



# **Spotlight** Initiative

To eliminate violence against women and girls

# **Interventions & Impacts**

Initiated by the European Union and the United Nations

















iolence Against Women and Girls (VAWG) represents a critical barrier to development globally. It is the most extreme manifestation of gender inequality and the most prevalent form of violence worldwide, affecting the well-being and productivity of individual survivors, families and communities, often across generations. Globally 1 in 3 woman have experienced violence from an intimate or non-intimate partner.

Sokoto, the seat of the Caliphate is in the Northwest of Nigeria, and it experiences Violence Against Women and Girls (VAWG) in both the urban and rural areas. The prevalent violence against women and girls are intimate partner violence, rape, sexual violence, while harmful practices are child sexual abuse, child marriage, forced marriage, intimate partner violence, and trafficking.

The incidence of child marriage including girls under the age of 15 years is high and educational achievement is very low. For instance, the cases of girls married before ages 15 and 18 in the state is 43.4 percent and 68.6 percent respectively and Sokoto literacy rate is 20.1 percent and 47.7 percent respectively for female and male aged 15 to 24 years. This has increased violence against women and girls, aided by the culture of silence and religious beliefs.

According to according to the National Demographic Health Survey (NDHS) 2018, at least 32.8 per cent of every married woman, aged 15-49 years experienced emotional, physical or sexual violence committed by their current or most recent husband/partner in Sokoto State. It also noted that 8.6 per cent of women aged 15-49, experienced physical violence since age 15, while 5.4 per cent of women 15-49, experienced genital mutilation, and 0.7 per cent per cent of women experienced violence during pregnancy.

Sokoto state has domesticated the VAPP law and the Child Rights Acts (CRA) but is yet to domesticate the Women Peace Action Plan; and women also do no not play prominent roles in policy decision making in the state. Women groups and women-led civil society organisations in Sokoto are working mostly in silos. Access to SRHR services is very low. Similarly, state-wide data on VAWG prevalence was inadequate. However, community-level programs, such as the STEER initiative, have shown promise in promoting gender equity and challenging harmful norms.

To address the negative social norms that drive VAWG and other harmful practices in Sokoto State, the EU-UN Spotlight Initiative launched various campaigns and interventions involving Ministries, Departments and Agencies of government, Civil Society Organizations (CSOs), and traditional leaders in 2019.

The GBV Situation Room was established with the support of the Spotlight project and a total of 1,556 GBV incidents were reported on the Dashboard. These reported cases included a range of GBV types, such as sexual assault, physical assault, financial and economic abuse, rape, defilement, forced marriage, denial of resources, psychological and emotional abuse, female genital mutilation, violation of property rights, child abuse, and neglect. Sokoto State is the location of Nana Khadija Centre, the first GBV One-Stop Centre in North-West Nigeria.

Radio broadcasts have been effective in disseminating messages against VAWG, harmful practices, gender stereotypes, and violent masculinities, to majority of the population.

# **Laws & Policies**

#### **Key Interventions**



Capacity
building for about 59

Law Enforcement Agents in the state including the Nigerian Police Force (NPF), the Nigerian Security and Civil Defense Corps (NSCDC), NAPTIP, and HISBAH Commission on Prevention and Responses to SGBV/VAWG/HP and SRHR.

1. Retreat on the review and validation for the passage of the Sokoto state VAPP bill with Sokoto House of Assembly (SoHA)

Conducted a study on SGBV and the Budget Gender Responsive Budgeting in the state's budgeting system. It reviewed and analysed the budgets of relevant MDAs that have responsibilities related to SGBV/VAWG/HP and SRHR of women and girls. The preliminary findings were validated at stakeholders meetings and the studies was published and disseminated to stakeholders.

- 2.Development of costed action plans and M&E Framewrok to facilitate the implementation of the VAPP Law.
- 3. Capacity Building on Gender Responsive Budgeting: Women's Rights Groups, CSOs, media groups and key populations in the state were trained on Gender Responsive Budgeting (GRB).
- 4. Advocacy to relevant stakeholders in the state for buy-in and collaboration. Some of the stakeholders include media houses, Legislature, Executive, Law Enforcement Agencies, Traditional and Religious leaders using policy briefs.
- 5. Secondly, need for full implementation of the compulsory and free universal basic education Act which will ensure that all boys and girls have access to basic education.

#### **Major Impact**

Through a multi-sectoral interventions, the Sokoto State VAPP Bill was reviewed, updated and passed by the State House of Assembly and assented to by the Governor and has become the Sokoto state VAPP Law being a legal framework based on evidence and international human rights standards prohibiting all forms of violence against women.

#### The development of a SOP for SGBV cases

The development of a Standard Operating Procedure for SGBV cases, one of the project's key recommendations has been adopted by the Nigerian Police Force.



#### Knowledge from training on gender responsive budgeting

CSOs in the state leverage knowledge from training on gender responsive budgeting to engage relevant MDAs in the state For example, the Centre for Peoples Health, Peace and Progress engaged the state through the production of 2021 Pre Budget Policy Briefs focusing on GBV.

#### Child protection law was successfully passed

Sokoto State Violence Against Persons Prohibition - VAPP law and Child protection law were successfully passed by the Sokoto State House of Assembly 7th July and 11th November 2021 respectively and assented by His Excellency, the Governor of Sokoto State on the 13th July and 22nd of November 2021 respectively. These laws have aided the prosecution of over 25 cases on violence against women and girls and release of children in correctional facilities.



