

Sexual and Gender Based Violence and the Budget (A Review of Sokoto State: 2016-2019)



**Spotlight
Initiative**
*To eliminate violence
against women and girls*



Centre for Social Justice

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(Mainstreaming Social Justice in Public Life)

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List of Abbreviations

Bn	Billion
CBOs	Community Based Organisations
CEDAW	Convention on the Elimination of all Forms of Discrimination against Women
CSOs	Civil Society Organizations
DEVAW	Declaration on the Elimination of Violence against Women
FBOs	Faith Based Organisations
FGM	Female Genital Mutilation
HIV	Human Immunodeficiency Virus
AIDS	Acquired Immunodeficiency Syndrome
HP	Harmful Practices
ICCPR	International Covenant on Civil and Political Rights
ICESCR	International Covenant on Economic, Social and Cultural Rights
M	Million
MDAs	Ministries, Departments and Agencies of Government
MICS	Multiple Indicator Cluster Survey
MNCH	Maternal, Newborn and Child Health
MOA	Ministry of Agriculture
MOH	Ministry of Health
MOJ	Ministry of Justice
MWCA	Ministry of Women and Children Affairs
NAPTIP	National Agency for the Prohibition of Trafficking in Persons
NDHS	Nigeria Demographic and Health Survey
NGOs	Non-Governmental Organisations
MICS	Multiple Indicator Cluster Survey
NEI	Nigeria Education Indicators
NSCDC	Nigeria Security and Civil Defence Corps
NYSC	National Youth Service Corps
PHC	Primary Health Care
SDGs	Sustainable Development Goals

SGBV	Sexual and Gender Based Violence
SRHR	Sexual and Reproductive Health and Rights
SSGP	Sokoto State Gender Policy
SSHA	Sokoto State House of Assembly
UBE	Universal Basic Education
UN	United Nations
VAPP	Violence Against Persons Prohibition
VAWG	Violence against Women and Girls
VVF	Vesico Vaginal Fistula
WCCE	Women Centre for Continuing Education

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EXECUTIVE SUMMARY

Section One is the introduction. It discusses issues on the focus and methodology of the study. The focus of the research is on budgeting for the eradication of sexual and gender-based violence (SGBV), violence against women and girls (VAWG), harmful practices (HP) and the promotion of sexual and reproductive health and rights (SRHR) of women and girls in Sokoto State. It is a desk study of budgets, relevant laws and policies, statistics and data. The draft report was validated by stakeholders including representatives of ministries, departments and agencies (MDAs) of government, relevant women's rights and civil society organisations and the media. The research is part of the Spotlight Initiative which has an overall vision of *a Nigeria where all women and girls, particularly the most vulnerable, live a life free from violence and harmful practices.*

Section Two is on the legal and policy framework on SGBV, VAWG, HP and SRHR of women and girls. It reviewed the provisions of international standards including the United Nations Declaration on the Elimination of Violence against Women (DEVAW), the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), the Beijing Declaration and Platform for Action as well as the Sustainable Development Goals (SDGs). It reviewed the multi-layered duties of state to respect, protect and fulfil the right to human dignity encapsulated in ensuring that women and girls enjoy a life free from violence. The national standards reviewed include the fundamentals rights provisions in S.34 (1) - freedom from torture, inhuman and degrading treatment and S. 42 of the Constitution of the Federal Republic of Nigeria 1999 (Constitution) on non-discrimination. It reviewed the Compulsory, Free, Universal Basic Education Act; the Sokoto State Right to Education Law, the Penal Code and Administration of Criminal Justice Law as well as the Sokoto State Gender Policy (SSGP), etc.

Section Three is the situation analysis which reviews the relevant data and statistics. The Nigeria Demographic and Health Survey 2013 and 2018, the Multiple Indicator Cluster Survey 2011 and 2016 and the Nigeria Education Indicators 2016, etc. are the main sources of the data used in this section. The discussion is presented in sub-groups - Education, SGBV/VAWG, HP and SRHR. In education, female primary and senior secondary school enrolment and completion rates, when compared with the national average and the enrolment and completion rates of boys in the state is low. The data for female junior secondary school's education matches the national average.

SGBV in the state is low compared to national and north west zone averages. However, in harmful practices, the state's data shows the prevalence of early marriages and teenage motherhood. The data on female genital mutilation (FGM) shows that although the practice exists, its prevalence is lower than the national average. The proportion of women who received antenatal care from skilled service providers as well as women who were delivered in a medical facility by skilled birth attendants lags behind the national average. The demand for and use of contraceptives in the state is low.

Section Four is on the budget and it focused on relevant key agencies dealing with the subject matter of study. It identified the baseline, gaps and challenges in the funding of the agencies involved in the campaign against VAWG, SGBV, HP and the struggle for improved SRHR for women and girls. It also sought to review value for money issues, variance between appropriated sums and actual releases, compliance with extant laws and policies as well as the duty to respect, protect and fulfil the rights of women and girls to freedom from violence. This was done against the background of the minimum core obligation of the state, established in national policies and international standards, to guarantee freedom from violence for all women and girls in Nigeria including the most vulnerable.

The budgetary provisions in health over the four years show that SGBV/VAWG/HP and SRHR of women and girls were not directly targeted by the allocations. Out of N12.613bn appropriated to the project theme over the four years, only N1.082bn was released which is just 9% of the appropriated sum. Generally, the appropriation lacked credibility as the votes to the Ministry of Health were poorly implemented due to sub-optimal releases. Some of the votes were repeated year after year without releases. The impression created by the 9% performance is that the appropriation process is not based on realistic evidence and the revenue estimates and projections of the budget were not realized. There was no vote for sensitisation for behavioural change related to SGBV/VAWG/HP and SRHR.

In the Ministry of Women Affairs and across board in all MDAs, there were no votes for gender mainstreaming, enhancement of women rights, sensitisation and capacity building on prevention and responses to SGBV. Family planning and reproductive rights hardly got any vote. Over the four years, out of a total sum of N2.930bn appropriated to address the thematic area, only N94.052m was released. Essentially, releases of the votes on SGBV/VAWG/HP and SRHR in the Ministry of Women Affairs averaged 3% a year. There were reoccurring votes which did not get a single release over the four years. The impression is created that the budget lacks credibility since the appropriation has no nexus with releases and utilised sums. When these very poor budgetary releases are pitched against the state's data on early marriage and teenage motherhood, access to antenatal services and delivery by skilled birth attendants as well as the need and use of modern contraceptives, it will become clear that the state did not dedicate the maximum of its available resources for the progressive realisation of freedom from violence for women and girls and the promotion of their SRHR.

In other reviewed sectors vis, Agriculture, Education, Youth and Sports, etc., only the appropriated figures were available as there was no information on releases to the ministries. Against the background of the foregoing, the study makes the following recommendations.

Executive

- Prepare a medium and long term costed multisectoral action plan and strategy for the elimination of SGBV/VAWG/HP and the promotion of the SRHR of women and girls.

- Make the budget more credible and responsive by using empirical evidence for revenue forecasts to ensure that forecasted revenue is realisable. Link the realistic revenue to expenditure to ensure that proposals for expenditure when approved by the legislature are implemented.
- Increase the budgetary allocations that respond to SGBV/VAWG/HP and the improvement of the SRHR of women and girls.
- Open the budgeting process by preparing and publishing quarterly, half yearly and full year budget implementation reports in hard and soft copies including posting same on the website of the Ministry of Finance. These should be prepared and published within one month of the end of reporting period.
- Capacity building for Strategic Implementation MDAs including Ministry of Women Affairs and other MDAs on gender sensitive budgeting especially as it relates to SGBV/VAWG/HP and SRHR.
- Collaboration between Ministry of Women Affairs, the State Planning Commission, Statistics Agency and other MDAs for the purpose of gathering, collation, processing and reporting on data (Data Bank) on SGBV/VAWG/HP and improvement of SRHR. This will improve planning and response to the associated challenges.
- Establish by law a Sexual and Gender Based Violence Response Team in the State for a comprehensive response to SGBV challenges. Provide referral services to survivors of SGBV/VAWG and to provide and monitor the provision of quality forensic, medical, legal and psycho-social support to survivors. This should include the establishment and funding of shelters run by the State. This would involve a collaboration of several MDAs including Women Affairs, Education, Health, Justice, etc.
- Engage in sensitisation and enlightenment campaigns to change cultural attitudes based on stereotypes on the inferiority or superiority of women and men. This will involve collaboration between MDAs such as Women Affairs, Information, Youths and Sports; civil society, religious and traditional leaders.
- Collaborate with and support law enforcement agencies to improve enforcement of laws on SGBV/VAWG/HP and the improvement of SRHR of women and girls.

Legislature

- Enact the following laws in the State: Child Rights Law, Gender and Equal Opportunity Act, Violence Against Persons Prohibition Law and Sexual and Gender Based Violence Response Team.

- Training of members of the State House of Assembly especially the Appropriation, Finance, Public Accounts and Women Affairs Committees on Gender Responsive Budgeting.
- Improve oversight over the expenditure of appropriated funds on the project theme.

Civil Society

- Engage the executive and legislature for the implementation of the above recommendations through advocacy visits, monitoring and reporting, action research, etc. on issues related to the project theme.
- Organize sensitisation and capacity building programmes to improve knowledge and skills on the subject matter. Engage both men and women and boys and girls.
- Provide pro bono support especially legal aid to survivors of VAWG/SGBV/HP.
- Engage the religious and cultural leaders in a dialogue for the eradication of SGBV/VAWG/HP and the promotion of the SRHR of women and girls.

Section One

Introduction

1.1 Focus and Methodology

Violence against women and girls in Nigeria is assuming pandemic proportions in the last couple of months since the lockdown arising from the coronavirus pandemic. The focus of this study is on budgeting for the eradication of sexual and gender-based violence (SGBV), violence against women and girls (VAWG), harmful practices (HP) and the promotion of sexual and reproductive health and rights (SRHR) of women and girls in Sokoto State. There is an inextricable relationship between laws, policies, plans and budgets. Plans, policies and laws cannot be implemented without the resource support of the budget. The extant intervention is a desk study of budgets, relevant laws and policies, statistics and data. The draft report was validated by stakeholders including representatives of Ministries, Departments and Agencies of government (MDAs), relevant women's rights and civil society organisations and the media. The study is part of the Spotlight Initiative which has an overall vision of *a Nigeria where all women and girls, particularly the most vulnerable, live a life free from violence and harmful practices.*

The research reviewed key state level policies and laws (or domestication of national policies, laws and programmes) and this include laws and policies on women and gender, violence against persons, child rights, maternal and child health, reproductive health and rights, female genital mutilation, rape, child marriage, intimate partner violence and prevention of trafficking in women. It reviewed laws, policies and programmes for access to family planning services, harmful widowhood practices, HIV prevention and treatment, second chance opportunity for girls, one stop centres for victims of sexual assault, domestic violence; medical, psychosocial, forensic and counselling services for female survivors of SGBV. Further, it reviewed policies, laws, programmes on girl child enrolment in schools. It established gaps in existing laws and policies and pointed out areas in need of law and policy reforms.

Using relevant statistics and data, the research did a situation analysis of the state in terms of the different aspects of SGBV, VAWG, HP, SRHR as well as some other issues captured under the law, policy and programme framework. Employing gender disaggregated statistics, it compared the state's data with national statistics and international standards. For the purpose of standardisation, statistics were mainly drawn from the most recent Multiple Indicator Cluster Survey (MICS), Nigerian Demographic and Health Survey (NDHS) and Nigeria Education Indicators (NEI).

The research reviewed provisions in the state budget which are geared towards eliminating SGBV, VAWG and HP while improving the SRHR of women and girls. The allocations for Education, Health, Women Affairs, etc. were reviewed. Issues flagged in the law and policy, data and statistics sections guided the budget review. The review of budgeting and data is for the period 2016-2019 and it focused on relevant key public agencies dealing with the subject matter. It was done with a view to identifying the baseline, gaps and challenges in the funding of the agencies involved in the campaign against VAWG, SGBV, HP and the struggle

for improved SRHR for women and girls. It also reviewed variance between appropriated sums and actual releases, compliance with extant laws and policies as well as sought to identify the optimum resources needed for the respect, protection and fulfilment of the rights of women and girls to freedom from violence.¹ This was done against the background of the minimum core obligation of the state, established in national policies and international standards, to guarantee freedom from violence for women and girls in Nigeria.

The draft report was presented to a validation meeting which was organised to ensure that the results and findings of the research are evidence based, factual and in conformity with specifications issued at the beginning of the exercise. It was an opportunity for quality control and validation. Participation at the validation meeting was drawn from representatives of MDAs and they include the Ministries of Women Affairs, Budgeting and Development, Health, Agriculture, Bureau of Statistics, the Police, NSCDC, NAPTIP, etc. The stakeholders also include representatives of civil society organisations working on gender and prevention of violence against women, the media and human rights organizations.

1.2 Context

SGBV and VAWG are twin vices that are witnessed in public and private life in Nigeria. Similarly, there are many societal and traditional practices that are harmful to the wellbeing of women and girls in Nigeria. In addition, there are laws, policies and actions of different tiers of government that restrict or limit women and girls' access to the realisation of sexual and reproductive health and rights in several Nigerian societies.

The Constitution of the Federal Republic of Nigeria 1999 (Constitution) classifies legislative powers which underlies the functions of government into Exclusive and Concurrent Legislative Lists.² The Residual List is the residue that is not outlined in the Constitution while the Fourth Schedule to the Constitution outlines the functions of a Local Government Council. The Exclusive List is made up of items that are left only for the Federal Government of Nigeria while the Concurrent List is made up of items that both the Federal Government of Nigeria and State Governments can legislate upon. Economic, legal and social services of governments that facilitate the reduction or elimination of SGBV are shared between the federal, state and local governments.

Sokoto State is one of the thirty-six states in Nigeria. It is in the North West geopolitical zone of Nigeria. It has 23 local Government Areas with an estimated population of 5,469,505

¹ See General Comment No. 3 of United Nations Committee on Economic, Social and Cultural Rights (Fifth Session, 1990) on the nature of State Parties obligations under the International Covenant on Economic, Social and Cultural Rights. See also the Maastricht Guidelines on Violations of Economic, Social and Cultural Rights adopted on the occasion of the 10th anniversary of the Limburg Principles on the Implementation of the International Covenant on Economic, Social and Cultural Rights.

² Second Schedule to the Constitution, Parts 1 and 2.

comprising of 2,789,448 males and 2,680,058 females.³ Over 90% of the people of the state are Muslim and Islamic religion provides them with a code of conduct and behavior that influences their day-to-day activities. Islamic Education plays a great role in the pursuit of knowledge by people of the state. This is what gives rise to the growing number of Qur'anic Schools. Sokoto State was first created in 1976. Kebbi state was carved out in 1991 while Zamfara was carved out in October 1996. It has a land area of 28,232.37sq kilometres, and it is located between longitudes 11° 30" to 13° 50" East and latitude 4° to 6° North. It is bordered in the North by Niger Republic, Zamfara State to the East and Kebbi State to the South and West.

Within the provisions of the Constitution, the State is autonomous and can take appropriate steps on its own to ensure the speedy reduction or elimination of SGBV/VAWG/HP as well as promote the SRHR of women. Sokoto State, being a part of the Nigerian Federation, is indirectly a signatory to any treaty or international standard binding on Nigeria. The State is therefore under obligation to make laws and policies that guide its activities in the light of all the agreements and conventions that Nigeria is signatory to. In some cases, the State domesticates or adapts laws and policies enacted by the Federal Government of Nigeria in order to suit the prevailing circumstances within its territory. As an autonomous entity, the State Government enacts annual budgets that show its fiscal policy direction for the year and this guides the execution of government functions within the fiscal year.

