



REPUBLIC OF KENYA

NATIONAL POLICY FOR PREVENTION AND RESPONSE TO GENDER BASED VIOLENCE





REPUBLIC OF KENYA

THE PRESIDENCY

MINISTRY OF DEVOLUTION AND PLANNING

**NATIONAL POLICY FOR
PREVENTION AND RESPONSE TO GENDER BASED VIOLENCE**

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ACRONYMS/ABBREVIATIONS

ACHPR	African Charter on Human and People's Rights
AG	Attorney General
BPFA	Beijing Platform for Action
CBO	Community Based Organisations
CCC	Comprehensive Care Centres
CEDAW	Convention on the Elimination of All forms of Discrimination against Women
COVAW	Coalition on Violence Against Women
CPC	Criminal Procedure Code
CRADLE	The Children's Foundation
CREAW	Centre for Rights Education and Awareness
CSOs	Civil Society Organisations
DEVAW	Declaration on Elimination of Violence Against Women
DNA	Deoxyribonucleic Acid
DPP	Director of Public Prosecutions
DG	Directorate of Gender
ECP	Emergency Contraceptive Pill
FGM	Female Genital Mutilation
FIDA (K)	Federation of Women Lawyers – Kenya
GAD	Gender and Development
GBV	Gender Based Violence
GBVIMS	Gender Based Violence Information Management Systems
GBVRC	Gender Based Violence Recovery Centre
GBVCO	Gender Based Violence Coordination Office
GBVNAP	Gender Based Violence National Action Plan
GBVIASC	Gender Based Violence Implementing Agency Steering Committee
HIV/AIDS	Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome
ICCPR	International Covenant on Civil and Political Rights

ICGLR	International Conference of the Great Lakes Region
KDHS	Kenya Demographic and Health Survey
KEMWA	Kenya Medical Women's Association
KIPPRA	Kenya Institute for Public Policy Research and Analysis
KNCHR	Kenya National Commission on Human Rights
KNH	Kenyatta National Hospital
KNPS	Kenya National Police Service
LVCT	Liverpool Voluntary Counseling and Testing Centre
MoDP	Ministry of Devolution and Planning
M&E	Monitoring and Evaluation
NACC	National AIDS Control Council
NGEC	National Gender and Equality Commission
PEP	Post Exposure Prophylaxis
PRC	Post Rape Care
PRCF	Post Rape Care Forms
RH	Reproductive Health
SGBV	Sexual Gender Based Violence
SOA	Sexual Offences Act
UDHR	Universal Declaration on Human Rights
UNFPA	United Nations Population Fund
VAC	Violence Against Children
VAW	Violence Against Women
WEL	Women's Empowerment Link
WID	Women in Development
WRAP	Women's Rights Awareness Programme

FOREWORD

Gender-Based Violence (GBV) occurs across all socio-economic and cultural backgrounds, and in many societies across the world. GBV is a symptom of underlying gender inequalities and power imbalances that transcend the bounds of geography, race, culture, class, and religion, touching virtually every community. It is often condoned by customs and reinforced by institutions.

The Government recognizes that sustainable development cannot be achieved in an environment where gender based violence is a daily occurrence. A coordinated multi-sectoral approach which involves stakeholders is paramount for the management of Gender Based Violence including provision of timely and efficient services to victims/survivors.

This Policy is informed by various Government policy documents and statutory frameworks, The Constitution of Kenya; the Penal Code; Criminal law (Amendment) Act 2003,; the Sexual Offences Act, 2006, and the Sexual Offences (Amendment) Act, 2011, the Sexual Offences Regulations 2008; and the Sexual Offences Dangerous Offenders DNA Data Bank Regulations, the Counter Trafficking in Persons Act (2011), the Prohibition of Female Genital Mutilation (FGM) Act 2011 , the Employment Act, 2008, the National Reproductive Health Policy, 2007; Kenya Vision 2030 and the two Medium Term Plans among others. The framework is also aligned with the national goals of fostering social economic growth, general improvement and the well being of Kenyans.

The overall Goal of this National Policy is to accelerate efforts towards the elimination of all forms of GBV in Kenya. The Policy Goal is to be realized as laid out in the key objectives which seek to ensure; a coordinated approach in addressing GBV and effective programming; enhanced enforcement of laws and policies towards GBV prevention and response; increase in access to quality and comprehensive support services across sectors; and improved sustainability of GBV prevention and response interventions.

The Policy takes cognizance that effective GBV prevention and response requires strong and efficient systems and structures to operationalize laws, policies and plans. It therefore provides an implementation framework which spells out the roles and responsibilities of

stakeholders towards the implementation of the Policy. This Policy further recognizes the functions between the two levels of Government at the National and County levels on accountability, reporting and management lines, and provides a structure that harnesses and synergizes GBV prevention and response interventions through involvement of different stakeholders.

Successful implementation of this Policy will require collaboration and coordination of state and non-state actors. In fulfillment of its mandate, the Ministry of Devolution and Planning shall spearhead the overall coordination of the implementation framework of the GBV policy, and shall work in close collaboration and consultation with all actors in ensuring effective GBV prevention, response and support for victims/survivors and their families and community.



ANNE WAIGURU, OGW

CABINET SECRETARY

ACKNOWLEDGEMENTS

This Policy provides a framework for effective Prevention and Response to Gender Based Violence. The principal objective of the Policy is to accelerate implementation of legislation, policies and programmes for prevention and response to GBV by state and non – state actors for the realization of a society where men, women, boys and girls are free from all forms violence.

The Policy was developed through an extensive, inclusive and participatory process whereby consultations were held with a wide range of stakeholders drawn from the National and County levels. The Ministry of Devolution and Planning appreciates the invaluable contribution from key partners during all the stages of developing and completion of the Policy. The leadership and overall guidance provided by Mrs. Katherine Muoki, Head, Gender Directorate and Faith Kasiva, Gender Advisor is appreciated.

We owe our gratitude to the technical team comprising individuals drawn from the Government, Private Sector, Development Partners and Civil Society Organizations who worked tirelessly to ensure quality of the entire process. We in particular recognize Mary Kabaru - Gender Directorate, Beatrice Kataka – Ministry of Defence, Rukia Yassin – Sexual and Gender Based Violence Networks, Juliet Kimemiah-Association of African Women for Research and Development, Julia Mutoria – Agency for Cooperation and Research in Development, Stephen Otieno-Masculinity Institute, Hulda Ouma – National Gender and Equality Commission and Florence Gachanja – United Nations Population Fund for unreservedly committing their time and expertise towards the preparation of the Policy.

The Ministry deeply appreciates the financial and technical support accorded by UNFPA throughout the process of developing this National Policy. We are grateful for the support in commissioning the consultancy services and financing all the stages of the work.

The successful implementation of this policy will immensely contribute to the elimination of all forms of gender based violence in our society.



ENG. PETER O. MANGITI

PRINCIPAL SECRETARY – PLANNING

CHAPTER 1

1. INTRODUCTION

Gender based Violence is a serious global health, human rights, and development issue. It is a symptom of underlying gender inequalities and power imbalances that goes beyond geography, race, culture, class, and religion, touching virtually every community in every corner of the globe. Gender based violence is often condoned by customs and reinforced by institutions which are thriving on impunity.

Gender Based Violence (GBV) has been defined as any act of gender-based violence that results in physical, sexual or psychological harm or suffering, including threats of such acts, coercion or arbitrary deprivations of liberty, whether occurring in public or private life.¹ Further, the definition has been expanded to include economic deprivation and isolation which may cause eminent harm to safety, health and well-being.² GBV is based on socially ascribed (gender) differences between males and females. Gender can be seen as the allocation of roles, attitudes and values that are deemed by the community to be appropriate for each sex. These roles define power relations between men and women regarding who makes decisions and who owns resources. They are learned and reinforced through interactions in the home and community.

GBV affects women, girls, men and boys, however, women have been found to be disproportionately affected by GBV. This has a direct correlation between women's subordinate status in society and their greater susceptibility to violence. In situations of conflict and humanitarian and disaster situations, women and girls are more vulnerable to different forms of GBV where acts such as rape, confinement and sexual slavery are used as weapons of war. Furthermore, GBV has also been strongly linked to HIV and AIDS with studies showing that there is an increased risk of HIV infection amongst GBV victims/survivors.³

GBV has serious and far-reaching negative effects including physical injuries resulting in death or disfigurement, psychological trauma, infection with HIV/AIDS, unwanted pregnancies, social stigmatization and exclusion and economic deprivation among others.

