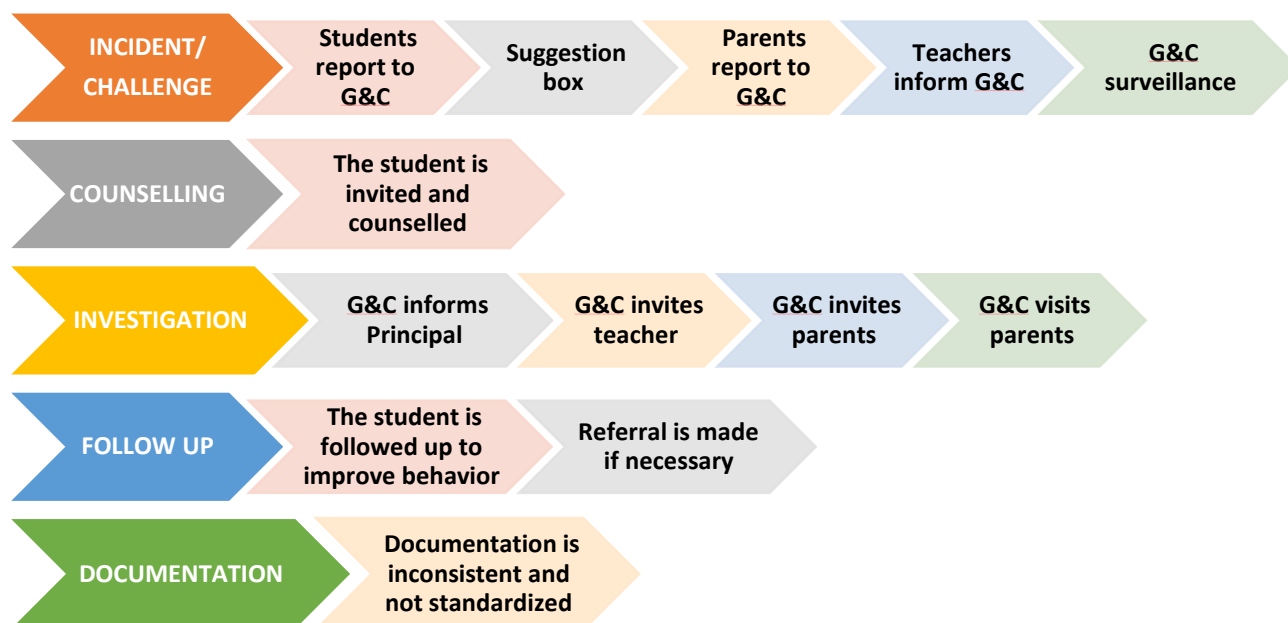
unsafe routes.

*because there are so many ways that we are taking care of this type of violence, for example, you will see that most of the schools that we have here in Kano, you see we don't normally mix boys and girls in the school, even in the mixed school, maybe you have gone round and you have seen, even in the mixed school the children were separated, so that is also one of the reasons that minimize this type of violence, and that we follow it because of the religion sometimes*

**KII\_Government Stakeholder**

#### 4.3.5 Guidance and Counselling Pathway

As shown below, SRGBV incidents are directly reported by students, teachers or parents to the guidance counsellors who investigate to verify reports. This is followed by identifying affected students, counselling, follow up and documentation of cases. Although most G&Cs described similar pathways for G&C in their state, it was not consistent across all the schools. For example, while some school counsellors intervened in forced marriage by having a conversation with the student's parents, some clearly stated that they leave this at the prerogative of the parents.

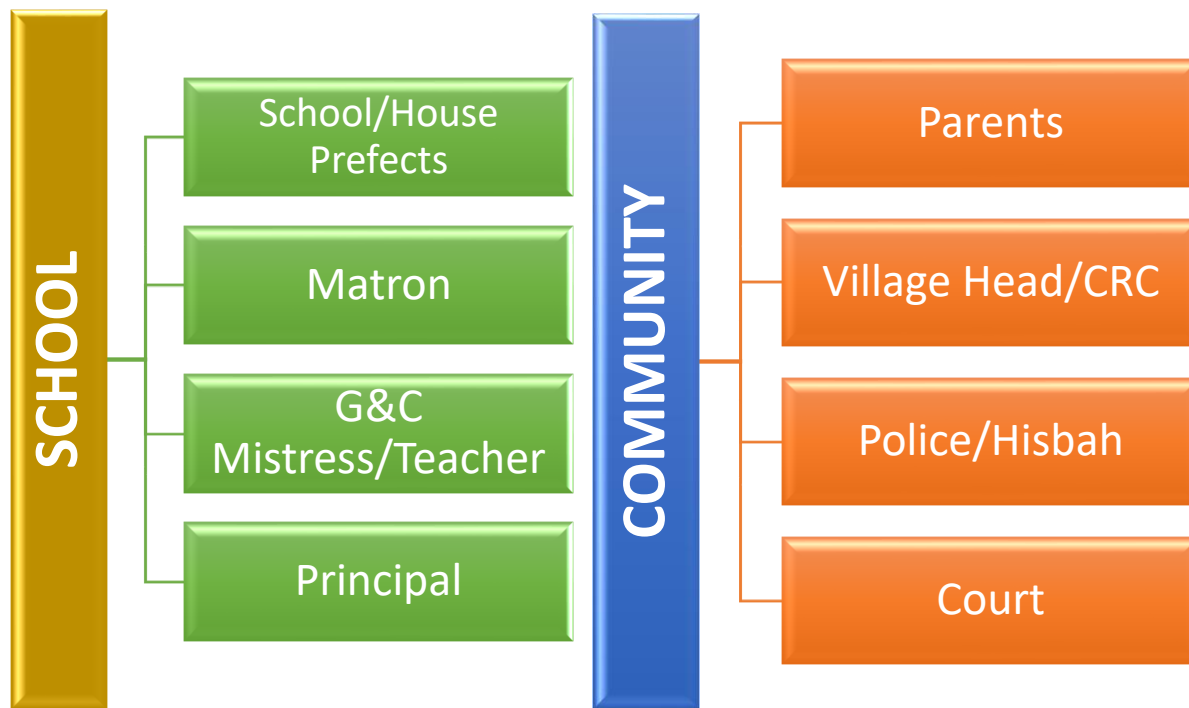


**Figure 5: School Guidance and Counselling Pathway**

#### 4.3.6 Reporting Mechanisms for SRGBV

Female students are expected to report GBV related issues to the guidance and counselling unit of the school. The school management ensures that appropriate actions are taken, and the first action taken is clinical observation while further actions like setting up a disciplinary committee

is required for further investigation. For female students in boarding schools, GBV related issues can be reported to the matron who reports to the school management.



**Figure 6: GBV Reporting Mechanisms for School and Community**

#### 4.3.7 Punitive Measures

Participants mentioned different punishments that could be meted out to teachers who were perpetrators depending on the complexity of the reported case. Some of these punishments include termination of appointment, temporary suspension and being transferred to another school. In addition, students who were perpetrators were often suspended for 2 weeks after deliberations with their parents.

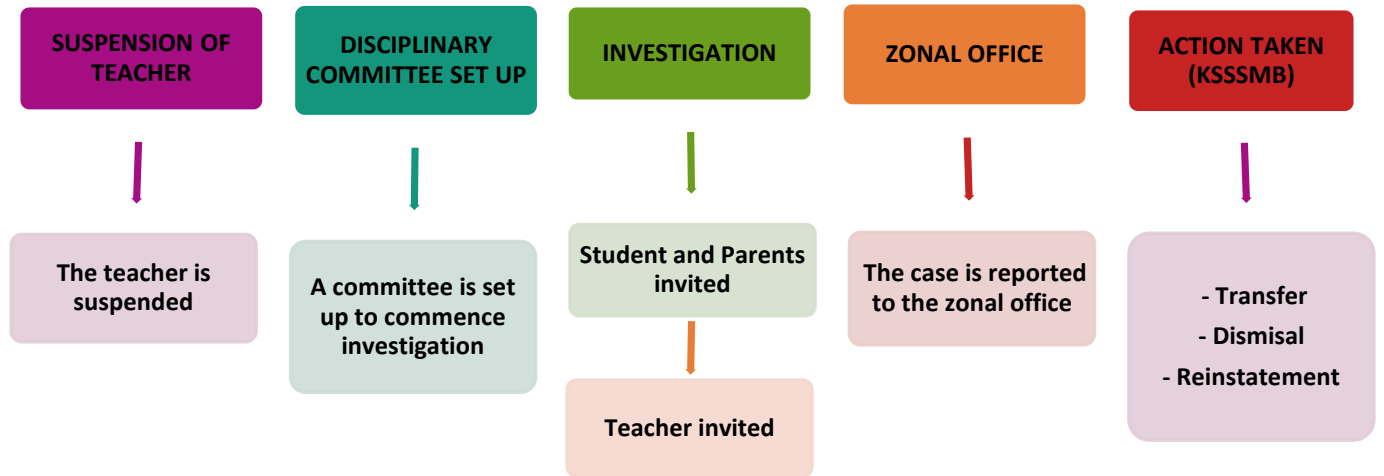
*there is... but most time they are being put on suspension, after calling their parents, giving them warning, they go on two weeks suspension, and after that if it is repeated again ... the same student repeat it...so I think...though I've not seen or I have not heard when anyone has been sent to go away from the school but then I know they have been suspended on several cases, several cases that came to be like this, they have been suspended within the school.*