Therefore, a critical review of Sokoto State's annual budgets will show the extent of alignment between the government's pronouncements, policy papers and expenditures. This is because the reduction or eradication of SGBV/HP or the promotion of SRHR is impossible without adequate funding. As a result, this study seeks to investigate or critically assess the extent to which Sokoto State Government has made budgetary provisions for activities and services that combat SGBV/VAWG/HP and eliminates limitations to women and girls' enjoyment of SRHR.

³ It had an estimated population of 4,998,090 comprising of 2,549,026 males and 2,449,064 females in 2016 and the current figures were estimated from the National Population Commission's annual growth rate of 3.05%.

Section Two

Legal and Policy Framework on SGBV, VAWG, HP and SRHR

2.1 Introduction - International Standards

The rights of women, girls and indeed all members of the human family, to freedom from any form of violence imposes peremptory and continuing state obligations under international standards ratified by and applicable in Nigeria⁴. Some aspects of the proscription of VAWG, especially SGBV, could be stated to have attained the status of *jus cogens*, being peremptory norms of customary international law recognised and binding on all civilised nations and from which no derogations are permissible. In articulating violence against women, the definition in article 2 of the United Nations Declaration on the Elimination of Violence against Women⁵ (“DEVAW”) is adopted vis:

Article 1

“For the purpose of this Declaration, the term “violence against women” means any act of gender-based violence that results in, or is likely to result in physical, sexual and psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty whether occurring in public or in private life”

Article 2

“Violence against women shall be understood to encompass, but not limited to the following:

(a) Physical, sexual and psychological violence occurring in the family including battering, sexual abuse of female children in the household, dowry-related violence, marital rape, female genital mutilation and other traditional practices harmful to women, non-spousal violence and violence related to exploitation.

(b) Physical, sexual and psychological violence occurring within the general community including rape, sexual abuse, sexual harassment and intimidation at work, in educational institutions and elsewhere, trafficking in women and forced prostitution;

(c) Physical, sexual and psychological violence perpetrated or condoned by the state, wherever it occurs.

Manifestations of VAWG/SGBV do not stand on their own but are products of discrimination outlawed in international standards, including the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) - being products of patriarchy and unequal power relations. In article 1, CEDAW defines discrimination:

⁴ See article 5 of the standard setting Universal Declaration of Human Rights - *No one shall be subjected to torture or to cruel, inhuman or degrading treatment or punishment* and article 7 of the International Covenant on Civil and Political Rights.

⁵ General Assembly Resolution 48/104 of 20 December 1993.

“For the purposes of the present Convention, the term “discrimination against women” shall mean any distinction, exclusion or restriction made on the basis of sex which has the effect or purpose of impairing or nullifying the recognition, enjoyment or exercise by women, irrespective of their marital status, on a basis of equality of men and women, of human rights and fundamental freedoms in the political, economic, social, cultural, civil or any other field”.

The prevalent patriarchal practices in different Nigerian cultures continue to predispose women and girls to violence, resulting in poor reproductive and sexual health outcomes, poor access to and control over resources, higher vulnerability to poverty at certain ages in life, poor access to education, lack of inheritance rights, lack of voice and minimal participation in decision making processes at different levels, etc.⁶ It has been stated that the definition of discrimination includes gender-based violence, that is, violence that is directed against a woman because she is a woman or that affects women disproportionately⁷. SGBV/VAWG has serious negative effects on the right to health and the right to life because the easiest way of depriving a woman or girl of her right to life is to accentuate violence to her person to the point of abrogation.

The Protocol to the African Charter on Human and Peoples Rights on the Rights of Women in Africa makes elaborate provisions on freedom from violence for women and girls. It defines violence against women as:⁸

“..all acts perpetrated against women which cause or could cause them physical, sexual, psychological and economic harm, including the threat to take such acts; or to undertake the imposition of arbitrary restrictions on or deprivation of fundamental freedoms in private or public life in peace time or during situations of armed conflict or of war”.

The Protocol mandates State Parties to enact and enforce laws to prohibit all forms of violence against women including unwanted sex, whether the violence takes place in private or public as well as identifying the causes and consequences of violence against women and take appropriate measures to prevent and eliminate such violence.⁹

The Beijing Declaration and Platform for Action states that¹⁰:

⁶ Banke Akinrimisi - *Discussions on SGBV and the Nigerian Federal Budget 2020*.

⁷ General Recommendation No.19 (11th Session, 1992), Paragraph 6 - Committee on the Elimination of Discrimination against Women

⁸ Article 1 on Definitions.

⁹ Article 4 (a) and (c) respectively.

¹⁰ See Paragraph 112. See also the product of the 1993 World Conference on Human Rights - Vienna Declaration and Programme of Action which highlights the need to eliminate all forms of violence against women in public and private life. The Declaration equally enjoins member states to use all available instruments to ensure the elimination of all forms of sexual harassment, exploitation and trafficking in women.

“Violence against women is an obstacle to the achievement of the objectives of equality, development and peace. Violence against women both violates and impairs or nullifies the enjoyment by women of their human rights and fundamental freedoms”.

Therefore, a proper understanding of VAWG/SGBV will include an analysis of its causes, consequences; how intersectionality impacts vulnerability to violence and an elaboration of the role of the State in combatting violence in the public and private domains¹¹. This is however beyond the remit of this rights, duties, and resources conceptual analysis.

Furthermore, the Sustainable Development Goals (SDGs) in Goal 5 mandates States to achieve gender equality and empower all women and girls through inter alia the following:

“End all forms of discrimination against all women and girls everywhere. Eliminate all forms of violence against all women and girls in the public and private spheres, including trafficking and sexual and other types of exploitation. Eliminate all harmful practices such as child, early and forced marriage and female genital mutilation. Ensure universal access to sexual and reproductive health and reproductive rights as agreed in accordance with the Programme of Action of the International Conference on Population and Development and the Beijing Platform for Action and the outcome documents of their review conferences”

There is a multi-layered duty of State in human rights and in SGBV/VAWG/HP/SRHR; they are the obligations to respect protect and fulfil. There are also obligations of conduct and obligations of result. Running in the middle of all these obligations is the duty to ensure that freedoms are enjoyed on a non-discriminatory basis.

The *obligation to respect* demands that federal, state and local governments refrain from directly taking action that promotes violation of freedom from VAWG/SGBV or obstructing action taken by women and girls in pursuit of their freedom. However, the deliberate withholding of information by the state - information necessary to protect women and girls from violence is a violation of the obligation to respect¹². Criminalising access to goods, facilities and services that facilitate the enjoyment of the right to decide freely and responsibly on the number and spacing of children will also be a violation of the obligation to respect.¹³ The *obligation to protect* demands that agents and officials of government take action to prevent violations of freedom from VAWG by third parties - whether private individuals or organisations and to impose adequate sanctions for violations. This is aptly captured in article 4 (c) of DEVAW. The State should:

¹¹ See page 7 of “15 Years of the UN Special Rapporteur on Violence against Women its Causes and Consequences”- initiated and guided by Yakin Erturk.

¹² Article 16 (1) (e) of CEDAW.

¹³ Article 16 (1) (e) of CEDAW.

“Exercise due diligence to prevent, investigate and, in accordance with national legislation, punish acts of violence against women, whether those acts are perpetrated by the State or by private persons”¹⁴

The exercise of due diligence will include special rules and orders for law enforcement agencies to mainstream issues of VAWG/SGBV in their day to day work by advancing an effective response system. It may also include educational measures on radio, television and social media to remind citizens that VAWG/SGBV is an offence and therefore unacceptable - advertising special hotlines, emails, WhatsApp contacts to help survivors, etc.

The *obligation to fulfil* requires governments to take appropriate legislative, judicial, administrative, budgetary, economic and other measures, to the maximum of available resources, to ensure freedom from violence to women and girls. This is a positive obligation that involves the appropriation of government’s expenditure towards its priorities and these priorities should and must include freedom from VAWG/SGBV/HP. The act of appropriation must also be seen to be done in way and manner devoid of discrimination on any of the prohibited grounds. The provision of state resources must be seen to be concrete and targeted - not just tokenistic, as a step towards the realisation of freedom from violence. Even in periods of resource constraints, like a fiscal crisis, vulnerable members of society must be protected by the adoption of relatively low-cost but targeted measures and programmes which satisfies the minimum core obligation to freedom from violence.¹⁵

Essentially, such provisions must satisfy the minimum core obligation of the State to ensure that women and girls are free from violence through the implementation of the minimum core content of the bundle of rights encapsulated in freedom from SGBV/VAWG. In any State where women and girls are constantly battered, trafficked, deprived of access to sexual and reproductive health and rights (“SRHR”), etc., and the State fails to respond, such a State will *prima facie*, be failing to discharge its obligations under national and international standards¹⁶.

Thus, the minimum core obligation of the State is to ensure that the intersections between freedom from violence and the rights to life, health, human dignity, freedom from torture, inhuman and degrading treatment, etc. are not breached and the personhood and dignity of women and girls is held sacrosanct. Further, no deliberately retrogressive measures that

¹⁴ This is also the position of prevalent international jurisprudence in the decision of the Inter-American Court of Human Rights in the *Velasquez Rodriguez v Honduras* of July 29 1988, Series C, Decisions and Judgement, No.04.

¹⁵ Women and girls are not born with vulnerability or inherently vulnerable by their nature but have been made vulnerable by patriarchy and unequal power relations.

¹⁶ See General Comment No. 3 of the UN Committee on Economic, Social and Cultural Rights on the nature of States Parties obligations under the ICESCR.

reduces the extent of enjoyment of this right is permitted unless it can be justified by reference to more pressing and relevant higher norms provided by law¹⁷.

State legislative obligations include the enactment of laws that prescribe a minimum age of marriage - not less than 18; marriage to be with the free, full and informed consent of the spouses; prohibition of forced marriages and guaranteeing equal rights and responsibilities during marriage and its dissolution¹⁸. CEDAW enjoins States Parties to enact legislation that modify the existing prejudices and customary practices which are based on the idea of the inferiority or the superiority of either of the sexes or on stereotyped roles for men and women, boys and girls.¹⁹

The obligation to respect, protect and fulfil contains elements of the obligation of conduct and obligation of result. The obligation of conduct may require action reasonably calculated for the realisation of the enjoyment of freedom from violence. This would include the adoption of legal and policy standards. Obligation of result requires government to achieve specific targets to satisfy detailed substantive standards for instance, the complete elimination of female genital mutilation or a drastic reduction in the incidence of domestic violence.²⁰

2.2 National and Subnational Standards

In S.42 of the Constitution, it is provided:

“(1) A citizen of Nigeria of a particular community, ethnic group, place of origin, sex, religion or political opinion shall not, by reason only that he is such a person: -

(a) be subjected either expressly by, or in the practical application of any law in force in Nigeria or any executive or administrative action of the government, to disabilities or restrictions to which citizens of Nigeria of other communities, ethnic groups, places of origin, sex, religions or political opinions are not made subject; or

(b) be accorded either expressly by, or in the practical application of, any law in force in Nigeria or any such executive or administrative action, any privilege or advantage that is not accorded to citizens of Nigeria of other communities, ethnic groups, places of origin, sex, religions or political opinions.”

¹⁷ This would be almost impossible to justify considering that freedom from violence is emerging as a non derogable right.

¹⁸ Article 16 of CEDAW.

¹⁹ Article 5 (1) of CEDAW.

²⁰ Adapted from paragraph 7 of the Maastricht Guidelines on Violations of Economic, Social and Cultural Rights adopted on the occasion of the 10th anniversary of the Limburg Principles on the Implementation of the International Covenant on Economic, Social and Cultural Rights.

Discrimination has been earlier articulated as a component of VAWG and any law, policy or administrative action that discriminates against women and girls on any of the prohibited grounds will be facilitating VAWG.

Also, S.34 (1) (a) of the Constitution is on the right to dignity of the human person and provides that “*no person shall be subjected to torture or to inhuman or degrading treatment*”. Practices such as female genital mutilation (FGM) amounts to torture; wife battering amounts to inhuman and degrading treatment²¹. The Constitution is the supreme law of the land and any legal or policy provision, customary, traditional or religious norms inconsistent with it is void to the extent of its inconsistency.²²

To degrade is to make another to be less moral and less deserving of respect whilst inhuman treatment refers to lacking moral, human qualities of kindness, pity, etc., to be extremely cruel or brutal. Degrading is defined to mean reviling, holding one up to public obloquy and odium, lowering a person in the estimation of the public, exposing to disgrace, dishonour and contempt²³. Human dignity is the foundation of all human rights and the pursuit of life in larger freedom is essentially the pursuit of a dignified existence. Human rights derive from the inherent dignity of the human person. Without dignity, the human being loses his personhood and stays on the same level as animals with low mental development. It is about the integrity of the human person.

The Compulsory, Free Universal Basic Education Act of 2004 makes basic education compulsory and free for all Nigerian children including girls and a special fund is set aside by the Federal Government which is shared to the thirty-six states of the Federation to augment their investments in basic education. The incumbent Governor of Sokoto State, Aminu Waziri Tambuwal has declared a state of emergency in the education sector. This declaration effectively signaled that the government understood what it takes to remedy the state’s education deficits and this includes intervention in teacher training, provision of school and learning facilities and building of new schools. It is geared to improve enrollment at all stages - basic, secondary and tertiary; ensure that the state fills its quotas in all federal schools; improve quality of teachers by training and retraining, and recruitment of new ones. The ultimate aim is to improve human capital capacity in the sector, eliminate inequality in access and radically improve numeracy and literacy.²⁴

²¹ See the statement by Juan E. Méndez; UN Special Rapporteur on Torture and other Cruel, Inhuman or Degrading Treatment or Punishment on *Female Genital Mutilation: Progress-Realities-Challenges* at the event sponsored by Women’s UN Report Network, Inter-African Committee, Worldwide Organization for Women and NGO Committee on the Status of Women-Geneva
1 June 2011.

²² S.1 (1) (3) of the Constitution.

²³ *Isenalumhe v Amadin* (2001); Cases on Human Rights, 458.

²⁴ Taken from a speech by the Speaker of the Sokoto State House of Assembly, Alhaji Saidu Umar.

The Right to Education Law of 2017 in S.3 guarantees free and compulsory basic education to all children in the state. It is a legal framework to make education a justiciable right in the state. The Law makes it possible for women and girls in Sokoto State to have a second chance in education and in life, learn life skills, improve their income earning opportunities and become more aware of their rights and how to seek for redress upon violation. The Law can be used as a tool to effectively delay the age of marriage in Sokoto State. This Law also provides free education for the girl child and free textbooks for all secondary school students in the state. The state runs a Women Centre for Continuing Education (WCCE) that provides second chance opportunity to women who have dropped out of school for one reason or the other. The Centre enrolls candidates, especially married women for basic education up to senior secondary level. This is in addition to basic literacy as well training on income generating skills. The State Government has established an agency for girl-child education in 2016. The new agency coordinates all issues related to female education from basic level to tertiary level. Also, the state government began to address girl-child education by introducing monetary incentives for rural mothers who allow their daughters to attend school instead of street hawking.

