



Homa Bay County Sexual and Gender Based Violence Policy

Department of Gender Equality and Inclusivity,
Youth, Sports Talent Development, Culture Heritage
and Social Services

SGBV
Policy

2023

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Forward

The Homa Bay County Government has made significant steps in the elimination of Sexual and Gender Based Violence through development of a policy framework that will comprehensively promote, prevent, protect, and co-ordinate the myriad phases of Sexual and Gender Based Violence. The policy addresses issues affecting Gender and Violence with regards to social, political, and economic forms of violence against boys, girls, women and men by ventilating on the mechanisms of addressing them.

The policy framework developed is coherent with the International, National legislative policy instruments to which Kenya is a signatory as provided in the Constitution 2010 under Article 2(6). The policy seeks to protect women, men, girls and boys against Sexual and Gender Based Violence.

The policy should reinforce legislative framework already in force alongside other legislations. The County of Homa Bay seeks to develop and support all programs and projects aimed at empowering the survivors of SGBV in the County. Gender-Based Violence not only violates human rights but also hampers productivity, reduces human capital and undermines economic growth within the County.

The policy framework will strengthen mechanisms and strategies that enhance accountability, co-ordination, monitoring and evaluation for sustainable Sexual and Gender Based Violence programs and projects while enhancing partnerships for a comprehensive response to increasing incidences of SGBV in the County.

The policy framework envisages a long term and sustained transformational change in the management of Sexual and Gender Based Violence cases in the County. This calls for adequate resource allocation by the County government to enhance partnerships with other stakeholders while also enhancing commitments by both state and non- state actors.



HON. SARAH MALIT
County Executive Committee Member
Gender, Youth, Sports Talent Development, Culture Heritage & Social Services.

Acknowledgement

The County Sexual and Gender Based Violence policy 2023 on Prevention, Response and Co-ordination of SGBV programs and projects has been prepared through a participatory process involving the County SGBV Technical Working Group that is composed of representatives of State and Non-State Actors in Homa Bay County. Inputs were made by all involved partners.

The team that developed this policy framework made great effort and commitment. The County particularly recognizes the staff of the Department of Gender Equality and Inclusivity, Youth, Sports, Talent Development, Culture Heritage and Social Services and Department of Health Services for their valuable commitment and input under the noble leadership of their County Executive Committee Members Hon. Sarah Malit and Hon. Roseline Omollo.

The production of this policy would not have been possible without the financial support of the County Government led by Her Excellency Governor Gladys Wanga, Office of Women Representative, Kenya Legal and Ethical Issues Network (KELIN), Family Health Options Kenya (FHOK), PATH-Kenya, LVCT, Practical Action, CATAG, NAYA Kenya, PLAN International, AMREF, GVRN Nairobi, Red Cross, Homa Bay County Disability Forum and CSO Network.

It is also worth noting that specific individuals/ institution played a key role in the SGBV Technical Working Group. This includes: Hon. Roseline Omollo (CEC, Health), Dr. Kevin Osuri (Chief Officer, Health), Dr. Gordon Okomo (Director Health Services), Mr. Michael Ochola (GBV Coordinator Homa Bay County, Ministry of Health), Department of Gender inclusivity, Youth, Sports, Culture Heritage and social services. Department of Education, PALAWAMA, WA-WA Kenya, Break through Action, State department of Gender Affairs and CATAG.

In a special way, we want to appreciate the effort of the County Assembly of Homa Bay County led by the committee in charge of Gender inclusivity, Sports, Youth, Culture in heritage and Social Services for their endless effort towards its legislative input in this document.

We also wish to acknowledge the Valuable input of the Policy Technical Development Team of Consultants led by Mr. Joel Okumu (Principal Consultant) and Dr. David Ambogo.

It is my conviction that based on this policy, the Department will be able to prevent and respond effectively to cases of SGBV within the County and in so doing create a secure environment for all the residents of the County. To those not mentioned here but contributed in one way or the other to the production of this policy we salute you.



MR. NYIERO OTIENO ELLY
Chief Officer
Department Of Gender, Youth, Sports Talent
Development, Culture Heritage & Social Services.

Executive Summary

Sexual and Gender Based Violence is a human rights violation with long term physical and psychological consequences on the victims as perpetrators most times go without conviction if the evidences collected are not corroborated to provide judicial processes with link to the perpetrators to the offence committed. It also affects the survivor's mental well-being due to stigmatization and the general discrimination they experience in the community. The impact of such violence extends far beyond the individual survivors, affecting households and communities, and spanning across generations. SGBV is widely recognized as a development constraint with reference to the World Bank report (2019).

According to the Kenya Demographic Health Survey (KDHS 2022), 54% of women aged 15-49 have ever experienced physical violence, while 23% have ever experienced Sexual Violence. The survey also revealed Homa Bay County was the leading county in Nyanza region in the prevalence of sexual violence.

The Kenyan government has put in various measures including legal mechanisms to address the myriad cases of SGBV. Homa Bay County through the Department of Gender Equality and Inclusivity, Youth, Sports Talent Development, Culture Heritage and Social Services and Health Services Department in consonance with partners in a Multi Sectorial Framework of SGBV Technical Working Group is also responding to the same challenges.

The main goal of this policy is to ultimately eliminate SGBV cases in Homa Bay County through a Multi sectorial framework in interventions and programming.

The policy has highlighted several strategies that will comprehensively promote prevention, protection and coordinated response towards the elimination of SGBV in the County. The departmental commitment through the policy framework of allocating a sixth of the County departmental budget towards combating SGBV is a significant bold commitment in the realization of the policy goal.

The policy envisages a participatory monitoring and evaluation in programs and projects aimed at enhancing the goal of the elimination of SGBV in the County. The involvement of the Community in every SGBV projects and programs will enhance reintegration of the survivors and perpetrators for family continuity and development.

Acronyms and abbreviations

AGYW	Adolescent girls and young women	MSA	Multi-Sectorial Approach
AYP	Adolescent and young people	MOE	Ministry of Education
AU	African Union	MNCH	Maternal Neonatal Child Health
CBOs	Community Based Organizations	MTP	Medium Term Plan
CEDAW	Convention on the Elimination of all of Discrimination Against Women	MIS	Management Information System
CHV	Community Health Volunteers	NCRC	National Crime Research Centre
CIDP	County Integrated Development Program	NCPWD	National Council for Persons with Disabilities
CSR	Corporate Social Responsibility	NGAAF	National Government Affirmative Action Fun
CSO	Civil Society Organization	NPS	National Police Service
CPVs	Child Protection Volunteers	ODPP	Office of Director of Public Prosecution
DNA	Deoxyribonucleic Acid	OHCHR	Office of the United Nations High Commissioner for Human Rights
DPP	Department of public prosecution	OPD	Organization of persons with Disability
DPO	Data protection officer	PWDs	Persons with Disabilities
ECD	Early childhood Development	PADV	Protection Against Domestic Violence
IDPs	Internally Displaced Persons	PRC	Post Rape Care
FGM/C	Female Genital Mutilation/Cutting	SRHR	Sexual Reproductive Health Rights
SGBV	Gender Based Violence	SDG	Sustainable Development Goals
GTWG	Gender Technical Working Group	SOP	Standard Operation Procedures
GVRC	Gender Violence Recovery Centre	TB	Tuberculosis
SGBVRC	Gender Based Violence Recovery Centre	TWG	Technical Working Group
HIV	Human Immunodeficiency Virus	USAID	United States Agency for international Development
HIMS	Health information management system	WEF	Women Enterprise Fund
HIS	Health Information Survey	UHC	Universal Health Care
SGBV	Sexual and Gender Based Violence	UNHCR	United Nations High Commission for Refugees.
SOP	Standard Operation Procedures	UN	United Nations
IPV	Intimate Partner Violence	KVACS	Kenya Violence Against Children Survey
KDHS	Kenya Demographic Health Survey	WHO	World Health Organization
KEPHIA	Kenya Population Based HIV Impact Assessment	YEDF	Youth Enterprise Development Fund
KELIN	Kenya Legal and Ethical Issues Network		
M&E	Monitoring and Evaluation		

Definitions of terms

Child	Individual who has not attained the age of eighteen (18) years as per the Kenya Constitution 2010 and the Children's Act 2008.
Adolescent	An individual aged between 10-19 years as defined under National Adolescent Sexual and Reproductive Health policy 2015.
Child marriage	Marriage of a girl or boy before the age of 18 and refers to both formal and informal unions in which children live as if they were married.
Inhuman treatment	A cruel act; a deliberate infliction of pain and suffering, cruelty, abuse, ill treatment, maltreatment as defined by the UNHCR Convention by General Assembly resolution of 1984.
Harmful Practices	All behavior, attitude and/or practices which negatively affect fundamental rights of people- health, dignity, education, and physical integrity as defined by CEDAW Convention 1979 and ratified by 1995.
Multi-sectorial Approach	A holistic inter-organizational and inter-agency effort that promote participation of people of concern.it involves cooperation, collaboration and coordination across key sectors including but not limited to health, community, security, legal justice and psychosocial systems.
Sexual and Gender Based Violence	Actual, attempted or threatened (vaginal, oral or anal) it includes defilement, rape, marital rape, sexual exploitation, child marriage, forced prostitution, transactional/ survival sex and sexual harassment, intimidation and humiliation.
Safe House	A residential facility providing short term intervention for survivors of SGBV in crisis. The intervention includes meeting basic needs as well as providing support, counseling and skills development.
Survivor/victim	An individual who suffers injury, loss or damage as a consequence of an offence; it is also defined under Section 2 of the Victims Protection Act.
Policy	Statement of intent with a set of principles to guide decision making.
Society	A group of people living together in a community.
Marriage	A union of two adults as partners with an intention of siring and rising of children.
Culture	The ideas, customs and social behavior of a particular people or society.
Widow	A woman in marriage whose husband has died.
Custom	A traditional way of behaving or doing something that is specific to a particular society.
Human Trafficking	According to the OHCHR, Human trafficking generally refers to the process through which individuals are placed or maintained in an exploitative situation for economic gain, e.g. for labor, exploitative sex or forced marriage.
Intimate partner	An individual one is indulged with sexually or was in a sexual relationship.

CHAPTER 1

1.0. Introduction

Gender based violence is a globally prevalent phenomenon with health and dire human rights violations and implications. It knows no social, economic, class or cultural confinement. It occurs in families, schools, workplaces, social structures, and communities across the world. Sexual and Gender based violence (SGBV) is the most devastating form of gender inequality. More than one third of the women in the world have experienced some form of gender-based violence. The impacts of such violence extend far beyond the individual survivors, affecting households and communities, and spanning across generations. Sexual and Gender based Violence is widely recognized as a development constraint as revealed by the World Bank report (2013-2018). World Health report on violence and health discloses that Women and girls, and to a lower degree men and boys, directly experience the impact of some form of gender-based violence. The Report further reveals that women are disproportionately affected by SGBV, and this is evident by the fact that violence initiated by wives was only a fraction of the level of violence initiated by husbands.