#### **Lessons Learned**



Threading with caution and respecting local values and norms, using culturally appropriate language and ensuring that local spokes-persons are used as lead faces for advocacy for change on sensitive issues.



The need for continuity of actions and interventions by different stakeholders including Civil Society, Media, Law Enforcement and the Judiciary beyond the project period to ensure that project gains are sustained.



Early collaboration with official stakeholders, especially in activity planning is imperative for successful engagement and implementation



enforcement agents.



Group discussion during the 2-day capacity building workshop of Justice sector partners



The CSJ Lead Director and his team on advocacy visit to the NSCDC



# Institutional Strengthening



Key Interventions



Lawyers, Magistrate and Judges, CSOs and security agencies trained and acquired skills on Administration of Criminal Justice and Child Protection;



**70** 

government stakeholders trained on desiging and implementing laws and policies to address VAWG/SGBV.

Training of Journalists



**37** 

Journalists acquired skills on ethical reporting, media advocacy and solutions journalism to ending violence against Women and girls

138

NHRC, Security Agencies strengthened with capacity to support the Litigation, Integrating and Implementing Plans and Programmes on SGBV/VAWG/HP and their Inter-linkages with Women's Access to SRHR.





Provide capacity building to Sokoto State Ministry of Women and Children Affairs on Coordination and system



Social workers/Security /Para Security Agencies acquired Skills to provide Professional Case management services to survivors (Girls and Women)



Provision of laptops, Desktop computers to Nigerian Police, Nigeria security and Civil Defense Corps, Ministry of Justice and Ministry of women and children Affairs to improve quality of data and program reports

**Major Impact** 

Over Convictions on Child Justice achieved, and perpetrators remanded in correctional centers



Functional One single coordination platform meeting, led by the Community Surveillance Child Protection Committee

(CPC) for all the advocacy work at the community level has promoted Joint integrated responses to VAWGs at community levels.

Efficient and Effective State Gender based and Child Protection Response Team (SGBV/CP)-Chaired by the Sultanate Councilresponding to cases of Violence Against women and Children-this has strengthened integrated case management services to over

Survivors

# 40 \*\*\*\*\*

staff of Ministry of Women and Children Affairs (MOWAS), CSOs and Response Team on SGBV/CP trained on data management, collation has improved monthly reporting and collation of incidences of violence against women and girl for action.

government stakeholders strenghtened to design and implement laws and policies to address VAWG/SGBV.

# Prevention



# Skill acquisition



460 survivors trained in various essential skills to prevent violence against women and girls (VAWG), sexual and gender-based violence (SGBV), harmful practices (HP), sexual and reproductive health and rights (SRHR), and vesicovaginal fistula (VVF). Each survivor was provided with startup grants, enabling them to kickstart their own ventures and endeavors. These 460 individuals are now poised to make a lasting impact, not only by transforming their own lives but also by becoming advocates and champions for gender equality and the eradication of GBV within their communities.

•Sensitization and awareness on issues linked to gender norms and violence against women and children/girls during town hall meetings and dialogues

# •Empowerment of survivors/vulnerable adolescent girls with SRHR knowledge, life skill and access to services:

Monthly Mentorship and interactive forum established for survivors at 6 focal Spotlight LGAs Supporting over 812 survivors of violence with different services including psychosocial support, medical services, educational support, legal assistance, life skills support, health education, provision of re-usable pads and Nutrition education/counselling.

• 538 Imams, Religious/Traditional Leaders, Modibbos (Female Religious Leaders), Youths, women groups, Women and Male Champions strengthened to promote Maternal and Child Health (MNCH), Sexual and Reproductive Health and Rights (SRHR), Family Planning (FP), Antenatal Care (ANC), Facility Delivery, Female Genital Mutilation (FGM), Harmful Traditional Practices (HTPs), behavioral change and prevention of Gender based Violence during social and religious gatherings such as child naming ceremony, wedding Fatiha and public preaching. in all 52 Wards/Communities across 6 Spotlight LGAs

• 100,000 copies of crucial messages about MNCH, SRHR, FP, ANC, Facility Delivery, and the prevention of GBV, FGM, and HTPs were produced and distributed. These materials were provided to the trained Imams of Juma'at Mosques, youth advocates, traditional leaders, and religious figures. They serve as guides for religious sermons and were shared within their respective communities

• Over **1,000,000** listeners, including women, girls, men, and youth reached across all 23 Local Government Areas (LGAs) through a weekly Hausa Radio Drama Series on Rima Radio, Sokoto, promoting MNCH, SRHR, FP, ANC, Facility Delivery and raising awareness about the prevention of GBV, FGM, HTPs, and the importance of women's empowerment





Teachers trained on Sexual and Gender Based Violence Prevention, Training of secondary school girls and boys on life skills and Peer Education.

• 16 service providers trained to reach out to schools and accept referral.





#### • 6 Community Based Surveillance Committee (CBSC)

with **125** members trained to identify and report cases of Violence Against women and Children (VAW/C) in all **6** focal LGAs (Binji, Sokoto South, Sokoto North, Tangaza and Bodinga)

**7** Community Surveillance Groups established.

• Improved capacities of community prevention and response structures: Community structures such as the LGA Surveillance Teams are better coordinated and able to identify, report and refer cases of violence to appropriate service providers.