The Sokoto State Penal Code 2019 defines a child as a person under the age of eighteen years and this tallies with the constitutional definition of full age to mean a person above the age of eighteen.²⁵ Relevant sections for SGBV/VAWG and SRHR in the Penal Code include:

- Defilement of child (S.210): liable to imprisonment for life.
- Desertion of a pregnant woman or girl child (S.213): liable to one to five years imprisonment with two hundred thousand naira fine and the recovery of the cost of upkeep of the woman or girl.
- Traffic in persons (S.258): liable to imprisonment for a term which shall not be less than seven years and to fine of not less than One Hundred Thousand Naira.
- Rape/sexual intercourse with a person without her consent or with her consent if she is below eighteen years [S.259 (1) (e) and S.260]: liable to life imprisonment for a term not less than twenty-one years. In trials for the offence of rape, corroboration shall be immaterial.
- Unlawful detention with intent to have sexual intercourse (S.263): liable to imprisonment for a term which shall not be less than three years and not exceeding five years or with fine of not less than Fifty Thousand Naira and not exceeding Two Hundred Thousand Naira or with both.

²⁵ See the definition section 2 of the Penal Code and S.29 (3) of the Constitution defining full age for the purpose of renunciation of citizenship. The 2019 Code repealed Cap.104, Penal Code Law of Sokoto 1996.

- Sexual harassment (S.264): liable to a term of not less than three years imprisonment or a fine of not less than one hundred thousand naira.
- Incest (S.375): liable to a term of not less than fourteen years imprisonment or a fine not less than one hundred thousand naira.

It is interesting to note that S.55 of the Penal Code of Old Northern Nigeria which allowed wife battery as chastisement, for the correction of a wife, as long as grievous harm is not inflicted was not reproduced in the Sokoto State Penal Code. Hitherto, this provision had treated husband-wife relationship as being similar to parent-child relationship in an age where corporal punishment has been virtually outlawed. Curiously, the Code in S.153 makes adultery a crime punishable with imprisonment for not less than five years or a fine of not less than one hundred and fifty thousand naira or both.

The Sokoto State Administration of Criminal Justice Act 2019 has some interesting provisions. In S.190, there is a remedy for a married woman against her husband and others in respect of her person and property. It states that a woman who has contracted a valid marriage shall have in her own name against all persons whatsoever including the husband of the marriage the same remedies or redress by way of criminal proceedings for the protection and security of her person or her own separate property as if such property belonged to her as an unmarried woman. The key interesting words for SGBV and VWAG relate to the protection and security of her person which reinforces the constitutional protection of human dignity.

Sokoto State does not have the equivalent of the Protection against Domestic Violence Law of Lagos State which specifically protects against physical and emotional violence, economic abuse, controlling behaviour, etc. The state lacks a Domestic and Sexual Violence Response Team established by law with a vision of overcoming negative societal norms, gender inequalities and systemic oppression to victims of domestic and sexual abuse through providing quality services and enriched programming.²⁶ However, there are civil society and informal programming involving responses to domestic and sexual violence in the state.

The Sokoto State Gender Policy (SSGP) is designed with the overall goal to:

“..build a just society devoid of discrimination, harness the full potentials of all social groups regardless of sex, and promote the enjoyment of fundamental human rights. The policy further seeks to ensure the survival, protection, participation and development of women, children, and people with special needs. It also seeks to evolve an evidence-based

²⁶ This is the vision of the Lagos State Domestic and Sexual Violence Response Team.

*planning and governance system where human, social, financial and technological resources are efficiently and effectively deployed for sustainable development”.*²⁷

The SSGP is founded inter alia on the acknowledgement and philosophical base that:

*“There is also the urgent need to improve the status of women and children which was guaranteed under Shariah and Islamic jurisprudence and by the Nigerian Constitution. These rights, although provided for and secured by law, are most often trampled upon or inhibited by harmful cultural practices. For example, the rights to personal safety and security, which protects women against any form of violence, and children, from all forms of harmful practices, are often violated. Thus, there is need for state-wide continuous gender re-orientation and sensitisation, as well as strategic planning to ensure gender mainstreaming”.*²⁸

*“Islam, being the major religion practiced in the State, the State adopts the Islamic philosophy of gender and social inclusion, which guaranteed the physiological and functional differences of males and females in society without discriminating between the two. These Islamic framework and laws accord with accepted norms and values of religion, and ensures equity, justice and fairness of all gender in access to health, education, and all other social services in the state.”*²⁹

The key policy objectives of the SSGP are to: Establish the framework for gender-responsiveness in all public and private spheres and strengthen capacities of all stakeholders to deliver their component mandate of the state’s gender policy and strategic framework; develop and apply gender mainstreaming approaches, tools and instruments that are compatible with the micro-policy framework of the state at any point in time, towards the socio-economic development of the state; adopt gender mainstreaming as an important value and practice in social transformation, organisational cultures and in the general polity in the state; and study and domesticate the principles of global and regional frameworks that support gender equity and women’s development into state’s laws, legislative processes, judicial and administrative systems where necessary and desirable. Other objectives are to encourage women’s participation and representation in all aspects of governance in order to promote equitable opportunities in all areas of political, social and economic lives in the state, to benefit from their wisdom and for them to have the opportunity to contribute to the development of the state and society; promote gender-specific projects and programmes as a means of developing the capabilities of both women and men, and enable them take advantage of economic and political opportunities, towards the achievement of gender equity and women’s development; and raise the level of educational attainment of men, women and children which is central to gender equity, and women’s development, to break the cycle of poverty in the family and enhance the attainment of the state’s general socio-economic development.

²⁷ Sokoto State Gender Policy at page 11.

²⁸ See rationale of the SSGP.

²⁹ At page 8 of the SSGP

Section Three

Situation Analysis: Statistics and Data

3.1 Introduction: Statistics and Data

The gathering, collation and analysis of gender disaggregated data is essential for the determination of whether progress has been made in any field of human endeavour including the eradication of SGBV/VAWG/HP and promotion of the SRHR of women and girls. For example, in SDG 5 which seeks to achieve gender equality and empower all women and girls and its target of eliminating all forms of violence against all women and girls in the public and private spheres, including trafficking and sexual and other types of exploitation, there are indicators which can only be measured with empirical evidence.³⁰

This section reviews statistics and data on the key areas of SGBV/VAWG, HP and SRHR as well as access to basic education which is an empowering right. The Nigeria Demographic and Health Survey 2013 and 2018, the Multiple Indicators Cluster Survey 2011 and 2016 and the Nigeria Education Indicators 2016, etc. are the main sources of data used in this section. The discussion is presented in sub-groups - Education, SGBV/VAWG, HP and SRHR.

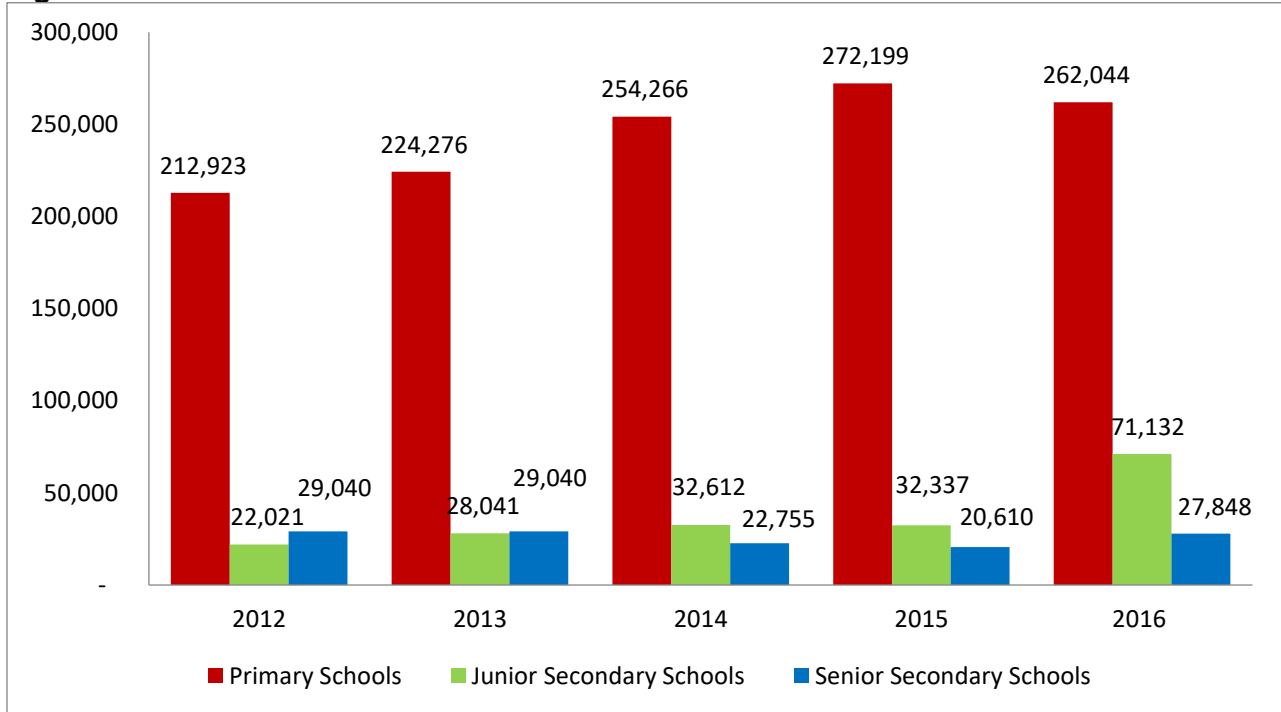
3.2 Education of the Girl Child

There is a basic state obligation to guarantee equal access to education and to eliminate inequality between men and women in the field of education. Education is an empowering right of intrinsic value that sensitises women and girls on their rights and the fact that they can claim their rights and demand redress when violated.

Figure 1 below shows that female primary school enrolment gradually increased from 212,923 in 2012 to 272,199 in 2015 being an increase of 28%. It declined to 262,044 in 2016. Female junior secondary school enrolment was much lower. It rose from 22,021 in 2012 to 28,042 in 2013 and 32,612 in 2014. In 2015, it came down to 32,337 and dramatically increased to 71,132 in 2016. This was an increase of 223% between 2012 and 2016. For senior secondary school, the enrolment started from 29,040 in 2012 and 2013 and declined to 22,755 in 2014; further declined to 20,610 in 2015 while increasing to 27,848 in 2016. The senior secondary school enrolment figures show a backward movement in a sector that demands a forward ever movement. The undulating backward and forward movements in enrolment engages the state's responsibility to ensure that girls have unimpeded access to basic education which is compulsory under Nigerian law.

³⁰ The evidence includes proportion of ever-partnered women and girls aged 15 years and older subjected to physical, sexual or psychological violence by a current or former intimate partner in the previous 12 months, by form of violence and by age and proportion of women and girls aged 15 years and older subjected to sexual violence by persons other than an intimate partner in the previous 12 months, by age and place of occurrence.

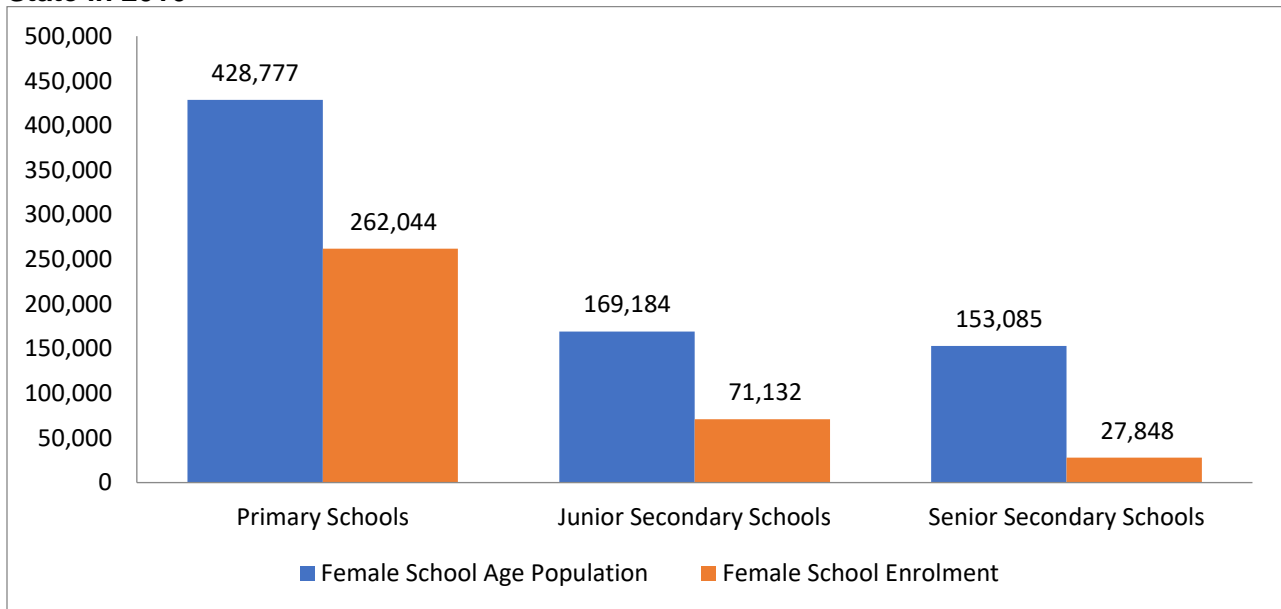
Figure 1: Trends in Female School Enrolment in Sokoto State 2012-2016



Source: Nigeria Education Indicators 2016

However, Figure 1 above tells only a part of the education story. The other part of the story is when the enrolment figures are compared with females of school age population. This gives a better picture of numbers and percentages who are either in school or do not have access to learning for basic education. Figure 2 below completes the picture of Figure 1.

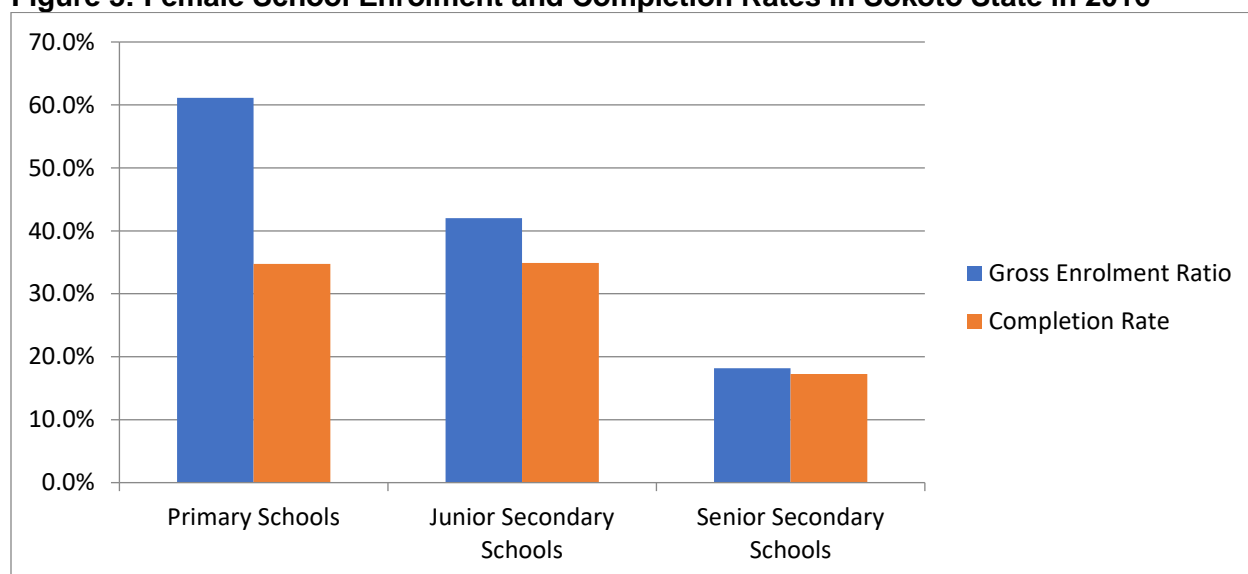
Figure 2: Female School Enrolment versus Female School Age Population in Sokoto State in 2016



Source: Nigeria Education Indicators 2016

From Figure 2, in 2016, out of 428,777 girls of primary school age, only 262,044 are in school which is just 61%. For junior secondary school age girls, only 71,132 are in school from a population of 169,184 which is just 42%. The senior secondary school attendance shows that out of 153,085 female school age population, only 27,848 are in school which is just 18%. Clearly, there is a crisis in the school enrolment figures that demands urgent state action to remedy the deficits. The completion rate is the final part of the data on enrolment and attendance of school for girls in Sokoto State. Figure 3 tells the story.