According to the World Health Organization (WHO), 35% of women worldwide have experienced either physical and/or sexual intimate partner violence or non-partner sexual violence. The effects of violence experienced by women, such as intimate partner violence (IPV), are felt at the individual, family, and community levels. Consequences of violence include increased risk for suicide, alcohol abuse, as well as negative impacts on human development outcomes. The unequal system of patriarchy governs various

aspects of Kenyan society. SGBV is commonly an act of patriarchy. It is perpetrated by persons who wish to exercise power and control over their survivors. These perpetrators can be anyone, from family members, intimate partners, acquaintances, strangers or institutions (Pypers, E. 2020).

Government of Kenya is committed towards eliminating gender inequalities. The Constitution 2010 is a progressive document which has made it possible for development of policy and legislative frameworks on comprehensive prevention, protection, response, and management of SGBV. The Constitution promotes equality for all persons while prohibiting all forms of discrimination and calls for protection of all persons by the respective agencies.

Commitment to addressing SGBV has accelerated faster in policy documents than in implementation of the said policy to the grass root levels of society. Further to this, there is a complete disconnect between the envisioned legislation, the experiences of the survivors and implementation through practical operations of the laws within different sectors. The devotion to fight all forms of SGBV calls for enhanced multi-sectorial and well-coordinated approach within relevant structures and agencies. It is on the same premise that the County government of Homa Bay through the department of Gender and Social Services and SGBV Technical Working Group has initiated a guiding framework aimed at eradicating SGBV in the County through a Multi-Sectorial Approach in intervention and programming.

1.1. Rationale

Sexual and Gender Based Violence Policy is a grave human rights violation that causes long-term and life-threatening harm to victims. It affects all aspects of a person's protection and well-being. It includes physical, sexual, and psychological violence perpetrated or condoned within the family, the general community or by the State and its institutions. National data reveals SGBV is prevalent in Kenya with variations across counties and cultures. Women and girls are disproportionately affected by SGBV; however, men and boys also experience SGBV. There is alarming evidence that orphans, school going children, Persons with Disabilities, the elderly, and persons in humanitarian crisis situations are most vulnerable to SGBV. The high prevalence of SGBV in Kenya and its negative impact on the society necessitates the development of a comprehensive policy framework to ensure effective prevention of response to and management of SGBV. SGBV in its various manifestations detrimentally affects individuals, their families and the entire community.

Sexual and Gender Based Violence violates the fundamental right to life, liberty, security, dignity, non-discrimination, and physical and mental integrity, and is therefore a direct breach of the Constitution of Kenya. At the individual level Sexual and Gender Based Violence results in pain and psychological trauma. At the social level SGBV often results into breakdown of the family unit. Economically, SGBV results in an economic burden on the government in terms of increased spending on health care, social services, and the civil and criminal justice system, absenteeism from work, and low productivity and output. SGBV creates an unequal political environment in which all those affected are denied the opportunity to participate in decision making for development.

There are many efforts by state and non-state actors working on prevention and response SGBV in Kenya. However, in Homa Bay County there is need for a well-coordinated framework that strengthens the Multispectral Approach in handling SGBV; this is needed in order to provide an overall guiding framework for the effective management of SGBV interventions. A policy framework would help demystify misconceptions around SGBV and aid in effective SGBV prevention and response. In addition, there is limited information to victims, who experience violence on where to seek support.

Furthermore, there is also lack of standardized data management tools, systems and a monitoring and evaluation framework for SGBV intervention. The SGBV policy will facilitate the development of a well-coordinated comprehensive Monitoring & Evaluation framework. SGBV prevention and response interventions require significant human and financial resources. This policy will provide an enabling environment for adequate resource allocation from the County government and partners.

1.2. Goals

The goal of the policy is to ultimately eliminate SGBV cases in Homa-Bay County through a multi-sectorial approach in interventions and programming.

1.3. Purpose

To involve all the state and non-state actors in the implementation of laws and policies that strengthens programs for prevention and management of SGBV in Homa Bay County

1.4. Vision

A county free from all forms of SGBV and upholds equal human rights and dignity for all.

1.5. Policy Objectives

1.5.1. Overall Objective:

The overall objective of the policy is to eliminate SGBV incidences through a multi-sectorial approach that will comprehensively promote prevention, protection and coordinated response to enhance access to justice and well-being for survivors/victims and perpetrators in the County.

1.5.2. Specific Objectives

- To Develop programs and initiatives that promote preventive measures to address SGBV in Homa Bay county
- To Promote protective measures to ensure
- Safety of SGBV survivors in Homa Bay County

- To establish a timely response to cases of SGBV with appropriate interventions by relevant actors in Homa Bay County
- To develop coordinated accountability measures that will enhance the efficient and effective delivery of SGBV interventions in Homa Bay County.

1.6. Guiding policy principles

National policy against gender-based violence 2014 and Sessional Paper No.2 of 2019 on National Policy on Gender and Development

Kenya recognizes SGBV as a damning violation of human rights. It takes cognizant of the fact that women and girls suffer disproportionately against SGBV. Kenya is committed to ensure promotion of gender equality and empowerment of women. The government is bestowed with the powers to prevent and provide timely response to all forms of gender-based violence in society in a harmonized and well-coordinated approach.

Consideration of harmful traditional practice

Gender based violence is manifested because of misunderstanding and misguided toxic cultural values and norms in the society. State and non-state agencies need to work in harmony in fighting these negative attitudes on gender, traditions, and in human practices to eliminate the culture of silence on SGBV. On the other hand, positive traditional values that promote non-discrimination, respect and protection of victims can be embraced to foster an intolerant society to SGBV.

Laws and policies against SGBV and which promote human rights and development

The legislative frameworks consist of laws that regulate roles and responsibilities of persons in the society. The law provides a set of rules and guidelines that oblige or prohibit certain types of behavior. Policies lay down government commitment and priorities, providing the framework for realizing these goals. Laws and policies must therefore work towards the attainment of development goals, advance human rights, creating a just and equitable society.

Male Involvement

Data reveal that women and girls comprise most of the survivors of SGBV worldwide. This is reflected nationally and in Homa Bay County. However, men and boys are also affected by SGBV both as survivors, and perpetrators. Therefore, while SGBV is often viewed as negatively impacting the feminine gender, long-term solutions to prevent and respond to SGBV must include the participation of men and boys. Strategies to prevent and respond to SGBV should therefore include dialogue between men and women, boys and girls with an aim of changing the cultural, social, economic and other structures and systems that deny realization of human rights and equality between women and men, boys and girls.

Responsibility of National and County Government, communities, and Individuals

Elected, nominated, and appointed leaders have a crucial role in preventing SGBV and in providing support to survivors. Moreover, communities and individuals must recognize their responsibility: to report SGBV cases, support survivors hence demonstrate to perpetrators that SGBV will not be tolerated in the community.

1.7. Approaches adopted to policy implementation

- Human rights-based approaches
- Gender responsive approaches
- Survivors centered approach: Emphasis on the survivor centered
- Integrative and collaborative approach
- Evidence based
- Public participation approach
- Economic empowerment approach
- Accountability and social mobilization.

CHAPTER 2 SITUATION ANALYSIS

1.1. Introduction

Sexual and Gender Based Violence (SGBV) is the most under-reported form of violence World over, with very limited data collected. From the limited data obtained from various sources, women and girls are mostly affected by this form of violence unlike men and boys.

Sexual and Gender-based violence (SGBV) is a particularly disturbing phenomenon which exists in all regions of the world. Homa Bay County being one of the Counties in Kenya is not left out. In 1993, the UN Declaration on the Elimination of Violence against Women offered the first official definition of gender-based violence as any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivations of liberty, whether occurring in public or in private life.

The impact of SGBV is devastating. The individual women and girls who are the majority survivors of such violence often experience life-long emotional distress, mental health problems and poor reproductive health, as well as being at higher risk of acquiring HIV and intensive long-term users of health services. In addition, the cost to women, their children, families, and communities is a significant obstacle to reducing poverty, achieving gender equality, and ensuring a peaceful transition for post-conflict societies. This, in conjunction with the mental and physical health implications of gender-based violence, impacts on a state or region's ability to develop and construct a stable, productive society, or reconstruct a country in the wake of conflict.

Kenya government like the rest of the World has put in various measures including legal mechanisms to address the myriad cases of SGBV. Homa Bay County is also responding to the same challenges posed by SGBV through a policy framework with various sourced data painting a grim picture and a drastic rise in the cases of defilements (85.3%) among other forms of SGBV reported.

Effective protection can be established only by preventing SGBV, identifying risks and responding

to survivors, using a coordinated, multi-sectoral approach. The present protection environment in Kenya is fraught with challenges and filled with opportunities, which should be carefully considered when devising responses. Whereas the Kenyan legal framework provides a mechanism for addressing SGBV, the levels to which the frameworks respond to the plight of the survivors of SGBV is debatable. The legal and policy framework mostly focuses on bringing of the accused person to 'justice' without a corresponding obligation of alleviating the conditions of the survivor of SGBV. In fact, the survivor of SGBV is more of an alien to the criminal justice system because the offence is perceived by the system to have been committed against the state, not against the survivor of the SGBV as an individual. The Homa Bay County policy framework proposes to adopt a robust and comprehensive referral mechanism that will be integrative and collaborative by ensuring that the survivor and perpetrator rights are properly entrenched in the community set up for purposes of rehabilitation and restoration.

2.1. Forms and Prevalence of Sexual and Gender-Based Violence in Kenya

2.1.1. Prevalence of Sexual and Gender Based Violence

In Kenya, SGBV manifests in various forms. The nature and extent of specific forms of SGBV vary across the different socio-economic and cultural background. The most reported forms of violence include sexual exploitation and abuse; forced prostitution; domestic violence; human trafficking; forced or child marriage; and harmful traditional practices such as female genital mutilation, honor killings, widow inheritance, among others. The violence registered by the survey could be linked to certain cultural beliefs and traditions, post-

Election violence as well as socio-economic status of the vulnerable groups. There is glaring evidence from the National Crimes Research Centre NCRC (2020) that Homa Bay County statistics is above the national threshold of SGBV violations in the Country.

Comparative data for Homabay County against the National statistics.

Data from the National Crime Research Centre 2020 (NCRC) shows that cases of Sexual and Gender Based Violence in Homa Bay County are way above the National statistics.