**FGD\_Male teachers**

##### 4.3.7.1 Disciplinary Procedures for Teachers

Stakeholders described the disciplinary procedures for erring teachers, commencing with suspension with possibility of dismissal from service. Although the disciplinary procedure for

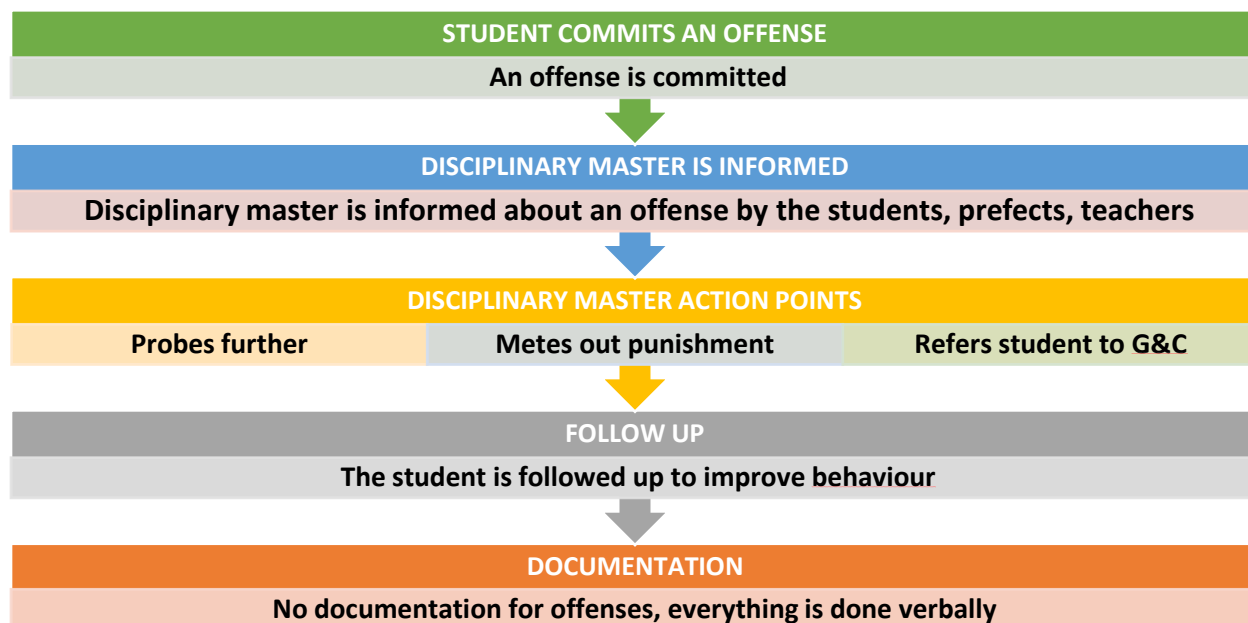
teachers was reported, there were no clear instances where these disciplinary procedures were applied.



**Figure 7: Disciplinary Procedures for Teachers**

#### *4.3.7.2 Disciplinary Masters Punishment Pathway*

Although the code of conduct for Teachers in Kano State documents that corporal punishment can only be approved by the school principal, conversations with the disciplinary masters did not reflect this. There was no documentation of minor or major offences or follow up actions. The punishment process utilized by disciplinary is highlighted as follows:



**Figure 8: School Discipline Masters Disciplinary Pathway for Students**

#### 4.3.8 Gaps and Challenges

##### 4.3.8.1 Challenges of G&C

Services provided by school include G&C services for girls, uptake of such services is usually hindered by shyness, fear of being stigmatized and fear of tarnishing their parents' image. Another factor that hinders uptake of such services include lack of privacy during counselling sessions as there are no dedicated offices for most staff. The gender of the counsellor was also important, when the officer is a female, students are more open to access the services.

*the reason why some people don't want to disclose is because there will be too much talk from neighbourhood, in fact such victims will be at home and some people can be insulting them indirectly especially the parents of the victim. Sometimes some men on hearing this will not agree to marry such people in fact some people can even stop their friends from dating such victims, these things are happening so much*

**FGD\_Male students**

Most of the G&C were not trained in counselling but were drafted to provide that service within the schools. This implied that they did not have the capacity to provide such services.

##### 4.3.8.2 Non-Documentation of GBV Policies

Some of the challenges mentioned by participants include non-documentation and poor implementation of SRGBV policies in schools. These concerns were raised particularly by teachers who recognised the importance of documenting these policies.



*There is rules and regulations but there is, there are no written rules. IDI\_School G&C*

#### **4.3.8.3 Capacity Building and Lack of Basic Amenities**

Teachers across the schools visited reported that they lacked the capacity to effectively handle GBV cases in school because they were not trained to do so. In addition, lack of basic amenities such as inadequate water supply was also considered a challenge.

#### **4.3.8.4 Poor Gender mix of teachers in girls' schools**

Poor gender mix of teachers in girls' school resulting in predominantly male teachers impacted negatively on the potential for female students to build relationships that enhance reporting of GBV.

#### **4.3.8.5 Non-implementation OF Punitive Measures**

While there were punitive measures for offences as reported by participants, enforcement was poor. In a situation where teachers were few, school administrators were unwilling to dismiss or suspend teachers as disciplinary measures and issued a warning instead.

*Then later on when it persists, they will warn him. You know there is problem? The problem is that we don't have enough teachers. You have to be, you know, (short laughter) ...Yes. Ehn that one. So, we call your attention, we warn you, yes. When we warn you, then if you corrected your attitude ....*

**IDI\_Vice Principal**

### **4.4 Stakeholders' perception and Institutional response to SRGBV**

Stakeholders believed violence against women rooted in socio-economic drivers such as poverty that forces families to send girls to the street to hawk. They argued that girls who hawk on the streets were aware of the potential risks of harassment and rape but had to do so to survive.

*"look at the girls hawking from one incomplete building to another, they know they have being harassed , they were are likely going to be harassed by who by the Mai guard (security man) and the brick layers, and laborers working in the small mini-factors but they still come, if they are like expose to all this dangers who took them there, so orientation comes in here, so in general if I am trying define gender base violence in my own level, is an act against the will either the child know or the child do not know"*

**KII\_Government Stakeholder**

Majority of stakeholders reported that GBV occurred to a lesser extent in schools than in communities. They, however, admitted a high chance of under-reporting because societal taboos and the culture of silence on such issues. They also attributed other forms of SRGBV such as

physical violence/assault to power dynamics between senior and junior students. When asked if there were codes of conduct for teachers that were SRGBV-related, a government stakeholder answered that his agency was in the process of producing the code of conduct for teachers in the state. Separating boys and girls in schools was considered an institutionalized mechanism to reduce SRGBV.

*Yeah there is this, this we have even assign our director of promotions to go and contact, he is already in the business with the government printer who produce this books, there is, we all know there is when you go to the principal's office you can meet a sheet of books but this code of conduct is not there but now we want it by January each and every school will have one*

**Government Stakeholder**

A government stakeholder highlighted that his agency's institutionalized way of responding to GBV offences was to first set up an investigative committee that develops a report after the investigation and the case is passed on to the legal department.

*"... most of the schools that we have here in Kano, you see we don't normally mix boys and girls in the school, even in the mixed school, maybe you have gone round and you have seen, even in the mixed school the children were separated, so that is also one of the reason that minimize this type of violence, and that we follow it because of the religion sometimes"*

**KII\_SARC**

#### **4.4.1 Waraka Sexual Assault and Rape Centre**

The Centre was founded by the government through the support of a DFID-funded 'Justice for All' project in 2016. Though it is located within a hospital, it enjoys collaboration from 3 MDAs; Ministry of Health which provides medical services; Ministry of Women Affairs and Social Development which provides counselling and psycho-social services and Ministry of Justice which provides legal services.

Most sexual assault cases were first reported to the police, who then refer them to the Centre. Majority of clients who access medical care at the centre do so late because of the stigma associated with disclosure and the fear of not getting married. The centre receives an average of five clients per day, an improvement over previous years due to increased sensitization. The centre, however, operates only on weekdays (Monday-Friday). There are referral linkages between the centre and the police, other services in the hospital; obstetrics and gynaecology unit for ante-natal services, HIV clinic as well as a follow-up process.

#### 4.5 Participants' Recommendations

The table below presents the summary of the participants recommendations to reduce the risk factors influencing SRGBV and sexual and gender-based violence (SGBV) in schools and in the communities respectively.