**Improved levels of GBV Awareness** among community members and change in their general attitudes towards GBV: Now, individuals in Sokoto State feel empowered to speak up and seek justice when confronted with GBV.



- Increased access to GBV Services for survivors: As a result of the Spotlight Intervention, survivors received diverse range of services including psychosocial support, medical services, life skills and justice. 29 cases have received legal services with 1 conviction so far in both LGAs
- 207 survivors provided with life skills, counselling, health, educational support during monthly mentorship and interactive forum.



• 1620 girls were enrolled in Safe Spaces and empowered with literacy, numeracy and life skills to enhance their core academic performance and increase retention and transition rates into Secondary schools, and have gained knowledge and information on GBV, SRH, Communication Negotiation skills etc.



Youths in Sokoto State trained on SGBV/GBV, SRHR, and HP, including FGM and CM, to spread and create awareness across the state.



Religious/Traditional leaders youths' Women groups, male champions strengthened to promote behavioral change and prevention of gender-based violence.

• **75** religious leaders trained on Stepping Stones and advocating against VAG and for implementation of legislation and policies on VAWG and for gender-equitable norms, attitudes and behaviours and women and girls' rights.



- **5720** persons reached by campaigns and interventions transforming negative social norms and gender stereotyping that promotes VAWG/HP/SGBV
- **55** communities with advocacy platforms established and/or strengthened to promote gender-equitable norms, attitudes and behaviours, including about women and girls' sexuality and reproduction.
- Cases of teenage marriage prevented as three junior secondary school students that had been betrothed and were supposed to leave school after their JS 3 exam continued their education. This was after a lot of engagement with their parents by trained teachers.
- Elimination of the Culture of Silence as there is an overwhelming Increase in the number of cases reported due to awareness and sensitization in expectation of case management services and justice.

#### **Lessons Learned**



 Community members are more likely to accept change when the messages come from their leaders and influencers. Thus, the involvement of community stakeholders especially community leaders boosted the rate of acceptance by the visited communities.



 Leveraging of the existing community structures such as networks and associations eased the community sensitization and engagement processes.



• Continued, consistent psychosocial support for survivors is needed to enable them fully recover and reintegrate into society.



· Community sensitization for behavioral change is an essential prerequisite for tracking and reporting GBV cases, ensuring that individuals are equipped with the knowledge and awareness needed to address and report such incidents effectively.



 Community-based sensitization and awareness is an effective tool to changing the narrative of Violence Against Women, Girls and Children.



Partnership with the government is key and essential to achieving results and ensuring sustainability.



 If students are to be encouraged to access referral services in health facilities, such facilities must be youth friendly with service providers trained in youth friendly service provision.



· With proper training and support, teachers are ready and capable to deliver programme interventions on school related gender-based violence that have direct impact on their students. This is irrespective of the culture and tradition.



• It is better to use the language that participants are more comfortable with in conducting trainings.







# Services

# **Key Interventions**

# The Second Chance Education and Vocational Learning for Survivors:



- Established 4-5 new learning centers across spotlight focal LGAs (Sokoto north & south, Tangaza, Dange shuni, Binji & Bodinga) in Sokoto state.
- Enrolled 2,731 learners into the 45 new Spotlight Initiative second chance education learning centers. Among those enrolled in Sokoto State are 1,411 women and 974 girls, 346 boys, 199 GBV Survivors and 51 persons with disability.
- Selected and trained 51 facilitators and supervisors on key approaches for the Second Chance Education program implementation tagged, key emphasis for GBV, Life skills, Health Education, its communication strategies and Literacy teaching methods.
- Developed the Second Chance Education Facilitator's guide on GBV, Life Skills and Health Education. Carried out need assessment, Community sensitization and enrollment drive in 41 communities within the six LGAs.

6000 instructional learning

and tools produced for effective teaching and learning outcomes of the second chance education learners. Communication tools for online visibility and media representation to enhance advocacy, sensitization and stakeholder's engagement developed and published.



51 CBV survivors and persons with disability were identified, selected and enrolled to vocational skills training, entrepreneurship and Digital literacy components of the second chance education program.

• The beneficiaries of the Vocational skills program are further provided with Start-up kits for their small-scale businesses.

#### **Accelerated Access to Obstetric Fistula Repair in Sokoto State:**

- Mobilised fistula women to treatment centre
- Conducted of Free Fistula repair treatment and care

#### **Major Impact**



#### Established a One-stop Centre (Nana Khadija)

Established a One-stop Centre for survivors of Gender based violence in Sokoto (Nana Khadija ) Nana Khadija Centre is a sexual assault referral centre established under the EU UN Spotlight initiative. The centre offers counselling and medical services to survivors of Gender Based Violence. The centre has served as a key stakeholder in offering services to survivors of GBV in Sokoto State, with over 1,292 clients provided with services.

#### • Established 4 new maternal waiting rooms

4 Maternal Waiting homes established to reduce maternal and Prenatal deaths in 4 LGAs (Sokoto North, Bodinga, Binji and Tangaza)





- 60 Health workers, (Community Midwives, Chews and Volunteers) equipped with skills to manage the Maternity waiting homes in Bagarawa PHC, Bodinga and Kofar Rini PHC, Sokoto North LGA
- 9,310 Out of School learners Successfully graduated from the Accelerated Second Chance Education Program scheme (Binji and Sokoto North LGAs).