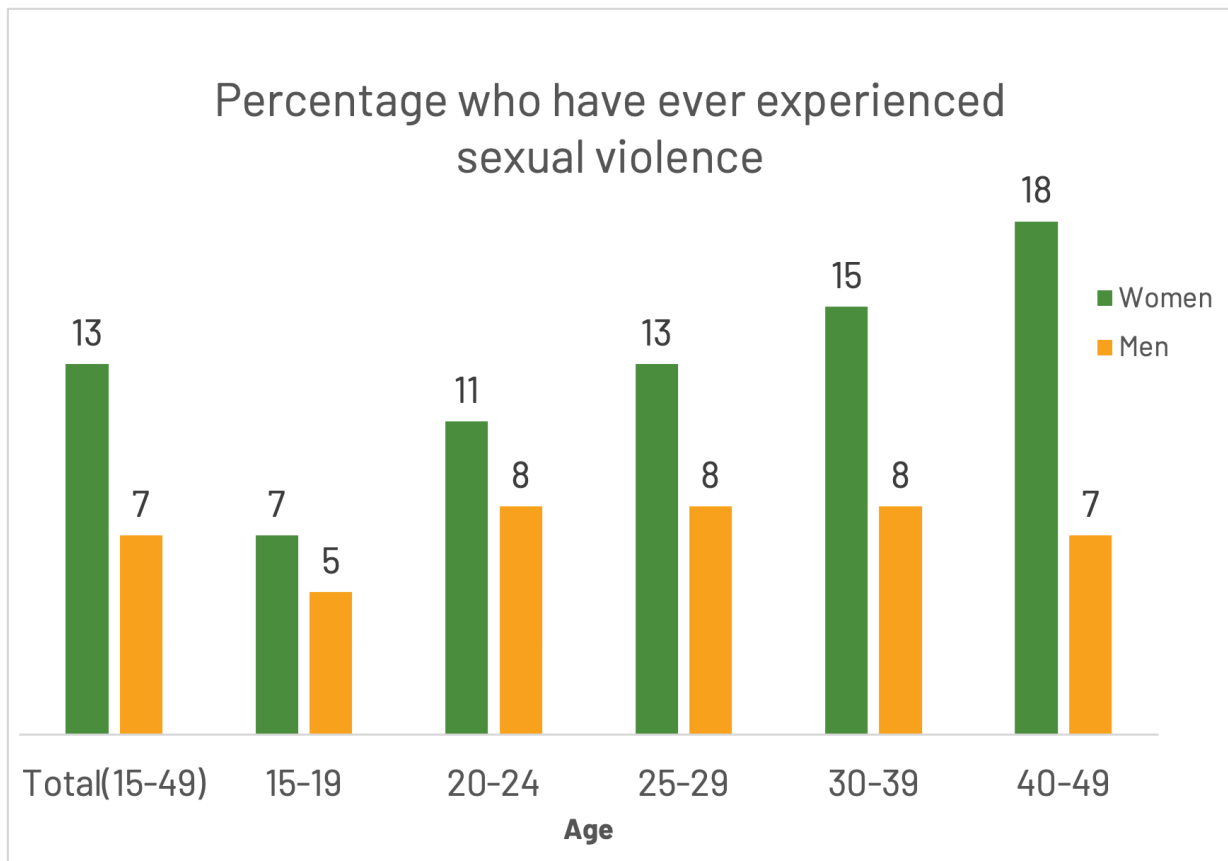
Crime	County%	National %
Rape	38.6	12.9
Assault	54.5	15.7
Defilement	30.1	7.1
Child abuse (other than sexual)	7.1	4.3
Domestic violence	16	9.2

Source: NCRC 2020.

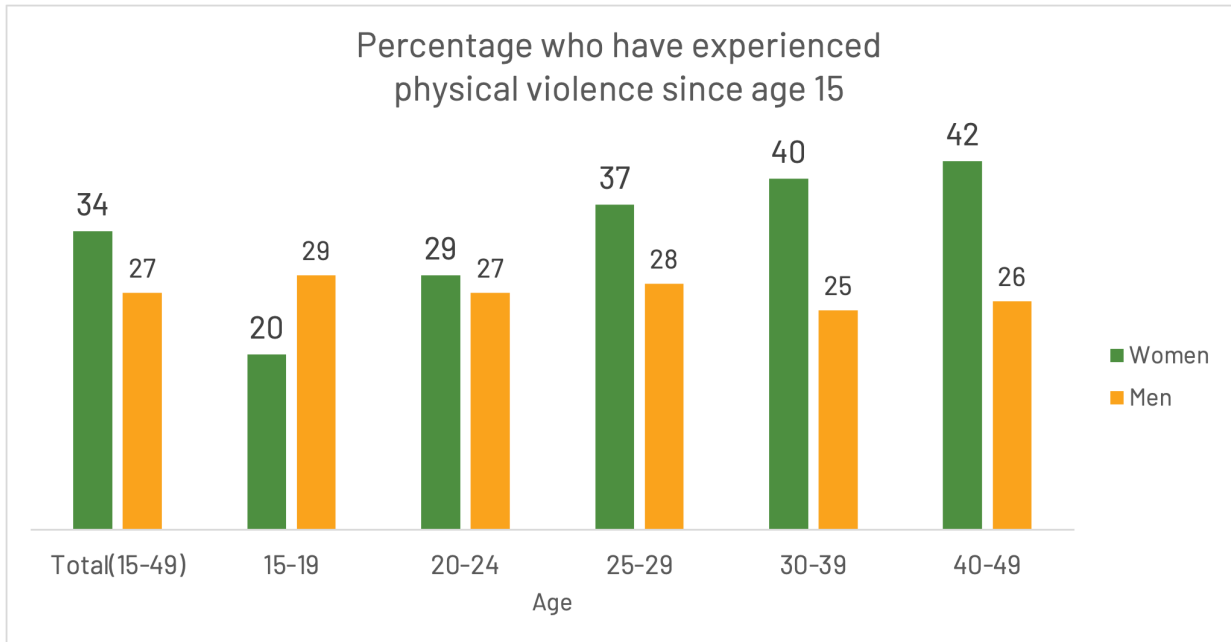
Homa Bay County sexual and gender based violence outlook compared to the National statistics from NCRC

Experience of sexual violence in Kenya:

Percentage who has experienced sexual violence aged 15-49, Kenya 2022.



Source: KDHS 2022

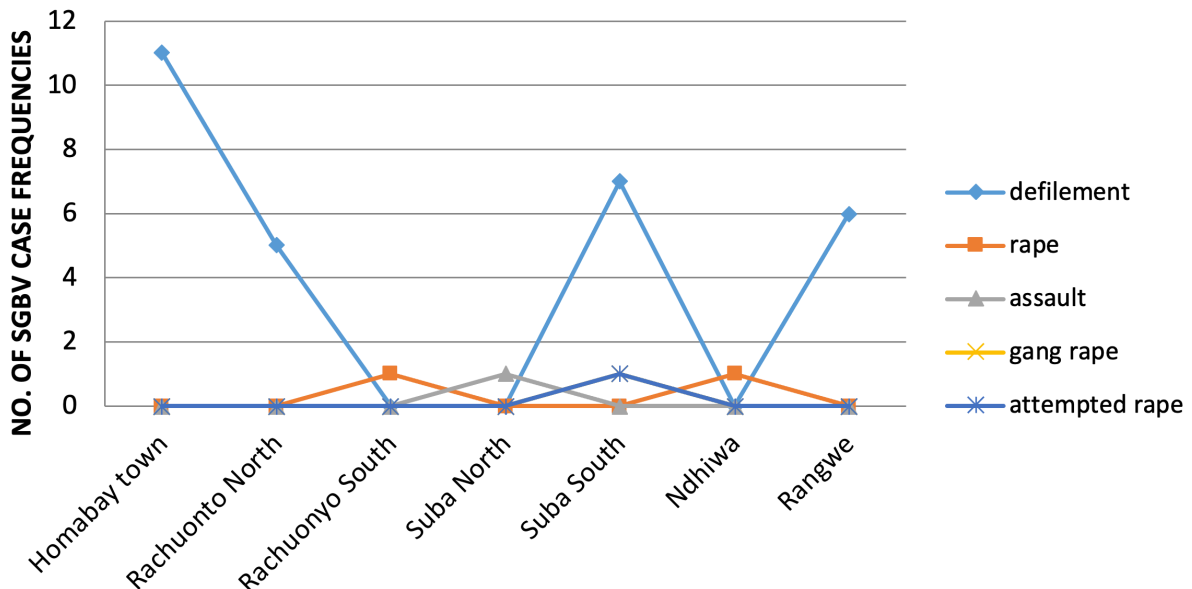


Source: KDHS 2014

Homabay County SGBV prevalence frequency data

Monthly prevalence cases of SGBV data from the Police Gender Desk shows that cases of defilement is leading (85.3%) followed by rape cases at 5% a clear manifestation of high teen pregnancies in the County in similar period as a resultant effect.

Forms of SGBV in Homabay County



policy seeks to address. A situational analysis report from KELIN 2019 has provided evidence from the grassroots on the link between gender-based violence (SGBV), teenage pregnancies and the high HIV prevalence among adolescents and young women aged 15-24 years within Homa Bay County.

2.1.2. Forms of SGBV in Kenya

2.1.2.1. Sexual violence

Sexual violence is a serious public health and human rights concern in Kenya. It affects men and women, boys and girls and has adverse physical and Psycho-social consequences on the survivor. It is the leading form of SGBV in the country, and different reports indicate increasing incidence. The number of persons reported to the police as having committed crimes against morality increased by 11.3% from 7233 in 2018 to 8051 in 2019. Defilement, which accounted for 76.4% of all crimes against morality increased by 13.2% from 4767 in 2018 to 5397 in 2019. In the same period, those reported to have committed rape increased by 3.1% from 921 to 950. Persons reported having committed assault increased by 1.3% to 16304 in 2019, with males accounting for 75.7% of the total cases of assault.

Results from KDHS 2022 also indicate that The percentage of women who have experienced sexual violence increases with age, from 7% among those age 15–19 to 18% among those age 40–49. By county, the percentages of women who have experienced sexual violence are highest in Bungoma (30%), Murang'a (24%), Homa Bay (23%), and Embu (22%). The Kenya Violence against Children Survey (KVACS) 2010 shows that violence against children is a serious problem in Kenya. Levels of violence prior to age 18 as reported by 18- to 24-year-olds (lifetime experiences) indicate that during childhood: 32% of females and 18% of males experience sexual violence. Current levels (12 months prior to the survey) of violence reported by 13 to 17 year-olds indicated that 11% of females and 4% of males experienced sexual violence.

A report from VACS 2019 indicated that among those who experienced any sexual violence in childhood, 41.3% of females told someone about their experience (Figure 4.4). This estimate was unreliable among males. Females most disclosed to a relative (57.6%) or a friend or neighbor (35.3%). Only around one third of females (34.8%) and males (34.2%) who experienced childhood sexual violence knew of a place where to seek medical services.

Sexual Violence and its attendant consequences threaten the attainment of global development goals espoused in the Sustainable Development Goals (SDG) and National goals contained in Vision 2030 as well as the National Health Sector Strategic Plan II, as it affects the health and wellbeing of the survivor.

Of concern is the emerging evidence worldwide that Sexual Violence is an important risk factor contributing towards vulnerability to HIV infection.