Figure 3: Female School Enrolment and Completion Rates in Sokoto State in 2016



Source: Nigeria Education Indicators 2016

The Sokoto State enrolment percentages in primary school (61%) and senior secondary (18%) are much lower than the national average of 80.4% for primary school, and senior secondary school of 32.6% respectively. However, the national junior secondary of 41.1% is lower than the unexplained Sokoto State figure of 42%. The female percentage enrolment in the state is lower than the enrolment figures for boys in the State. The primary school enrolment percentage for boys is 95.45%; junior secondary is 75% and senior secondary 32%. Other education related indicators in Sokoto State compared to the national averages are shown in Table 1.

Table 1: Other Education Indicators: Sokoto versus the National Average

Indicator	Sokoto	National
Literacy	20.1%	59.3%
Net Primary School Attendance	28.7%	59.2%
Net Secondary School Attendance	16.3%	46.2%
Primary School Completion	18.7%	63%

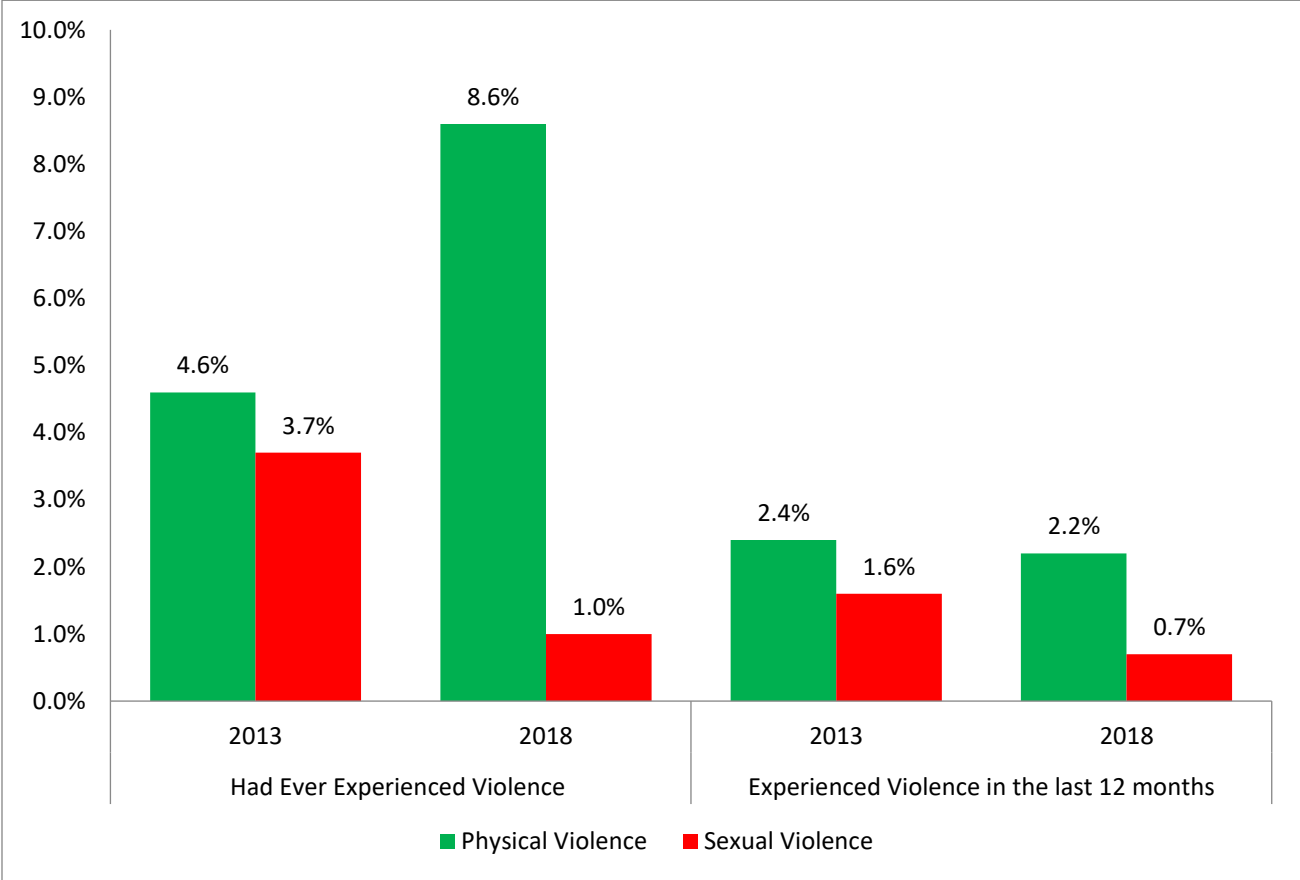
Source: MICS, 2016

Table 1 shows that the State is performing lower than national averages in the above indicators. Furthermore, the enrolment and completion data indicate nothing about the students achieving minimum proficiency in literacy and numeracy or generally acquiring the requisite knowledge for their level of education. Against the background of the foregoing, the State needs to take concrete and targeted steps towards the promotion of female education. Essentially, the state is in a crisis in the basic education sector which demands administrative, budgetary, legislative and policy interventions to provide more financial, human, information, technology and other resources to uplift female education in the state.

3.3 SGBV/VAWG

The State is under a legal obligation to eliminate all forms of violence against women and girls. The obligation demands public enlightenment and sensitisation, preventive measures as well as investigation and punishment of offenders when the rights of women and girls are violated. Figure 4 shows the trend of domestic violence in Sokoto State.

Figure 4: The Prevalence of Domestic Violence against Women and Girls in Sokoto State



Source: Nigeria Demographic and Health Survey – NDHS (2013 & 2018)

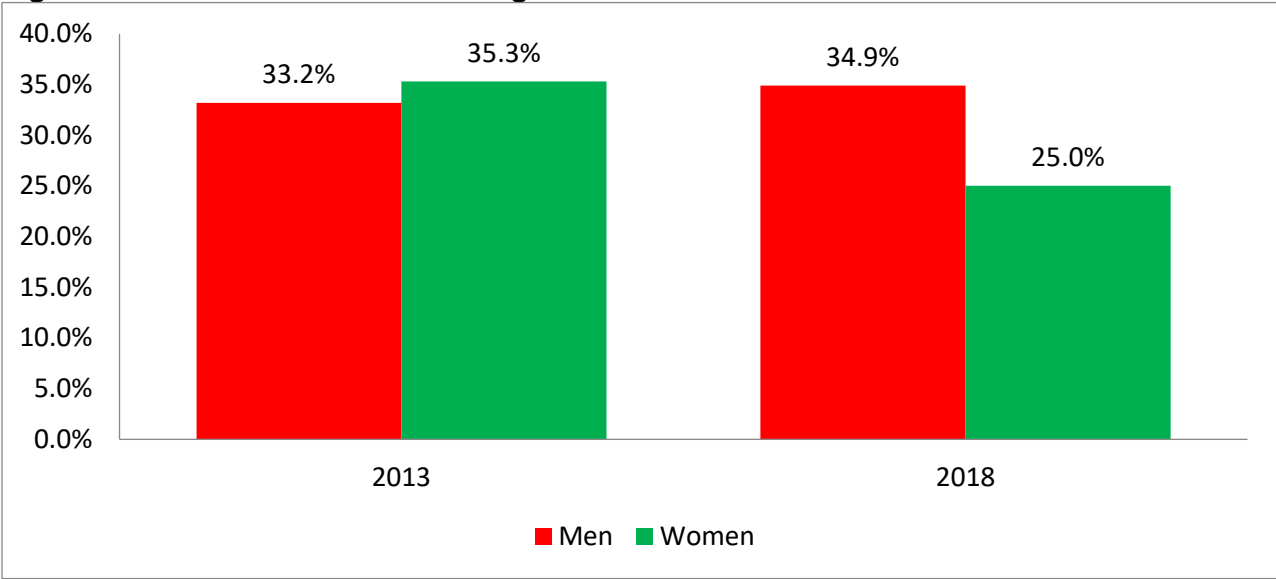
In 2013, 4.6% of women and girls (aged 15-49) had ever experienced physical violence while 3.7% had experienced sexual violence. By 2018, physical violence incidences had risen to 8.6% while sexual violence decreased to 1%. This percentage is lower than the North West

Zone 2018 average of 11.7% in physical violence and 5% in sexual violence and also lower than the 2018 national average of 31% and 9.1% in physical and sexual violence respectively.

Again in 2013, 2.4% of women and girls indicated that they experienced physical violence in the last 12 months while only 1.6% indicated their experiencing sexual violence with the same period. By 2018, the percentages have changed to 2.2% for physical violence and 0.7% for sexual violence. This indicates that the situation is improving and physical and sexual violence against women and girls is decreasing. This state of affairs is lower than the North West zonal average of 6.6% and 3.2% for physical and sexual violence respectively in 2018. Also, it is lower than the 2018 national average of 13.7% and 4.1% in physical and sexual violence respectively.

Violence against women and girls is a product of a mindset, education, social sensitisation and people’s upbringing. There are still individuals who justify wife beating and intimate partner violence in Sokoto State. Figure 5 shows the percentages in 2013 and 2018.

Figure 5: Justification of Wife Beating in Sokoto State



Source: *Nigeria Demographic and Health Survey – NDHS (2013 & 2018)*

In 2013, 33.2% of men justified wife beating while 35.3% of women justified it. This is a surprising outcome that victims of aggression will be justifying the illegality meted out to them in much higher numbers than the group that perpetrates the violence. By 2018, the percentage of men justifying wife beating had increased to 34.9% while the numbers dropped for women to 25%. The percentages for men and women justifying wife beating in 2018 appears more normal considering that victims of violence will be more opposed to it than the perpetrators. However, the percentages in Figure 5 seem to contradict the impressive percentages of very low incidences of violence against women and girls in the State. Incidences of physical violence recorded in the state was 4.6% and 8.6% in 2013 and 2018 respectively while the average of the male and female gender supporting wife beating was

34.25% and 29.95% respectively in 2013 and 2018. If these percentages justify wife beating, the incidence of wife beating may have been more than reported.

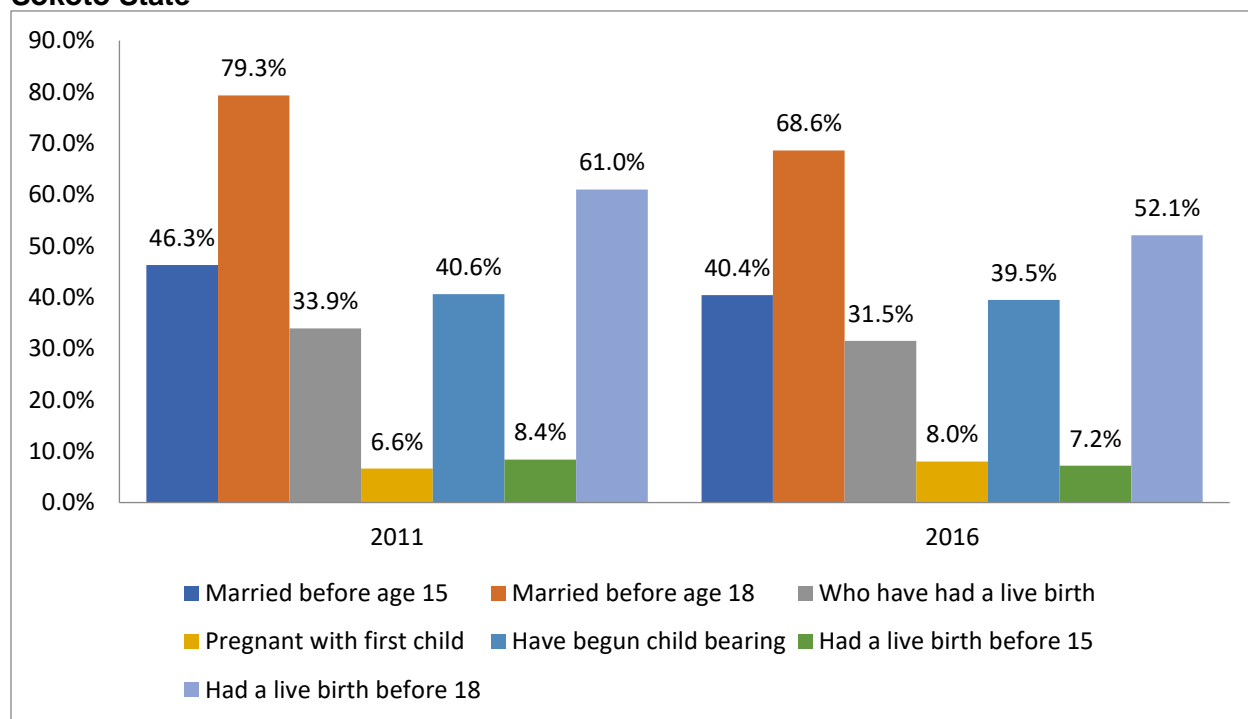
The foregoing developments engage the responsibility of the state to adopt legislative, administrative, social and economic measures as may be necessary to ensure the prevention, punishment and eradication of all forms of violence against women.³¹

3.4 Harmful Practices

Harmful Practices constitute discrimination against women and unleash undeserved violence, hardship, pain and suffering on women and girls. They include early marriage and teenage motherhood and female genital mutilation (FGM). One of the targets of SDG5 is to eliminate all harmful practices, such as child, early and forced marriage and female genital mutilation.

Figure 6 shows the trend of early marriage and teenage motherhood in Sokoto State.

Figure 6: The Prevalence of Early Marriage and Teenage Motherhood among Girls in Sokoto State



Source: Nigeria Multi Indicator Cluster Survey (MICS) 2011 & 2016

From Figure 6, 46.3% and 40.4% of girls in 2011 and 2016 respectively had married before the age of 15. These are rather high percentages for early marriage. Even though the percentage of marriage before 15 years decreased between 2011 and 2016, the decrease was not significant. Again, for marriage before the age of 18, it was for 79.3% of girls in 2011 and 68.6% in 2018. There was slight decrease between 2011 and 2016 but the baseline was

³¹ See article 4 (2) (b) of the Protocol to the African Charter on Human and Peoples Rights on the Rights of Women in Africa.

too high for the decrease to make any meaning impact. The percentage of girls who have had a live birth between age 15-19 was 33.9% in 2011 and 31.55 in 2016 respectively. This was also a slight decrease and the baseline before the decrease was also high. The percentage of girls (15-19) who were pregnant with their first child was 6.6% and 8% respectively in 2011 and 2016. Furthermore, the percentage of girls (15-19) who have begun child bearing was 40.6% and 39.5% respectively in 2011 and 2016. 8.4% and 7.2% of girls aged less than 15 have had a life birth before age 15 in 2011 and 2016 respectively. Again, these are high fairly percentages for girls under 15. The percentage of girls who have had a live birth before age 18 was 61% and 52.1% respectively in 2011 and 2016. Table 2 compares the foregoing data of child marriage and teenage motherhood with the data on national averages.