**Table 10: Summary of participants' recommendations**

S/N		PARENTS
1		Allow girls to finish school before marriage
2		Sensitize students on safety measures
3		Ensure offenders are prosecuted
4		Establish more boarding schools for girls
5		Parents economic empowerment to reduce street hawking
6		Enforce laws against street hawking by girls
7		Provide security for day students
8		Provide school bus for day students
<b>TEACHERS</b>		
1		Initiate skill acquisition for students
2		Encourage scholarships for girls in schools
3		Ensure sanctions for GBV offences to encourage deterrence
4		Increased collaboration with non-governmental organisations through awareness creation in schools on GBV
5		Improve infrastructural facilities in school to improve uptake and retention of girls in schools
6		Provision of school buses for day students
7		Teachers should maintain professionalism in discharging duties
8		Improve Guidance and Counselling Units in Schools:
9		Encourage girl-child education through scholarship
10		Create safe and gender-sensitive school environment:
<b>STAKEHOLDERS</b>		
1		Increase staff recruitment
2		Improve data collection and reporting on GBV case to facilitate policy development
3		Improve funding for sustainability in sexual assault referral centres
4		Parents should develop interest in girls' education and wellbeing
5		Reinforcing GBV specialized service providers
<b>STUDENTS</b>		
1		Increase the number of guidance and counselling units in schools
2		Dialogue with neighbouring schools to reduce school related gender-based violence

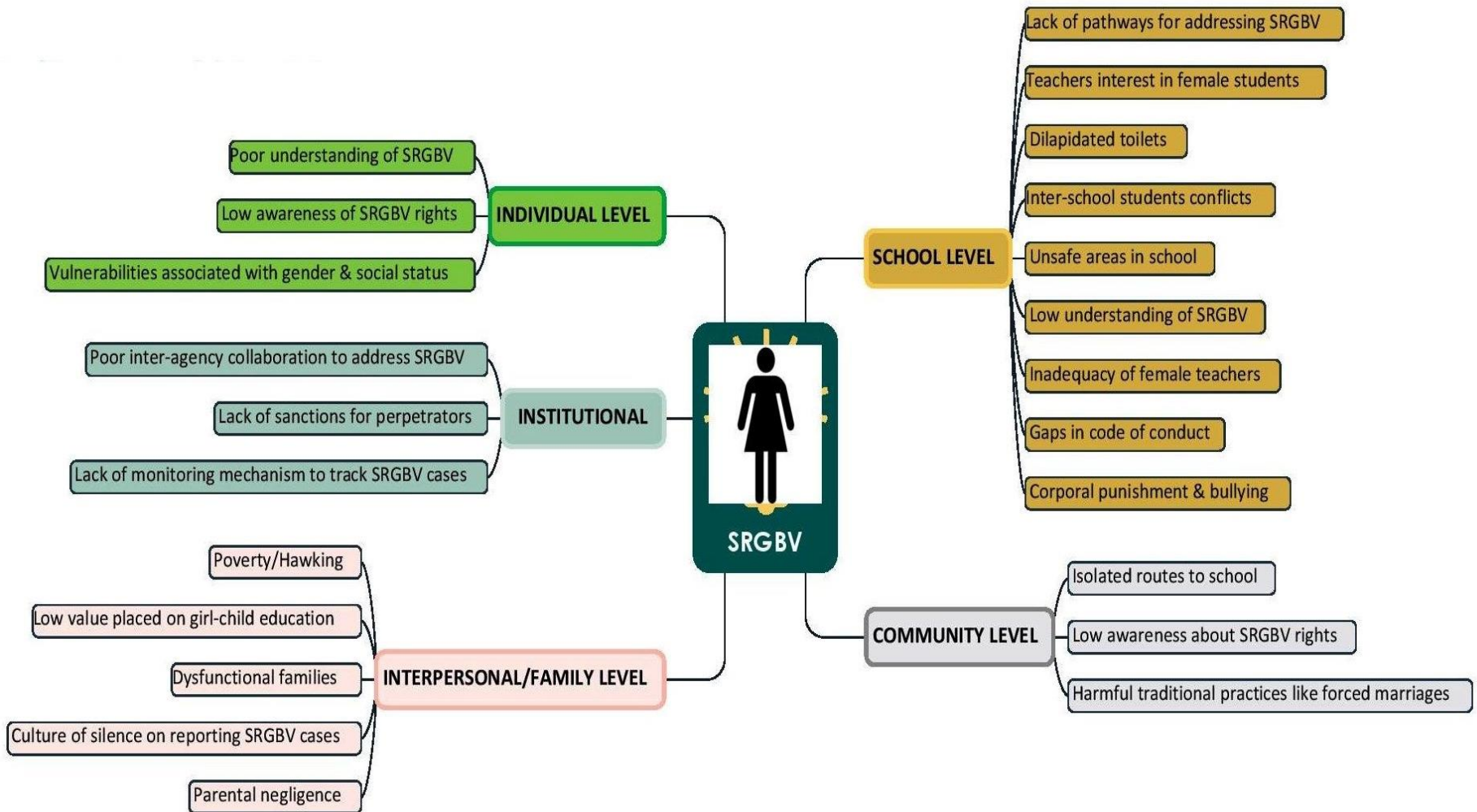
3	Improve security measures in and around schools
4	Improved Reporting of cases

## CHAPTER 5: SUMMARY OF FINDINGS

This assessment highlighted potential risks for SRGBV in school settings and in the communities. Some of the potential risks identified include forced marriage, teachers' interest in marrying female students, corporal punishments by teachers, verbal abuse and bullying by male students. Girls identified to be vulnerable include adolescent girls under the care of stepmothers, involved in hawking, out of schoolgirls and girls from dysfunctional home. Perpetrators of SRGBV include male students and teachers; perpetrators of GBV at community level include elderly men, drug users, commercial motorcyclists, unemployed youths, male relatives.

Some prevention measures identified by participants include the demarcation of boys and girls learning spaces in mixed schools, prohibition of teacher-student relationship, sensitization and orientation of female students, ensuring perpetrators are punished, encouraging female students in local communities go home in clusters, step-down guidance and counselling training for teachers. The common ways of reporting SRGBV incidents in schools are through the teachers and guidance counsellors while a few students report through boarding house matrons, designated school prefects or suggestion boxes. At community level, GBV incidents are reported to the Head of Community, District Head or religious police (Kano State Hisbah Corp).

Although a teacher's code of conduct existed in schools, it did not comprehensively address the issues relating SRGBV and communication about the code of conduct was mainly verbal. Documentation and dissemination of the code of conduct was poor in many schools. This assessment highlighted the multi-sectoral collaboration between the Ministries of Health, Justice, Women Affairs and Social development as well as the police in responding to GBV cases through the operations of the Waraka Sexual Assault and Rape Centre. The Centre caters to medical, psychosocial and legal needs of survivors and has linkages with relevant units in the hospitals and police departments. The staff received GBV specific training but due to inadequate personnel and limited operating hours, the centre was not equipped to provide optimal care to survivors. Finally, there were no clear pathways for referral and some participants were not aware of specific centres that provided care and support for GBV.



**Figure 9: Summary of Assessment Findings**

## CHAPTER 6: REVIEW OF THE AGILE PAD AND RECOMMENDATIONS

Findings from the SGBV rapid assessment indicated the need for awareness and prevention of GBV at leadership and school levels. It also identified the need for a robust SRGBV incidents response, collaboration with stakeholders and monitoring and reporting of SRGBV issues. The table below highlights the recommendations on mitigating the potential risks of SRGBV in schools.

**Table 11: Review of AGILE PAD and Recommendations**

COMPONENT 1: Learning spaces	Risks and considerations	Project strategies	Other strategies
<b>Construction/expansion of classrooms</b>	<ul style="list-style-type: none"> <li>*Risk exposure at construction site, security and GBV risk for young girls hawking at site.</li> <li>*Impact on existing hygiene facilities, improved livelihood for men, shift in power dynamics, increased demand for sex work or forced/early marriage.</li> <li>*Safety of girls</li> </ul>	<ul style="list-style-type: none"> <li>*Disability friendly considerations for construction/use</li> <li>*Perimeter fences</li> <li>* Project GRM</li> <li>*Site specific ESMP</li> </ul>	<ul style="list-style-type: none"> <li>*Temporary toilet facilities for construction workers.</li> <li>* Timing of construction activities.</li> </ul>
<b>Construction of basic amenities (hygiene/sanitation facilities)</b>	<ul style="list-style-type: none"> <li>* Adequacy of new hygiene facilities for number of classrooms constructed.</li> <li>*Location of the facilities in ‘safe zones’ within the school.</li> <li>* Sustainable supply of power and water to ensure facilities are well lit and maintained.</li> <li>*Long term sustainability and maintenance of amenities.</li> <li>*Implications for menstrual hygiene.</li> </ul>	<ul style="list-style-type: none"> <li>*Separate toilets for boys/girls</li> <li>* Stakeholder consultations</li> </ul>	<ul style="list-style-type: none"> <li>*Mapping by students and teachers to mark safe and unsafe zones within the school.</li> <li>*Toilet/student ratio should be considered to ensure toilets are adequate.</li> <li>*Work with PTA and SBMC to monitor water supply, clearing of bushes, maintenance of fence, toilets.</li> </ul>

<b>COMPONENT 2: Life skills</b>	<b>Risks and considerations</b>	<b>Project Strategies</b>	<b>Other strategies</b>
<b>Teacher recruitment</b>	<ul style="list-style-type: none"> <li>*Availability of female teachers</li> <li>*Adequacy of Incentives to attract and retain teachers</li> <li>*GBV education and gender sensitive approach</li> </ul>	<ul style="list-style-type: none"> <li>*Induction package</li> <li>*Prioritizing recruitment of female teachers.</li> <li>*Positive discipline</li> <li>*Head teacher support</li> </ul>	<ul style="list-style-type: none"> <li>*Update school code of conduct to address school related GBV (enforcement mechanisms, sanctions, accountability structure) and reporting guidelines.</li> <li>*Trainings/ refresher sessions and clear communication on GBV.</li> </ul>
<b>Mentoring and coaching</b>	Structure of mentoring program (participatory vs top-down)	Professional mentors Practice sessions	
<b>Life skills and livelihood skills</b>	<ul style="list-style-type: none"> <li>Cultural competence</li> <li>Incorporation of SRGBV skills</li> <li>Sustainability of trainings</li> <li>Safeguards to ensure participants feel safe</li> </ul>	<ul style="list-style-type: none"> <li>* Create of safe spaces in schools.</li> </ul>	<ul style="list-style-type: none"> <li>*Create of safe spaces using a participatory approach.</li> <li>* SRGBV curriculum to be incorporated into the school's life skills program.</li> </ul>
<b>COMPONENT 3: Family/Community Empowerment</b>	<b>Risks and considerations</b>	<b>Project Strategies</b>	<b>Other strategies</b>
<b>Targeted community level activities</b>	<ul style="list-style-type: none"> <li>* Opportunities for community involvement in addressing GBV</li> </ul>	<ul style="list-style-type: none"> <li>*Community leaders and high level advocated as champions of change.</li> <li>Social norms campaign</li> </ul>	