1 UN Declaration on Elimination of Violence Against Women

2 General Assembly Resolution on the Elimination of Domestic Violence Against Women

3 Kenya Demographic Health Survey, 2008/9

The forms of GBV are sexual violence, physical violence, emotional and psychological violence, harmful traditional practices, trafficking in persons and socio-economic violence. Each of the GBV forms has manifestations in several types and this list is by no means exhaustive.

Sexual Violence:

Rape, attempted rape, defilement, incest, sexual abuse, sexual exploitation, forced prostitution, sexual violence as a weapon of war and torture and trafficking for sexual exploitation.

Physical Violence:

This includes physical assault, human trafficking and slavery.

Emotional/Psychological Violence:

Verbal abuse, insults/humiliation, isolation, sexual harassment, confinement and intimate partner violence all fall under emotional/ psychological violence.

Harmful Traditional Practices:

These include Female Genital Mutilation (FGM), Early Marriage, Forced Marriage, Infanticide and/or Neglect, widow inheritance and disinheritance.

Socio-Economic Violence:

This manifests itself through discrimination and/or Denial of Opportunities and Services, Social Exclusion/Ostracism based on gender, Obstructive Legislative Practice, Wife/Spouse Inheritance and Bigamy.

Globally, there are a number of instruments outlining internationally agreed norms and standards aimed at addressing GBV. Kenya has ratified and subscribes to many of them including: the Universal Declaration of Human Rights (UDHR, 1948), the International Covenant on Civil and Political Rights (ICCPR, 1976), the Convention on the Elimination of all Forms of Discrimination against Women (CEDAW, 1979), the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (1984), the United Nations Convention on the Rights of Child (CRC, 1989), the Beijing Platform for Action (1995), UN Resolution 1325 (2000), the UN Protocol to Prevent, Suppress and Punish Trafficking in Persons Especially Women and Children (2000), The ILO Convention 182 on the Worst Forms of Child Labor; and The Optional Protocol on the Convention of the Rights of the Child on Child Trafficking, Child Prostitution and Child Pornography.

At the regional level, the normative framework includes instruments such as: the Protocol to the Africa Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo

Protocol, 2003), the Solemn Declaration on Gender Equality in Africa (2004), the International Conference of the Great Lakes Region Protocol; and The African Charter on the Rights and Welfare of the Child.

The Government is committed to the elimination of all forms of Gender Based Violence (GBV) and to the effective provision of quality and accessible services to all survivors. Kenya has a robust legal framework prohibiting various forms of GBV: the Constitution of Kenya; the Sexual Offence Act (2006); the Penal Code and its various amendments; the Prohibition of Female Genital Mutilation Act (2011); the Children's Act (2001); the Counter Trafficking in Persons Act (2010) and the HIV Prevention and Control Act (2006). The Vision 2030 explicitly acknowledges that cases of GBV are on the increase and lays out various strategies to reduce its prevalence. Nevertheless, GBV remains a negative phenomenon in our society and presents serious multi-faceted challenges.

1.1 Rationale

National data reveals high GBV prevalence in Kenya with variations cutting across typologies and geographic locations. Women and girls are disproportionately affected by GBV, however men and boys also experience GBV. There is growing evidence that orphans and vulnerable children, Persons with Disabilities, the elderly and persons in humanitarian crisis situations are most vulnerable to GBV. The high prevalence of GBV in Kenya and its negative impact on the society necessitates the development of a comprehensive policy framework to ensure effective prevention of and response to GBV.

GBV in its various manifestations negatively affects individuals, their families and the entire community. At the individual level GBV results in pain and psychological trauma. At the social level GBV often results breakdown of the family unit. Economically, GBV results in an economic burden on the government in terms of increased spending on health care, social services, the civil and criminal justice system, absenteeism from work, and lost productivity and output. GBV creates an unequal political landscape in which all those affected are denied the opportunity to participate in decision making for development.

Article 2 (5) of the Constitution of Kenya makes international law a source of the country's laws. The Constitution provides that the "general rules of international law shall form part of the laws of Kenya" and further that "Any Treaty or Convention ratified by Kenya shall form part of the law of Kenya under this Constitution." By ratifying the above-mentioned treaties Kenya

has demonstrated its commitment to combat GBV. This calls for the development of a policy framework guiding the implementation of GBV instruments. The policy also seeks to address the challenges emerging from the implementation of the recent GBV related laws such as the Sexual offences Act, the Counter Trafficking in persons Act and the Prohibition of FGM Act. Currently, there are many efforts by state and non-state actors working on prevention and response to GBV in Kenya. However, these need to be coordinated in order to provide an overall guiding framework for the effective management of GBV interventions.

The concept of “GBV” is often misunderstood and generally taken to mean “a women only issue”. Men and boys are often left out of the dialogue and perceived as opponents rather than partners in GBV prevention. However, men and women, boys and girls are all affected by GBV and all have an important role to play in changing social attitudes and preventing GBV. This misunderstanding often leads to misinformation. This national policy framework helps to demystify these misconceptions and aid in effective GBV prevention and response. Another factor that complicates the response to GBV is the stigma towards those affected by GBV. This limits reporting of GBV cases. In addition, there is limited information to survivors who experience violence on where to seek support. Furthermore, there is lack of standardized data management tools, systems and a monitoring and evaluation framework for GBV intervention. The GBV policy will facilitate the development of a comprehensive Monitoring and Evaluation framework.

GBV prevention and response interventions require significant human and financial resources. This policy will provide an enabling environment for adequate resource allocation from government and its partners.

1.2 Goal

The overall goal of this Policy is to accelerate efforts towards the elimination of GBV in Kenya.

1.3. Purpose

The purpose of this policy is to put in place a framework to accelerate implementation of laws, policies and programmes for prevention and response to GBV by state and non – state actors for the realization of a society where men, women, boys and girls are free from all forms violence.

1.4 Objectives

- i. To facilitate a coordinated approach in addressing GBV and to ensure effective programming.

- ii. To improve enforcement of laws and policies towards GBV prevention and response.
- iii. To increase access to quality and comprehensive support services across sectors.
- iv. To improve sustainability of GBV prevention and response interventions.

1.5 Guiding Principles

- i. Equal access to health, social services and justice for all affected by GBV.
- ii. Integrity in the implementation of laws, policies and programmes on GBV.
- iii. Recognition of the importance of gender equity and gender equality in national development.
- iv. Accountability at all levels for all those involved in programmes targeting GBV.
- v. Equal participation of women, men, girls and boys in the planning, implementing, monitoring and evaluation of GBV programmes.
- vi. Affirmative action directed to groups of persons historically marginalized through harm caused by GBV.
- vii. Confidentiality of survivors/victims and their families at all times.
- viii. Non-discriminatory laws, policies and programmes on GBV and respect for diversity on the basis of race, sex, age, religion, and ethnicity.

1.6 Approaches

This policy will be guided by the following approaches:

- i. The Human Rights Based Approach, which identifies rights holders and duty bearers and their respective entitlements and obligations.
- ii. The survivor-centered approach which prioritizes rights, needs, and wishes of the survivor.
- iii. The gender-responsive approach, which recognizes the gender dynamics, impacts and consequences of GBV.
- iv. The preventive approach, where actors focus on activities that lead to reduction of the incidence of GBV.
- v. The evidence based approach which focuses on using factual and timely data to inform policy formulation and programming.
- vi. Integrative and collaborative approach, which recognizes the complexity and multi-dimensional nature of GBV, and seeks to create linkages and logical chains of collaboration between actors in the different sectors.'

CHAPTER 2

2. SITUATION ANALYSIS

2.1 Introduction

Gender-based violence is a problem in Kenya whose nature is multi-faceted. Results from KDHS 2008/2009, revealed that 39 percent of married, divorced or separated women aged 15 to 49 years reported to have suffered some form of violence during their lifetime. The violence registered by the survey could be linked to certain cultural beliefs and traditions, the legacy of the post-election violence as well as the socio-economic status of the vulnerable groups.