- · Attitudinal behavioral changes and improved levels of GBV Awareness among women and girls on how to seek justice, report cases and access services.
- Improved levels of literacy / SRHR among women and girls in project communities, Women and girls are now empowered on how to identify and protect themselves against advancing perpetrators.



- Women and girls have developed self-esteem, assertiveness, goal setting through the life skills training; Survivors and persons with disability have been empowered to be self-reliant, and can now relate effectively as functional members of the society
- A total of **3/2** eligible women and Girls who underwent Free Fistula Surgery in Sokoto State (overall healing rate of fistula repairs at 90% their dignity was restored following our improved quality of perioperative care and engaged competent local surgeons, resulting in reduced repeat surgeries and more survivors are carrying on with their lives, fistula free!
- Over 500,000 men and women were educated on causes of obstetric fistula and preventive measures

#### **Lessons Learned**

- Community Based Sensitisation and awareness is an effective tool to changing the narrative of Violence Against Women, Girls and Children.
- Engagement of religious/Traditional Leaders has been instrumental in mitigating Violence Against Women Girls and Children
- $(\mathbf{V})$ The need to increase community level advocacy and the inclusion of local media, capacity development for community actors, facilitators, Centre based Management Committees [CBMC], SBMCs, FBOs, CBOs and the Mothers Associations.
- Increase support structure for needs assessment, mental health psychosocial support and referral services at the Second **Chance Education Learning Centers**



















### Data

#### **Key Interventions**



Equipping the central data coordination room with laptop, Desktop computers, Printer, Photocopier, Inverter and Solar panel, cabinet for case files,

Samsung curve television.

Samsung curve televisio



Training Data Entry Officers (DEOs) and Supervisors from MOWCA, NGOs/CSOs/ CBOs and other willing stakeholders on how to report on the national dashboard, through the State Situation Room

- Establishment of a functional Situation Room hosted at the GBV Centered at the MOWCA
- Training of training of trainers on the reporting process to develop a pool that can be drawn upon to sustain the capacitybuilding process across the state.
- Institutionalisation of the impact model requiring Implementing Partners (IPs) to support the training of NGOs/CSOs
  to report GBV cases in their areas of operation across the state Building the capacity of the MOWCA to conduct Data
  Quality Assessment (DQA).
- Building the capacity of MOWCA to provide Technical Support to CSOs/Service providers in reporting and validating
  cases; and facilitation of usernames and passwords to DECs Supervisors newly trained.

#### **Major Impact**

The availability and access to quality data has helped in planning intervention for specific group of persons

- Enhanced Skills Data Officers: Skills and capabilities of data officers in reporting, documentation, analysis, and information sharing among implementing CSOs have improved.
- Facilitated Collaboration with the Ministry of Women and Children Affairs, leading to effective addressing of GBVrelated issues.
- Data Quality Assurance: Data Quality Assessments (DQA) were conducted with a view to ensuring the accuracy and reliability of the provided information.

#### **Lessons Learned**

- ♥ One cannot successfully fight the issues of GBV without a strong engagement and coordination with relevant stakeholders.
- ${\mathfrak G}$  Continuous capacity building is key in a rapidly changing world as ours.





# Women's Movement

#### **Key Interventions**



#### The strategic partnerships through the adopted Ten Pillar Strategy (TPP) increased partners from 60 groups in phase I to 274 groups in phase II in Sokoto.

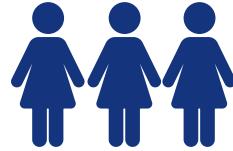
They formed a community of practice to jointly advocate for the abolition of harmful practices and elimination of all forms of violence against women and girls. The intervention focused on building capacity of both individuals and institutions, to "influence and act", across state and non-state actors.

• Key interventions include enhancement of project management skills, facilitating constructive and result based dialogue and convening, communicating for impact and advocacy, adapting in alternative solutions, and effective coordination, which led to establishment of gender desks in TPPs organization which improved reportage and access to justice for survivors of GBV.

#### **Major Impact**



women right groups strengthened and trained to advocate on ending VAWG/ SGBV/HP/SRHR



#### **Lessons Learned**

- Community Ownership and Engagement: Empowering communities to take ownership of initiatives has yielded remarkable results. When community members, especially women, youth, and persons with disabilities, are given resources, trust, and guidance, they become agents of change, addressing gender-based violence and harmful practices from within.
- © Collaborative Approaches: Collaborations among diverse stakeholders, including civil society organisations, religious and traditional leaders, and government bodies, create a united front against gender-based violence and harmful practices. Working together maximises impact, improves resource utilisation, and strengthens community-based initiatives.
- Leveraging on existing groups: Ten Pillar Partners (TPP) model collaborated with existing organisations and leveraged on their coordinated meetings and other programmes to implement activities. The strategy adopts partnerships and "Do It Yourself (DIY)" principles to encourage learning by taking a more hands-on approach to learning.



Sokoto Sac Stepdown Gurori Community Initiative Dialogue Session



Gurori Community Dialogue Session



Gurori Community Dialogue Session



Joint Association of Persons with Disability (JONAPWD) Sokoto Sensitization Meeting



Group photo of participant at the capacity building in Sokoto State



Supporting the state during a 2 days training on report writing for MDAs and response team members.