Table 2: Sokoto State Data on Early Marriage and Teenage Motherhood Compared with National Data 2016

Indicator	National Average %	Sokoto %
Married before 15	18.5%	40.4%
Married before 18	44.1%	68.6%
Who have had a life birth	15.8%	31.5%
Pregnant with a first child	3.3%	8%
Have begun child bearing	19.2%	39.5%
Had a live birth before 15	3.1%	7.2%
Had a live birth before 18	30.8%	52.1%

Source: Nigeria Multi Indicator Cluster Survey (MICS) 2016

From Table 2, it is clear that the Sokoto percentages are far higher than the national average in all indicators of early marriage and teenage motherhood. Under Nigerian law and international standards, marriage is for adults and persons who have reached the age of majority and are in a position to give full, free and informed consent to a marriage.³² Child bearing is also for adults and not for persons who are yet to be recognised to be of full-age under the law. Considering the indivisibility and interrelatedness of all human rights and fundamental freedoms, early marriage is indicted in the denial of basic education for the girl child as well complications in pregnancy and child bearing, including rising incidences of vesico vaginal fistula (VVF). It also has implications for child survival and the health of the child. The duty of the state to enlighten, sensitise, prevent and punish violations of basic standards is engaged by the prevalent practice on early marriage and teenage pregnancy.

Another major challenge in harmful practices is female genital mutilation. Figure 7 shows the prevalence of FGM in the State. FGM has been shown not to have any benefits but comes with a number of health challenges. According to the World Health Organization:³³

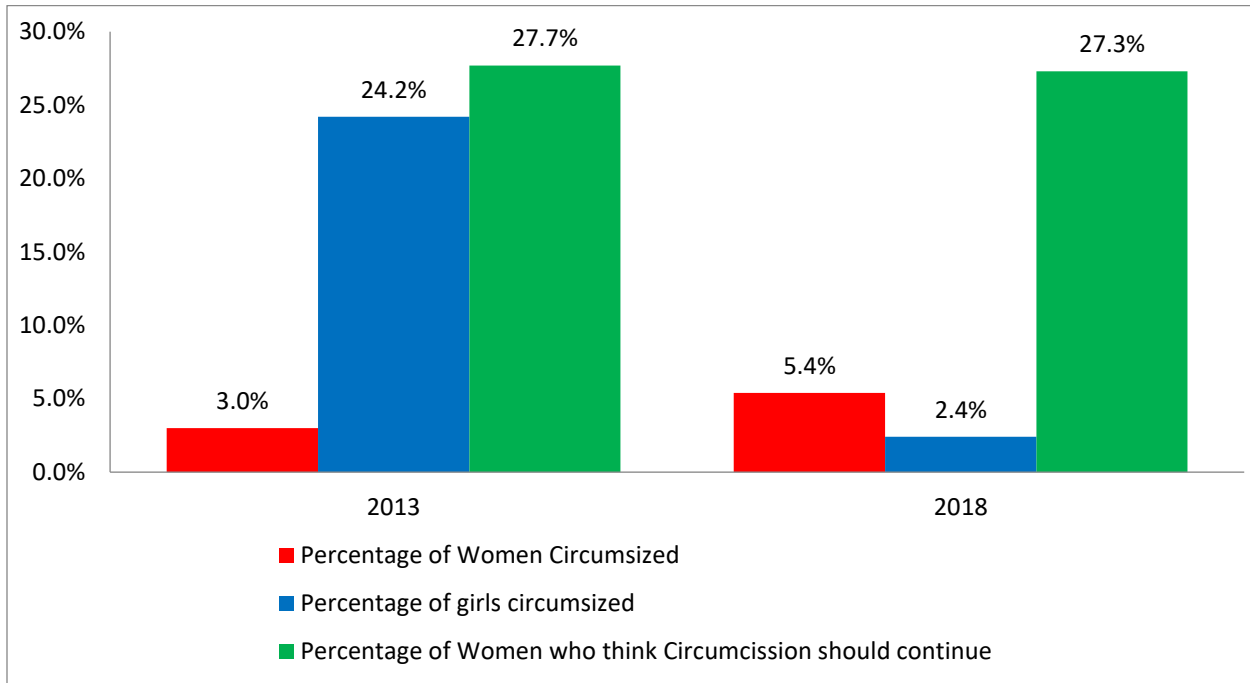
³² See article 6 of the African Protocol on the Rights of Women in Africa, article 16 of CEDAW, S. 21 of the Child Rights Act and S.29 (4) (a) of the Constitution.

³³ <https://www.who.int/news-room/fact-sheets/detail/female-genital-mutilation>

“FGM is recognized internationally as a violation of the human rights of girls and women. It reflects deep-rooted inequality between the sexes, and constitutes an extreme form of discrimination against women. It is nearly always carried out on minors and is a violation of the rights of children. The practice also violates a person’s rights to health, security and physical integrity, the right to be free from torture and cruel, inhuman or degrading treatment, and the right to life when the procedure results in death”.

Figure 7 shows the prevalence of FGM in Sokoto State.

Figure 7: The Prevalence of Female Genital Mutilation/Cutting among Women and Girls in Sokoto State



Source: Nigeria Demographic and Health Survey (NDHS) 2013 & 2018

In 2013, 3% of the women were mutilated while 24.2% of the girls suffered mutilation. By 2018, the percentage of women mutilated increased to 5.4% while the mutilated girls drastically decreased from 24.2% to 2.4%. However, the percentage of women who think that mutilation should continue stagnated from 27.7% to 27.3%. Comparing the Sokoto figures with the North West shows that the zonal average for mutilated women was 20.2% while the national average is 19.5% which shows a better performance from Sokoto. For mutilated girls, the North West zone recorded an average of 28.6% while the national average was 19.2%. This also shows that the Sokoto percentages are better. For women who support continuity of FGM, the North West average is 42.4% while the national average is 23.1% respectively.³⁴

Considering that the mindset and socialisation motivates FGM, it is imperative for the state to engage in education and sensitisation of these gatekeepers in a bid to discourage FGM.

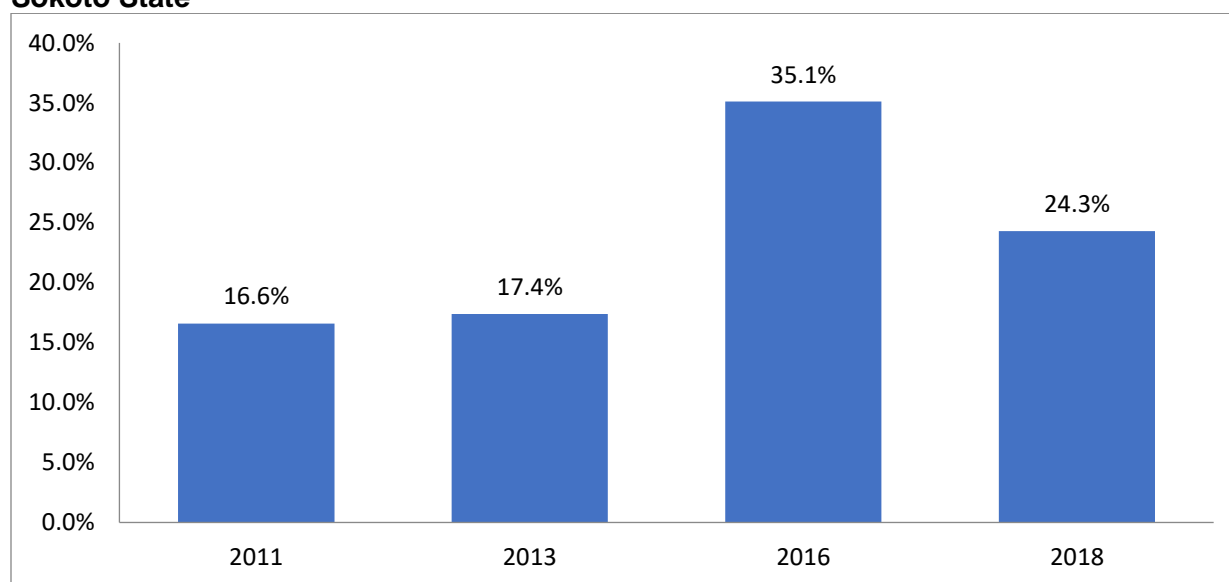
³⁴ See NDHS 2018 for the compared figures.

3.5 Limitations to the Enjoyment of SRHR of Women and Girls

Women's SRHR includes the right to life, to carry a pregnancy to term and deliver successfully, reduction of maternal and child mortality and morbidity. It also includes control of fertility, to decide whether to have children and the timing and spacing of the children as well as the right to have access to the information, services and goods that will facilitate the overall enjoyment of SRHR. It is imperative to note that one of the targets of SDG5 is to ensure *universal access to sexual and reproductive health and reproductive rights* as agreed in accordance with the Programme of Action of the International Conference on Population and Development and the Beijing Platform for Action and the outcome documents of their review conferences.

Access to antenatal care is basic right of all women and girls during pregnancy. It contributes to the reduction of maternal mortality and morbidity. Figure 8 shows the trend in Sokoto State.

Figure 8: Proportion of Women who Received Antenatal Care from Skilled Providers in Sokoto State



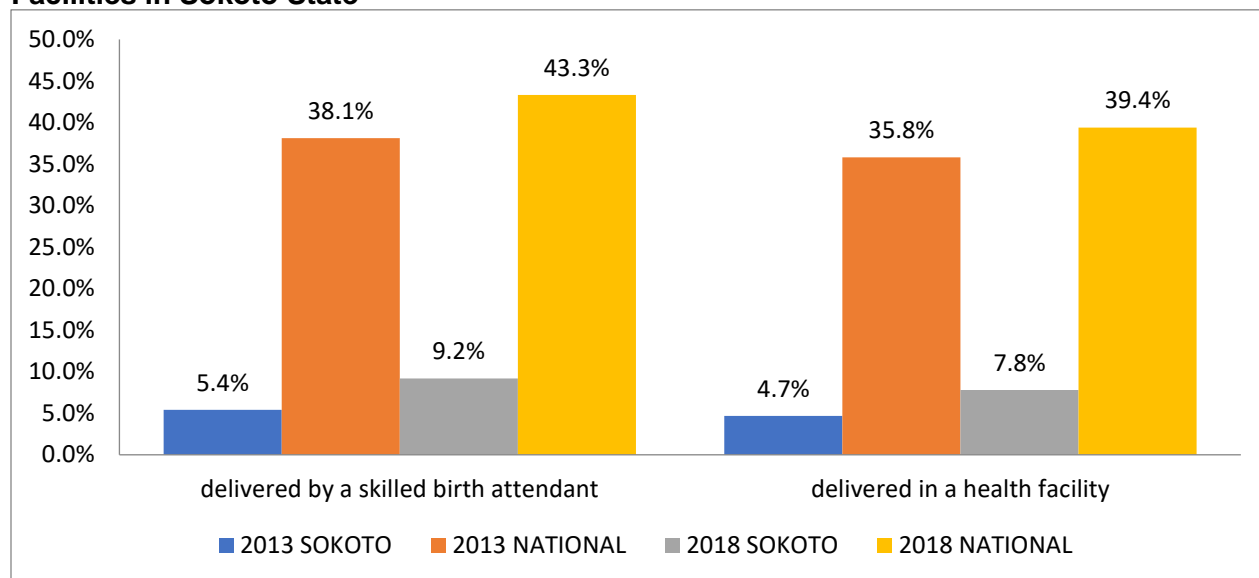
Source: Multiple Indicators Cluster Survey (MICS 2011 & 2016) and National Demographic and Health Survey (NDHS 2013 & 2018)

Figure 8 shows that in 2011, 16.6% of women received ante natal care from skilled health providers and this marginally improved to 17.4% in 2013. Furthermore, it improved to 35.1% in 2016 and reduced to 24.3% in 2018. The 2018 national average is 67% while the Northwest average is 53.9%. This shows that Sokoto's performance is below the North West and national averages.

Delivery by skilled birth attendants and in a medical facility is part of the right to health of pregnant women and girls. This plays a key role as a major indicator in the realization of SDG 3 for the reduction of maternal mortality ratio to less than 70 per 100,000 live births. Skilled birth attendants have the requisite skills to ensure the safety of mother and child in the event

of complications in delivery while delivery in a medical facility provides access to the health resources needed by the skilled birth attendants to do their job.

Figure 9: Proportion of Women Delivered by Skilled Birth Attendants and at Health Facilities in Sokoto State

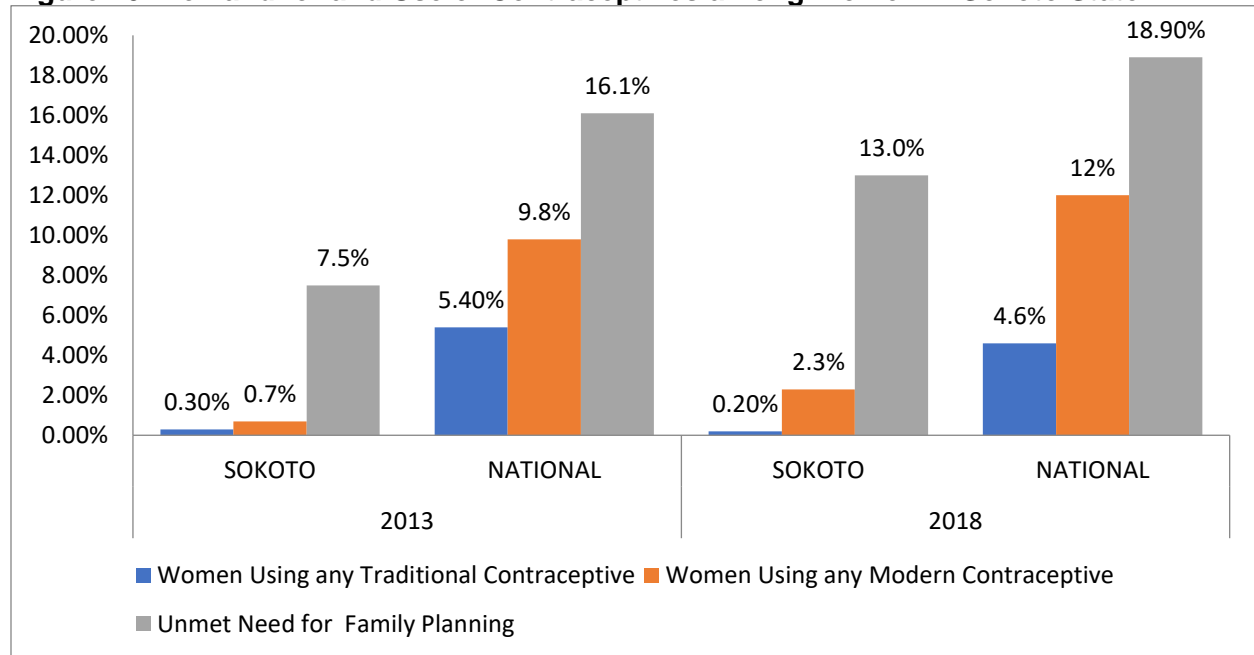


Source: *Nigeria Demographic and Health Survey, (NDHS) 2013 & 2018.*

From Figure 9, 5.4% of Sokoto women were delivered by a skilled birth attendant in 2013 as against the national average of 38.1% women. By 2018, the numbers have gone up to 9.2% in Sokoto while the average for women delivered by skilled birth attendants increased to 43.3% at the national level. The percentages in Sokoto State is way below the national average and there is so much room for improvement. Again, in delivery in a health facility, 4.7% of Sokoto women delivered in a health facility in 2013 while the national average was 35.8%. By 2018, the Sokoto figures came up to 7.8% while the national average was 39.4%. In both indicators (delivery by a skilled birth attendant and delivery in a health facility), the Sokoto State baseline in 2013 was very low and the progress recorded up to 2018 was marginal. There is room for improvements through sensitisation and empowerment, more resource outlays for maternal and child health and a combination of the incentives and punishment approach to improve SRHR of women and girls in the State.