GBV in Kenya is caused by unequal power relations between men and women, socio-cultural norms that normalize GBV, discriminatory practices and changing gender roles. Other factors contributing to GBV include poverty, illiteracy, breakdown of the family unit and support systems, insecurity, alcohol and substance abuse, uncensored media content. Conflict, political instability as well as poor enforcement of laws and policies also contribute to the occurrence of GBV.

2.2 Forms of violence

Experience of different forms of violence

Percentage of women age 15-49 who have experienced different forms of violence by current age, Kenya 2008-09

Age	Physical violence only	Sexual violence only	Physical and sexual violence	Physical or sexual violence	Number of women
15-19	21.8	6.3	5.1	33.2	1,365
15-17	19.9	6.0	5.3	31.2	808
18-19	24.6	6.7	4.7	36.0	557
20-24	23.7	5.7	13.8	43.2	1,246
25-29	28.6	7.2	13.5	49.4	1,097
30-39	25.6	6.0	18.1	49.7	1,554
40-49	23.0	8.1	20.5	51.6	1,056
Total3	24.5	6.6	14.0	45.1	6,318

Source: KDHS 2008/09

2.2.1 Sexual Violence

Sexual violence is the leading form of GBV in the country, and different reports indicate increasing incidence.⁴ Incidence varies in different regions with Nyanza region leading at 31.6% followed by Western region at 24 percent.⁵ Evidence in the police data on sexual violence shows a rise from 3,525 reported cases in 2007 to 4,703 in 2012.

Sexual violence against children is the most common form of GBV and has reached national crisis proportions. The KDHS 2008/9 indicates an incidence of 32 percent for females and 18 percent for male children and an alarming increasing rate across the country especially in learning institutions.

The Kenya Violence Against Children Survey 2010, shows that violence against girls is a growing concern where the prevalence of sexual violence prior to the age of 18 is 32 percent for females and 18.5 percent for males.

Although sexual violence cuts across gender, and class, majority (51 percent between 40-49 years) of survivors are women with no education at all or who have not completed primary school, are among the poorest, and most of them are divorced, separated or widowed⁶. Whereas they cannot be considered as the only factors for GBV, poverty and illiteracy compound the problem as poor and illiterate victims have very limited choices. There is therefore an important link between GBV and poverty as well as illiteracy which this policy seeks to address.

Situations of conflict and breakdown of law and order have been found to leave women and children more vulnerable to sexual violence. Conditions similar to these consistently exist in informal settlements hence occasioning high incidence of sexual violence.

Sexual violence is a health issue and a factor in the transmission of HIV. Data indicates that 74 percent of intimate violence cases are by intimate partners and the increase in new cases of HIV infection is due to gender based violence in the home.⁷

According to the KDHS 2008/2009, in the case of sexual violence, the most common perpetrators are intimate partners (53.4 percent those surveyed), trusted persons, and care givers for children. Fathers are the leading perpetrators of sexual violence against children. The survey also revealed that 15 percent of married women were sexually violated compared to about 13 percent in 2003.

4 National Police Service Annual Crime Reports 2011/12; National Commission on Gender and Development (NCGD), A Baseline Survey on Gender Based Violence in Kenya. p1. 2010; Kenya Demographic Health Survey 2008-2009 (KDHS 2008/9).

5 KDHS 2008/9.

6 KDHS 2008/9

7 KDHS 2008/9

2.2.2 Physical Violence

Physical violence is prevalent in Kenya especially against women. The KDHS 2008/9 indicates that 64.8 % women who have ever been married have experienced physical violence by a husband or partner, with 25% of them being battered often.⁸ Further even those women who have not been married are physically abused by their mothers (35.9%) and by teachers (40.6%).⁹ Few men (6.9%) have reported experiencing physical violence from their partners. There is a very high incidence of physical violence against children, a factor likely to lead to cycles of violence.¹⁰ 66% of female and 73% of male children experience physical violence, with boys experiencing it in almost all spaces of their lives: at home (by parents), at school (teachers), in public space (police), and in social places (by fellow boys), hence entrenching a socialization of violence.¹¹

According to the KDHS 2008/2009, physical violence is perpetrated mostly by intimate partners and parents. The same survey shows that 83% of women and girls reported to have one or more episodes of physical abuse.

2.2.3 Domestic Violence

Domestic violence refers to acts committed by a Family or house hold member against another such as spousal or child abuse. It is a pattern of abusive behavior in any relationship that is used by one partner to gain or maintain control over another intimate partner. It includes physical, sexual, emotional, psychological, and economic abuse. Threats of such violence are considered as domestic violence. Other forms of domestic violence include stalking and cyber-stalking or cyber-bullying¹².

2.2.4 Harmful Cultural Practices

Harmful cultural practices such as early child marriages, forced marriages, widow inheritance, disinheritance, infanticide, virginity testing, ritual killings amongst others are practiced. Female Genital Mutilation (FGM) in Kenya accounts for 27% amongst women aged-15-

8 KDHS 2008/09

9 KDHS 2008/09

10 KDHS 2008/09

11 KDHS 2008/09

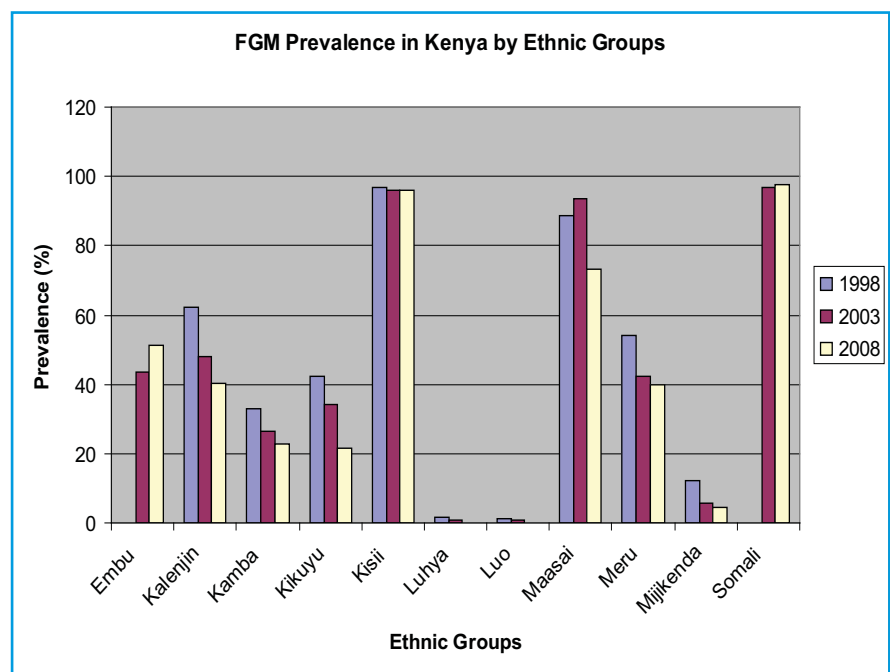
12 US Department of Justice on Violence against Women

49. This is a decline from 32% recorded in 2003 that is attributed to the government led eradication campaign.¹³

The most severe forms and the highest incidence (95%) of FGM are found in the North Eastern region and the least (1%) in Nyanza. Ethnically, Somalis record the highest incidence at 98% followed by Kisiis at 96% and Maasais at 73%, a fact attributed to cultural beliefs and traditions in these communities.¹⁴

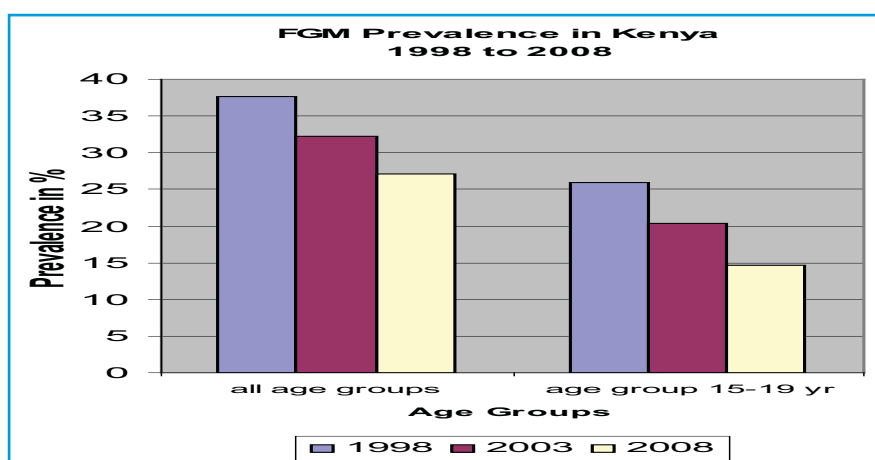
2.2.5 Emotional and Psychological Violence

Emotional and psychological violence has been mostly overlooked by actors because of its personal/private and socially inoffensive nature. It is widespread and includes practices such as: confinement; silent treatment, controlling of socialization; emotional abuse; and unfaithfulness. The KDHS 2008/09 indicates that: 50% of men surveyed were jealous if their partners talk to other men; 20% controlled their spouse's socialization; while 35% monitor their spouse's movements. Incidence differs regionally with Eastern and Western regions leading at 57% and 49.2% respectively. This type of violence precipitates other types of GBV, and is therefore a strategic type to focus on to realize prevention goals.