### **Success Stories**



adiza is a 17-year-old survivor of female genital mutilation and domestic violence. She was diagnosed with fistula at age seven after she was badly injured by the blades of the traditional bed attendants who performed the genital mutilation. Life became unbearable for Hadiza who faced discrimination and neglect from her family and friends. Her condition greatly affected her performance in school as she was constantly despised by her school mates. She decried that going to school became a nightmare for her so much that she cherished isolation.

In her words: "I was doing so well in school, but my classmates complained bitterly that I was smelling urine and they won't sit with me.

Being a product of a broken home, Hadiza was neglected in her condition by her father and stepmother who constantly tortured her physically and mentally.

The narrative changed when Hadiza's mother took her to the hospital to seek medical help where she received free repair by fistula foundation with support from the EU-UN Spotlight initiative.

Like many survivors who were successfully repaired, Hadiza now has a second chance to life. Her dream is to go back to school and study to become a medical doctor to repair fistula patients for free.

In Hadiza's words; "My greatest wish is to go back to school, I want to become a doctor in future, I want to be part of the people who provide help for women and girls especially fistula survivors. I want to also take good care of my parents. All thanks to EU-UN Spotlight Initiative, I now have my life back".

**E**U-UN Spotlight Initiative brought back life to a survivor and restored her health through the timely delivery of emergency medical services.

Hauwa, an orphan, and a survivor of rape in Bodinga became pregnant at the age of 16 while staying with her relatives. Being under-aged and uninformed, Hauwa developed complications while carrying the pregnancy which led to her hospitalization.

Understanding the severity of the case, EU-UN Spotlight Initiative through its partner 3Ps intervened and followed it up critically and clinically to ensure the safety of both Hauwa and her child. The case was referred to Usmanu Danfodiyo University Teaching Hospital (UDUTH) where she was diagnosed with eclampsia.

With the support of the EU-UN Spotlight Initiative Project, Hauwa received the needed emergency surgery which saved the lives of her and her child. Hauwa has fully recovered and is presently receiving psychosocial support services through the monthly survivors' forum. In her words: "I was at the brink of death, if not for the intervention of the EU-UN Spotlight Initiative during my ordeal, I would have probably lost my life and that of my child".





Accelerated Second Chance Education Program for women and girls in Sokoto State Empowers a GBV Survivor of serial Rape back to a formal Education System to achieve her lifelong learning and dream career.

Second Chance Education Program is providing lifelong recovery, a safe space to Survivors and those at risk of GBV through literacy teachings, improving their Health education and Life skills, which empowers them to understand their SRHR, to speak up (be assertive), build up their self-esteem and confidence to relate as functional members of the society. Livelihood skills, Entrepreneurship, and start-up kit are also provided for survivors/persons with disability and mainstreaming of those that Chooses to further their career in the Formal Education System.

Adama is a 20- year-an old young woman from Sokoto North Local Government Areas of Sokoto State in Nigeria. Her journey for being a serial rape survivor started when she dropped out of school as a result of financial burdens and family challenges, when her parents got divorced and she was left in the hands of her family relations to survive, due to her condition she could not continue her studies, she suffered different forms of abuse including domestic abuse and serial rape from those that were meant to protect her. she lived with her perpetrators to the extent she resolved that the abuse was normal for her, she was further introduced to the use of drugs as a means to cope with her misfortune. Her situation remained difficult following her inability to provide for herself and her basic needs. She had no skills nor employment. she had to seek financial assistance to support herself.

Adama was supported with rehabilitation, forensic examination, Psychosocial support counseling, and other services and was further referred to Grassroots Entrepreneurship Skills Acquisition [GESA] Initiative through the EU-UN Spotlight Initiative Second Chance Education Program where Adama is now enrolled in a Livelihood



Skills, Entrepreneurship a start-up support program beneficiary, under the program, Adama is determined to be skilled in Fashion Designing and to further set-up a fashion designing enterprise in other to be self-reliant and further support her education. The Second Chance Education Program also supported the registration of Adama at Umaru Shinkafi Polytechnic Sokoto State where she is studying Laboratory Science.

Adama has embraced her lifelong learning career since joining the Second Chance Education Program which has enabled her to dream beyond her past experiences.

For Adama and other survivors of Gender Based Violence Second Chance Education ensures that their voices are heard and unlocks their potential for a brighter future through education and skills development.

Aisha (pseudonym), a 17 years old disabled survivor of neglect in Bodinga LGA has suffered emotional and physical trauma from her paternal relatives after the death of her father. She became physically challenged at age seven where she suffered from broken limps after being knocked down by a sheep they reared. At the advent of the loss of her father, her condition deteriorated with constant pains in her hips, legs, and back as well as the development of boils and lesions on her leg, which calls for serious intervention. On the 15th of July, 2022, a case worker reported Aisha's case to the Centre for People's Health, Peace, and Progress (3Ps) – the EU-UN Spotlight Initiative partner working in Bodinga LGA.

The EU-UN Spotlight Initiative partner visited Aisha to assess her condition and provide the necessary support needed. She was referred to the Sokoto State Advance Medical Diagnostic Centre where she underwent medical examinations and treatment. Aisha was presented with a wheelchair to ease her movements. The wheelchair was presented to her during the monthly survivor's forum in August 2022. Aisha has now recovered from the lesions on her legs and consistent pains and currently attends the Survivors Forum in Bodinga where she continues to receive mental health and psychosocial support services. She expressed her gratitude to the EU-UN Spotlight Initiative, 3Ps, and the community surveillance team for standing with her all through her trying moment. In her words: "With the intervention of 3Ps with support from the EU-UN Spotlight Initiative, I have recovered from the physical injuries, and

the provision of the wheelchair has enabled me to do many things I couldn't do on my own".