2.1.2.2. Physical Violence

Physical violence is prevalent in Kenya especially against women. Results from KDHS 2022, revealed that 34% of women have experienced Physical violence since ages 15. This data further revealed that experience of physical violence differs by background characteristics. Experience of violence among women increases with age; 20% of women aged 15–19 have experienced

physical violence since age 15, as compared with 42% of women age 45–49. By county, the percentage of women who have experienced physical violence since age 15 is highest in Bungoma (62%) and lowest in Mandera (9%)

A report from VACS 2019 shows that 2 out of 3 female and 1 out of 2 male children experience some form of physical violence in their childhood. 1 out of 5 female and male experienced physical violence by parents, care givers or adult relative among age 13–17 years. Among 13–17-year-olds who experienced any physical violence, one third of females (34.4%) and males (33.1%) told someone about an experience of physical violence. Both females (68.5%) and males (76.5%) most commonly told a relative, followed by a friend or neighbor (females, 26.4%; males, 34.1%). More than one out of four females (28.0%) and males (23.9%) who experienced physical violence knew of a place to seek help for physical violence. Only 6.0% of females and 5.7% of males sought help for an experience of physical violence, and 4.4% of females received help. The estimate for service receipt for males was unreliable. Among those 13–17-year-old females who experienced physical violence in the past 12 months and did not seek services, the most common reasons were that they did not think it was a problem (42.5%) or felt that it was their fault (23.4%). For males, the most common reasons for not seeking services were that they did not think it was a problem (54.4%) or felt it was their fault (15.6%).

2.1.2.3. Domestic Violence

Domestic violence is assault and/or abuse perpetrated by a family member against another. It includes physical violence, psychological violence,

and emotional abuse. It is often accompanied by emotional abusive and controlling behavior. Domestic violence can result in physical injury, psychological trauma, and in severe cases, even

death. The devastating physical, emotional, and psychological consequences of domestic violence can cross generations. Most domestic violence cases go unreported due to fear of stigmatization and family interference.

The year 2018, there were a total of 148 cases reported to the National Police Service (NPS) Data Unit. Western region reported the largest numbers of cases at 39 cases. It was followed by Rift Valley region at 24 cases, Nyanza at 21 and Central at 19 cases respectively. Most of the survivors were women, girls, men and boys in that order.

2.1.2.4. Harmful Cultural Practices

Harmful cultural practices such as child marriages, forced marriages, forced widow inheritance, and ritual killings amongst others are practiced.

The customs of widow cleansing and widow inheritance are practiced in several communities throughout sub-Saharan Africa. In the Nyanza Province of Kenya, according to Luo tradition, widows are expected to engage in sexual intercourse with a "cleanser," without the use of a condom, in order to remove the impurity ascribed to her after her husband's death. Luo couples, including widows, are also expected to engage in sex preceding specific agricultural activities, building homes, funerals, weddings, and other significant cultural and social events.

According to KEPHIA report 2018 the HIV prevalence rate in Kenya had dropped to 4.9% in the same period HIV prevalence rate in Homa Bay County was at 20.6%, this percentage has since dropped to 18% currently though the figure is still way above the National prevalence rate and is leading in the four Counties of Luo Nyanza. It is further revealed that the prevalence of HIV in Women is at 6.6%, twice that in men which is at 3.1%, the gender disparity is even greater than 3 times in between the ages of 20-34 years. There is thus a strong relationship between HIV prevalence and SGBV prevalence among women and girls.

Widows who are inherited for the purpose of fulfilling cultural obligation have a higher prevalence of HIV

than those who remain un-inherited or are inherited for the purpose of companionship. Nyanza Province has a high prevalence of HIV infection among widows (63%), and that widows who are inherited for the purpose of performing sexual rituals have increased

Odds of being infected with HIV when compared with widows who are not inherited or are inherited for the purpose of companionship, and only 2.7% of widows reported having used a condom since the death of their husbands.

2.1.2.5. Emotional and Psychological Violence

Emotional and psychological violence has been mostly overlooked by actors because of its personal or private nature. It includes practices such as confinement, controlling socialization, unfaithfulness, emotional abuse amongst others. The KDHS 2014 indicates that the main controlling behaviors women experienced from their husbands were jealousy or anger if they talked to other men (53%) and insisting on knowing where they are always (41%). For men, the main controlling behaviors experienced from wives were jealousy or anger if they talked to other women (58%) and insisting on knowing where they were at all times (43%). 44% of husbands and 53% of wives in Nyanza control their partners' movements respectively. Emotional violence is more prevalent in Western (46%) followed by Nyanza at 40% This type of violence precipitates the other forms of violence and is therefore a strategic type to focus on to realize prevention goals.

2.1.2.6. Human Trafficking

A new US report 2020 on global human trafficking trends has put Kenya in the list of countries with the worst human trafficking problems in the world.

The Trafficking in Persons Report 2020 says traffickers exploit domestic and foreign survivors in Kenya.

"Within the country, traffickers exploit children through forced labor in domestic service, agriculture, fishing, cattle herding, street vending, and begging," says the report Children are also exploited in sex trafficking by people working in khat (miraa) cultivation areas and near gold mines in Western Kenya, truck drivers on highway and fishermen on Lake Victoria.

Human trafficking is a crime against humanity and involves the acts of recruiting, transporting, transferring, harboring persons through use of force or other means for the purpose of sexual exploitation, slavery, forced marriage or illegal adoption. As reported over the past five years, Kenya is a source, transit, and destination country for men, women, and children subjected to forced labor and sex trafficking. With Homa Bay County, being a transit route to border Counties of Migori and Kisii.

2.2. Legislative & Policy Framework

2.2.1. International legislative frameworks

Article 2 (6) of the Kenyan constitution 2010 states that: Any treaty or convention ratified by Kenya shall form part of the law of Kenya under the constitution.

- **Beijing declaration and platform for action (1995),**
- **AU Agenda2063,**
- **Maputo protocol,**
- **CEDAW 1979 and**
- **SDG 5, 10.**

2.2.2. National legislative and policy framework.

Kenya has been at the fore front in efforts to eliminate all forms of SGBV as envisaged by the constitution of Kenya 2010. By virtue of a Constitutional provision, all international and regional legislative and policy frameworks adopted and ratified by Kenya have become part of the domesticated laws to fight SGBV. Within this context, Kenya has taken steps in ratifying international treaties and regional conventions on elimination of SGBV and gender inequality. She has also put in place a national policy and legislative framework that supports the campaign against all forms of SGBV in practice.

Globally, the Beijing Declaration and Platform for

2.1.2.7. Intimate Partner Violence (IPV)

IPV is a pattern of abusive behavior in any intimate relationship that is directed towards a current or former spouse, boyfriend or girlfriend. Intimate Partner Violence can be physical, emotional, economic, or sexual in nature.

Action of 1995 adopted a set of priority areas which Kenya acceded to.

The prohibitions on sex discrimination in the UN Convention on the Elimination of All Forms of Discrimination against Women encompass SGBV.

The UN Convention on the Rights of the Child requires State Parties to protect children from all forms of violence, maltreatment, or exploitation, including sexual abuse.

The UN Declaration on the Elimination of Violence against Women affirms that violence against women constitutes a violation of the rights and fundamental freedoms of women.

SDG No 5 Achieving gender equality and empowering all women and girls including women and girls with disability.

Further, the African Union (AU) adopted the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo Protocol) in 2003 which was ratified by Kenya in 2010.

The Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa devotes Article 4 entirely to the topic of violence against women, calling for a range of state measures to address violence which takes place "in private or public", including the punishment of perpetrators, the identification of causes of violence against women and the provision of services for survivors.

Table 1: Summary of National Legislative Framework Addressing Elements of SGBV

Statute	Summary
The Constitution 2010	Provides that every person has right to freedom and security of their person which includes the right not to be subject to any form of violence from either public or private sources, any form of torture whether physical or psychological or cruel, inhuman Or degrading treatment. The right to security means that the Constitutions safeguards women's right against SGBV and any other related form of gender-based violence.
The Penal Code Cap 63 Laws of Kenya	Other than bigamy, which is provided for under section 171, there are no provisions for such forms of SGBV as marital rape, wife or husband battery, domestic violence etc. Some of these offences are only derivative of main offences such as assault under section 250 and 251.
The Children Act, 2001	Provides for childcare, administration institutions, and sets the age of sexual consent at 18 years in line with Convention on the Rights and Welfare of the Child.
HIV & AIDS Prevention and Control Act 2006	Prohibits deliberate transmission of HIV/AIDS and outlaws' discriminatory acts and policies based on ones HIV/AIDS status in all places and safe guards rights and dignity of those already affected
The Sexual Offences Act, 2006	Provides for prevention and the protection of all persons from harm from sexual acts and access to justice and psychosocial support
Employment Act, 2007	The Act prohibits discrimination and sexual harassment of employees based on sex, guaranteeing equal remuneration for work of equal value. Child Labor prohibited
Counter Trafficking in Persons Act, 2010	Prevent, Suppress and Punish Trafficking in Persons Especially Women and Children.
Prohibition of Female Genital Mutilation Act, 2011	Prohibits the practice of Female Genital Mutilation and safeguards against violation of a person's mental or physical integrity
The Land Act, 2012	Secures rights of women to matrimonial property
The Land Registration Act, 2012	Requires spousal consent in any dealing with matrimonial property
Matrimonial Property Act, 2013	Provides for the rights and responsibilities of spouses in relation to matrimonial property.
Marriage Act, 2014	Provides for the minimum age in marriage and types of marriages. The Act guarantees parties to a marriage, equal rights at the time of the marriage, during the marriage and at the dissolution of the marriage.
The Protection Against Domestic Violence (PADV) Act, 2015	Provides for the protection and relief of members of a family from domestic violence.
The Computer Misuse and Cybercrimes Act, 2018	Provides for offences relating to computer systems; to enable timely and effective detection, prohibition, prevention, response, investigation and prosecution of computer and cybercrimes; to facilitate international co-operation in dealing with computer and cybercrime matters; and for connected purposes.
The Witness Protection Act 2010	Provides the frameworks and procedures for giving special protection to persons with important information and who are facing potential risk and/or intimidation due to their cooperation with prosecution and other reporting agencies.
The Persons With Disability Act 2003	Provides for the rights and rehabilitation of PWDs and to achieve equalization of opportunities.