13 KDHS 2008/09

14 KDHS 2008/09



Source: KDHS 2008/2009

2.2.6 Human Trafficking

Human trafficking is a crime against humanity, and involves the acts of recruiting, transporting, transferring, harboring or receiving persons through use of force, coercion or other means for the purpose of sexual exploitation, domestic servitude, and forced involvement in illicit activities, begging, illegal adoption and forced marriage. Survivors are mostly women and children, and a few men. Kenya is a source, transit and destination country for trafficking in persons. Victims of trafficking include persons from EAC countries, China, India, and Pakistan. Kenyans also voluntarily migrate to the Middle East, Europe where they fall into trafficking traps.¹⁵

2.3 National Legislative and Policy Framework

The Government has put in place the following legal framework to address issues of GBV. The Constitution of Kenya; the Penal Code; Criminal law (Amendment) Act 2003 which amended the Penal Code to enhance sentences on sexual violence; the Criminal Procedure Code; and the Sexual Offences Act, which among other things broadens the definition of sexual offences; the Sexual Offences (Amendment) Act, 2011 which strengthened the 2006 Act; the Sexual Offences Regulations 2008; and the Sexual Offences Dangerous Offenders DNA Data Bank Regulations, the Counter Trafficking in Persons Act (2011) and the Prohibition of Female Genital Mutilation (FGM) Act 2011. The impact of these laws is however hampered by inadequate enforcement and gaps in various respects. A number of NGOs and community initiatives carry out awareness and advocacy programmes on FGM. In addition, the government has developed policies to address sexual violence including: the National Social

¹⁵ United States Department of State, 2012 Trafficking in Persons Report, 19 June 2012, available at <http://www.refworld.org/docid/4fe30cbbc.html> [accessed 21 May 2013].

Protection Policy, 2011, National Policy on the abandonment of FGM, 2010, the National Guidelines on the Management of Sexual Violence, 3rd Edition 2013; and the Multi-sectoral Standard Operating Procedures for Management of Sexual Violence.

2.4 National Institutional Framework on GBV

The key government institution charged with coordination of GBV prevention and response interventions is the Directorate of Gender in the Ministry of Devolution and Planning. Other key institutions include: the National Gender and Equality Commission (NGEC) with a responsibility of oversight on gender issues; the Ministry of Health with the responsibility of delivery of quality services for GBV survivors/victims; the criminal justice system for enforcement of law and order; the Task Force for the Implementation of the Sexual Offences Act under the Attorney General's Office; Gender Units/Focal points in government ministries and agencies; the Police Gender Desks; the National Steering Committee to Combat Human Trafficking; and the Kenya Police Services Anti-Trafficking Unit among others

2.5 Initiatives to address GBV

Programmatic initiatives have been sector-based, mostly in the areas of health, justice and security. Other efforts have been geared to referrals, coordination and emergency response. Some multi-sectoral initiatives have included the GBV Response Centers based within health facilities offering comprehensive care services, GBV Helplines 1195, 116 and 1192.

Initiatives in the health sector include: capacity building for GBV response including training of GBV clinicians; the Post Exposure Prophylaxis (PEP) kits distribution programme; and the GBV Information Management System (GBVIMS). In the security sector, programmes have included the establishment of Gender Desks at police stations and the development of a training curriculum on GBV for police officers and the continued sensitization of police officers. An SGBV manual for prosecutors has also been launched and prosecutors deployed to specifically deal with GBV cases in areas with high prevalence. Other initiatives include the use of sector specific Codes of Conduct, multi-sectoral Standard operating Procedures for GBV Prevention and response, GBV workplace policies, sexual harassment policies, men to men programmes and male involvement programmes. The office of the Director of Public Prosecutions has appointed special prosecutors to prosecute cases of sexual violence. In

some counties, networks of stakeholders working on GBV have been formed and they meet periodically to share information on GBV and conduct joint activities to combat GBV. Their impact is however minimal due to limited resources.

2.6 Existing Challenges

- Lack of a comprehensive national policy on GBV prevention and response.
- Few shelters and safe houses have been established which cannot meet the demand.
- Limited coordination of stakeholders working on GBV prevention and response.
- The health, security and justice sectors have limited capacity and resources to effectively respond to GBV and implement anti-GBV programmes
- There is inadequate programmatic focus in addressing GBV in the public and private sector work places.
- Inadequate enforcement of legislation to curb GBV due to lack of a policy framework.
- Weak data management and a poor Monitoring and Evaluation framework for GBV management.
- Weak utilization of existing research to inform policy and programming.
- Limited rehabilitation and reintegration programmes targeting GBV perpetrators.
- Misconception that GBV unduly focuses on girls and women at the expense of men and boys.
- Limited documented evidence on what works for primary prevention in the country.
- The link between gender based violence, sex and HIV/AIDS is still not clear in programming and therefore the approaches applied may not be as effective as they ought to be.
- The legal dilemma of how to address the issue of sex between minors.
- Limited male involvement in GBV prevention and response initiatives.
- Lack of DNA laboratories at the county level.
- Weak chain of custody of forensic evidence resulting in acquittals.
- Lack of comprehensive programs for rehabilitation of survivors.
- Lack of evidence based programs for rehabilitation of perpetrators.
- Lack of comprehensive prevention mechanisms.

CHAPTER 3

3. POLICY OBJECTIVES AND POLICY ACTIONS

3.1 Introduction

The International human rights law provides clear sets of principles, ideals and standards that form state obligations to their citizens. These standards serve as guidelines and benchmarks for state parties in assessing their responsibilities regarding human rights. The domestication of human rights treaties has been anchored in the Constitution of Kenya thus providing a legal framework in which the state addresses human rights violations. In this regard, this policy is cognizant of the role of state and non state actors towards prevention, response and support mechanisms for GBV.

3.2 Prevention

The high cost of GBV cuts across social, economic and political sectors. There is need for government in partnership with stakeholders to put in place measures to prevent GBV with the objective of its total elimination. In this regard, the government seeks to fast-track the implementation of laws and policies through meaningful programmes aimed at addressing the root causes of GBV.

3.3 Policy Objective 1: To increase access to quality and comprehensive response and support services across sectors

Response

The high prevalence of GBV in Kenya calls for mechanisms to ensure provision of quality and comprehensive services for GBV survivors across the social, health and criminal justice systems. Effective response to GBV requires a multi-sectoral and inter-agency collaborative and coordinated approach. Community services, protection, health and security must work together to ensure that a comprehensive approach is implemented and that GBV prevention is integrated in all aspects of response.