<b>Providing financial support package to families</b>	<ul style="list-style-type: none"> <li>* Monitoring payments to mother of the girls (stepmothers)</li> <li>* Sustainability/Transition plan for girls so they don't go back hawking</li> </ul>	<ul style="list-style-type: none"> <li>* Payment to the mother of the girls.</li> <li>* Spot checks</li> <li>* Tracking of school attendance</li> </ul>	<ul style="list-style-type: none"> <li>* Additional monitoring of payments to care givers of vulnerable girls.</li> </ul>
<b>Social norms and behavioural change campaigns and community engagement</b>	<ul style="list-style-type: none"> <li>* Accountability of families &amp; Culturally competent messaging on GBV, school enrolment, forced marriage</li> </ul>	<ul style="list-style-type: none"> <li>* Work with community groups</li> <li>* Engage boys and men groups</li> </ul>	<ul style="list-style-type: none"> <li>* Consider participatory approach in developing content and delivery engagement sessions.</li> </ul>
<b>COMPONENT 4: Institutional/System strengthening</b>	<b>Risks and considerations</b>	<b>Project Strategies</b>	<b>Other strategies</b>
<b>* Capacity building at State and Federal Ministry to improve coordination, technical skills, M&amp;E and financial management</b>	<ul style="list-style-type: none"> <li>* Continuity and sustainability.</li> <li>* Institutionalizing capacity building opportunities to facilitate continuity and technical skills transfer at Federal and state level.</li> </ul>	<ul style="list-style-type: none"> <li>* Capacity building support.</li> <li>* Technical assistance</li> </ul>	<ul style="list-style-type: none"> <li>* Assess existing M&amp;E structures and data transmission mechanisms that can improved</li> </ul>
<b>* Knowledge sharing and collaboration at federal and state level, foster shared commitment to girls' education and empowerment</b>	<ul style="list-style-type: none"> <li>* Political will, transitions in government, working with existing coordination structures to enhance sustainability.</li> <li>* Learning agenda to address need for evidence-based data.</li> </ul>	<ul style="list-style-type: none"> <li>* Policy review with a focus on strengthening girls' empowerment.</li> </ul>	

### **Additional notes on Safe Spaces**

The creation of safe spaces is critical in facilitating a supportive environment for girls and ensuring that they engage. Preliminary findings from the assessment show that girls want to engage, and they enjoy participatory opportunities to do so. This was reflected in the level of energy and focus they demonstrated during the school mapping exercise they participated in. The project is recommending the creation of safe spaces to ensure that girls can build strong social support/network (by girls for girls), acquire life skills, mentorship and social empowerment.

- The safe space component of the project can be strengthened to serve as avenues for supporting linkages to referral pathways for GBV, by incorporating key messaging about sexual and reproductive health/ rights, communication, GBV and centers where they can seek professional help for GBV. These messages will also address specific vulnerabilities that girls with disabilities face. This will facilitate ease of communication in instances where help seeking is necessary.
- As safe spaces are girl only spaces, identification of these spaces will involve the girls to ensure they truly feel safe and can be free to express themselves. Engaging them in the identification of accessible and safe venues will increase participation. The process of identifying safe spaces will also be inclusive of girls with a variety of disabilities to ensure that it is physically accessible to them.
- Training and evaluation of mentors will incorporate practical sessions that explore their capacity to provide consistent and accurate (non-judgmental) information. This can be achieved by simulating the same scenario with different mentors (post training) and comparing their responses on how they will handle it. This is important because conflicting messages from mentors can result in confusion and limit trust.
- To build trust in safe spaces, girls should participate in the development of guidelines for respect, privacy/confidentiality. Building trust will ensure that the most vulnerable feel confident about discussing private and sensitive issues and can receive the help they need. Keen consideration should be given to the most vulnerable, disabled, very young whose participation may be further limited by stigma and social exclusion.
- The girls should co-create participatory exercises for meetings to improve ownership and leadership. This will also ensure that the sessions are aligned with appropriate cultural standards.

## CHAPTER 7: ACTION PLAN ON MITIGATING SRGBV IN AND AROUND SCHOOLS

**Table 12: Action Plan on Mitigating SRGBV**

Expected Output	Focus Actions	Time Frame	Institution Focal Point	Collaborating Partners	Indicators
<b>Outcome 1: Update and implement school code of conduct on SRGBV</b>					
<b>Output 1.1: Updated school code of conduct for teachers, administrative and support staff to address school related GBV (to include youth corpers and temporary teachers)</b>	Update school code of conduct to address SRGBV (GBV reporting guidelines, enforcement mechanism, sanctions and accountability structure to be signed by teachers, administrative and support staff.	3 Months	SMOE, SMWA,	FMOE and partners	
<b>Output Indicator 1.1.1: Updated school code of conduct for teachers and support staff and finalise with stakeholders.</b>	Using a participatory approach, update code of conduct to address SRGBV and finalise with stakeholders.	3 Months	SMOE, SMWA	FMOE and partners	Comprehensive code of conduct developed
<b>Output Indicator 1.1.2: Capacity building for increased knowledge/skills of teachers, administrative and support staff on GBV and communicate code of conduct.</b>	Conduct focused SRGBV training to improve knowledge about GBV, code of conduct and build skills in positive discipline for teachers, administrative and support staff.	6 Months/ Ongoing	SMOE, SMWA	FMOE and partners for TOT	Number of teachers Trained
<b>Output Indicator 1.1.3: Signed code of conduct for teachers and support staff</b>	Ensure that new teachers sign off code of conduct after training/orientation. Facilitate sign off with existing	Ongoing	SMOE, SMWA	FMOE and partners	Code of conduct signed (number)

Expected Output	Focus Actions	Time Frame	Institution Focal Point	Collaborating Partners	Indicators
	teachers/support staff as part of a reorientation process.				
<b>Output Indicator 1.1.4: Increased availability of accurate information on SRGBV related issues for teachers, administrative and support staff.</b>	Develop learning guides for teachers, administrative and support staff to serve as a reference document for daily use.	3 months	SMOE, SMWA	FMOE and partners for development of guide	No. of booklets produced and given to staff
<b>Output 2: Parents engagement on SRGBV</b>					
<b>Output 2.1: Increased knowledge of parents and caregivers on benefits of girl child education and SRGBV</b>	Facilitate discussions with parents through the PTA to deliver balanced information about gender equality, SRGBV and school retention for girls.	quarterly	SMOE, SMWA	PTA SBMC CBO/CSO	Number SRGBV PTA meetings per year
<b>Output Indicator 2.1.1: Increased number of parents with better understanding and knowledge of SRGBV</b>	Facilitate discussions with parents through the PTA to deliver balanced information about gender equality, SRGBV and school retention for girls.	quarterly	SMOE, SMWA	PTA SBMC CBO/CSO	PTA attendance
<b>Output Indicator 2.1.2: Increased the knowledge of parents about GBV case management process, reporting and referral</b>	Facilitate discussions with parents through the PTA to deliver information about GBV case management process and referral	quarterly	SMOE, SMWA	PTA SBMC CBO/CSO	Number SRGBV PTA meetings per year
<b>Output Indicator 2.1.3: Increased parent involvement in addressing SRGBV and safety issues in schools</b>	Institute safety sub-committee within the PTA to discuss/review safety related issues and make recommendations	3 Months	SMOE	PTA SBMC CBO/CSO	Safety subcommittee constituted.