Now leading her small business and making homemade samosa and meat pie, Bilkisu Aliyu's vision of financial freedom didn't always look attainable. After many attempts to set up a small business, Bilkisu was about to give up. 'I didn't, at the time, have the skills to successfully run a small business that would enable me to cater for my own needs as well as my children's need, I was about to give up," said Bilkisu. That was when she was selected to be part of Neem Foundation's Second Chance Education, Financial Literacy, and Vocational Skills Training.

Amid high inflation and persistent economic downturn, which had made the dependency on the income of the husband inadequate to meet the family needs, Bilkisu could no longer sit on the sideline. Bilkisu a resident of Sokoto North LGA, aged 37, is a full-time housewife with 3 children and was selected to be part of Neem Foundation's Second Chance Education, Financial Literacy, and Vocational Skills Training.

This is a program built to provide young women with practical skills to enhance their financial ability After gaining financial literacy knowledge and going through vocational skills training in catering for about three months, Bilkisu was able to start a small business making and selling samosa and meat pies from the confines of her home. And She has also learned how to communicate in basic English language having undergone the basic literacy class session under the Second Chance Education program of the Spotlight Initiative "Without the skills and insight I picked, I don't think I will be able to make the little money I make from this small business," Bilkisu said proudly.

Worldwide an estimated one in three women has experienced or is experiencing one form of gender-based violence. It undermines the health, dignity, security, and autonomy of its victims, yet it remains shrouded in a culture of silence. This is the situation of Rukkaya Abubakar (not real name) a 25year old divorcee, from Sokoto North LGA and a mother of one child.

Rukkaya is an intimate partner violence survivor, who also got infected with HIV by the perpetrator who later divorced her. Following her divorce, she moved on with her life and later married another man with the same health status as hers, but her situation turned out worse because the second husband was also an abuser. She could not take the abusive situation anymore, she decided to sue him in court for divorce, and her request was granted.

After counseling her family through Nana Khadija SARC, the family accepted her back and never stigmatized her and she was later referred to EU-UN Initiative Partner- Neem Foundation through Nana Khadijah Center to have access to second chance education, mental health, and psychological therapy, and the economic empowerment program, a few months after participating in all the activities she shared with us how she has been impacted positively and considered herself to be one of the lucky people to be part of this program

In her own words "Zanso ace wannan gidauniyar zata taimaka ta cigaba da wannan tsarin saboda nayi matuqar qaruwa ta fannin ilimi da lafiyan hankalina da Kuma jikina. Zanso 'yanuwana dasuke irina suma samu irin wannan qaruwa".



(How I wish this Partners will continue to implement this program because I so much benefited from it in terms of improving my knowledge and health status, especially my mental and physical health. Therefore, I wish those of the same status as I would also benefit the same way as I do).

Rukkaya wishes to express her gratitude to EU-UN Spotlight and UN Women for such an initiative to support all women and girls who suffered such a fate.

#### Men's attitudinal change in action!

t is a known fact that in the conservative northern traditional setting, women do not have equal rights with men. This was the case during the training of teachers in Sokoto. Female participants were not allowed to freely express themselves by male participants and they were not also allowed to go for their meal until men have been fully served.

The facilitators at the training addressed this during the training and it became a serious issue that almost brought the training to an abrupt end. At the end of the third day, the men agreed to women being served first but on the fourth day, they rejected the idea. The men on their own suggested two parallel lines of male and female being served simultaneously which everyone was happy about and which was retained until the training ended. This is a shift from the normal in a place like Sokoto. At the end of the training, there was obviously a change in the attitude of the men.

#### Hassana's Story

All hopes seemed dashed for Hassana a 15-yearold from Tangaza LGA who was raped by an unidentified man on her way to source for firewood in the bush.

After the incident, Hassana was rushed to the Nana Khadija SARC for medical care. She was immediately attended to and the case was reported to security agencies. The long search for the perpetrator is still on as she was unable to identify the perpetrator. Hassana was however referred to LHI by the surveillance team at the community to be part of the monthly survivor's forum.

Hassana has braced up to face the realities of times, and her mental health has greatly improved through the EU-UN Spotlight Initiative survivor's forum. She has enrolled in school and in her Senior secondary year now. In her words: "I want to be a lawyer, to be able to give justice to survivors like me. I am forever grateful for this training that builds in me a new hope and confidence, I feel free and also loved. Thank you, EU-UN Spotlight Initiative".

#### **Nafisat's Story**

afisat is a 12-year-old who lives in Binji LGA of Sokoto state. Subjected to hawking by her family in order to support the family's means of livelihood, Nafisat was raped and left to die by her perpetrator. Identified by the gender-based/child protection surveillance team in Binji, Nafisat was referred and taken for proper medical care at the Nana Khadija One-Stop Centre. In their quest for justice for Nafisat, her parent reported the case to the Nigerian Security and Civil Defense Corps (NSCDC). The perpetrator on hearing the news took to his heels and left the town. However, he is currently on the wanted list by security agencies in the State.