In this regard, the State shall:

- i. Fast-track dissemination and implementation of minimum standards for service delivery across sectors and enhance comprehensive care and support for survivors, perpetrators and their families in all government facilities (health, legal, social) including emergency situations.
- ii. Establish and strengthen health, legal, social infrastructure to ensure integration of GBV response.
- iii. Ensure gender mainstreaming in all policing functions and operations, especially in relation to the handling of GBV victims;
- iv. Ensure that specific needs of men and women, boys and girls affected are incorporated into the planning, delivery and evaluation of humanitarian and disaster response
- v. Put in place standards and mechanisms for debriefing/ counseling service providers dealing with GBV across sectors
- vi. Strengthen capacity of institutions and service providers handling GBV across the health and social sectors and the criminal justice system.
- vii. Accelerate efforts to address the intersection of HIV/AIDS, SRH and GBV, and in particular common risk factors.
- viii. Support the establishment of GBV response centers offering quality and comprehensive services in every sub-county level, with at least one county referral centre at county level.
- ix. Establish an elaborate communication strategy incorporating all actors including the public, service providers, government agencies and non-state actors so as to effectively respond to GBV.
- x. Ensure adequate supplies, commodities and equipment for facilities providing services for GBV response
- xi. Establish and equip forensic specimen analysis laboratories at the County level
- xii. Protect vulnerable persons by implementing a witness protection programme for GBV victims and survivors.

Support mechanisms

GBV is a health, legal and social issue that affects individuals, families and the society at large. The negative consequences of GBV require a supportive environment that provides coping mechanisms for survivors and their families as well as rehabilitation and reintegration of perpetrators into the community.

In this regard, the Government shall:

- i. Promote the development of shelters, safe houses, rehabilitation and reintegration facilities for all survivors and also programmes for protection of GBV service providers
- ii. Integrate GBV rehabilitation programmes in the correctional facilities
- iii. Fast-track implementation of GBV offenders' rehabilitation and reintegration into the community.

3.4 Policy Objective 2: To improve coordination for effective programming for GBV prevention and response

Systems and structures

Effective GBV prevention and response requires strong and efficient systems and structures to operationalize laws, policies and plans. These cut across infrastructure, coordination of actors, generation and management of evidence.

In this regard, the Government shall do the following:

Coordination of actors

- i. Through the Ministry responsible for gender, put in place a coordination mechanism for state and non-state actors across sectors working in prevention and response to GBV.
- ii. Strengthen communication and the referral mechanism on GBV response interventions within and across sectors.
- iii. Strengthen community, medical, law enforcement and legal linkages to improve forensics management.

Data collection, monitoring, evaluation and research

- i. Improve collection, analysis and use of data and research to enhance GBV prevention and response efforts
- ii. Disaggregate data by sex, age, socio-economic status, geographical region etc for targeted response.
- iii. Strengthen existing monitoring and evaluation and data management systems on GBV across sectors

3.5 Policy Objective 3: To improve enforcement of laws and policies towards prevention of GBV

Laws and Policies

The Kenya constitution under article 2(5) and (6) provides that the general rules of international law shall form part of the law of Kenya, and that any treaty or convention ratified by Kenya shall form of the law of Kenya. In this respect, the State through the National and County Governments recognizes its obligations in regard to gender equality and non-discrimination, and GBV prevention and response towards women and men, boys and girls as highlighted in Article 27 (among others) of the Constitution, and other national laws, regulations and policies; and regional instruments. In order to fast-track implementation of these commitments, the State shall:

- i. Accelerate gender mainstreaming into all legislation, policies, plans and programmes.
- ii. Review, amend and enact laws and policies in line with international and regional human rights commitments and standards that safeguard against GBV
- iii. Monitor the implementation of laws relating to GBV especially, SOA, Prohibition of FGM and Counter Trafficking in Person's Act.
- iv. Fast-track implementation of laws and policies in collaboration with various state and non-state actors at national and county levels.
- v. Enhance the capacity of criminal justice and law enforcement institutions to ensure that perpetrators are prosecuted and to end impunity.

- vi. Develop and implement standards and guidelines to prevent GBV and institute standard operating procedures at service delivery centers.
- vii. Develop work place policies addressing GBV prevention and response in public and private set ups.
- viii. Put in place clear regulatory measures to ensure that children are not exposed to explicit/pornographic content that is likely to result in affecting them negatively.
- ix. Put in place clear regulatory measures to curb public exposure to explicit content that is likely to result in moral degradation.
- x. Strengthen regulatory frameworks for alcohol and substance abuse.
- xi. Adopt, strengthen and enforce stringent policies against GBV in institutions of learning.
- xii. Develop standards for safety nets such as shelters and rescue centers that support GBV victims and survivors.

Programmes

GBV results from gender inequality and discrimination. Therefore, there is need to develop interventions aimed at challenging inequalities and changing the underlying attitudes and behaviours that cause GBV.

In this regard, the State shall:

- i. Upscale and fast track implementation of policies and programmes aimed at economic empowerment of vulnerable groups, to reduce vulnerability to GBV. including women, girls, persons with disabilities, persons living with HIV/ AIDs and elderly persons
- ii. Strengthen community advocacy programmes aimed at addressing GBV prevention.
- iii. Promote the participation of men in all efforts towards GBV prevention, for example through the involvement of Councils of elders to eliminate FGM and early/forced marriage.
- iv. Promote elimination of discrimination and GBV against persons living with HIV, Persons with Disabilities and their caregivers.
- v. Strengthen alternative dispute resolution mechanisms to improve prevention and response to GBV without compromising the rights of GBV survivors.

3.6 Policy Objective 4: To improve sustainability of GBV Prevention and Response interventions

Resource mobilization

The implementation of this policy will require resources which must come from different sources. The resources required include human and financial resources. Identifying and obtaining both financial and non-financial resources is important in achieving the goals and objectives of this policy.

In this regard, the Government shall:

- i. Ensure sufficient budgetary allocation for coordination, capacity development, awareness creation evidence generation, monitoring and evaluation to achieve this policy's objectives.
- ii. Collaborate with non-state actors including the private sector, Faith Based Organizations and development partners to ensure that all GBV prevention and response programmes are adequately resourced.

CHAPTER 4

4. POLICY IMPLEMENTATION FRAMEWORK

4.1 Introduction

The Gender Based Violence policy implementation process will adopt a multi-sectoral and multi-stakeholder approach. The process shall be guided by the preventive and responsive objectives and strategies of this policy that will be undertaken by the three arms of Government. The stakeholders comprise state actors, non-state actors, development partners and citizens. The policy will be implemented within the framework of the Constitution and will be aligned to the Kenya Vision 2030 and the Medium Term Plans. It will be coordinated by the ministry responsible for gender which will oversee the development of a National Action Plan (NAP) to guide the implementation to be undertaken in five year phases.

Strategies for Effective Policy Implementation

Strategies

4.2 Policy Objective 1: To reduce GBV prevalence through enforcement of laws, policies

Issue	Strategy
Preventive Laws and policies	<ul style="list-style-type: none">·Gender mainstreaming across laws, policies and, programmes;·Enactment, amendment and implementation of laws and policies in line with the Constitution, international and regional human rights commitments·Implementation of Standards and guidelines for GBV prevention at public and private service delivery centres.

Harmful Social Cultural Practices and norms	<ul style="list-style-type: none"> ·Develop an advocacy and public awareness strategy for GBV ·Engage men and boys as allies, advocates, role models, champions and change agents in advocacy against GBV ·Provide alternative sources of income for female circumcisers
Enforcement	Capacity development of institutions and service providers responding to GBV across sectors including teachers, healthcare workers, Police, Chiefs, Magistrates and Judges
Curriculum development	Integrate GBV training as part of the training curricula for Police, medical doctors and schools.

4.3 Policy objective 2: To increase access to quality and comprehensive responsive and support services across all sectors

Issue	Strategy
Access to services:	· Capacity development of institutions and service providers responding to GBV across sectors.
	· Enhance legal aid services for GBV victims through collaboration with NALEAP, LSK and legal aid providing CSOs
	· Create awareness of existing services for increased uptake
	· Develop a national directory for GBV service providers
	· Develop a multi-sectoral and multi-stakeholder GBV referral mechanism
Quality Service:	· Develop standards and guidelines to regulate GBV response across sectors

4.4 Policy Objective 3: To enhance coordination, evidence based research and Monitoring and Evaluation for effective programming

Issue	Strategies
Coordination	<ul style="list-style-type: none"> · Establish a multi-stakeholder and multi-dimensional coordination framework for GBV interventions across all levels. · Establish partnerships among stakeholders along thematic areas of operation. · Establish referral infrastructure and linkages cutting across sectors working on GBV response · Establish a rapid response mechanism for GBV response especially in conflict situations or during periods of heightened insecurity
Data management and Monitoring & Evaluation	<ul style="list-style-type: none"> · Establish a comprehensive GBV monitoring and evaluation framework cutting across sectors at national and county level · Create a database of organizations working on GBV prevention and response
Research and development	<ul style="list-style-type: none"> · Undertake periodic studies, surveys and research to inform policies and programmes addressing GBV

4.5 Policy Objective 4: To enhance resource mobilization towards sustainable GBV response and prevention programmes

Issue	Strategies
Financial and Human Resource	<ul style="list-style-type: none"> · Ensure sufficient budgetary allocation by Government to implement this Policy. · Promote Gender Responsive Budgeting · Strengthen collaboration with Development Partners · Foster public private partnerships · Provide technical support to key government institutions charged with implementing the GBV policy, through the MDP
Sustainability	<ul style="list-style-type: none"> · Foster community participation. · Integrate GBV strategy into existing financing mechanisms. · Foster inter-agency cooperation in the delivery of GBV services.