Table 2: Summary of Policy Framework on SGBV

Statute	Summary
National Gender and Development Policy (2000)	Makes recommendations on diverse issues on violence including: amendments of SGBV laws, more so the Penal Code to include gender related crimes; privacy in conducting SGBV hearings; SGBV tailored trainings on agents in the judicial system; setting up safe shelters for survivors of domestic violence; and ensuring access to information.
Kenya Adolescent Reproductive Health Policy (2003)	Which recommends development of safety nets and rehabilitation and rescue mechanisms for survivors of sexual abuse and violence and enhancing measures to protect young people in penal institutions from sexual abuse
National Adolescent Sexual and Reproductive Health Policy (2015)	It provides for mechanisms for addressing adolescents' sexual and reproductive health (SRHR) needs. It recommends multifaceted approaches to adolescent SRH issue which provides for mitigation of risk factors and puts in place a safety net for early detection and prevention of SRHR challenge.
National Guidelines on the Management of Sexual Violence (2014)	Is a guiding policy framework on procedures and services for management of survivors of sexual violence and explicitly recognizes sexual violence as a serious human rights and health issue which calls for imperative attention by all concerned. Provides elemental information on management of sexual violence in a multi-pronged manner. Gives medical practitioners information on steps to be taken when treating a survivor of sexual violence, preservation of evidence for court use, issues of psycho-social support and other ethical issues related to the management of health-related problems of sexual violence.
The Education Gender Policy (2007)	Addresses prevention and response to school related gender-based violence. It recommends mainstreaming of policies that address SGBV at all education levels; establishing modalities for dealing with SGBV including harassment; and developing and implementing clear anti-sexual harassment and anti-gender-based violence policies at all levels in the Ministry of Education and all educational institutions.
Vision 2030 Second Medium Term Plan (2013–2017)	Emphasizes the need for establishment of integrated one stop SGBV response centers in all healthcare facilities in Kenya and undertaking public awareness campaign against FGM, early and forced marriages.
The National Reproductive Health Strategy (2009-2015)	Provides for the implementation of Post-Rape Care Services ensures the inclusion of sexual violence as a key issue within the Reproductive Health Strategy and sets the development of standards for post rape care service delivery.
Energy Policy 2019	To ensure affordable, competitive, sustainable and reliable supply of energy to meet county and national government needs at least cost, while protecting and conserving the environment
Kenya Youth Development Policy 2019	Seeks to mainstream Youth Issues
National Policy on Prevention and Response to SGBV	Accelerate efforts towards elimination all forms of SGBV in Kenya, Recognizes the two levels of government on accountability, reporting and management lines and provides a structure that harnesses and synergizes SGBV prevention and response interventions through involvement of different stakeholders
Ministry of Public Service, Youth and Gender 2018-2022	Establishment of a Directorate of SGBV to spearhead efforts towards prevention and response to SGBV

2.3. Legislations and Policy Implementation Challenges

Despite the existence of policies and legislative frameworks, plans and programs addressing SGBV, challenges still abound. These include:

- Persistence biased socio-cultural attitudes, beliefs and behaviors in society that perpetuate negative stereotypes, and discrimination and gender inequality.
- Trivialization of SGBV experienced by men and boys.
- Variation of quality, availability and accessibility of services is limited.
- Ineffective enforcement of legislation.
- Limited resources allocation for SGBV interventions.
- Ignorance on the existing SGBV laws and policies.
- Low literacy rates and ignorance on SGBV
- Inadequate political will.
- Lack of harmonized indicators and consolidation of data and poor record keeping of SGBV case management.
- Lack of essential multi-sectorial and coordinated approaches to SGBV.
- Absence of shelters/safe houses
- Poor monitoring and evaluation mechanisms.
- Inadequate sex education for minors at the household level

Generally, the Constitution of Kenya 2010, the Penal Code, the Sexual Offences (amendment) Act (2011), the Children Act 2001, Employment Act (2007), Counter Trafficking in Persons Act (2011), Marriage Act (2014), the protection Against Domestic Violence Act (2015), provide a secure legal framework to prosecute SGBV cases, the Sexual offences dangerous offenders DNA data bank regulations, the prohibition of female genital mutilation (FGM) Act (2011), the National protection policy (2011), the multi-sectorial standard operating procedures for management of sexual violence, Land Act (2012), Land registration Act (2012), Matrimonial property Act (2013). The Kenya government has also developed national policies to address SGBV. These include National guidelines for key population, National guidelines on the management of sexual violence (2014), National Framework toward Response and Prevention of Gender Based Violence in Kenya (2014), National Adolescent Sexual and Reproductive Health Policy (2015). The National gender and development Policy (2019), Education gender Policy (2007), MTP III 2017 to 2022, HIV and AIDS prevention and control ACT 2006, Vision 2030, UN principles for older persons 1991, UN proclamation on ageing 1992, UN plan of action on ageing 2002, 2010 constitution of Kenya article 57 and 53, AU policy framework on ageing 2002,

Vision 2030 agenda 10, article 22 protocol on African charter on rights of women, VIPAA principle of ageing, Community Health Policy, County Integrated Development Plan 2018-2022.

COUNTY INSTITUTIONAL FRAME WORK ON SGBV

The main coordinating institution on SGBV is the County Government Department of Gender, Youth, Sports Talent Development, Culture and Social Services under the Directorate of Gender and Social Services. State department for gender affairs, the Judiciary, ODPP, Police, Children Department, Department of social services, Probation, Ministry of education, Health and NCPWD are also institutions which support GBV in Homabay County.

2.4. Initiatives to address the SGBV Issues at the County

2.4.1. National Government initiatives

The government has initiatives at the national level to help support SGBV strategies. These initiatives include the development of National Policy on SGBV, establishment of state department of gender affairs with a specific directorate in charge of SGBV and national government affirmative action fund. Under Health Sector there is the establishment and operationalization of Gender Based Recovery Centers in a few selected health facilities, Universal Health Care (UHC), development of SGBV strategic plan and establishment of SGBV help line. To promote socio-economic aspects to support SGBV, the government

has allocated financial resources through Women Enterprise Fund (WEF), National Government Affirmative Action Fund (NGAAF), Uwezo Fund, Youth Enterprise Development Fund (YEDF), back to school initiative by MOE and sanitary towels provision.

2.4.2. County Government Initiatives

The county government of Homa Bay has established various initiatives to support sexual and gender based violence programs like; a coordinating body under GTWG with sub-committees on, there is a county department of gender and social services with designated gender officers, the Ministry of

Health designated County SGBV coordinator, there is an active court user's forum at the sub county levels, establishment and operationalization of a safe space at Makongeni Health Center, active SGBV network in all sub counties, formation of committee to spear head Integration of SGBV in HIV/TB/MNCH/SRHR, Luo council of elders who do community sensitization on issues around teenage pregnancies, ending child marriage and SGBV in general is very active, the county is currently developing Child welfare and protection policy. Trainings targeting service providers on SGBV have been conducted. The county government has also included SGBV interventions in the CIDP 2018-2022

2.5. Existing and anticipated challenges on legislation and policy implementation

- Lack of and/or delayed resources to implement SGBV activities and programs in the county.
- Inadequate political goodwill and support to address SGBV concerns.
- Limited research on SGBV incidences and consolidated retrievable SGBV data to inform decision-making at the county
- Due to the crosscutting nature of the GVB there is lack of coordinated roles among the duty bearers on specific roles for each stakeholder.
- Limited capacity of the health, security and justice sectors to effectively respond to SGBV cases in the county. (Personnel, resources and equipment).
- Existence of Socio-cultural factors that promote gender discrimination and gender inequality.
- Low levels of awareness on existing laws, policies, programs and support services on SGBV.
- Lack of a comprehensive county policy on SGBV prevention and response measures.
- Inadequate SGBV shelter/safes spaces/ gender violence recovery centers and police gender desks within the county to meet the needs of the survivors/survivors.
- Lack of public programs which builds the capacity of the public on SGBV concerns.
- Lack of rehabilitation and reintegration programs for SGBV perpetrators and survivors/victims.
- Misconception on SGBV as focusing on the females at the expense of men coupled with limited participation of men in SGBV programs.
- Programmatically, there is unclear link between the SGBV and HIV interventions.
- The legal dilemma of how to address the issue of sex between minors.
- Dilemma on how to address Intimate partners' violence (IPV).
- There is no clear policy which links SGBV to the environment, environmental resources and climate change at the county.
- The SGBV interventions focus more on responsive mechanisms rather than root causes without clear prevention mechanisms.
- Weak witness protection mechanism in the county and poor custody of SGBV evidence along reversed scalar chain.
- Community SGBV support structures are not adequately supported to address SGBV issues within the community.
- Change in government structures, portfolios and personnel may hamper the implementation of the policy.
- Lack of parenting programs targeting early childhood (0-8)-ECD and Positive parenting and teenagers-(9-17) and their parents/guardians.
- Lack of data to provide a clear link between teenage pregnancies resulting from SGBV.

CHAPTER 3

POLICY OBJECTIVES AND POLICY ACTION POINTS

3.0. Introduction

There are set international standards of human rights laws, set principles, ideals which compel states to comply at national level.

SGBV is among the major forms of human right abuse, which is desired to be eliminated, The Constitution of Kenya 2010 upholds most of the human rights principles proclaimed in the International Human rights framework that address SGBV.

This policy is anchored on both the international and national instruments addressing SGBV. This chapter highlights Policy objectives, challenges, and strategies for implementation at the County level

3.1. Policy Objective 1:

To develop programs and initiatives that promotes preventive measures to address SGBV in Homa Bay County.

Policy Actions

a) Promotion of SGBV preventive measures

Policy statement

The County Government of Homa Bay commits itself to:

- Promotion of gender equality, equity & SGBV prevention programs in Educational and other social institutions including public barazas in the County.
- Undertake legal literacy and legal rights awareness in the County.
- Carry out county annual risk assessment and analysis to inform the response initiative in SGBV prevention measures.
- Undertake annual SGBV baseline survey to inform programming on preventive measures.
- Strengthening HIS data collection on all forms of SGBV cases.
- Empower community socio-economic groups (Youths, Women, PWDs, AYPs ,AGYW, Key Population, Elderly)through diversified livelihood programs

b) Programs and initiatives for SGBV prevention.

- Develop workplace policy and code of regulation on sexual harassment.
- Advice County staff and other employees within the County of their rights, obligation, and responsibility under the policy.
- Carry out capacity building for staff on the policy administration.
- Sensitize employers to develop sexual harassment policy as required by law.
- Develop and strengthen economic and psychosocial initiatives within the sectors.
- Strengthening existing community structures and institutions on SGBV awareness creation i.e. CHVs, CBOs, DPOs, paralegals, Village heads and clan elders, CPVs, Caregivers.

c) Reduction of vulnerability of groups at high risk of SGBV

- To map individuals and groups at high risk of SGBV such as the elderly persons, children, widows, orphans, PWDs, intersex and the persons living under humanitarian crisis like IDPs, Street families.
- To develop coordinated programs for socio economic empowerment of at-risk persons.
- To ensure that information is available, accessible and user-friendly form for all.
- To develop programs and training manuals on SGBV life skills targeting educational, rehabilitation, correctional, safe spaces and rescue Centre.
- To establish and resource the activities for County SGBV change agents, Gender ambassadors/ Champions/Committees/Task force.
- To establish safe spaces and rescue centers in all the sub-counties.
- To develop and strengthen existing information sharing platforms including reliable social media platforms and 24 hours call centers in all the sub-counties.

3.2. Policy Objective 2:

To promote protective measures to ensure safety of SGBV survivors in Homa Bay County.