Nafisat was then enrolled by the Community Based Surveillance team where she attends the EU-UN Spotlight Initiative supported survivor forum put in place to encourage survivors build resilience and give life a second chance

She is gradually recovering from the trauma and shock she experienced from the event through engaging in psychosocial support services she enjoys at the safe space. In her words: "This group has helped me to develop great self-confidence and courage to go back to school. I now thrive for a better life. All thanks to EU-UN Spotlight Initiative and the Life Helpers Initiative (LHI) team for giving me a new beginning and also the teaching we get monthly has helped me to know how to stay safe and secure."

#### Fatima's Story

atima is a 30-year-old Fulani woman from Zamfara State who lost her parents at the age of 10 years and started living with her uncle who married her off to her first husband (a Fulani herdsman) at the age of 16. 3 years later, Fatima got pregnant but suffered prolonged labour for 3 days at home without help until her neighbours heard her cry and rushed her to the nearest hospital. She delivered a stillbirth and macerated through the caesarean section.

The husband who was away during the happenings that led to her fistula condition sent her a divorce letter which threw her into depression, anxiety, and stress. On discharge from the hospital, Fatima returned to her uncle's place where she stayed for years before being married to another Fulani man whom she had a daughter. The man passed away.

In her words: "At age 19 my entire life changed totally and I was psychologically disturbed. I started a new life in my uncle's house where I was isolated from everybody. I was given a separate room where no one would come to check on me. I cried bitterly every day and begged Allah to take my life".

Things took a new turn when information from the radio reached Fatima that there would be a free fistula repair campaign in one of the fistula repair centers organized by Fistula Foundation Nigeria. She was taken to the centre with the help of her uncle and an examination reviewed that she had a complex fistula that requires surgeries in stages.

Haven lived with fistula for 15 years of her life, Fatima went through four stages of fistula repairs from which she had the last one earlier this year by Fistula foundation with support from the EU-UN Spotlight Initiative.

Fatima is now happily married, stands as a fistula advocate in her community and has been empowered through Ministry of Women and Children Affairs with various skills such as sewing, shoe making, and how to rear animals with support from EU-UN Spotlight initiative which has improved her livelihoods and mental health. Fatima now generates income from the empowerment program and is living a stable and fulfilled life with her family.

#### Amina - 1 Story

Amina is a 17-year- an old young woman from Sokoto North Local Government Area in Sokoto state Nigeria. She is a primary school dropout and a survivor of Gender Based Violence [rape] her story is quite pathetic because of the trauma and stigmatization she experienced. She was raised in a poor home and due to poverty, her parents could not support her primary education. She managed to go through primary one to five and finally dropped out of school when she couldn't register to write her common entrance examination. Amina missed out on her adolescent stage development without comprehensive knowledge of her sexual reproductive health and dropping out of school made her very vulnerable to perpetrators in her community. She was raped by a male member of the community where she lived, for over four years Amina couldn't share her story, speak- out or report her case to government authority or try to seek justice, she has lived in fear, trauma, and stigmatization she feels depression, powerless and shy but she never gave up. Amina believed she will receive another opportunity for education.

During the community sensitization and enrollment of learners, Amina heard about the second chance education program and indicated her interest she was further screened and enrolled by her facilitator, the facilitator noticed her because of her depressive look, shyness, lack of interest in school interaction with others, she further engaged her, assessed her mental health and wellness. Amina opened up and shared her story with her facilitator, psychosocial support and counseling therapy were provided for her, and she was encouraged to take a new leaf and move on since her perpetrators can no longer be located.

Amina is now taking her six months basic literacy course under the Accelerated Second Chance Education Program implemented by EU-UN Spotlight Initiative [Grassroots Entrepreneurship Skills Acquisition [GESA] Initiative] in Sokoto State where she is training to read and write well, improve her social interactions, assertiveness and self-esteem through life skills teaching and health education to enable her to understand her sexual reproductive health and rights.[SRHR].

Today Amina believes she can further her education after the six months program, learn a trade skill, and also become a female champion and change-maker in her community.

In her words: "Ina ma Allah godiya da kuma kungiyar ku ta fistula foundation da EU-UN Spotlight Initiaitive da gudunmawa da suka bani har nakai wanga matsayi. Lalai ga da na zabi mutuwa, ama yanzu nafison in rayu. Nagode, kuma Allah ya saka da alheri".



#### **Amina-2 Story**

mina was raped by a man who disappeared without a trace while trying to cope and recover from the trauma she was married off at the age of 12 to another man who was already married with a wife and children. After 3 years of marriage, her husband was influenced by his first wife to maltreat and eventually divorced her. She had been with her parents for over six months without and care from the abused husband. He had asked her to return to his home with the promise of turning a new leaf. Due to fears on a resourced abused she refused to return.

Amina was then referred to the EU-UN Spotlight initiative partner, Save The Child Initiative (STCI) through the community surveillance team by her aunty where she was registered on the CPIMS for Case management services and enrolled into the EU-UN Spotlight initiative survivor's forum that provides a platform for healing through expression activities such as expressive therapy and other mental health and psychosocial support services. She was referred to the Ministry of Women and Children Affairs for Social support where she received a grinding machine. Amina has returned to school and has been empowered to be resilient and fend for her daily living.

#### Farida's Story

arida is an adolescent girl who was raped and got pregnant. After the rape incident, Farida's parents tried to hide the case without knowing she was pregnant.

After Several months, the pregnancy was discovered, and unfortunately for her, she was thrown out of the house by her parents.