Expected Output	Focus Actions	Time Frame	Institution Focal Point	Collaborating Partners	Indicators
<b>Outcome 3: Teachers and educational staff support</b>					
<b>Output 3.1. Increased knowledge and skills of teachers to prevent and respond to SRGBV</b>	Develop GBV reference materials and guides for teachers	3-5 months	SMOH SMOE, SMWA	FMOE and partners for development of guide	Number of reference guides distributed
<b>Output 3.1.1 Increased number of teachers with better understanding and knowledge of SRGBV</b>	Conduct on the job training for all teachers on prevention and response to SRGBV in schools using the reference guides.	3-6 months	SMOH SMOE, SMWA	FMOE and partners for development of guide	Number of teachers trained.
<b>Outcome 4: SRGBV education and life skills for girls</b>					
<b>Output indicator 4.1: Increased knowledge of teachers/G&amp;C to build capacity of schoolgirls and boys on SRGBV.</b>	Conduct TOT workshops for trainers/teachers on SRGBV, life skills and rights.	3-6 months	SMOE, SMWA	FMOE and partners for TOT.	
<b>Output indicator 4.1.1: Increased knowledge of teachers/G&amp;C capacities to build capacity of schoolgirls and boys on SRGBV.</b>	Conduct TOT workshops for trainers/teachers on SRGBV, life skills and rights.	3 months	SMOE, SMWA	FMOE and partners for TOT.	Number of TOT workshops and teachers trained.
<b>Output indicator 4.1.2: Increased knowledge of schoolgirls and boys on SRGBV, life skills and rights.</b>	Conduct trainings for schoolgirls and boys as part of the school program. Incorporate trainings as part of their school health education program.	On-going	SMOE, SMWA	FMOE and partners for TOT.	Number of schoolgirls and boys trained

Expected Output	Focus Actions	Time Frame	Institution Focal Point	Collaborating Partners	Indicators
<b>Output indicator 4.1.3: Increased engagement of schoolgirls in participatory SRGBV and life skills activities</b>	Establish active girls' clubs to promote participatory learning for life skills and SRGBV in safe spaces.	On-going	SMOE, SMWA	FMOE and partners for TOT.	Number of girls' clubs established
<b>Output 5: Reporting, monitoring and accountability</b>					
<b>Output 5.1:</b>	Develop reporting and monitoring system to track GBV in schools and referral mechanisms.	3-6 months	SMOE, SMWA	FMOE and partners	Number of cases reported/number of referrals
<b>Output 6: Incidents Response</b>					
<b>Output 6.1: Increased and clear referral pathways</b>					
<b>Output 6.1.1: Increased number of safe spaces and first aid facilities in schools</b>	Create safe spaces that provide peer support for girls that increase openness in	3-5 Months	SMOE	Ministry of women affairs and social development	
<b>Output 6.1.2: Mapped child protection services, medical, psychosocial, legal or family welfare services</b>	Mapping of child protection services, medical, psychosocial, legal or family welfare services that exist in the community or around the school.	2 months	SMOE, SMWA	FMOE and partners	List of mapped services
<b>Output 6.1.3: Increased knowledge of GBV referral services by parents, G&amp;C,</b>	Create awareness on child protection services, medical, psychosocial, legal or family welfare services through flyers, meetings, G&C sessions etc.	3-6 months	SMOE, SMWA	FMOE and partners	Number of people reached

Expected Output	Focus Actions	Time Frame	Institution Focal Point	Collaborating Partners	Indicators
students and the wider community.					
<b>Output 6.1.2: Increased knowledge of guidance counsellors on support and counselling services for students</b>	Conduct GBV specific training for guidance counsellors on providing counselling and support for victims and survivors	1-2 months	SMOE	SMOE and ministry of women affairs and social development	Number of guidance counsellors trained
<b>Output 6.1.3: Increased knowledge of Guidance and Counsellors about referral mechanisms</b>	Develop referral protocol or manual for guidance and counsellors to ensure effective referral mechanism	3-5 months	SMOH	SMOE and ministry of women affairs and social development, SARC	Number of guidance counsellors sensitised
<b>Output 6.1.4: Increased number of GBV referral centres linked to schools.</b>	Develop linkages between schools and referral centres.	3-5 months	SMOH	SMOE , SARC, and ministry of women affairs and social development	Number of schools linked to referral services
<b>Outcome 7: Strengthening physical environments in and around schools</b>					
<b>Output 7.1: increased safe learning environment in and around schools</b>					

Expected Output	Focus Actions	Time Frame	Institution Focal Point	Collaborating Partners	Indicators
<b>Output indicator 7.1.1:</b> Increased recruitment and training of female teachers in secondary schools on mentorship	Recruit and conduct trainings and refresher sessions for female teachers to increase role models	ongoing	SMOE		Number of female teachers recruited
<b>Output indicator 7.1.2:</b> Increased the number standard toilet facilities in schools to ensure good hygiene	Construct/ repair toilet facilities in schools ensuring good toilet/student ration	ongoing	State ministry of works	SMOE partners	Number of toilets constructed Toilet/student ratio.
<b>Output indicator 7.1.3:</b> Increased safe zones in and around school premises	Clear bushy areas in and around school	1-3 months	SMOE	SMOE partners	
<b>Output 8: School leadership and community engagement</b>					
<b>Outcome 8.1:</b> Increase knowledge of community leaders, and PTA/SBMC on gender equality, GBV, and reporting/ referral of SRGBV					
<b>Output 8.1.1:</b> Increased knowledge of the community leaders and traditional leaders on SRGBV	Engage community and traditional leaders with information on GBV for behaviour change to encourage reporting and empower community members to identify protection mechanisms for SRGBV.	1-3 months	SMOE	SMOE, CSOs/CBOs, Ward committee	Number of community leaders engaged



Expected Output	Focus Actions	Time Frame	Institution Focal Point	Collaborating Partners	Indicators
<b>Output 8.1.2:</b> Increase knowledge of school administrators/PTA/SBMC on SRGBV and effective reporting mechanisms.	Conduct trainings for school administrators/PTA/SBMC on GBV reporting mechanisms using a participatory approach.	1-3 months	SMOE	TOT teams, CSOs/CBOs	Number of people trained
<b>Output 8.1.3:</b> Increased availability of accurate information on SRGBV related issues for community leaders and members	Develop learning materials locally adaptable to the context	3-6 months	SMOE	SMWA, CSOs/CBOs	Number of IEC materials produced and disseminated
<b>Output 8.1.4:</b> Increased involvement and participation of community leaders in addressing GBV related issues	Conduct engagement sessions with community leaders/members to discuss ways of making the community safe for girls	3-6 months	SMOE	SMWA, CSOs/CBOs	Number of GBV sessions held in the community