SDG 3 demands that by 2030, there will be universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes. One of its core indicators is the proportion of women of reproductive age (aged 15-49 years) who have their need for family planning satisfied with modern methods. Access to and the use of contraceptives is therefore imperative for the making of informed choices on number of children, the spacing and timing and general control of fertility. Figure 10 shows the demand and use of contraceptives in Sokoto State.

Figure 10: Demand for and Use of Contraceptives among Women in Sokoto State



Source: *Nigeria Demographic and Health Survey, (NDHS) 2013 & 2018*

Figure 10 shows that in 2013, less than 1% of women in Sokoto were using traditional or modern methods of contraception (0.30% and 0.7% respectively) while only 7.5% had unmet need for family planning. In the same year, the national average indicates that 5.40% and 9.8% of women were using traditional and modern contraceptives respectively while the unmet need was 16.1%. This shows that more women were using contraceptives of any type across the nation when compared to the Sokoto percentages. Furthermore, in 2018, 0.20% and 2.3% were using traditional and modern contraceptives respectively in Sokoto State while the national average was 4.6% and 12% for traditional and modern methods of contraception respectively. Again, this indicates that more women were using contraceptives of any type at the national level when compared with Sokoto State. It will be recalled that the Federal Government through the Federal Ministry of Health had set a Modern Contraceptive Prevalence Rate of 27% by 2020. But the modern contraceptive prevalence rate in Sokoto and at the national level is yet to meet the target. There is therefore the need to channel more resources towards meeting this target.

Section Four

Budget Funding 2016-2019

4.1 Budgeting for SGBV/VAWG/HP/SRHR in Sokoto

Public finance management, resource allocation and the budget are political and economic processes at the same time. As a political process, they represent the contestation for power and how the dominant social and political forces allocate public resources. As an economic process, resource allocations are expected to respond to value addition, efficiency and effectiveness of production of public goods and services while signaling the areas of greatest interest for the private sector and civil society to engage government. It should accord with reason and generate the greatest value for money. Furthermore, the allocation and management of public resources represents a human rights process that can be used to guarantee the respect, protection and fulfilment of human rights obligations including the rights of women and girls to freedom from all types of violence. It is in this context that this study examines the extent to which the Sokoto State Government has allocated and utilised resources to fulfill its obligations on freedom from violence for women and girls and the promotion of their SRHR.

This section shall review key allocations in agriculture, education, health, science and technology, youths and sports development and women affairs. The responses we received from MDAs in respect of their actual expenditures were not the same. While some MDAs provided their actuals, others ignored our request. The details of the available budget information are as provided below.

4.2 Ministry of Health

Tables 3 to 6 presents the allocations to the Ministry of Health and the releases to the Ministry which was also the same as the utilised funds. This is in respect of budgetary line items and programmes which could impact on SGBV/VAWG/HP/SRHR.

Table 3: Allocations and Releases to Ministry of Health in 2016

Code	Project Description	Budget (N)	Released (N)
459023	Noma Children Hospital; renovation and provision of 5000KVA standby generator, etc.	50m	26.470m
459027	HIV/AIDS Response	50m	50m
459033	Support/maintenance of PHC Kuchi in Kebbe LGA	10m	Nil
459034	Maintenance of PHC at Karfen Sarki	20m	Nil
459036	Reproductive Health Project in collaboration with UNFPA: Strengthening of O&G Depts of State Health facilities with Obstetrics & Gyna equipment, provision of family planning commodities and training of staff on life saving skills, etc.	40m	4m
450039	Support to Immunisation	50m	44m
450050	Strengthen Primary Health Care Development Activities	30m	29.770m
4590051	Establishment of the Sokoto State Agency for the Control of HIV/AIDS (SOSCA)	100m	Nil

459045	Child Health Services: Nutrition, Growth Monitoring, Breastfeeding, etc.	150m	95.110m
459054	Establishment of New Women and Children Hospital and VVF Centre	350m	Nil
Total		850m	249.350m

Source: Sokoto State Approved Budget 2016 and Response from Ministry of Health

A good number of the projects generally touch on SGBV/VAWG/HP and SRHR. It is pertinent to note that appropriated projects which specifically touch on women's health in 2016 - the reproductive health project and the establishment of new women and children's hospital and VVF centre did not receive adequate attention. While the reproductive health project got only 10% of its appropriation, the hospital and VVF project did not get a release. There was no appropriation targeting sensitisation and education related to the project theme. Overall, out of N850m appropriated, only N249.350m was released which represents 29% of appropriation. The release was the same as the utilised sum.

Table 4: Allocations and Releases to Ministry of Health in 2017

Code	Project Description	Budgeted (N)	Released (N)
459003	Health System Development Project- (World Bank Loan Assisted Project) (Strengthening of Primary & Secondary Healthcare Services in the State- Institutional Capacity Building/Training upgrading/rehabilitation of health facilities in the state, strengthening of HMIS, MCH, Disease prevention /control i.e Malaria, HIV/AIDS, TB, provision of essential drugs, medical equipment, support to Schs, of Nursing & Health Technology Gwagwalada and Environmental Management	40m (Counterpart funding)	Nil
459023	Noma Children Hospital-Renovation of the Hospital, provision of 5000KVA standby generator, Higher tension/Underground cable wires, transformer, provision of CMD Vehicle, Peugeot 307, 30 seater bus, Toyota Hilux, Office furniture, waste disposal vehicle, foreign visit teams etc.	100m	2.370m
459027	HIV/AIDS State Response- Establishment of HIV/AIDS/STI & Counselling SDP: Provision of RT Centres, Blood screening, HIV Testing/Confirmatory kits centres/drugs/, PMTCT, BCC, Procurement of HIV/AIDS STI Laboratory Equipment, CD4 counting machines, testing kit, disposable syringes,/needles, gloves, waste bags, reagent to all state government hospitals, 4WD vehicle, advocacy visits,	50m	Nil

	sensitization meetings, awareness creation, support to NGOs, CBOs, FBOs, PLWHA, PET, & Line ministries, Formation and training of staff as well as put in place M&E/NNRIMs		
459033	Support/Maintenance of PHC Kuchi in Kebbe LGA-Support to Primary Health Centre Kuchi in Kebbe Local Government Area	10m	Nil
459034	Maintenance of constructed PHC at Karfen Sarki-Support to the completed primary health centre in Kuchi in Kebbe LGA	20m	Nil
459036	Reproductive health project in collaboration with UNFPA-Strengthening of O&G Depts of state health facilities with obstetrics & Gynea equipment , Provision of family planning commodities and training of staff on life saving skills , LSS, Procurement and and distribution of TBA kits to trained TBAs in the state, procurement of weighting scale, histograms & arm circumferences tape. Counterpart funding and project sustainability	40m	40m
459037	Establishment of Malaria Control Agency-Strengthening of malaria units/centres in the 23 LGAs & State MOH hqtrs with Vector control equipment , IEC materials, ITNs, Coartem, anti malaria drugs, i.e SP, ACTs, etc, & training of malaria staff, purchase of vehicles, motrocycles, laptop, supervisor visits, airing of jingles, -counterpart funding	80m	53.920m
459039	Support to Imunization (NIDs, SNIDs, IPDs, & Routine) with support by Dangote and Bill Gates	50m	42m
459040	Health Education/IEC-Training of health educators, provision of IEC materials including inspectorate activities, maintenance and replacement of health education equipment	10m	Nil
459042	School Health Program-Conducting routine screening for visual problems, schistosomiasis and parasites in primary and secondary school pupils in the state, providing reading glasses, anthelminthic, anti schistosomiasis treatment to the affected pupils and pupils and health education on personal hygiene	20m	19.887m

459050	Sokoto State Primary Health Care Development Agency-Construction of new offices/Renovation existing office Hqtrs, Construction of New Offices , renovation of existing offices at zonal levels, purchase of office furniture/equipment for hqtrs/zonal, official vehicles, 4WD, Office stationeries and capacity building of health planners and managers, primary health care professionals and other supporting staff, printing of home base & child health cards, procurement of vaccines, cold chin equipment essential drugs, mamakits, mag, suiph, anti shock garment, plump peanut, strengthening routine immunization FP, IMCI, CDD, ORT, RH/MCH, IMNCH, Purchase of Toyota Hilux to NSSPHCDA.	200m	51.947m
459052	Establishment of Sokoto State Agency for the Control of HIV/AIDS, SOSACA,- Construction and furnishing of offices, rehabilitation of additional HCT Centres, provision of 3NOs operational vehicles, for supervision, Motorcycles, support to CSOs, NYSC, PETD,NGOs, FBOs, CBOs, capacity building of staff, production of jingles, drama shows, airing on radio/Tv, IEC materials, provision of consumables, ARV Drugs, Lab consumables, blood safety materials, test kit, to all SDP centres, foe HCT, PMTCT, services in the state,TBL program, conduct of world AIDS day, purchase of office equipment, training and attendance.	300m	41.980m
459054	Establishment of new Women and Children Hospital and VVF Centre-Relocation of Women/Children Hospital and VVF centre to Specialist Hospital	250m	Nil
459056	Routine immunization in the State-with support from Dangote/Bill & Melinda Gates Foundation	100m	Nil
459058	Save one million child lives program, SOML	457.5m	Nil
Total		1.727bn	252.104m

Source: Sokoto State Approved Budget 2017and Response from the Ministry of Health

Out of a vote of N1.727bn, only N252.104m was released which is just 14.6% of appropriation. The reproductive health project got its full funding while the hospital and VVF Centre did not attract a release. Surprisingly, the counterpart funding for Health System Development Project did not get a release. The impression created by the 14.6% performance is that the appropriation process is not based on realistic evidence and the revenue estimates and projections were not realised.

Table 5: Allocations and Releases to Ministry of Health in 2018

Code	Project Description	Budget (N)	Released (N)
459/16 459/17 459/19	Upgrading and equipping of existing Clinics to Primary Health Care Centres in the State	730m	73.376m
459023	Noma Children Hospital; renovation and provision of 5000KVA standby generator, etc.	100m	Nil
459/27	HIV/AIDS Response	50m	Nil
459/33	Support/maintenance of PHC at Kuchi in Kebbe LGA	15m	Nil
459/34	Maintenance of PHC at Karfen Sarki	20m	Nil
459/36	Reproductive Health Project in Collaboration with UNFPA: Strengthening of O&G Depts of State Health facilities with Obstetrics & Gyna equipment, provision of family planning commodities and training of staff on life saving skills, etc.	40m	Nil
	Procurement of child birth spacing commodities, consumables and to provide CBS services, etc.	200m	
459/39	Support to Immunisation	50m	27m
459045	Child Health Services: Nutrition, Growth Monitoring, Breastfeeding, etc.	100m	
459/50	Sokoto State Primary Health Care Development Agency	3bn	Nil
459/52	Sokoto State Agency for the Control of AIDS	300m	Nil
459/54	Establishment of new Women and Children Hospital and VVF Centre	100m	Nil
459/56	Routine Immunisation in the State	175m	Nil
459/58	Save One Million Lives	222m	Nil
459/62	PLAN International support for Reproductive Health, MNCH, Adolescent Health and Gender Lens	2.442bn	Nil
Total		7.544bn	100.376m

Source: Sokoto State Approved Budget 2018 and Response from the Ministry of Health

The family planning and reproductive health facilities, goods and services, the state primary health care development agency, establishment of new women and children hospital and VVF centre, international support for reproductive health, MNCH, adolescent health did not get a single release. Out of a budget of N7.544bn, only N100.376m was released, a paltry 1.3% of the appropriation.

Table 6: Allocations and Releases to Ministry of Health in 2019

Code	Project Description	Budget (N)	Released (N)
459/16	Maintenance of Danchadi and Gande PHCs	40m	Nil
459/17 459/19	Upgrading and equipping of existing Clinics to Primary Health Care Centres in the State	580m	130.457m
459023	Noma Children Hospital; renovation and provision of 5000KVA standby generator, etc.	60m	9m
459/27	HIV/AIDS Response	50m	49m
459/36	Reproductive Health Project in Collaboration with UNFPA: Strengthening of O&G Depts of State Health facilities with Obstetrics & Gyna equipment, provision of family planning commodities and training of staff on life saving skills, etc.	40m	Nil

	Procurement of childbirth spacing commodities, consumables and to provide CBS services, etc.	100m	
459/39	Support to Immunisation	50m	15.750m
459045	Child Health Services: Nutrition, Growth Monitoring, Breastfeeding, etc.	50m	Nil
459/50	Sokoto State Primary Health Care Development Agency	1bn	185m
459/52	Sokoto State Agency for the Control of AIDS	100m	91.050m
459/56	Routine Immunisation in the State	100m	Nil
459/54	Women and Children Hospital and VVF Centre	100m	Nil
459/58	Save One Million Lives	222m	Nil
Total		2.492bn	480.257m

Source: Sokoto State Approved Budget 2019 and Response from Ministry of Health

The women and children hospital and VVF centre, family planning services, save one million lives and routine immunization did not get a release. Out of N2.492bn, only N480.275m was released, just 19.3% of appropriation.

Generally, the budgetary provisions in health over the four years show that SGBV/VAWG/HP and SRHR of women and girls were not directly targeted by the allocations. It appears there is no multi-sectoral plan for the eradication of SGBV which budgets should respond to in the policy, plan, budget continuum. Out of N12.613bn appropriated to the project theme over the four years, only N1.082bn was released which is just 9% of the appropriated sum. Generally, the appropriation lacked credibility as the votes to the Ministry of Health were poorly implemented due to sub-optimal releases. Some of the votes were repeated year after year without releases. The impression created by the 9% performance is that the appropriation process is not based on realistic evidence and the revenue estimates and projections were not realised. There was no vote for sensitization for behavioural change related to SGBV/VAWG/HP and SRHR.

4.3 Ministry of Women Affairs

The Ministry of Women Affairs is the focal point of the state government's interventions on SGBV/VAWG/HP. Tables 7 to 10 presents the allocations to the Ministry of Women Affairs and the releases to the Ministry which was also the same as the utilised funds. This is in respect of budgetary line items and programmes which would impact on SGBV/VAWG/HP/SRHR.

Table 7: Allocations and Releases to Ministry of Women Affairs in 2016

Code	Project Description	Budget (N)	Released (N)
470102	Renovation, furnishing and provision of materials for FSP Primary/Nursery schools	30m	Nil
470103	Furnishing of Girl Child Craft Centre; purchase of computers, deep freezers	5m	Nil
470104	Rehabilitation and equipping of Maryam Abacha Centre	60m	Nil
470112	Renovation of existing and construction of additional structures for Women Development Centre, Sokoto	40m	Nil
470113	Purchase of workshop equipment for Wammako Centre	15m	Nil
470151	Furnishing of Model Women Development Centres in 23 LGAs (Phase 1)	300m	19.281m
470205	Welfare to VVF Patients	20m	Nil

470206	Soft loan facility to women	100m	Nil
470207	Purchase of medical equipment	30m	Nil
470216	Purchase of additional materials and equipment for Women Development Centre	20m	Nil
470220	Provision of VVF Patients Rehabilitation Centre	10m	Nil
470227	Construction and furnishing of standard laboratory at Maryam Abacha Centre, Sokoto	20m	Nil
470228	Renovation and provision of materials and equipment for rice processing pilot cottage industry at Wurno	15m	Nil
470230	Purchase of working materials for distribution to WDCs in the state	60m	Nil
470240	Construction of additional workshop blocks for tailoring tye and dye, knitting and pomade making at Wammako Centre	20m	Nil
47043	Intervention to Maternal and Child Health Care and other Related issues	27m	Nil
Total		772m	19.281m

Source: Sokoto State Approved Budget 2016 and Response from the Ministry of Women Affairs

A good number of the projects in the Ministry's 2016 budget related to health and economic empowerment of women. There was no project responding directly to SGBV/VAWG. Economic empowerment facilitates women's ability to make decisions to improve their lives and livelihoods as well as take the requisite decisions that would respond to SGBV. The health related provisions will improve access to medical care especially for sexual and reproductive health. Unfortunately, out of vote of 772m, only N19.28m as released and utilised which is a paltry 2.5% of the budget.