She was admitted to the maternity waiting home, until after she was delivered of the child and was connected with the Community surveillance/response team before getting discharged.

In Farida's words: "Aunty na gode kwairai da taimakon da na samu dagareki ta hanyar EU-UN Spotlight Initiative project. Allah ya saka muku da Alheri".

### Recommendations



- Facilitate planning and budgeting engagement for state ownership of Sexual Assault Referral Centre (SARC).
- There is a need for diligent monitoring the implementation of the Violence Against Persons (Prohibition)

  Act (VAPP) in the state as a basis for further and necessary engagements.
- Program development on participation of citizens and groups in the enforcement of the provisions of the VAPP law is desirable. This could include capacity building for diverse citizens groups, medical/health professionals, law enforcement agents among others in litigation.
- Provision of office equipment for LGA Surveillance Teams to enhance proper documentation of all cases and activities.
- Inclusion of parents/caregivers of survivors in counseling and trainings on VAWG/C.
- Extended timeline to consolidate the gains of the Spotlight Project in the LGAs implemented as well as expansion to other LGAs.
- Expand the awareness-raising efforts on Gender-Based Violence (GBV) to cover the recently incorporated Spotlight focus Local Government Areas (LGAs).
- Plan and facilitate town hall meetings in the four LGAs where Spotlight initiative has been implemented, providing a platform for information exchange and feedback on GBV concerns.
- Host a symposium aimed at educating and involving stakeholders, including newly appointed political office
  holders, on the importance of GBV financing and related matters, promoting sustainability and ownership of
  initiatives to combat GBV.
- There is a need for the government to continuously assess the SI program's impact and adapt to changing needs and circumstances, as well as identify and support local champions that can advocate for the sustainability of Safe Space programs within the state.
- Strengthen the use of indigenous organization to implement project
- An ecological model is required in addressing gender based issues among in-school young people. As students are being reached in schools, parents need to be reached in the community; policy makers reached to provide policies and systems that provide enabling environment; teachers trained to provide information and enforce the policies in schools; while health facilities must be equipped to be youth friendly to take referral from schools.
- Proper coordination mechanism must be established among different implementers of the project to leverage on the strength of one another, for effective collaborations among stakeholders.
- The need to strengthen and implement digital literacy programs as an additional component to the Second Chance Education Program for survivors and persons with disabilities.
- Produce Information, Education and Communication (IEC) materials in local languages.
- Addressing gaps in educational access and access to GBV services for women and girls with special needs by providing disability friendly tools, resources, safe learning environment and supportive aid equipment for the blind, deaf and physical and intellectual disabilities.

- Increasing GBV service points across hard-to-reach communities
- There is a need for more capacity building interventions for GBV actors.
- The GBV situation room to be equipped to standard.
- Data validation meeting and Data Quality Assessment should be held more regularly
- Collaboration through Referrals: Establishing strong referral networks among civil society organisations and support centres ensures comprehensive assistance for survivors. Referrals facilitate access to various services, including medical care, counselling, and legal support.
- Media Advocacy: Leveraging media platforms and technology, such as radio and social media, increases outreach to remote areas. Disseminating information through these channels ensures broader awareness and encourages conversations around gender-based violence and harmful practices.
- Document Best Practices: Collect and document success stories, challenges, and innovative approaches from different communities. These insights can guide future initiatives and contribute to evidence-based strategies. Empowering the communities on skills or cottage industries will also assist in Best Practices in Documentation.



Spotlight Initiative

To eliminate violence against women and girls

### **List of Acronyms**

CBOs Community Based Organizations

CEDAW Convention on the Elimination of All Forms of Discrimination Against Women

CEFM Child Early and Forced Marriage

CPIMS Child Protection Information Management System

CRA Child Rights Act

CRM Case Response Management

CSE Comprehensive Sexuality Education

CSO Civil Society Organization
CSRG Civil Society Reference Group

CRS Cross River State
DEO Data Entry Officer

DQA Data Quality Assessment

EU European Union

**EVAW** Ending Violence Against Women

**EVAWG** Ending Violence Against Women and Girls

FRED Foundation for Resilient Empowerment and Development

FGM Female Genital Mutilation

GAP Gender Action Plan
GBV Gender-Based Violence

HP Harmful Practices

HTP Harmful Traditional Practices

IP Implementing Partner
LGAs Local Government Areas

MDAs Ministries, Departments and Agencies
MICS Multiple Indicator Cluster Surveys

MPTF Multi-Partner Trust Fund

NDHS Nigeria Demographic and Health Survey

NGO Non-Governmental Organization

OSC One-Stop Centre

PME Participatory Monitoring and Evaluation
PME Participatory Monitoring and Evaluation
PVAWG Preventing Violence against Women and Girls

PSC Project Support Committee
PWD Persons With Disabilities

SAP Systems Applications and Products in Data Processing

SARC Sexual Assault Reference Centre

SCE Second Chance Education
SOP Standard Operating Procedure

SPs Service Providers

SGBV Sexual and Gender-Based Violence SMoWA State Ministry of Women Affairs SRH Sexual and Reproductive Health

SRHR Sexual and Reproductive Health Rights
SRGBVT School Related Gender Based Violence Team

VAC Violence Against Children

VAPP Violence Against Persons Prohibition Act

VAW Violence Against Women

VAWG Violence against Women and Girls