4.6 Stakeholders involved in the policy implementation

Successful implementation of the GBV policy will be the responsibility of state and non state actors. The role of each stakeholder in the process is summarized in the implementation matrix and is briefly explained below.

4.7 Role of state actors in the implementation of the GBV policy

The Government will facilitate partnership building and inter-agency cooperation among all key stakeholders identified in this policy. This entails creating favorable legal and policy frameworks; maintenance of essential infrastructure for the operationalization of the policy and provision of adequate resources for the roll-out of the policy. Specific areas in which Government will provide support include: establishing the GBV infrastructure within key institutions such as the police and health facilities; cascading all activities and initiatives to the County level; fostering research and data gathering; training and capacity building. The following ministries, departments and agencies are of particular relevance to the GBV policy framework:

4.8 Role of stakeholders in the implementation of the policy

Actor	Role
Ministry responsible for Gender	<ul style="list-style-type: none">· Overall leadership and coordination in policy implementation, and resource mobilization, data aggregation and analysis.
National Gender and Equality Commission	<ul style="list-style-type: none">· Provide oversight on the implementation of the Policy by state and non state actors
Ministry responsible for Health:	<ul style="list-style-type: none">· Delivering GBV health related services at national and county level such as health financing, trauma counseling, treatment of victims/survivors, community health awareness. Effective participation in multi-sectoral referral infrastructure.· Providing continuous capacity building to staff on GBV health related services.· Relevant data collection

Ministry responsible for Security	<ul style="list-style-type: none"> · Overall provision of security to create an enabling environment for GBV prevention. · Investigation and arrest of potential and actual perpetrators of GBV. · Continuous training of the Police Service to handle gender based offences. · Relevant data collection
The Attorney General's Office	<ul style="list-style-type: none"> · Administration of justice for GBV victims/survivors · Ensuring a standardized and coordinated government approach on matters relating to GBV. · Streamlining the development and implementation of legislation. Particularly developing and reviewing legislation to strengthen and accommodate modern methods of evidence delivery.
Directorate of Public Prosecutions	<ul style="list-style-type: none"> · Investigation and prosecution of GBV cases · Relevant Data collection
Ministry responsible for Education:	<ul style="list-style-type: none"> · Formal education curriculum design and review towards prevention and awareness creation of GBV manifestation at primary, secondary and tertiary levels of education. · Ensure safety for all students from gender based violence in learning institutions. · Enlightening and sensitizing parents, community and stakeholders on the contributory factors of gender based violence and the need to for protection from gender based violence.
Judiciary:	<ul style="list-style-type: none"> · Develop Bail and Sentencing policies to assist in determining cases of GBV in a manner consistent with the law and constitution and ensure speedy determination of cases. · Increase and improve the institutional capacity of all courts to deal with gender based crimes. · Ensure that Magistrates and Judges are comprehensively trained on matters of gender based crimes. · Ensure full implementation of the Witness Protection Act in relation to gender based criminal cases. · Develop and constantly review rules relating to gender based crimes.

Ministry in charge of Labour:	<ul style="list-style-type: none"> · Ensure that employers and employees adhere to legal provisions on GBV. Adopt Codes of Conduct aimed at tackling GBV in the workplace and design appropriate GBV prevention and response mechanisms.
Defence	<ul style="list-style-type: none"> · Ensure compliance with national and international standards
Kenya Bureau of Statistics	<ul style="list-style-type: none"> · Data collection management and analysis
County Governments	<ul style="list-style-type: none"> · Establish facilities and infrastructure necessary for GBV responses at the County level · Collect and aggregate information on prevention, occurrence, responses related to GBV · Implementation of GBV programmes · Monitoring and review of GBV elimination programmes and delivery at the County level. · Coordinate the referral infrastructure for survivors/victims across the different sectors in the County. · Build the capacity of local administration to effectively speedily and appropriately handle cases of GBV. · Create public awareness on GBV and ensure that Chiefs and Assistant Chiefs register all cases of GBV in their areas.
Ministry responsible for Justice	<ul style="list-style-type: none"> · Expand access to justice for the vulnerable groups and victims: · Reform and expand legal aid services to provide effective and efficient services to vulnerable groups including victims of gender based crimes.

4.9 Role of Non state Actors in implementation of the GBV policy

Non state actors play a significant role in implementing initiatives towards elimination of Gender Based Violence. This policy recognizes the strengths of these actors in designing and implementing GBV programs as well as organizing and interacting with community groups.

The non state actors have also been a critical source of much needed human and financial resources that are critical in the implementation of this policy.

Actor	Role
Private sector	<ul style="list-style-type: none"> · Financing of GBV programmes. · Participation in data collection on GBV trends in the country. · Implementation of the GBV policy through adoption of Codes of Conduct aimed at tackling GBV in the workplace · Provision of GBV services and participation in the GBV referral infrastructure
Civil Society	<ul style="list-style-type: none"> · Provision of GBV services and participation in the GBV referral infrastructure. · Participation in data collection and analysis, including undertaking research and surveys. · Resource mobilization for GBV policy implementation. · Designing appropriate programmes and interventions. · Advocating for appropriate policies and legislation for prevention and response to GBV · Complimenting government's efforts in awareness creating and disseminating the policy provisions to the grassroots. · Developing strategies for multi-stakeholder interventions to mitigate the impact of GBV in this regard build the capacity of vulnerable and poor people to understand and fight GBV. · Providing rehabilitation for GBV victims in this regard, establishing safe havens for victims and setting up kitties to support GBV victims
Development Partners	<ul style="list-style-type: none"> · Financing of GBV policy. · Providing technical support to key state actors.
Individuals and Communities:	<ul style="list-style-type: none"> · Participation in awareness- raising campaigns · Participation in Alternative Dispute Resolution Systems (ADR) initiatives where appropriate. · Reporting incidences of GBV. · Discouraging harmful cultural practices. · Utilization of already existing services to address GBV.
Media	<ul style="list-style-type: none"> · Awareness creation on GBV · Policy dissemination · Gender responsive coverage of GBV interventions

4.10 Coordination Framework

This Policy recognizes the functional assignments between the two levels of Government at the National and County levels with regard to accountability, reporting and management lines, and further provides a structure that harnesses and synergizes GBV prevention and responses through involvement of different stakeholders. Collaboration and coordination of state and non-state actors is key for effective and efficient planning, optimum utilization of evidence in informing programming as well as in ensuring efficient utilization of resources and accountability.

The coordination of the implementation of this Policy document shall be guided by the Policy's objectives and already existing legal framework including the Bill of Rights under Chapter IV of the Constitution and all relevant international and regional conventions ratified by the Republic of Kenya.

The Ministry responsible for Gender shall spearhead the overall coordination of the implementation framework of the GBV policy, and shall work in close collaboration and consultation with all actors in ensuring effective GBV prevention, response and support for victims/survivors, their families and community at large.

The National Gender and Equality Commission will provide oversight on the implementation the policy by all actors.

The purpose of a comprehensive coordination structure is aimed at ensuring:

- Adequate and efficient utilization of public resources and mobilization of additional funds required for building and strengthening the infrastructure for GBV response across sectors;
- Timely uptake of response and support services by GBV victims/survivors and their families and ultimately, access to justice;
- Collection and collation of information on GBV prevalence and interventions towards GBV so as to inform policy and legal reforms as well as programming at national and county levels

In order to achieve the strategic objectives spelt out within this Policy, coordination will take place within and across various levels as follows:

4.10.1 Inter-Agency Steering Committee (IASC):

The Inter-Agency Steering Committee is at the highest level of National coordination at the political level. It provides National level strategic policy direction and mobilizes resources for GBV prevention and response. The Committee will meet on a bi-annual basis to monitor progress towards achievement of the National GBV Policy objectives as well as to share information on policy and legal decisions affecting GBV prevention and response.