Policy action:

Protection and safety of SGBV survivors

Policy statement

The County government of Homa Bay commits itself to:

- Establish and resource safe houses/spaces in every sub-County.
- To strengthen referral pathways to enable survivors access services.
- To establish resource SGBVRC in every sub-county hospital.
- To strengthen gender desks in every sub-county police station.
- Establish a 24-hour toll-free number in the County.
- Capacity build law enforcement officers/agencies on SGBV response.
- Establish child protection units in every sub-county police station.
- Capacity build health care workers to provide medical and psychosocial support to SGBV survivors.
- Work in partnership with Judiciary to strengthen the existing legal frameworks to enable SGBV survivors' access justice.
- Capacity build survivors on evidence preservation and reporting mechanisms.
- Engage the media fraternity to create public awareness on SGBV issues monthly to grass root level.

3.3. Policy Objective 3:

To establish a timely response to cases of SGBV with appropriate interventions by relevant actors in Homa Bay County.

Policy actions:

a) Strategies and initiatives for appropriate SGBV interventions

Policy statement

The county Government of Homa Bay commits to:

- Capacity build the Health care workers, Community health volunteers, police and local administration on SGBV prevention and response mechanism.
- Fast track dissemination and implementation of minimum standards for service delivery across health sectors and enhance SGBV case identification, comprehensive care and support for survivors/victims, perpetrators and their families.
- Ensure the health facilities include SGBV services in the service charter.
- Strengthen the referral pathway for SGBV in the county between judiciary, prosecutors and the paralegal.
- Mobilize and allocate resources for SGBV response and support services at all levels within the county.
- Facilitate free SGBV health services and legal assistance, advice, advocacy and other support services to the victim/survivor and access to information on their rights.
- Procure evidence collection kit for SGBV cases in all the health facilities.
- Procure SGBV tools including but not limited to: PRC forms, SGBV register, and SGBV summary tool.
- Strengthen SGBV data collection and analysis.
- Review existing SGBV data collection and reporting tools and harmonize.
- Establish gender help desk at the police station and toll free telephone hotline for victims/survivors.
- Mainstream SGBV as a program service within Homa Bay County.
- Facilitate programs for rehabilitation and reintegration of perpetrators in the society.
- Carry out interventions to influence behavior change in the society.

- Carry out sensitization through various forums (social media, text message).
- Paralegal and human right defenders to enhance community involvement in the management through collaboration and networking with the County and other relevant stakeholders in enhancing referrals and service delivery for the survivors/victims and supports rehabilitative programs for the perpetrators.
- Establish a centralized SGBV database (SGBV MIS) to store, analyze, report and share all SGBV information.
- Constitute case conferencing committees to address SGBV incidences
- Ensure a functioning monitoring and Evaluation teams as a sub-committee of the Gender TWGs to ensure SGBV quality service provision to survivors and perpetrators.

b) To promote timely response to SGBV cases

- Strengthen SGBV referral directory for the county.
- Sensitize all the relevant stakeholders on timely SGBV response.
- Collaborate with the relevant stakeholders to strengthen capacity of institutions and service providers in handling SGBV across the health and social sectors and the criminal justice system
- Strengthen the referral between the community and service delivery points
- Establishment and monitoring of formal protocols and referral systems between the health and specialized SGBV sectors
- Have a 24-hour toll-free line
- Establish resource mobilization kitty for SGBV programs
- Constitute a joint stakeholder planning committee for SGBV programs and interventions.
- Assign SGBV coordinators (County and Sub County) to the grassroots to coordinate all the SGBV issues in their areas of jurisdictions and report accordingly.
- Coordinate all SGBV research in liaison with academic institutions and other freelance researchers to inform SGBV programs and interventions
- Coordinating implementation of SGBV policy and fast track implementations of laws and policies in collaborating with state and non-state actors.
- Develop and implement standards and guidelines to address SGBV (SOPs)
- Support programs that build the capacity of the public on SGBV programs and concerns
- Implement the SGBV policy and mobilize other state and non-state actors to implement laws and legislation on SGBV.
- Allocate a sixth of the county Departmental budget to support SGBV operations.
- Strengthen multi-sectorial teenage pregnancy data collection tool

3.4. Policy Objective 4:

To develop coordinated accountability measures that will enhance/promote the efficient and effective delivery of SGBV interventions in Homa Bay County.

Policy action

Develop coordinated accountability measures

Policy statement

The County Government of Homa Bay commits to:

- Strengthen County SGBV technical working group a (TWGs) at the county and to create TWGS at the ward and sub-county levels to assess and address SGBV issues at the county, sub-county and community levels to share information and make decision.
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CHAPTER 4

SGBV POLICY IMPLEMENTATION FRAMEWORK

4.0. Introduction

The main goal of this policy framework is to provide a strategic guide for the progressive eradication and prevention of future emerging forms of SGBV incidences in Homa Bay County.

This policy will adopt a collaborative multi agency approach for the implementation of programs (Prevention, response, and protection), effective coordination, Monitoring and Evaluation, public participation, and legal instruments and frameworks

The county government of Homa Bay commits to work with the international agencies, national government entities, development partners, civil society organizations, private sectors and the Citizens of Homa Bay County.

There is political good will at both National and County

government to address SGBV as a violation of human rights, impediment to economic development and emerging social crisis. However, there are existing gaps that hinder the county government from addressing SGBV such as inadequate coordination of existing legal frameworks, resource allocation to SGBV programs, lack of a centralized SGBV management information system.

In addition to the above challenges, the existing cultural practices such as wife inheritance, widow cleansing, fish for sex (Jaboya culture), kangaroo courts, child marriage, disability myths and negative attitude (contributing to increase of all forms of SGBV) towards the elderly that complicates SGBV and therefore calls for multi-sectorial approach.

4.1. Multi agency roles and responsibilities

The County governments of Homa Bay commits to resource mobilize and allocate funds to implement SGBV programs and initiatives. To achieve this, there is need for enhanced coordination through defined Multi Sectorial Approach at the County. Each agency will effectively promote and coordinate strong response in strengthening SGBV referral systems.

The county is mandated to strengthen the county SGBV management team and establish Multiagency SGBV management teams at ward, and sub-county levels to coordinate and implement eradication of SGBV

The institution roles will include;

Level	Institution	Role
National	Ministry of Public Service, Youth and Gender Affairs State Department of Gender.	<p>Facilitates inter-agency and inter sectoral planning for SGBV response in prevention, protection and prosecution, monitors compliance with legislation and international conventions.</p> <ul style="list-style-type: none"> Facilitates the development of interagency systems for incident reporting, documentation, referrals, information sharing, monitoring and evaluation, and coordination Facilitates access to resource and best practice materials, including new information available in newsletters, journal articles, and reports that disseminate best practices, lessons, innovations, and other practical tools for this relatively overlooked area of humanitarian aid. Overall leadership and coordination in policy implementation, and resource mobilization, data aggregation and analysis.

Level	Institution	Role
County Government		<ul style="list-style-type: none"> Establish facilities and infrastructure necessary for SGBV responses at county level Collect and aggregate information on prevention, occurrence, responses, protection related to SGBV Implementation of SGBV programs and initiatives Monitoring and review of SGBV eradication programs and deliveries at county level Coordinates the referral system 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 SGBV Create public awareness on SGBV and ensure that chiefs, ass. Chiefs, ward admins register all cases of SGBV in the areas Establish Multiagency SGBV management teams at ward, sub-county and the county levels to coordinate and implement eradication of SGBV through the department of gender in the ministry of tourism, sports and culture, social and gender
National	Judiciary	<p>Criminal justice system addresses SGBV to ensure accountability for the perpetrators and promote the safety of survivors. Judiciary works in coordination with police, advocates, health care providers, Criminal justice actors, child protection services, employers, media, and faith-based leaders.</p> <ul style="list-style-type: none"> Increase and improve the institutional capacity of all courts to deal with gender-based crimes. Ensure that Magistrate 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. Convene regular court users' committee meetings at the county and sub counties.
National	Director of Public Prosecutions	Prosecutes criminal offences and ensures effective administration of Criminal justice system. Prosecutes election offences.
National	National Police Service	Provides security through enforcement of law and order; provides security personnel during election activities; investigates SGBV offenses and collaborates with the Department of Public Prosecution (DPP) on law enforcement.
County	County Assembly	<ul style="list-style-type: none"> Enacts legislation and approves regulations relating to County programming and projects. Political parties and campaign finance. Oversees the executive branch including all institutions mandated to undertake legal functions or enact secondary legislation.

Level	Institution	Role
National and County	Ministry of Health	<p>Government agencies will be relevant in budgeting, facilitating the application and enforcement of SGBV law and policies.</p> <ul style="list-style-type: none"> Runs the health information management systems (HIMS); Elaborates the Standard Operating procedures on clinical management of SGBV and sets standards Delivering SGBV 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-sectorial referral infrastructure. Providing continuous capacity building to staff on SGBV health related services. Relevant data collection
National	Ministry Interior and Coordination	<p>Overall provision of security to create an enabling environment for SGBV prevention.</p> <ul style="list-style-type: none"> Investigation and arrests of potential and actual perpetrators of SGBV. Continuous training of the Police Service to handle Sexual and gender-based offences. Relevant data collection
County	CSOs	<p>Service providers (e.g. members of the Africa Unite Network, Male Alliance Network members, Refugee Consortium of Kenya) in SGBV prevention (awareness raising, women's empowerment and women rights), protection and prosecution (referral systems).</p> <ul style="list-style-type: none"> Claims accountability for SGBV laws and policies and budgetary allocations. Participates in CIDP elaboration and annual budget reviews at county level. Provision of SGBV services and participation in the referral infrastructure. Participation in data collection and analysis, including undertaking research and surveys. Resource mobilization for SGBV policy implementation. Design appropriate programs and interventions. Advocating for appropriate policies and legislation for prevention and response to SGBV 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 SGBV in this regard build the capacity of vulnerable and poor people to understand and fight SGBV. Support rehabilitation for SGBV victims by establishing safe havens for victims and set up kitties to support SGBV survivors

Level	Institution	Role
National and County	Media	Information provider, and analysis on enforcement of SGBV policies and legislation, serves a public watchdog function. <ul style="list-style-type: none"> Provides a campaign platform for awareness raising and education, and for all stakeholders to communicate concerns and opinions. Awareness creation on SGBV Policy dissemination Gender responsive coverage of SGBV interventions
County	Survivors organizations	Beneficiaries of SGBV program (prevention, protection, and prosecution). Able to hold duty bearers accountable.
National and County	Development partners	Co-funding SGBV program aligned to Government priorities under the Aid Effectiveness Agenda
National and County	Private sector	Engagement in Public-private partnerships, CSR towards components of SGBV prevention, protection (e.g. infrastructure) and also ensuring enforcement of employee related policies such as sexual harassment policies at the work places <ul style="list-style-type: none"> Financing of SGBV program. Participation in data collection on SGBV trends in the country. Implementation of SGBV policy through adoption of Codes of Conduct aimed at tackling SGBV in the workplace Provision of SGBV services and participation in the SGBV referral Infrastructure
National	Ministry of Education	<ul style="list-style-type: none"> Offer positive change and learning curriculum to the adolescent. They also offer SRHR education to adult learners.
National	Probation	Offer probationary services to the perpetrators. They will be useful in co-ordination of rehabilitation programs for the perpetrators.
National	Children department	<ul style="list-style-type: none"> Convene regular Area Advisory council meetings to address issues of child protection Linkage and referral of survivors/Victims to safe spaces, rescue centers, homes, and relevant institutions Consolidate data and information on child related SGBV cases Mainstream issues of child rights
National	Ministry of trade	Offers entrepreneurship training and socio-economic empowerment programs for the survivors.
National	Ministry of Agriculture	Offers agricultural skills for food adequacy to the survivor organizations and perpetrators once released from jail or set free back in the Community.
County	Office of the Women Rep	Affirmative action programs by supporting the vulnerable in the community through funding their activities through government grants.
National	Social Services Department	<ul style="list-style-type: none"> Mainstreaming SGBV issues of special interest groups and implement programs that address their needs (Elderly, PWDs) Linkages and referrals of social groups to devolved fund for economic empowerment (WEF, YEDF, Uwezo Fund, Affirmative Action Fund)

Level	Institution	Role
National	National Council for Persons with Disabilities	<ul style="list-style-type: none"> Implement programs addressing the needs of PWDs. Consolidate and generate data on SGBV cases to inform program and initiatives in the county. Linking and referral of PWDs for special services such as Sign language interpretation, braille. Economically empower OPDs and provide tools of trade

4.2. Coordination Framework

The Policy shall adopt a coordinated approach that ensures the design and implementation of SGBV programs strategies towards the prevention, protection, response mechanisms and monitoring and evaluation.