Table 8: Allocations and Releases to Ministry of Women Affairs in 2017

Code	Project Description	Budgeted (N)	Released (N)
470102	Renovation, Furnishing and provision of materials for FSP Primary/Nursery Schools	30m	Nil
470103	Furnishing of Girl Child Craft Centre-Purchase of Computers, Deep freezers	10m	Nil
470104	Rehabilitation and Equipping of Maryam Abacha Centre	60m	Nil
470106	Establishment of Children's Library at Multipurpose Centre	15m	Nil
470110	Renovation of Children's multipurpose Centre, Sokoto Metropolis	20m	Nil
470112	Renovation of existing and construction of additional structures for Women Development Centre, Sokoto	40m	Nil
470151	Furnishing of model Women Dev, Centres in 23 LGAs (Phase 1)-To construct and furnish model Women Development Centres in 23 LGAs (Phase 1)	350m	22m
470205	Welfare to VVF Patients-To provide welfare package to discharge patient	20m	4.9m
470206	Soft loan facility to women to provide counterpart funding by the state government to enable women establish business	70m	Nil

470207	Purchase of medical equipment to enhance the services delivery at the MAWCH Sokoto.	20m	Nil
470216	Purchase of additional materials and equipment for Women Development Centre-To fully equip the centre to cater for more trainees	20m	Nil
470220	Provision of VVF patients rehabilitation centre at Maryam Abacha Hospital-To furnish and equip the centre	20m	Nil
470227	Construction/furnishing of standard laboratory at Maryam Abacha Centre, Sokoto-For proper diagnosis of cases in the hospital	20m	Nil
470228	Renovation and provision of materials /equipment for rice processing pilot cottage industry at Wurno	15m	Nil
470230	Purchase of Working Materials for distribution to WDCs in the State	50m	Nil
470236	Construction and Furnishing of two visiting Doctors quarters and repair renovation of Administrative Block at Maryam Abacha Hospital	30m	Nil
470240	Construction of additional blocks of 5 workshops for Tailoring, Knitting, tie and dye, and soap and pomade making	21m	Nil
470242	Enhancing Surgery services, as well as training TBAs and wanzami practice in 23 LGAs	40m	Nil
47043	Intervention to maternal and child health care and other related issues	20m	Nil
47046	Intervention to USAID STEER project for orphans and vulnerable children in Sokoto	30m	Nil
47047	Purchase of 200KVA stand by generator for Maryam Abacha Hospital, Sokoto	20m	Nil
47049	Counterpart funding for Donor Agencies Programs and Projects	30m	Nil
47050	Construction of Additional ward store and waiting shade for VVF patients	20m	Nil
47051	Provision of framework for comprehensive data bank and dissemination of VVF Services	10m	Nil
47052	Construction of modern theater at Maryam Abacha Women and Children Hospital	20m	Nil
Total		1.001bn	26.9m

Source: Sokoto State Approved Budget 2017 and Response from Ministry of Women Affairs

Again, most of the projects in the Ministry's 2017 budget are related to health and economic empowerment of women. There was no project responding directly to SGBV/VAWG, either in the prevention mode or a follow-up for rights validation. No provisions were made for shelters for survivors of SGBV or for other support services. Surprisingly, a counterpart fund to unnamed donor agencies was provided in the budget and nothing was released for it. Provisions for VVF patients got nothing while many of the 2016 projects were repeated and still got no release. Out of a vote of N1.001bn, only N26.9m was released which is 2.7% of the appropriated sum.

Table 9: Allocations and Releases to Ministry of Women Affairs in 2018

Code	Project Description	Budget (N)	Released (N)
470102	Renovation, furnishing and provision of materials for FSP Primary/Nursery schools	30m	Nil
470103	Furnishing of Girl Child Craft Centre; purchase of computers, deep freezers	10m	Nil
470112	Renovation of existing and construction of additional structures for Women Development Centres, Sokoto (hall renovation)	40m	35m
470151	Furnishing of Model Women Development Centres in 23 LGAs (Phase 1)	200m	Nil
470205	Welfare to VVF Patients	20m	Nil
470206	Soft loan facility to women	50m	Nil
470207	Purchase of medical equipment	30m	Nil
470216	Purchase of additional materials and equipment for Women Development Centre	20m	7.971m
470220	Provision of VVF Patients Rehabilitation Centre	20m	Nil
470227	Construction and furnishing of standard laboratory at Maryam Abacha Centre, Sokoto	20m	Nil
470228	Renovation and provision of materials and equipment for rice processing pilot cottage industry at Wurno	14m	Nil
470230	Purchase of working materials for distribution to WDCs in the state	30m	Nil
47043	Intervention to Maternal and Child Health Care, HIV, Child Spacing Service and other Related issues	15m	Nil
470050	Construction of additional ward, store and waiting shed for VVF patients	20m	Nil
470051	Provision of ICT for comprehensive data bank and dissemination of VVF services	10m	Nil
Total		529m	42.971m

Source: Sokoto State Approved Budget 2018 and Response from the Ministry of Women Affairs

In 2018, the trend of the same projects which appeared in 2016 and 2017 continued. Out of a total vote N529m, only N42.971m was released which 8.1% of the overall allocation. Again, there was no project responding directly to SGBV/VAWG, either in the prevention mode or a follow-up for rights validation. No provisions were made for shelters for survivors of SGBV or for other support services.

Table 10: Allocations and Releases to Ministry of Women Affairs in 2019

Code	Project Description	Budget (N)	Released (N)
470102	Renovation, furnishing and provision of materials for FSP Primary/Nursery schools	30m	Nil
470103	Furnishing of Girl Child Craft Centre; purchase of computers, deep freezers	10m	Nil
470113	Purchase of workshop equipment for Wamakko Centre	15m	Nil
470151	Furnishing of Model Women Development Centres in 23 LGAs (Phase 1)	190m	Nil
470205	Welfare to VVF Patients	20m	Nil
470206	Soft loan facility to women	50m	Nil
470207	Purchase of medical equipment	30m	Nil
470216	Purchase of additional materials and equipment for Women Development Centre	20m	Nil

470220	Provision of VVF Patients Rehabilitation Centre at Maryam Abacha Women and Children Hospital	20m	Nil
470227	Furnishing of standard laboratory at Maryam Abacha Centre, Sokoto	20m	Nil
470228	Renovation and provision of materials and equipment for rice processing pilot cottage industry at Wurno	14m	Nil
470230	Purchase of working materials for distribution to WDCs in the state	30m	Nil
470236	Furnishing of visiting Doctors' quarters	23m	Nil
470240	Workshops for knitting, tailoring tie and dye, pomade making at Wamakko Centre	21m	4.9m
470243	Intervention to Maternal and Child Health Care, HIV, Child Spacing Service and other Related issues	15m	Nil
470248	Construction of additional ward, store and waiting shed for VVF patients	20m	Nil
470249	Provision of ICT for comprehensive data bank and dissemination of VVF services	20m	Nil
470250	Construction of additional theatre at Maryam Abacha Women and Children Hospital	20m	Nil
470251	Social Welfare and Empowerment Services	30m	Nil
470252	Village Savings and Loan Scheme	30m	Nil
Total		628m	4.9m

Source: Sokoto State Approved Budget 2019 and response from the Ministry of Women Affairs

The challenges from the previous years were carried over in 2019 and out of a total vote of N628m, only N4.9m was released which is 0.8% of the allocation. Thus, the percentage release got worse in 2019.

There were no votes for gender mainstreaming, enhancement of women's rights, sensitisation and capacity building on prevention and responses to SGBV. Family planning and reproductive rights hardly got any vote. Over the four years, out of a total sum of N2.930bn appropriated to address the thematic area, only N94.052m got released. Essentially, releases of the votes on SGBV/VAWG/HP and SRHR in the Ministry of Women Affairs averaged 3% a year. There were reoccurring votes which did not get a single release over the four years. The impression is created that the budget lacks credibility since the appropriation has no nexus with releases and utilised sums. When these very poor budgetary releases are pitched against the state's data on early marriage and teenage motherhood, access to antenatal services and delivery by skilled birth attendants as well as the need and use of modern contraceptives, it will become clear that the state did not dedicate the maximum of its available resources for the progressive realisation of freedom from violence for women and girls and the promotion of their SRHR.

4.4 Ministry of Youths and Sports Development

Table 11 presents the allocations to the Ministry of Youth and Sports Development and the releases to the Ministry which was also the same as the utilised funds. This is in respect of budgetary line items and programmes which would impact on SGBV/VAWG/HP/SRHR.

Table 11: Allocations and Releases to Ministry of Youth Development in 2017

Code	Project Description	Budgeted (N)	Released (N)
471306	Purchase of training equipment to State Youth Centre for skills acquisition	20m	Nil
471315	Re orientation of Youths and Students	15m	Nil
471316	Purchase of training equipment for State Youth Centre	20m	
471317	Training Allowance for Youth Trainees	20m	Nil
Total			

Source: Sokoto State Approved Budget 2017 and Response from the Ministry of Youths and Sports Development

Out of a total allocation of N75m, nothing was released. It is pertinent to note that the same items of expenditure were repeated in the appropriations of 2018 and 2019 and not a single kobo was released. This is still a challenge of budget credibility.

4.5 Ministry of Social Welfare and Community Development

Table 11 presents the allocations to the Ministry of Social Welfare and Community Development and the releases to the Ministry which was also the same as the utilised funds. This is in respect of budgetary line items and programmes which would impact on SGBV/VAWG/HP/SRHR.

Table 12: Allocations and Releases to Ministry of Social Welfare and Community Development in 2016

Code	Project Description	Budget (N)	Released (N)
471313	Gender Sensitive Youth Development Programmes	30m	Nil
Total		30m	Nil

Source: Sokoto State Approved Budget 2018 and Response from Ministry of Social Welfare

Table 13: Allocations and Releases to Ministry of Social Welfare and Community Development in 2018

Code	Project Description	Budget (N)	Released (N)
471313	Gender Sensitive Youth Development Programmes	20m	Nil
Total		20m	Nil

Source: Sokoto State Approved Budget 2018 and Response from Ministry of Social Welfare

From Tables 12 and 13, not a single kobo was released to the Ministry from the appropriation. This also hinges on the credibility of the state budget considering that these discrepancies occurred across so many sectors of the state's budget. This raises a key poser vis; why repeatedly budget for a project or activity without any intent to implement same?

4.6 Ministry of Agriculture

Tables 14-17 are the relevant votes to the Ministry of Agriculture for years 2016, 2017, 2018 and 2019 respectively.

Table 14: Allocations and Releases to Ministry of Agriculture in 2016

Code	Project Description	Budget (N)	Released (N)
453106	Youth and Women Empowerment Scheme	25m	
451030	Economic empowerment through veterinary and livestock programme to reduce poverty, enhance skills and knowledge, gender, youth and growth of private sector.	30m	
451028	Small ruminant development farming for youth and women	15m	
Total			

Source: Sokoto State Approved Budget 2016

Table 15: Allocations and Releases to Ministry of Agriculture in 2017

Code	Project Description	Budgeted (N)	Released (N)
451028	Small Ruminant Development-Purchase-Development and promotion of livestock and farming among youth and women	100m	
453106	Youth and Women Empowerment Scheme, Support targeted groups with related inputs for increase production of fish	25m	
451030	Economic empowerment through veterinary and livestock programme	30m	
Total			

Source: Sokoto State Approved Budget 2017

Table 16: Allocations and Releases to Ministry of Agriculture in 2018

Code	Project Description	Budget (N)	Released (N)
451028	Small ruminant development farming for youth and women	80m	
451030	Economic empowerment through veterinary and livestock programme to reduce poverty, enhance skills and knowledge, gender, youth and growth of private sector.	30m	
453106	Youth and Women Empowerment Scheme: for increased fish production	25m	
451031	Development of poultry subsector in the State through procurement of poultry feeds, feedmills, hatcheries equipment and chicks for empowerment of youths, women and other targeted poultry farmers.	300m	
Total			

Source: Sokoto State Approved Budget 2018

Table 17: Allocations and Releases to Ministry of Agriculture in 2019

Code	Project Description	Budget (N)	Released (N)
451028	Small ruminant development; purchase of animals for distribution to targeted groups among youth, women and other vulnerable	50m	
453106	Youth and Women Empowerment Scheme: support farmers with related inputs for improvement of economic status and increase in fish production	25m	

451031	Development of poultry subsector through empowerment, rehabilitation, and establishment of feedmill and hatcheries with equipment procurement of young chicks and poultry farmers.	1bn ³⁵	
Total			

Source: Sokoto State Approved Budget 2019

In respect of these budgetary votes, the State Ministry of Agriculture did not respond to our request for information on the actual releases and utilisation of the votes. The projects listed above were chosen because they target the economic empowerment of women and most of them were specifically stated to be for women.

4.7 Ministry of Education

It is pertinent to start the review of the Ministry by pointing out that the State had N614.097m outstanding, which it had not accessed from the Universal Basic Education Fund as at late 2019. Tables 18 to 22 are the relevant votes to the Ministry of Education for years 2016, 2017, 2018 and 2019 respectively. There is also a vote for the Ministry of Science and Technology on the establishment of Girls' Technical College.