The Committee shall be Chaired by: The Cabinet Secretary- Ministry of Devolution and Planning. Other members of this Committee will include:

- Cabinet Secretaries- Line Ministries; Health, Education, Science and Technology, Labour, Social Security and Services, Interior and Coordination of National Government, Defence and the National Treasury
- Chairperson, Kenya Women Parliamentarians Association;
- The Attorney General;
- The Director of Public Prosecutions;
- Commissioner, Kenya Prisons Service;
- Inspector General of Police;
- Chairperson, Taskforce on the Implementation of the Sexual Offences Act;
- Chairperson, Supreme Council of Kenyan Muslims;
- Chairperson, National Council of Churches in Kenya;
- Chairperson, Maendeleo ya Wanawake Organization;
- Relevant Development Partners

Linkages will be made with other key policy and political structures particularly Cabinet committees, Commission on the Implementation of the Constitution, Vision 2030 Secretariat, National Economic and Social Council for the purposes of maintaining political will and commitment to the GBV policy agenda.

4.10.2 National GBV Technical Committee:

The National GBV Technical Committee is responsible for technical advice and resource mobilization towards implementation of this Policy at the national level. The Committee will meet on a quarterly basis to review progress and share experiences across sectors on

implementation of this Policy. The deliberations of this Technical Committee shall be utilized to inform policy and legal reforms relevant for GBV prevention and response. The Committee shall report to the Inter-Agency Steering Committee on a bi-annual basis.

The Committee will be chaired by the Directorate of Gender as the national machinery mandated to coordinate GBV prevention and response initiatives.

Other members of this Committee include representation from Line Ministries: Health, Education, Science and Technology, Labour, Social Security and Services, Interior and Coordination of National Government, Defence and the National Treasury; the National Gender and Equality Commission and relevant Commissions; as well as representatives from the Taskforce on Implementation of the Sexual Offences Act; Anti-FGM Board; Teachers Service Commission; National Council for Children Services; National Council for Persons with Disabilities; Vision 2030 Secretariat; National Economic and Social Council; Kenya Medical Supplies Agency; Department of Standards and Regulations; the MTP Directorate; relevant research and training institutions; the Government Chemist, National Referral Health Facilities; relevant civil society and faith based organizations; relevant private sector organizations and interested development partners.

Effective GBV prevention and response requires a multi-faceted and multi-sectoral approach so as to adequately address GBV in its various forms. In this regard, the National GBV Technical Committee will comprise of specific 'thematic groups' that will focus on specific types of GBV. The thematic group chairs will then make submissions to the National GBV Technical Committee on a quarterly basis.

The thematic groups include:

- Thematic Group on Physical/Domestic and Sexual Violence: Co-chaired by Ministry of Health and Directorate of Gender
- Thematic Group on Harmful Cultural Practices: Co-chaired by Ministry of Sports, Culture and Arts and Directorate of Gender
- Thematic Group on Workplace Mainstreaming: Co-chaired by Ministry of Labor and Directorate of Gender

- Thematic Group on Humanitarian Response: Co-chaired by Ministry of Interior & Coordination and Directorate of Gender
- Thematic Group on GBV/HIV/SRH Integration: Co-chaired by National AIDS Control Council and Directorate of Gender

4.10.3 GBV Coordination Secretariat:

The GBV Coordination Secretariat provides overall support and guidance on day-to-day implementation of the GBV policy. The Secretariat shall also act as a link between national and county level coordination and implementation of the policy and shall channel information and decisions within and across the various structures within the Coordination Framework. The Ministry responsible for Gender shall work with key actors in mobilizing adequate resources for the Secretariat including ensuring that the technical and management capacities of the Secretariat are strengthened. The GBV Coordination Secretariat will be housed within the Ministry responsible for Gender.

4.10.4 County GBV Steering Committee:

The County GBV Steering Committee is at the highest level of County coordination at the political level. The Committee will be reflected in each of the 47 counties of Kenya and is responsible for providing county specific strategic policy direction, enacting relevant laws, policies and mobilizing resources for GBV prevention and response at the county level. The County GBV Steering Committee will meet on a bi-annual basis to monitor progress towards county-specific achievement of the National GBV Policy objectives. The Committee will also share information on policy and legal decisions affecting GBV prevention and response at the county level.

The Committee will be chaired by the County Woman Representative. Other Committee members include: Chairs of County GBV Committees, County Executive Members, Chairs of County Assembly Committees, Chairs of Maendeleo ya Wanawake Organization, relevant development partners and private sector actors.

4.10.5 County GBV Operational Committee:

The County GBV Operational Committee will be reflected in each of the 47 Counties of Kenya and is responsible for technical advice and resource mobilization towards implementation of this Policy at the County level. The Committee will meet on a quarterly basis to share experiences and best practices in dealing with GBV across sectors within the County. The

results from this Committee shall be utilized to inform policy and legal reforms relevant for GBV prevention and response at the County level. The Committee will report to the Inter-Agency Steering Committee on a bi-annual basis.

The Committee will be chaired by the County Commissioners. Other members of the committee include: Line Ministry representatives as well as representation from County Health Facilities; the National Police Service; the Judiciary; Chairperson- Court User Committees; County Health Records Information Officers; Youth and Gender Officers; Social Development Officers; civil society and faith based organizations; Chairperson of Community GBV Committee; interested development partners and relevant private sector actors.

4.10.6 Community GBV Committee:

The Community GBV Committee will be reflected in each of the 47 Counties of Kenya and is responsible for providing information on achievements and challenges faced during community prevention and response mechanisms to GBV at the county level. The Committee also acts as the community watchdog for prevention and response.

The Committee will be co-chaired by: Chairperson of Community Policing at the County level. Other members of this committee will include representation from: Community Health Facilities and Workers; Council of Elders; Religious Leaders; Social Workers; Paralegals; Case Managers; Community Policing Teams, Community Based Organizations and interested development partners.