The Policy envisages the creation of an accountability platform from Community to County levels in an effort to strengthen SGBV eradication programs in the County.

The Policy framework is underpinned on the following.

- Efficiency and effectiveness in resources utilization (financial, human resources etc.) towards SGBV interventions.
- Enhance data management and usage for decision making on service delivery, resource mobilization and advocacy.
- Timely access to services by SGBV survivors & perpetrators-client centered approach to comprehensive referral services.
- Leaders’ accountability and responsibility on legal reforms, advocacy and programming at both National and County levels.
- Partners’ involvement through a Multi Sectorial Approach.

The policy has adopted National Standards of Gender Policy 2014 and models developed by Gender and Equality Commission (2017) in its structures while the coordination structure epitomizes the State Department of Gender Affairs new model of coordination of Gender Sector Working Groups in the Counties.

COUNTY GENDER SECTOR WORKING GROUP

Gender being a cross cutting issue envisages a well-coordinated working of all sector players in a multi-sectorial framework, this is legally espoused in the Constitution 2010 Article 6(2), the National and County Government are distinct and interdependent and shall conduct their mutual relations on the basis of consultation and co-operation. The Coordination at the National level just like at the County level shall be through County Gender Sector Working Group that brings together all the actors (both state and non-state) intervening in the sector.

The purpose of consultation framework is to provide a mechanism of consultation, co-ordination and cooperation between the National government and County government on issues of gender equality, empowerment and promotion of Human rights.

The sector working group is consolidated and coordinated under sector thematic areas; GBV, Women in Leadership and Decision making, Socioeconomic empowerment and financial inclusion, Women in Peace building and Conflict Resolution among other relevant subcommittees.

This policy shall be coordinated under the GBV subcommittee due to the nature of GBV issues, being that they are attached to human rights, medical issues and community affairs.

The leadership of the GBV sector subcommittee shall be chaired by the department of Gender and the secretary shall be non-state actor as other members shall form the steering team.

Secretary shall be rotational as the GBV Committee shall decide.

The Core functions of the GBV committee shall be;

- To harmonize the GBV prevention, protection and coordination programs and projects.
- To develop joint implementation strategies as the policy provides
- To make policy programs and projects budgeting and review.
- To carry out the GBV monitoring and evaluation to ascertain the success and adjust on areas of weakness as per the policy program implementation strategy.

The County GBV subcommittee shall cascade their programs to Sub Counties, Ward and Village levels to help in strengthening the surveillance and monitoring for enhanced GBV prevention, protection and coordination

4.3. Monitoring and Evaluation

M&E Will identify and resource for specially-commissioned impact assessment, case studies and specialist technical evaluations.

Monitoring and evaluation will be at various levels; Monitoring will be undertaken to facilitate information dissemination and sharing. The evaluation will seek to attain the achievement of outputs and impact at the objectives level and confirm that Program activities have been carried out effectively and to appropriate quality standards.

This policy will outline the monitoring and evaluation framework as informed by the sector specific M&E plans. The monitoring framework will outline the indicators and monitoring processes to be adapted. The monitoring and evaluation framework will include policy objectives, programmatic strategies, activities, outcomes, outputs and indicators that will guide performance and policy progress reviews.

The policy framework will be evaluated at county, sub-county and ward level through the involvement of relevant National and County departments, SGBV TWG and CSOs

The key monitoring activities will consist of:

- Collation of sex and age disaggregated data on SGBV cases reported in health facilities, police stations, the judiciary, children department, implementing partners, ministry of interior, Kenya National bureau of statistics, research institutions.
- Coordinate partner monitoring visits to measure progress of output and measure indicators
- Develop framework for measuring milestones
- Mid and end term reviews of the policy.
- Identify best practices as informed by programmatic and advocacy mechanisms
- Quarterly review meetings to measure the performance indicators

4.4. Policy review

This policy may be reviewed after every three years to address emerging issues and changes on the social economic trends in Homa Bay County.

4.5. Policy Financing

This Policy shall be financed by the County government of Homa Bay which Commits at least a 1/6 of the County Departmental annual budget to address SGBV issues.

4.6. Resource Mobilization

The County government of Homa Bay shall from time-to-time resource mobilize in collaboration with partners to address SGBV issues

4.7. SGBV Implementation matrix

	Strategy	Activities	Verifiable indicators	Means of verification	Partners
Goal	The overall objective of the policy is to progressively eradicate SGBV incidences through a multi-sectorial approach that will comprehensively promote prevention, protection and coordinated response to enhance access to justice for survivors/victims and perpetrators in the County.				
Objective 1	Develop programs and initiatives that promote preventive measures to address SGBV in Homa Bay county				
	1. Programs and initiatives for SGBV prevention.	<p>Promotion of gender equality, equity & SGBV prevention programs in Educational and other social institutions including public barazas in the County.</p> <ol style="list-style-type: none"> Capacity building (sensitization and trainings) of local administration, religious leaders, community leaders, child protection volunteers, civil society organizations, education sectors on SGBV laws, prevention, response and referral Undertake legal literacy and legal rights awareness in the County. Carry out county annual risk assessment and analysis to inform the response initiative in SGBV prevention measures Use of media for awareness creation on SGBV Empower community socio-economic groups through diversified livelihood programs 	<ul style="list-style-type: none"> # of the target groups reached # of SGBV cases reported # of functional health clubs strengthened in the educational institutions <p>Annual County SGBV baseline report</p> <ul style="list-style-type: none"> # of legal rights sessions held # of identified cases # Population at risk # of hot spot areas identified # of groups linked to financial support systems (YEDF, WEF, Uwezo fund, NGAAF, Microfinance institutions, NGOs, table banking and other saving schemes) 	<ol style="list-style-type: none"> Minutes of the meeting Reports of the capacity building activity Minutes/ reports and activities functional health clubs, Annual County SGBV baseline report Reports/ attendance list SGBV risk assessment report List of groups Linked Activity reports Financial reports 	<p>County government Judiciary Education department Children’s department National Council for Persons with disability Office of the director for public prosecution Ministry of Health Police service department State department of gender Social services department Non state actors</p>
	b) Programs and initiatives for SGBV prevention.	<ul style="list-style-type: none"> Develop workplace policy and code of regulation on sexual harassment Advice County staff of their rights, obligation and responsibility under the policy. Carry out capacity building for their staff on the policy administration. Sensitize employers to develop sexual harassment policy as required by law Develop and strengthen economic and psychosocial initiatives within the sectors Strengthening existing community structures and institutions on SGBV awareness creation i.e. CHVs, CBOs, DPOs, paralegals, Village heads and clan elders, VCOs, Caregivers 	<p>Proportion of institutions with existing workplace policy and code of regulation on sexual harassment</p> <p>Proportion of staffs with signed and filed copies of sexual harassment policy existing in employee’s files.</p> <ul style="list-style-type: none"> # of staffs sensitized on their rights, obligations and responsibilities on SGBV policy # of sensitization/trainings done on sexual harassment # of employees sensitized on sexual harassment policy # of the target groups reached in the community # of SGBV cases reported # of functional SGBV TWG at the community level (County Sub county and ward level) 	<p>Proportion of institutions with existing workplace policy and code of regulation on sexual harassment</p> <p>Sensitization reports</p> <p>Sensitization/ training reports on sexual harassment</p> <p>Community Sensitization/ training reports on SGBV awareness</p> <p>Functional SGBV TWG at the community level (County Sub county and ward level)</p>	<p>County government Judiciary Education department Children’s department National Council for Persons with disability Office of the director for public prosecution Ministry of Health Police service department State department of gender Social services department Non state actors</p>

	Strategy	Activities	Verifiable indicators	Means of verification	Partners
	c) Reduction of vulnerability of groups at high risk of SGBV	<ul style="list-style-type: none"> To delineate/map individuals and groups at high risk of SGBV such as the elderly persons, children, widows, orphans, PWDs, intersex and the persons living under humanitarian crisis like IDPs, Street families. To develop coordinated programs for socio economic empowerment of at-risk persons To ensure that SGBV information is available, accessible and user-friendly form for all To develop programs and training manuals on SGBV life skills targeting educational, rehabilitation, correctional, safe spaces and rescue Centre To establish and mobilize resource to support the activities for County SGBV change agents, Gender ambassadors/Champions/ Committees/Task force To establish safe spaces and rescue centers in all the sub-counties To develop and strengthen existing information sharing platforms including reliable social media platforms and 24 hours call centers in all the sub-counties 	<p>A database of all at high risk populations and groups</p> <ul style="list-style-type: none"> # of coordinated socioeconomic empowerment programs # of SGBV cases reported on DHIS Accessibility of user friendly SGBV information # of training manuals on SGBV life skills developed on each of the target areas. # of SGBV activities supported by the resources mobilized # of Safe spaces and rescue centers established in the county # of existing and functional information sharing platforms in the county 	<p>Accessibility of user friendly SGBV information</p> <p>Availability of training manuals</p> <p>Activity report</p> <p>Existence of functional safe spaces and rescue centers</p> <p>Existence of functional information sharing platform</p>	
Outcome for Objective 1	<ol style="list-style-type: none"> Increased reporting of SGBV cases Increased awareness on SGBV issues Prompt response on SGBV cases by the relevant stakeholders Improved evidence preservation (Forensic evidence, PRC forms and P3 forms) Increased awareness on the existence of the court users forum by the public 				
Input for Objective 1	<ol style="list-style-type: none"> Technical expertise Training/sensitization materials Financial resources 				
Objective 2	To promote protective measures to ensure safety of SGBV survivors in Homa Bay County				