Table 18: Allocations and Releases to Ministries of Education and Higher Education in 2016

Code	Project Description	Budget (N)	Released (N)
458001	Construction of new buildings in existing schools GDCAIS Dendo Road, GDSS Romon Sarki, etc	3.550bn	
458002	Construction of structures at newly established and upgraded schools to meet the required standards GDSS Kurawa, etc	1.450bn	
458003	Construction of classrooms in Junior Secondary Schools	1.5bn	
458006	School for the Handicapped	100m	
450008	Development of boarding primary schools and integrated early childhood care development	950m	
450021	Procurement of furniture to schools	5.3bn	
458022	Women Education: Establishment of 3 additional women centres,- Rabbah, Silame, and Dange-Shuni expansion and equipping WCCE and women education generally to address gender disparity and empower women	150m	
458037	Girls' Education Project-UNICEF/DFID/FMOE/ project Government Counterpart funding	500m	
458048	Agency for Mass Education-Purchase of reading and instructional materials; Procurement of monitoring and evaluation facilities, construction of 23 rural reading rooms, establishment of special education centre construction of women vocation training centre, etc	150m	
458059	College of Midwifery: Maintenance of existing building structures, additional structures, new admin block, new laboratory, additional hostel block staff quarters, classrooms, estate units, etc.	500m	
458060	Establishment of School of Midwifery at Tambuwal Town in Tambuwal LGA Acquisition of land, construction of new	400m	

³⁵ Previous provisions on this subject matter made reference to women and youths. Thus, if the previous money was disbursed and capacity developed in women and youths, they would naturally be beneficiaries or should have acquired sufficient knowledge to benefit from this fund.

	offices, classroom, library, laboratory, demonstration room, staff quarters, student hostels, access roads, boreholes, standby generators etc.		
4580610	Counterpart funding for Universal Basic Education	1bn	
Total			

Source: Sokoto State Approved Budget 2016

Table 19: Allocations and Releases to Ministry of Science and Technology in 2016

Code	Project Description	Budget (N)	Released (N)
472116	Establishment of Government Girls Technical College	200m	
Total			

Source: Sokoto State Approved Budget 2016

Table 20: Allocations and Releases to Ministry of Education in 2017

Code	Project Description	Budgeted (N)	Released (N)
458001	Expansion of Existing Schools	3.9bn	
458002	Construction of new schools	1.75bn	
458021	Procurement of furniture to schools	3.5bn	
458022	Women Education-Establishment of 3 additional women centres-Rabah, Silame and Dange-Suni expansion and equipping WCCE and women education generally to address gender disparity and empower women.	200m	
458037	Counterpart funding with Development Partners.	450m	
458042	Vocational Basic Science & Intro Tech equipment for effective learning-JSS Asada, GDSS, JGASS	100m	
458043	Provision of Basic Science and Intro tech Workshops for JSS-JSS Margai, JSS Awariki., JSS Kware, JSS, Wurno, GDSS	100m	
458048	School Feeding Programme in partnership with FGN and donor Agencies.	5.4bn	
458049	Agency for Mass Education-Purchase of reading and instructional materials. Procurement of monitoring and evaluation facilities, construction of 23 rural reading rooms, establishment of special education centre construction of women vocation training centre etc.	100m	
458051	Purchase of Admission/Examination Forms-JAMB, IJMB, GCE, NABTEB, etc.	100m	
458058	State wide extra moral lessons for preparation for students who failed SSCE, NECO NABTEB for another attempt to qualify them for University and other Tertiary institutions	25m	
458060	Universal Basic Education-Counterpart funding for construction, rehabilitation and furnishing of basic education schools.	1.0bn	
458061	Construction and furnishing of Permanent site for SUBEB	480m	
458063	College of Nursing Sciences	500m	

458064	Female Education Board-Rehabilitation of new office for the Board at STC & provision of furniture, equipment & female education friendly facilities in the schools including security, demarcation of males from females	260m	
458065	Establishment of School of Midwifery at Tambuwal Town in Tambuwal LGA-Acquisition of land, construction of new offices, classrooms, library, laboratory, demonstration rooms, staff quarters, students hostels, access roads, drilling of boreholes, provision of standby generator, beds, mattress, pillows, classroom furniture, office furniture, sporting facilities,, library books, laboratory equipment/chemicals, internal facilities computers, utility vehicles and consultancy services for construction works of School of Midwifery Tambuwal.	400m	
Total			

Source: Sokoto State Approved Budget 2017

Table 21: Allocations and Releases to Ministry of Education in 2018

Code	Project Description	Budget (N)	Released (N)
458022	Expansion of equipping of WCCE Sokoto	31.153m	
	Expansion of equipping of WCCE Tambuwal, Isa and Gwadaba	78.323m	
	Construction of additional Women Centres at Rabah, Silame and Dange Shuni	80.522m	
458037	Girls Education Project: Counterpart Funding with Development Partners		
	UNICEF	979m	
	NIPEP	180.8m	
	NEI+	200m	
	Action Aid	45m	
	State to State	25m	
	G4H	40m	
	P4R (BESDA)	20m	
458069	Female Education Project-Construction/Rehabilitation, Provision of furniture and equipment etc., to enhance female education statewide	2bn	
458060	UBE Counterpart Funding for construction, rehabilitation and furnishing of Basic Educations Schools	1bn	
458062	NEI+ Counterpart Funding on improving children reading skills	170.3m	
458063	College of Nursery and Midwifery Sciences	470m	
458065	College of Nursery and Midwifery Sciences, Tambuwal	500m	
Total			

Source: Sokoto State Approved Budget 2018

Table 22: Allocations and Releases to Ministries of Basic and Secondary Education and Higher Education in 2019

Code	Project Description	Budget (N)	Released (N)
458022	Women Education: Expansion of equipping of WCCE Sokoto	14.019m	
		35.245m	

	Expansion of equipping of WCCE Tambuwal, Isa and Gwadaba Construction of additional Women Centres at Rabah, Silame and Dange Shuni	36.235m	
458037	Girls Education Project: Counterpart Funding with Development Partners UNICEF NIPEP NEI+ Action Aid State to State G4H P4R (BESDA)	976m 360m 200m 45m 25m 40m 20m	
458064	Female Education Board: rehabilitation of offices, provision of furniture and equipment	157.5m	
458066	Rehabilitation of Schools under Female Education Board NGSS Sokoto GDSS Yabo JGDSS Maberu Magaji GGDSS Runjin Sabo	59.366m 8.133m 4.5m 22.5	
458067	Purchase of materials and equipment for 4 Women Development Centres	18m	
458068	Construction of Women Centres at Arkilla and Gagi	67.5m	
458069	Female Education Project-Construction/Rehabilitation, Provision of furniture and equipment etc., to enhance female education statewide	2bn	
458060	UBE Counterpart Funding for construction, rehabilitation and furnishing of Basic Educations Schools	1.473bn	
458062	NEI+ Counterpart Funding on improving children reading skills	529.2m	
458063	College of Nursery Sciences	585m	
458065	College of Nursery and Midwifery Sciences, Tambuwal	337m	
Total			

Source: Sokoto State Approved Budget 2019

In respect of these budgetary votes, the State Ministry of Education did not respond to our request for information on the actual releases and utilisation of the votes. The projects listed above were chosen because they target the empowerment of women through the acquisition of education. However, some of them are of a general nature and are not women specific but would have benefitted women if implemented.

Section Five

Conclusions and Recommendations

5.1 Conclusions

Sokoto State, as part of the Nigerian Federation is bound by the international standards ratified and applicable to Nigeria. These standards include CEDAW, ICESCR, Protocol to the African Charter on Human and Peoples Rights on the Rights of Women in Africa, Beijing Declaration and Platform for Action, the Sustainable Development Goals, the Declaration on the Elimination of Violence against Women, etc. These standards prohibit the continuation of discrimination and violence against women in any form and mandates the State to improve the SRHR of women and girls.

The 1999 Constitution has provisions which prohibit inhuman and degrading treatment, and VAWG is one of such unconscionable treatment. It also prohibits discrimination on the ground of sex. The Compulsory, Free, Universal Basic Education Act is complimented by the state's Right to Education Law. The State is yet to enact and or domesticate laws on Child Rights and VAPP. The state is yet to establish by law a Sexual and Gender Based Violence Response Centre. However, it has a Gender Policy.

The State still has challenges in female school enrolment and completion rates. Out of 428,777 girls of primary school age in 2016, only 262,044 were in school which is just 61%. For junior secondary school age girls, only 71,132 were in school from a population of 169,184 which is just 42%. The senior secondary school attendance shows that out of 153,085 female school age population, only 27,848 are in school which is just 18%. The State's enrolment percentages in primary school (61%) and senior secondary (18%) are much lower than the national average of 80.4% for primary school, and senior secondary school of 32.6% respectively. However, the national junior secondary of 41.1% is lower than the unexplained Sokoto State figure of 42%. The female enrolment percentages in the state are lower than the enrolment percentages for boys in the State. The primary school enrolment percentage for boys is 95.45%; junior secondary is 75% and senior secondary 32%.

In SGBV/VAWG, by 2018, physical violence incidences had risen to 8.6% while sexual violence decreased to 1%. This percentage is lower than the 2018 North West Zone average of 11.7% in physical violence and 5% in sexual violence and lower than the 2018 national average of 31% and 9.1% in physical and sexual violence respectively. Again in 2013, 2.4% of women and girls indicated that they experienced physical violence in the last 12 months while only 1.6% indicated their experiencing sexual violence with the same period. By 2018, the percentages have changed to 2.2% for physical violence and 0.7% for sexual violence. This indicates that the situation is improving and physical and sexual violence against women and girls is decreasing. This state of affairs is lower than the 2018 North West zonal average of 6.6% and 3.2% for physical and sexual violence respectively. Also, it is lower than the national average of 13.7% and 4.1% in physical and sexual violence respectively.

Early marriage and teenage motherhood, which is about marriage and childbearing before the age of majority - 18 years, when free, full and informed consent can be given to a marriage, is still a great challenge in the State. For marriage before the age of 15, the national average is 18.5% while the Sokoto data is 40.4%; marriage before the age of 18, the national average is 44.1% while the Sokoto data is 68.6%; the national average for live birth before 15 and 18 years respectively is 3.1% and 30.8% while in Sokoto, it is 7.2% and 52.1% respectively.

In 2013, 3% of Sokoto women were mutilated while 24.2% of the girls suffered mutilation. By 2018, the percentage of women mutilated increased to 5.4% while the mutilated girls drastically decreased from 24.2% in 2013 to 2.4%. However, the percentage of women who think that mutilation should continue stagnated from 27.7% to 27.3%. Comparing the Sokoto figures with the North West shows that the zonal average for mutilated women was 20.2% while the national average is 19.5% which shows a better performance from Sokoto. For mutilated girls, the North West zone recorded an average of 28.6% while the national average was 19.2%. This also shows that the Sokoto percentages are better. For women who support continuity of FGM, the North West average is 42.4% while the national average is 23.1% respectively.

In 2011, 16.6% of Sokoto women received ante natal care from skilled health providers and this marginally improved to 17.4% in 2013. Furthermore, it improved to 35.1% in 2016 and reduced to 24.3% in 2018. The 2018 national average is 67% while the Northwest average is 53.9%. This shows that Sokoto's performance is below the North West and national averages. 5.4% of Sokoto women were delivered by a skilled birth attendant in 2013 as against the national average of 38.1% women. By 2018, the numbers have gone up to 9.2% in Sokoto while the national average for women delivered by skilled birth attendants increased to 43.3% at the national level. The percentages in Sokoto State is way below the national average and there is so much room for improvement. Again, in delivery in a health facility, 4.7% of Sokoto women delivered in a health facility in 2013 while the national average was 35.8%. By 2018, the Sokoto figures came up to 7.8% while the national average was 39.4%. In both indicators (delivery by a skilled birth attendant and delivery in a health facility), the Sokoto State baseline in 2013 was very low and the progress recorded up to 2018 was marginal.

In 2013, less than 1% of women in Sokoto were using traditional or modern methods of contraception (0.30% and 0.7% respectively) while only 7.5% had unmet need for family planning. In the same year, the national average was that 5.40% and 9.8% of women were using traditional and modern contraceptives respectively while the unmet need was 16.1%. This shows that more women were using contraceptives of any type across the nation when compared to the Sokoto percentages. Furthermore, in 2018, 0.20% and 2.3% were using traditional and modern contraceptives respectively in Sokoto State while the national average was 4.6% and 12% for traditional and modern methods of contraception respectively. Again,

this indicates that more women were using contraceptives of any type at the national level when compared with Sokoto State.

There was information on the allocations and releases related to the project theme in the Ministries of Health, Women Affairs, Social Welfare and Community Development and Youths and Sports. Overall, it appears there is no multi-sectoral plan for the eradication of SGBV which budgets should respond to in the policy, plan, budget continuum.

The budgetary provisions in health over the four years show that SGBV/VAWG/HP and SRHR of women and girls have not been directly targeted by the allocations. Out of N12.613bn appropriated to the project theme over the four years, only N1.082bn was released which is just 9% of the appropriated sum. Generally, the appropriation lacked credibility as the votes to the Ministry of Health were poorly implemented due to sub-optimal releases. Some of the votes were repeated year after year without releases. The impression created by the 9% performance is that the appropriation process is not based on realistic evidence and the revenue estimates and projections were not realised. There was no vote for sensitisation for behavioural change related to SGBV/VAWG/HP and SRHR.

In the Ministry of Women Affairs, there were no votes for gender mainstreaming, enhancement of women rights, sensitisation and capacity building on prevention and responses to SGBV. Family planning and reproductive rights hardly got any vote. Over the four years, out of a total sum of N2.930bn appropriated to address the thematic area, only N94.052m got released. Essentially, releases of the votes on SGBV/VAWG/HP and SRHR in the Ministry of Women Affairs averaged 3% a year. There were reoccurring votes which did not get a single release over the four years. The impression is created that the budget lacks credibility since the appropriation has no nexus with releases and utilised sums. When these very poor budgetary releases are pitched against the state's data on early marriage and teenage motherhood, access to antenatal services and delivery by skilled birth attendants as well as the need and use of modern contraceptives, it will become clear that the state did not dedicate the maximum of its available resources for the progressive realisation of freedom from violence for women and girls and the promotion of their SRHR.

5.2 Recommendations

Against the background of the foregoing, this study makes the following recommendations.

5.2.1 Executive

- Prepare a medium and long term costed multisectoral action plan and strategy for the elimination of SGBV/VAWG/HP and the promotion of the SRHR of women and girls.
- Make the budget more credible and responsive by using empirical evidence for revenue forecasts to ensure that forecasted revenue is realisable. Link the realistic revenue to expenditure to ensure that proposals for expenditure when approved by the legislature are implemented.

- Increase the budgetary allocations that respond to SGBV/VAWG/HP and the improvement of the SRHR of women and girls.
- Open the budgeting process by preparing and publishing quarterly, half yearly and full year budget implementation reports in hard and soft copies including posting same on the website of the Ministry of Finance. These should be prepared and published within one month of the end of reporting period.
- Capacity building for Strategic Implementation MDAs including Ministry of Women Affairs and other MDAs on gender sensitive budgeting especially as it relates to SGBV/VAWG/HP and SRHR.
- Collaboration between Ministry of Women Affairs, the State Planning Commission, Statistics Agency and other MDAs for the purpose of gathering, collation, processing and reporting on data (Data Bank) on SGBV/VAWG/HP and improvement of SRHR. This will improve planning and response to the associated challenges.
- Establish by law a Sexual and Gender Based Violence Response Team in the State for a comprehensive response to SGBV challenges. Provide referral services to survivors of SGBV/VAWG and to provide and monitor the provision of quality forensic, medical, legal and psycho-social support to survivors. This should include the establishment and funding of shelters run by the State. This would involve a collaboration of several MDAs including Women Affairs, Education, Health, Justice, etc.
- Engage in sensitisation and enlightenment campaigns to change cultural attitudes based on stereotypes on the inferiority or superiority of women and men. This will involve collaboration between MDAs such as Women Affairs, Information, Youths and Sports; civil society, religious and traditional leaders.
- Collaborate with and support law enforcement agencies to improve enforcement of laws on SGBV/VAWG/HP and the improvement of SRHR of women and girls.

5.2.2 Legislature

- Enact the following laws in the State: Child Rights Law, Gender and Equal Opportunity Act, Violence Against Persons Prohibition Law and Sexual and Gender Based Violence Response Team.
- Training of members of the State House of Assembly especially the Appropriation, Finance, Public Accounts and Women Affairs Committees on Gender Responsive Budgeting.

- Improve oversight over the expenditure of appropriated funds on the project theme.

5.2.3 Civil Society

- Engage the executive and legislature for the implementation of the above recommendations through advocacy visits, monitoring and reporting, action research, etc. on issues related to the project theme.
- Organize sensitisation and capacity building programmes to improve knowledge and skills on the subject matter. Engage both men and women and boys and girls.
- Provide pro bono support especially legal aid to survivors of VAWG/SGBV/HP.
- Engage the religious and cultural leaders in a dialogue for the eradication of SGBV/VAWG/HP and the promotion of the SRHR of women and girls.