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## APPENDICES

### Appendix I: School mapping with girls highlighting hotspots for SRGBV in a few secondary schools in Kano State

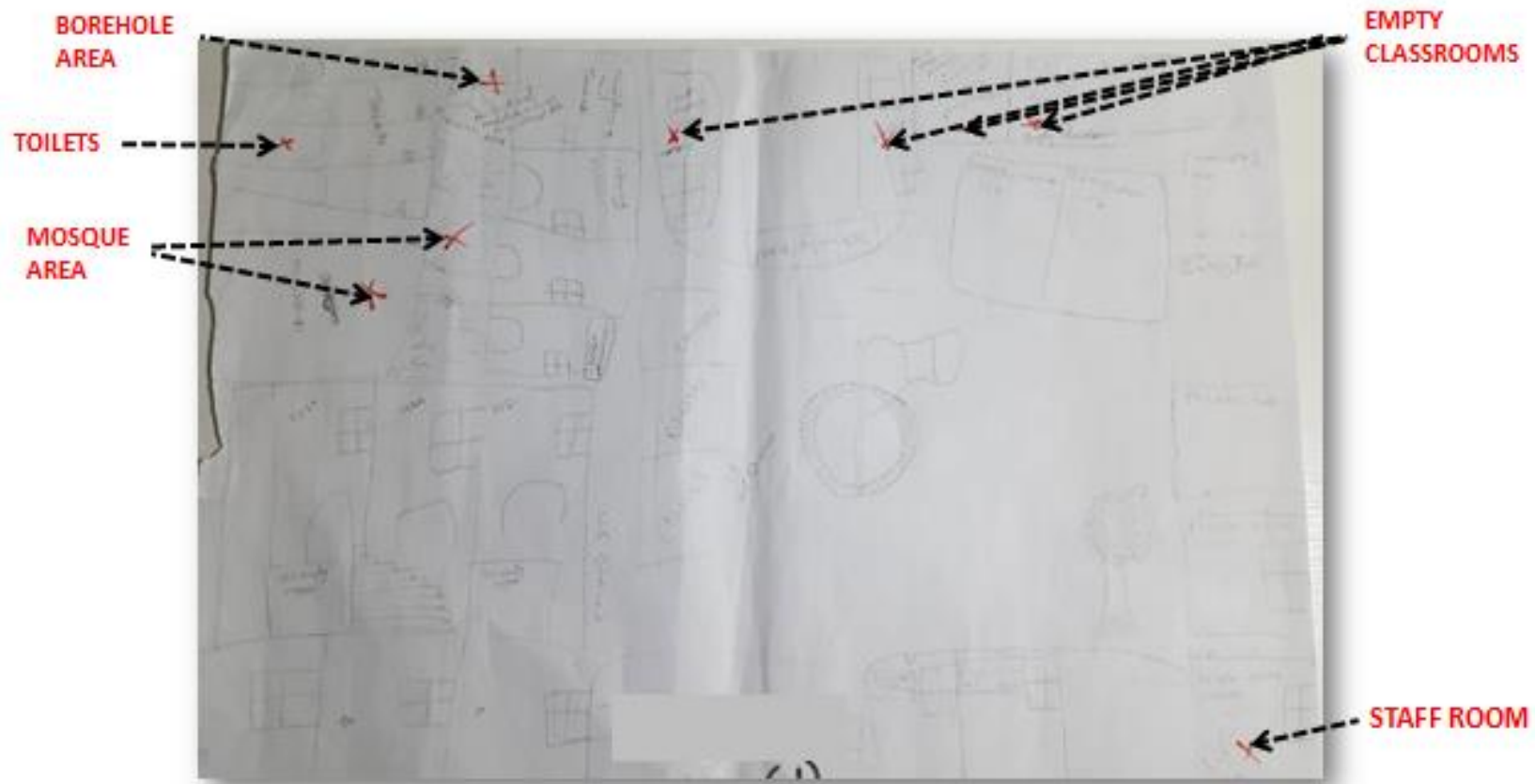


Figure 10: School 1 showing hotspots identified by female students

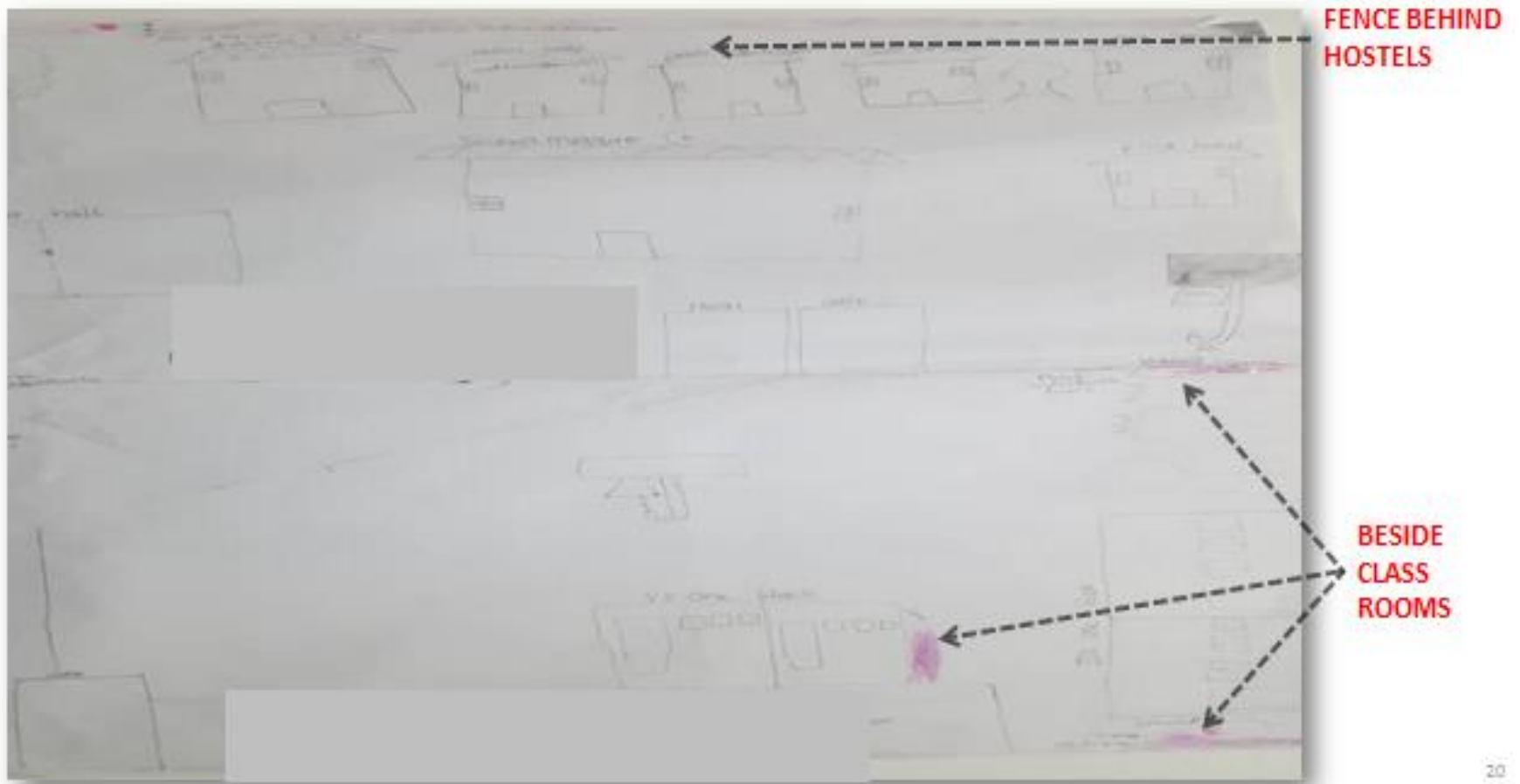
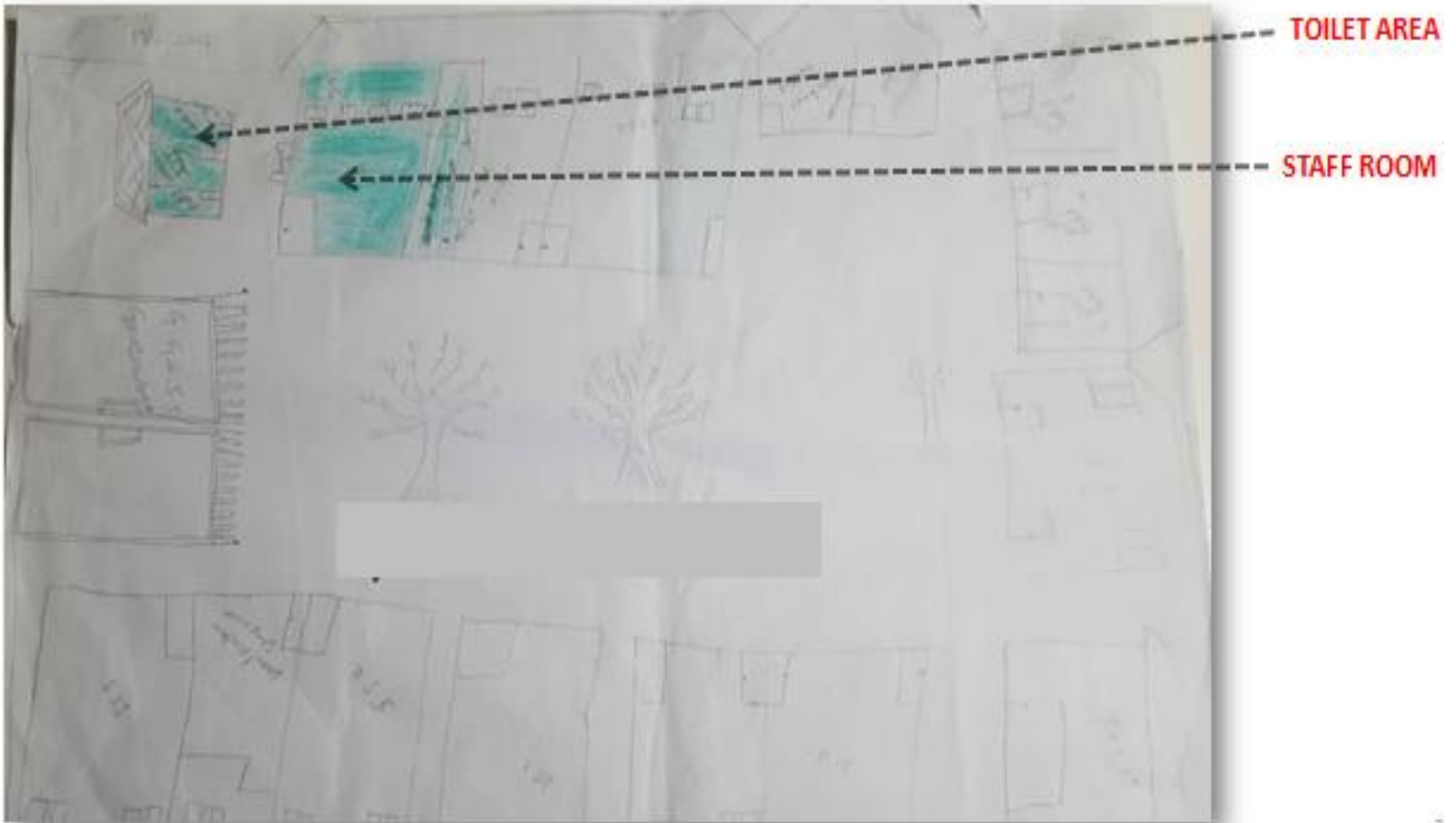