	Strategy	Activities	Verifiable indicators	Means of verification	Partners
	Protection and safety of SGBV survivors	<ul style="list-style-type: none"> To strengthen referral pathways to enable survivors access services To establish and resource SGBVRC in every sub-county referral hospitals To strengthen gender desks and establish child protection unit in every sub-county police station Strengthen public health facilities to handle SGBV cases and capacity build health care workers to provide medical and psychosocial support to SGBV survivors Strengthen the existing legal frameworks to enable SGBV survivors' access justice. Capacity build survivors on evidence preservation and reporting mechanisms 	Existence of a county referral directory # of functional SGBVRC established in the county # of gender desks and child protection units established in every sub county police station # of public health facilities strengthened to handle SGBV cases # of HCW trained on medical and psychosocial support to SGBV survivors Proportion of SGBV cases fully executed in court Proportion of survivor's capacity built on evidence preservation and reporting mechanism	Existence of a county referral directory Existence of functional SGBVRC in all the sub counties Existence of a functional gender desks and child protection units (CPU) at sub county police station Training report Existence of public health facilities capable of handling SGBV cases Court registry Survivors' capacity building report	
Outcome for Objective 2	1. Improved turnaround time for handling SGBV cases by relevant stakeholders 2. Improved referral pathway for SGBV cases 3. Efficient handling of SGBV cases at all levels				
Input for Objective 2	1. Financial resource (space, building materials, equipment, furnishing) 2. Human resource 3. Sensitization/ training materials 4. SGBV tool kit				
Objective 3	To establish a timely response to cases of SGBV with appropriate interventions by relevant actors in Homa Bay County				
	Strategies and initiatives for appropriate SGBV interventions	Capacity build the Health care workers, Community health volunteers, police and local administration on SGBV prevention and response mechanism.	<ul style="list-style-type: none"> # of SGBV service providers trained # of Information Education and Communication materials on GVB produced and shared Increased reporting, documentation and improvement of SGBV services 	Training reports List of attendance	
		Fast track dissemination and implementation of minimum standards for service delivery across health sectors and enhance SGBV case identification, comprehensive care and support for survivors/ victims, perpetrators and their families in a health service charter.	Disseminated standard operation procedures of SGBV Existence of SGBV service charter on the wall of health facilities in the county	<ul style="list-style-type: none"> Continuous medical education reports # of SGBV centers served with the SGBV SOPs # of victims and perpetrators who received who received SGBV services. # of health care workers sensitized 	

	Strategy	Activities	Verifiable indicators	Means of verification	Partners
		Strengthen the referral pathway for SGBV in the county between judiciary, prosecutors, police, health, community support systems.	<ul style="list-style-type: none"> Use of bidirectional referral forms, case conferencing reports, minutes documented reports on cases by each stakeholders 	<ul style="list-style-type: none"> #of case conferencing meetings held #of bidirectional referrals made 	
		<ul style="list-style-type: none"> Mobilize and allocate resources for SGBV response and support services at all levels within the county Facilitate free SGBV health services and legal assistance, advice, advocacy and other support services to the victim/survivor and access to information on their rights. 	<ul style="list-style-type: none"> cost and budgeted SGBV programs by the county line departments and other stakeholders Existence of SGBV Kitty supported by the county government and the Non state actors Inclusion of SGBV interventions in the county sector Existence of Work plan by non-state actors and county departments to address SGBV issues County budget with allocation to support SGBV programs 	<ul style="list-style-type: none"> Copies of the work plans and budgets on SGBV programs # of SGBV survivors and Perpetrators reached 	
		Procure SGBV tools and evidence collection kit including but not limited to: PRC forms, SGBV register, SGBV summary tool	Availability of data collection tools at the health facilities, police stations.	Availability of data collection tools at the health facilities, police stations.	
		Strengthen and review SGBV data collection and analysis	Existence of a SGBV database which allows ease of access , retrieval, and analysis of SGBV data	Existence of a SGBV database which allows ease of access, retrieval, and analysis of SGBV data	
		Establish gender help desk at the police station and toll free telephone hotline for victims/ survivors	<ul style="list-style-type: none"> #of SGBV care desks existing within the county #of user accessing the care desks Available functional toll free hotline for SGBV reporting 	<ul style="list-style-type: none"> #of SGBV care desks existing within the county Records of users of the free toll telephone hotline 	
		Mainstream SGBV services in Homa Bay County programs	<ul style="list-style-type: none"> Existence of Work plan by non-state actors and county departments to address SGBV issues #of SGBV focal persons at the ward, sub county and County levels coordinating SGBV activities 	<ul style="list-style-type: none"> #of Institutions mainstreaming SGBV programs #of SGBV focal persons coordinating SGBV activities 	

	Strategy	Activities	Verifiable indicators	Means of verification	Partners
		Facilitate programs for rehabilitation and reintegration of perpetrators in the society	<ul style="list-style-type: none"> Existing programs for rehabilitation and integration of perpetrators and survivors of SGBV Existence of counselors, vocational skills programs. 	<ul style="list-style-type: none"> #of survivors and perpetrators reached Existing programs on reintegration and rehabilitation 	
		Carry out social behavior change interventions to influence behavior change in the society	Social Behavior change programs run by county government departments and Non state actors	<ul style="list-style-type: none"> #of trainings conducted and reported # of trained participant captured in training lists 	
	b) To promote timely response to SGBV cases	<ul style="list-style-type: none"> Collaborate with the relevant stakeholders to strengthen capacity of institutions and service providers in handling SGBV across the health and social sectors and the criminal justice system Strengthen the referral between the community and service delivery points Establishment and monitoring of formal protocols and referral systems between the health and specialized SGBV sectors 	<ul style="list-style-type: none"> # of stakeholders meetings held # of community awareness sessions held Proportion of the wards having referral directory # of cases timely reported to the relevant authority # of identified SGBV community focal persons Turnaround time between one referral point to another (turnaround time between interdepartmental referral e.g. police to court, children's department to hospital, hospital to police, tracking turnaround time for the cases are reported and executed in court) 	<ul style="list-style-type: none"> Minutes of the stakeholders meeting Community awareness activity report Case load report Existence of SGBV community focal persons turnaround time report 	
Outcome for Objective 3	<ol style="list-style-type: none"> Reduced turnaround time in handling SGBV cases Improved collaboration among key stakeholders in handling SGBV cases Timely SGBV services offered to survivors Decreased SGBV cases increased funding for SGBV programs Increased awareness on SGBV Proper documentation and collection of evidence of SGBV enhanced coordination of SGBV activities 				
Input for Objective 3	<ol style="list-style-type: none"> Technical expertise Training/sensitization materials Financial resources 				
Objective 4	To develop coordinated accountability measures that will enhance / promote the efficient and effective delivery of SGBV interventions in Homa Bay County				
	Coordinated communication with partners.	To strengthen and establish County SGBV TWGs.	NO. of TWGs established and strengthened	Minutes of meeting held, attendance lists, reports.	
	Coordinated resource mobilization plan	To Develop SGBV data collection tools			
	Coordinated resource mobilization plan	To establish a centralized SGBV database		Functional SGBV database	County government and partners

	Strategy	Activities	Verifiable indicators	Means of verification	Partners
		To hold quarterly stakeholders forum		no of quarterly minutes held, workshops, meetings	
Outcome	Establishment of a referral pathway for SGBV survivors/ victims	Identify SGBV focal point leads from the village, ward, sub-county and the county level to facilitate referral			No of SGBV cases referred ,No of focal leads
Input	Partnership and collaboration	Collaborate with state and non-state, educational institutions on issues related with SGBV research,		No of institutions engaged, activity reports,	
		Develop SGBV SOPs		SGBV SOP	
		conduct quarterly Community awareness and sensitization campaigns on SGBV		No of sensitization done, reports, attendance list	State and non-state actors

APPENDIX II: HOMABAY COUNTY KEY SGBV POLICY STAKEHOLDERS

No.	Name	Organization
1	Michael Ochola	Department of Health Services
2	William Otago	State Dept. Gender Affairs
4	Nahashon Lotaruk	NGEC
5	Joel Okumu	State Dept. Gender Affairs/Consultant
6	Jaspers Gadafi	NCPWD
7	Sophie Obop	County Gender & Social Services
8.	Maureen Odongo	EGPAF
9	Eunice Onuong'a	EGPAF
10	Everlyne Dede	Plan International
11	Omuga Julius	HOCEN
12	Quinter Muga	World Vision
13	Ida Pendo	County Gender & Social Services
14	Joseph Otieno	Department of Children Services
15	Cavin Odera	Power To Youth
16	Hilarly Achieng	State Dept Gender Affairs
17	Salome Munyendo	Catholic Relief Services
18	Edwine Nyanja	Family Health Options Kenya
19	Chi-Chi Undie	Population Council
20	Faith Mbushi	Population Council
21	Elizabeth Amimo	Social Services
22	Vallerie Ongeti	ODPP

No.	Name	Organization
23	Ronald Kotut	LVCT Health
24	Salome Awuor	Action Aid
25	Oliver Furechi	Practical Action
26	Naomi Monda	KELIN
27	Zahra Hassan	CATAG
28	Benedict Ochieng	CSO Network
29	Beatrice Oluoch	AMREF
30	Emma Olum	PALAWAMA
31	Grace Wangechi	ENA
32	Steve Juma	CYAN Kenya
33	Consolata Achieng	Mango Tree Orphan Support Trust
34	Dorcus Indalo	Country Director- Power to Youth Project AMREF
35	Willis Bolo	Director Economic Planning
36	Ronald Kotut	Technical Adviser SGBV-LVCT Vukisha 95
37	Janet Akech	SBC Technical Officer-Breakthrough ACTION (K)
38	Lucy Odwar	PWD Rep-Dep of Social services
39	Ododa Everlyne	Director Gender
40	Mathews Owili	Chairman Homa bay CSO network
41	Susan Wambanda	PATH -Kenya, USAID(Nuru ya Mtoto project
42	Mercy Kwamboka	Youth Advisory champion of health president
43	Achieng Okuku	Dep. Gender National
44	Charles Orora	Population Services Kenya
45	Elector Opar	State Department of Youth Affairs
46	Immaculate Amondi	NAYA Kenya
47	Hon Paul Barry	County Assembly Homa Bay
48	John Onyango	AMREF
49	Millicent Ooko	County Gender & Social Services
50	Everline Khaemba	PALAWAMA
51	Leonida Achieng	HBCSON
52	Benedict Ochieng	EACOR
53	Zarhah Hassan	CATAG
54	Daniel Ouma	Dep Gender and Social Services
55	Silas Rabah	Director Youth Affairs
56	Moses Buriri	Former Chief officer Gender and Social services department
57	Fredric Odera	Former CEC Gender and Social services department
58	Cavin Odera	WA-WA KENYA
59	Lynet Akinyi	Gender Officer

Homa Bay County SGBV Policy

Department of Gender Equality and Inclusivity,
Youth, Sports Talent Development, Culture
Heritage and Social Services