Figure 1: KENYA GBV PREVENTION AND RESPONSE COORDINATION STRUCTURE

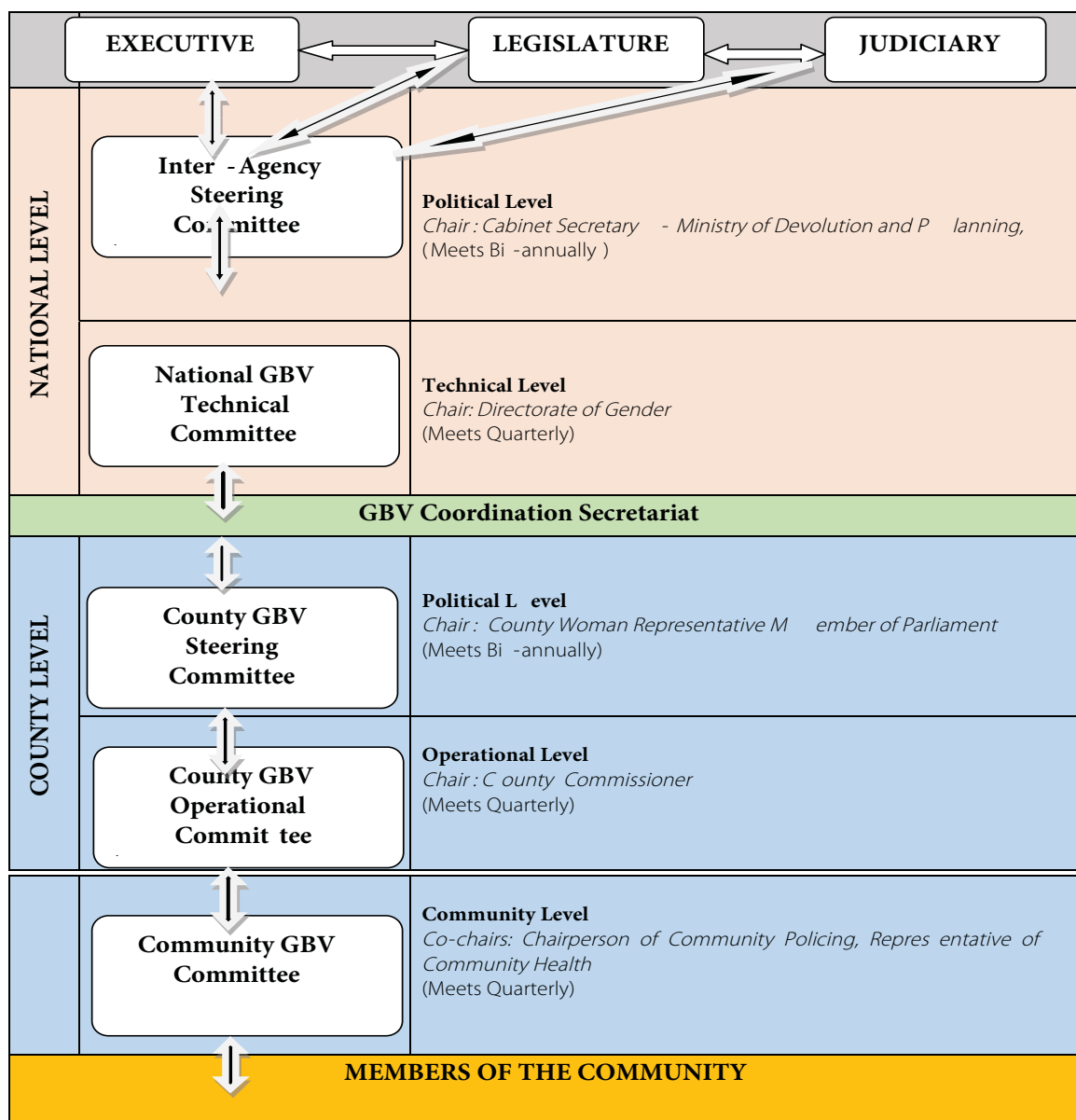


Figure 2: KENYA GBV PREVENTION AND RESPONSE COORDINATION STRUCTURE

		EXECUTIVE	LEGISLATURE	JUDICIARY
NATIONAL LEVEL	POLITICAL LEVEL		Inter -Agency Steering Committee <i>Chair : Cabinet Secretary - Ministry of Devolution and Planning</i>	Members: Cabinet Secretaries - Line Ministries ; Chair person , Kenya Women Parliamentarian Association ; Director of Public Prosecutions; Commissioner of Prisons;; Inspector General of Police, Chairperson , Supreme Council of Kenyan Muslims ; Chairperson , National Council of Churches in Kenya ; Chairperson -; Maende leo ya Wanawake Organization ; relevant Development Partners
	TECHNICAL LEVEL		National GBV Technical Committee <i>Directorate of Gender</i> <u>Thematic Groups :</u> TG- Physical/Domestic and Sexual Violence: <i>Co-chairs: Ministry of Health and Directorate of Gender</i> TG- Harmful Cultural Practices: <i>Co-chairs: Ministry of Sports, Culture & Arts and Directorate of Gender</i> TG- Workplace Mainstreaming: <i>Co-chairs: by Ministry of labor and Directorate of Gender</i> TG- Humanitarian Response: <i>Co-chairs: Ministry of Interior & Coordination and</i>	Members: Line Ministries: Health, Education, Science and Technology, Labour, Social Security and Services , Interior and Coordination of National Government, Defence and the National Treasury; the National Gender and Equality Commission and relevant Commissions; representatives from the Taskforce on Implementation of the Sexual Offences Act; Anti -FGM Board; Teachers Service Commission; National Council for Children Services; National Council for Persons with Disabilities; Vision 2030 Secretariat; National Economic and Social Council; Kenya Medical Supplies Agency; Department of Standards and Regulations; the M TP Directorate; relevant research and training institutions; the Government Chemist, National Referral Health Facilities; relevant civil society and faith based organizations; relevant private sector organizations and interested development partners
			<i>Directorate of Gender</i> TG- GBV/HIV/SRH Integration: <i>Co-chairs: National AIDS Control Council and Directorate of Gender</i>	

GBV Coordination Secretariat			
Located within the Ministry of Devolution and Planning			
COUNTY LEVEL	POLITICAL LEVEL	County GBV Steering Committee <i>Chairs: County Woman Representative Member of Parliament</i>	Members: Chairs of County GBV Committees, County Executive Members, Chairs of County Assembly Committees, Relevant Development Partners and Relevant Private Sector
	OPERATIONAL LEVEL	County GBV Operational Committee <i>Chair: County Commissioner</i>	Members: Line Ministry representatives as well as representation from County Health Facilities; the National Police Service; the Judiciary; Chairperson - Court User Committees; County Health Records Information Officers; Youth Officers; Social Development Officers; civil society and faith based organizations; Chairperson of Community GBV Committee; interested development partners and relevant private sector actors.
	COMMUNITY LEVEL	Community GBV Committee <i>Co-chairs: Chairperson of Community Policing, Representative of Community Health, Head of Chiefs at the County level</i>	Members: include representation from: Community Health Facilities and Workers; Council of Elders; faith -based Leaders; Social Workers; Paralegals; Case Managers; Community Policing Teams, Community Based Organizations and interested development partners.
MEMBERS OF THE COMMUNITY			

4.11 Monitoring and Evaluation

A Monitoring and Evaluation framework will be developed to accompany this GBV Policy document so as to facilitate effective routine managerial and coordination control, strategic assessment of outcomes and impact, and provide the material from which lessons can be learned and policy analysis developed. The monitoring framework for the Policy will outline information requirements, data collection methods, and analytical frameworks and will include plans for ongoing monitoring activities to inform the future direction of the policy.

The framework will also outline and clarify the indicators for the policy objectives and outputs. The evaluation plan will include key regular evaluation activities, including the outputs to objectives and sequential policy progress reviews. It will also identify and allocate resources for specially-commissioned impact assessment, case studies and specialist technical evaluations.

Monitoring: Monitoring will be conducted at various levels within each implementing agency to facilitate management and control of GBV interventions. At the strategic level,

monitoring will inform the necessary reforms as well as the next phase of programme development and management. The Ministry of Devolution and Planning through the Directorate of Gender will develop a Monitoring and Evaluation Framework to guide the process.

At the Operational level: At the operational level implementing agencies will be required to provide appropriate, timely and sufficient information about the activities carried out under each output, and which information will serve several purposes: as a management tool, as a databank to inform decisions at the operational level; to keep stakeholders informed and to underpin strategic –level monitoring.

At the Strategic Level: Strategic level monitoring will be the responsibility of the ministry responsible for gender and will also facilitate the information dissemination and knowledge management role. The Ministry will carry out the following strategic monitoring activities:

- Establish baseline information which can be used as a starting point for all the GBV policy activities, both as a tool to facilitate targeting and as fixed point from which trends in agreed key indicators for outputs can be tracked;
- Systematically collect a range of data at fixed intervals to document changes in the target population and attribute these to the laid down activities (where appropriate);
- Undertake special analyses as necessary to explore changes in particular agreed key indicators;
- Disseminate and publish monitoring information in appropriate formats to all relevant stakeholders to facilitate lesson learning and contribute to dialogue and the future design of the policy framework.

Evaluation: The evaluation will seek to attain the achievement of outputs and impact at the objectives level and confirm that Programme activities have been carried out effectively and to appropriate quality standards. This will consist of:

- Evaluation of progress towards key milestones which will be carried out by both state and non-state actors coordinated by the ministry responsible for gender.
- Multi stakeholders forums which will take place sequentially to review outputs and progress achieved as indicated in the National Action Plan which will capture emerging issues essential for continuous strengthening of the policy.

The monitoring and evaluation framework will be completed by a National GBV Implementation Framework and Plan of Action for this Policy.

4.12 Resourcing Plan

The successful implementation of this Policy is predicated upon the availability of sufficient financial and human resources. The Government will integrate gender perspectives in all its budgetary decisions and policies and programs in order to engender the budgetary process. The Government will allocate resources for implementation of the National GBV Policy. Development partners, the private sector and civil society organizations will also be approached to complement Government efforts to combat GBV.