Figure 11: School 2 showing hotspots identified by female students



**Figure 12: School 3 showing hotspots identified by female students**

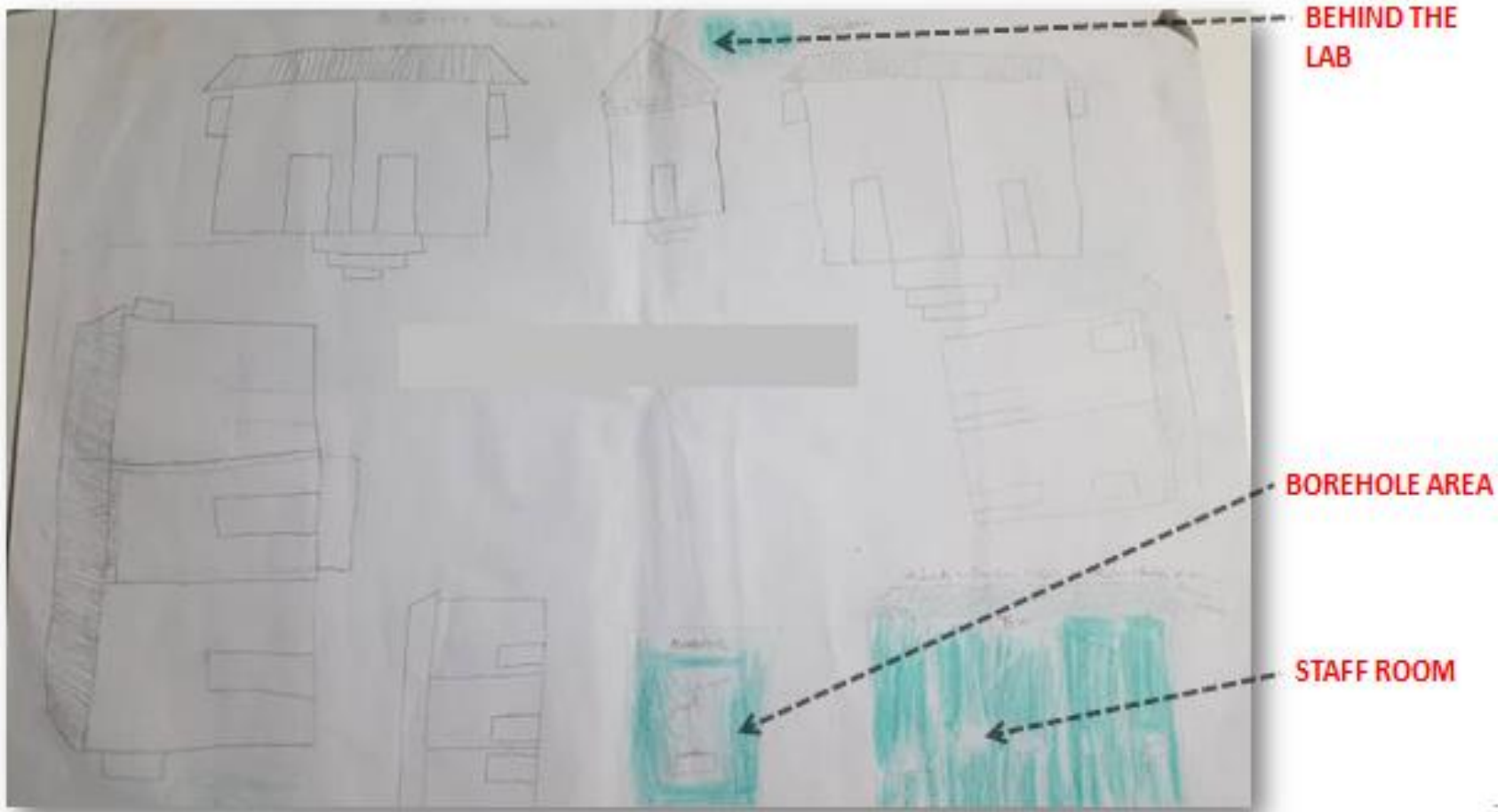


Figure 13: School 4 showing hotspots identified by female students

## Appendix II: Safety Audit/Checklist

### Boarding Schools

S/N	QUESTION	ANSWER	COMMENT
1	Does the school have adequate and functioning latrines and bathrooms?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
2	If no, what are the alternatives?		
3	Are boys and girls latrines and bathhouses separated?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
4	Are the latrines and bathhouses easily accessible?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
5	Are the latrines and bathhouses safe and secure for girls?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
6	Are pathways to the female latrines and bathrooms in the schools well lit?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
7	Does the school have functioning water collection points inside their compounds?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
8	Are the water collection points safe and easily accessible to girls?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
9	Are the male and female dormitory facilities separated from each other by well-built walls?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
10	Do the school compounds have secured walls and security personnel on patrol in the evenings?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
11	If yes, how many security personnel are always on duty?		
	Are there separate reading/dining halls for male and female students		
12	If yes, are female reading/dining halls easily accessible and safe?	Yes <input type="checkbox"/>	



		No	<input type="checkbox"/>	
13	Is the environment well-lit at night?	Yes	<input type="checkbox"/>	
		No	<input type="checkbox"/>	
14	Are there burglary proofs in the windows and are there well protected doors for the female dormitories?	Yes	<input type="checkbox"/>	
		No	<input type="checkbox"/>	
	If yes are they always locked at night?	Yes	<input type="checkbox"/>	
		No	<input type="checkbox"/>	
15	Are there known danger zones in the school?	Yes	<input type="checkbox"/>	
		No	<input type="checkbox"/>	
16	Does this school have a protection focal point? If yes please name the organization responsible for it _____	Yes	<input type="checkbox"/>	
		No	<input type="checkbox"/>	
17	Are students being sensitized on child rights/sexual education, in the area of GBV?	Yes	<input type="checkbox"/>	
		No	<input type="checkbox"/>	
18	Are there GBV services in this school to support GBV survivors?	Yes	<input type="checkbox"/>	
		No	<input type="checkbox"/>	
19	Are there any existing code of conduct for teachers/admin staff in the schools?	Yes	<input type="checkbox"/>	
		No	<input type="checkbox"/>	
20	Is there any existing teenage friendly complaint/reporting mechanisms within the community for survivors of GBV?	Yes	<input type="checkbox"/>	
		No	<input type="checkbox"/>	
21	If yes what are the mechanisms?			
22	Are there any existing punitive measures for perpetrators of GBV in this community?	Yes	<input type="checkbox"/>	
		No	<input type="checkbox"/>	
23	Do NGOs/government raise GBV awareness among teachers and parents in the school?	Yes	<input type="checkbox"/>	
		No	<input type="checkbox"/>	

 **Day Schools**

S/N	QUESTION	ANSWER	COMMENT
1	Is there any existing teenage friendly complaint/reporting mechanisms within the community for survivors of GBV?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
2	If yes what are the mechanisms?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
3	Are there any existing punitive measures for perpetrators of GBV in this community?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
4	Do NGOs/government raise GBV awareness among teachers and parents in the community?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
5	Are there any existing code of conduct for teachers/admin staff in the schools?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
6	Does the community where the school is located have easy access to water collection (well, tap water, etc.)	Yes <input type="checkbox"/> No <input type="checkbox"/>	
7	If no, do they fetch water from an isolated place/stream	Yes <input type="checkbox"/> No <input type="checkbox"/>	
8	Do students assist their parents in farm work or in their private business?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
9	If yes, are the roads to farms far or isolated from the residential houses?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
10	Are construction sites near school routes that female students follow to school?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
11	Are there sexual assault counselling/referral centres in the community where the schools are	Yes <input type="checkbox"/> No <input type="checkbox"/>	
12	Are there known danger zones around the community?	Yes <input type="checkbox"/>	

		No	<input type="checkbox"/>	
13	Are community members aware of how to report a case of sexual violence against a girl living in this community? If yes, ask: Who would they report the case to?	Yes	<input type="checkbox"/>	
		No	<input type="checkbox"/>	
14	Are there female health workers available in the health centre to treat girls who have experienced sexual violence?	Yes	<input type="checkbox"/>	
		No	<input type="checkbox"/>	
15	Are there other services available in this community to assist girls who have experienced violence? If yes, ask the following: What services are available?	Yes	<input type="checkbox"/>	
		No	<input type="checkbox"/>	
16	Is there an interagency GBV committee in this community?	Yes	<input type="checkbox"/>	
		No	<input type="checkbox"/>	

### Appendix III: IDI tools for Stakeholders (Heads of schools, Teachers and PTA Executives)

#### GENERAL INFORMATION

1. What does the word gender-based violence mean to you? (If the respondent does not seem to know what GBV is, ask what about sexual violence or domestic violence? to see if they encounter these things.)
2. What types of GBV do you think are mostly common in this community/school? (Probe for types: mention them)
3. Who are the main perpetrators of GBV in schools/community? What are the reasons for such occurrences?
4. Who are the most vulnerable to GBV in schools/community and why?
5. How often (if ever) do you see or hear of sexual violence cases or other forms of gender-based violence in school setting? How many per week or month?
6. What types of violence have adolescent girls reported?
7. What are the commonly used channels for reporting gender-based violence, particularly cases from school?
8. How safe do community members and girls view the school environments?
9. Is there “violence against girls” awareness and violence prevention activities for adolescent girls in schools/community?
10. What initiatives are being implemented in schools/community to prevent violence against girls?

#### A) CODES AND CONDUCT (FOR HEAD OF SCHOOLS/TEACHERS ONLY)

11. What are the obligations of teachers towards GBV situations?

What are the obligations of administrative staff in school towards GBV situations?

What are the obligations of the ministry of education personnel towards GBV situations?

12. Are there institutional codes of conduct for teachers/administrative staff as regards GBV situations?

Yes  No

13. If there are, what are those institutional codes of conduct? Briefly explain.

14. Do the codes provide definitions of violence and harassment and specify sanctions for these behaviors?

Yes  No

15. What are those specified sanctions?

16. What policies, laws and protocols (national, state-level and school) are in place for cases of sexual violence or other forms of gender-based violence? How do you use these policies?

17. Are there undocumented rules or regulations with respect to GBV cases in your school? What are the informal ways of responding to GBV in your school?

18. In what ways do education sector participate in any inter-institutional coordination mechanisms for addressing violence against girls?

## **B) ACCESS TO SERVICES (Head of School/Teachers)**

19. Are there health workers or counsellors in this School trained to treat/respond to girls who have experienced various forms of violence including sexual violence?

Yes  No

20. If yes, what services are they trained to provide?

21. What gender sensitive services are available to students in your schools? If relevant, please note the organization and the types of services they render. (Probe for the following; health care services (*including reproductive health*), Menstrual hygiene/dignity kits, Girl-friendly spaces, access to clean water, gender sensitive latrines, and counselling)

22. Do adolescent girls access these services?

Yes  No

23. If no, what are some reasons why adolescent girls are unable to access these services? (Probe for availability of female staff providing services, availability of medicines at clinics,

safety issues for girls to travel to service locations, convenience of location, girls not permitted to access their services by their families and parents etc.)

24. How do students report GBV cases? Who do they report the cases to?

**C) Drivers of GBV (GENERAL)**

25. What kinds of cultural practices, norms and beliefs exist that you think might be harmful to girls in this community/school or increase their vulnerability in school/community?

26. What type of GBV interagency system exists between community leaders/ community representatives and your school? Who are the people that constitute the agency?

27. Which places are considered by girls as unsafe in the school/community or on their way to school?

28. Are there girls who are not in school because they earn income to meet basic needs? (Probe for mostly affected girls: economic class, tribe, age, children from dysfunctional home etc)

29. What risks are girls prone to on their way to school in this community?

**D) SECURITY AND SAFETY FOR GIRLS (GENERAL)**

30. What are the most significant safety and security concerns facing adolescent girls in the community/school? (Probe for safety place in the community, sexual violence/abuse, violence in the home, risks of attack moving to and from school, risks of being asked to marry by their families, trafficking)

31. In what context in the community/school does rape/sexual violence occur? (Probe for home, when going to or coming back from school, at latrines, during school hours, etc.)

32. Where do adolescent schoolgirls/survivors mostly go to for help? (Also probe for Family member, Principal, Teacher, School Nurse, law enforcement agency, NGO, and friends. Probe for reasons for choice of help)

33. What safety measures have been put in place by schools to minimize any potential for risk to adolescent schoolgirls? (Probe for Security men patrolling around the school environment, educating girls on how to report incidents, increased number of female staff and availability of a school counsellor, etc.)

34. Where do you consider as danger zones in the schools or near the schools/community where girls are at increased risk for violence?

**E) GBV TRAINING (GENERAL)**

35. What GBV specific trainings are available for teachers? And who was responsible for the training (Probe for the names of the training organisers (i.e. SMOE and Women Affairs) How recent and relevant are the trainings?
36. Have you heard about or participated in school/community education activities that are focused on violence against girls? What are some of those activities?
37. What approach would you recommend to protect adolescent girls from GBV in schools?
38. Are there other contributions or recommendations?

#### **Appendix IV: KII tools Stakeholders (SMOE, SMWA and Service Providers)**

##### **GENERAL INFORMATION**

1. What do the words gender-based violence mean to you? (If the respondent does not seem to know what GBV is, ask what about sexual violence or domestic violence?). What are some of the terminologies for describing GBV in this community?
2. What types of GBV do you think are most prevalent in this community?
3. How often (if ever) do you see sexual violence cases or other forms of gender-based violence? How many per week or month?
4. What are the commonly used channels for reporting gender-based violence, particularly cases from school? \_\_\_\_\_
5. Is there a GBV reporting chain in the community?  
Yes  No
6. If Yes, please describe the reporting chain (who are the individuals involved)  
\_\_\_\_\_

##### **Codes and Conducts on GBV (SMOE and SMWA)**

7. Are there protocols for identification and care of violence survivors particularly adolescent school girls?  
Yes  No
8. If there are, what are the current protocols? \_\_\_\_\_
9. What are the obligations of teachers towards GBV situations?  
What are the obligations of administrative staff in school towards GBV situations?  
What are the obligations of the ministry of education personnel towards GBV situations?
10. Are there institutional codes of conduct for teachers/administrative staff regards GBV situations?  
Yes  No
11. If there are, what are those institutional codes of conduct?  
\_\_\_\_\_

12. What can you say about the effectiveness of such codes? Are they being implemented or used? What are the barriers to its implementation?
13. Do these provide definitions of violence and harassment and specify sanctions for these behaviours?  
Yes  No
14. If yes, briefly explain \_\_\_\_\_
15. What are those specified sanctions? \_\_\_\_\_
16. What policies or laws (national, state-level) are in place for cases of sexual violence or other forms of gender-based violence? How do you use these policies? What are the existing gaps in implementing these policies?
17. Is there a GBV redress mechanism? (A process of reporting grievances)
18. Yes  No
19. If yes, please describe the GBV redress mechanism (how do you report, who do you report to) \_\_\_\_\_
20. Are there training programs on GBV response for education sector personnel?  
Yes  No
21. What are some of those training programs? \_\_\_\_\_
22. Could you tell us a bit about the content of the training program?

#### Health Response to GBV (Service Providers)

23. Are health services available for adolescent school girls (GBV survivors) in this community?  
Yes  No
24. If yes, do adolescent girls have access to the health services all the time?  
Yes  No
25. If yes, what are some of the health services provided for adolescent GBV survivors?
- HIV related services to include Post exposure prophylaxis
  - Pregnancy related services
  - STI related services
  - Others. Please specify \_\_\_\_\_
26. Do you use a pre-packaged rape kit when conducting the exam? If yes, do you have a steady supply? Where do the kits come from? Where are the kits kept after use?  
\_\_\_\_\_
27. Where do the examinations take place? Is there a private room (with four walls and a door)? How does the staff ensure confidentiality?  
\_\_\_\_\_

28. Do you collect physical evidence from survivors/victims (e.g., clothing, footwear, hair, fibers, or debris, etc.)? If so, where do you store them?

---

29. What are some of the reasons that make adolescent girl survivors of GBV not to access health services?

- Fear of being identified as survivors
- Distance to health facility
- Lack of awareness
- Culture of silence/cover-up
- Hours of operation
- Cost of services
- Fear of perpetrators
- Gender of service provider
- No availability of confidential treatment
- Lack of safe spaces in facilities
- Attitude of service providers
- Lack of trained staff
- Don't know
- Other – If “other,” please specify: \_\_\_\_\_

30. Does this facility have protocols/guidelines for the management of rape survivors?

Yes  No

31. If yes, where do you keep them? (And ask to see them)

32. Is there a referral mechanism for survivors in this facility?

Yes  No

33. If yes, what is the protocol for referral and where do you refer people to?

---

34. Has anyone in your institution received training on sexual violence or other forms of gender-based violence?

Yes  No



35. If yes, what was the training about, who received it, who provided it, how frequent is the training? Are the individuals who were trained still in their post?

---

**Psychosocial Response to GBV (SMWA and SERVICE PROVIDERS)**

36. Are there psychological and/or social support systems for adolescent girls survivors?  
Yes  No

37. If yes, what kinds of support systems are available for adolescent girl survivors? (Select all that apply.)

Drop-in Centers

Peer Support groups

Case management with individual counseling

Skills building

Education

Income-generating activities/vocational training

Mental health referrals

Other – If “other,” please specify: \_\_\_\_\_

38. Is there a functional referral system between schools, health providers and organizations providing psychological or social support?

Yes  No

39. Are there informal community-based networks for adolescent girls?

Yes  No

40. What are some of the reasons that prevent adolescent school girls’ survivors of GBV not to be able to access psychosocial support services?

Fear of being identified as survivors

Distance to health facility

Lack of awareness

Culture of silence/cover-up

Hours of operation

Cost of services

- Fear of perpetrators
- Gender of service provider
- No availability of confidential treatment
- Lack of safe spaces in facilities
- Attitude of service providers
- Lack of trained staff
- Don't know
- Other – If “other,” please specify: \_\_\_\_\_

**Legal Services (SMWA)**

41. What types of cases of gender-based violence do you handle?  
 \_\_\_\_\_ (If the respondent lists something other than sexual violence, ask him/her what is the most frequent type of violence against women and girls that he/she handles?)
42. From what individuals or organizations do you typically receive reports of gender violence? \_\_\_\_\_ (PROBE: survivors, family members, health professionals, etc.)
43. Who are the main survivors of sexual violence? \_\_\_\_\_ (PROBE: who are survivors, what are their ages, sex...?)
44. What legal facilities or personnel exist for survivors of sexual violence or other forms of gender-based violence and punish perpetrators?  
 \_\_\_\_\_ (e.g., court, local/traditional, or civil authorities)
45. Has anyone in your institution received training on sexual violence or other forms of gender based violence?  
 Yes  No
46. If yes, what was the training about, who received it, who provided it, how frequent is the training? Are the individuals who were trained still in their post?  
 \_\_\_\_\_
47. What services do you provide to victims/survivors of sexual violence or other forms of gender based violence?  
 \_\_\_\_\_ (Try to get the respondent to be as specific as possible, e.g., provision of information on court process, roles and responsibilities of different actors, time frames, etc.)

48. What kind of documentation is required to facilitate legal proceedings and investigations? What are the major challenges experienced? What is the time period that it takes to finalize a case, and why?  
\_\_\_\_\_
49. Does anyone from this institution accompany, advocate for and support the survivor during any meetings with the police or court officials? *(If yes, ask the respondent to describe how this process works and who is responsible for doing this)*
50. Which laws are used in addressing gender-based violence and how are they enforced, and by whom? \_\_\_\_\_
51. How do you ensure the survivor's confidentiality and protection during pre-trial, trial and post-trial?
52. Do you ever refer survivors to other services such as counselling or healthcare? If yes, where are these services located? How do you provide the referral? How do you ensure that the service is provided?
53. How do you work with other service providers (NGOs, government departments, health facilities, law enforcement, and psychosocial (social welfare)) on the issue of gender-based violence?
54. What are some of the challenges that you face in responding to sexual violence or other form of gender-based violence? How do you think these challenges could be addressed?
55. General recommendations