

POLICY BRIEF

STATE OF SEXUAL AND GENDER-BASED VIOLENCE (SGBV) IN KISUMU, KAKAMEGA & VIHIGA COUNTIES: PERSPECTIVES FROM THE COMMUNITY



BACKGROUND

Insights from various community dialogues in Kisumu, Kakamega and Vihiga counties, highlight the rampant and increasing incidents of sexual and gender-based violence (SGBV), most of which go unreported. Survivors face challenges in accessing justice, stigma from both family and community, and limited response mechanisms at the grassroots level. Young girls are particularly vulnerable, with early defilement cases often settled informally or covered up.

CHALLENGES

- **Lack of survivor support services:** Communities lack access to psychosocial support, legal aid, and safe shelters for survivors of violence.
- **Weak coordination among duty bearers:** Health workers, police, and chiefs often operate in silos, leading to delayed or denied services for survivors.
- **Underreporting by boys and male survivors:** While girls are most affected, male survivors rarely report abuse due to stigma and lack of gender-sensitive support systems.
- **Lack of knowledge:** of the referral pathway that often causes delay or interference evidence collection and processing of forensic evidence further undermining the judicial processes
- **Inadequate survivor-friendly services in health facilities:** Survivors often encounter judgmental attitudes, long waits, or referrals across multiple offices, discouraging them from seeking care or justice.

CHALLENGES

- **Prevalence of defilement and rape cases:** of girls aged 12-18 years remain largely unreported due to fear, stigma, parental cover-up and continued use of Kangaroo courts.
- **Failure to report leading to low prosecution rates coupled with slow judicial process** has contributed to families and victims often negotiating for out of court settlement of SGBV cases privately, further perpetuating this vice.
- **Stigma against Survivors:** Victims of SGBV face community backlash and victim-blaming, leading to emotional trauma and social isolation.
- **Limited male-targeted interventions:** Current SGBV prevention and response programs largely focus on women and girls, with minimal structured efforts to engage men and boys as allies or address male survivors.

POLICY ASKS

- **Strengthening Legal and Reporting Systems-** Policy Ask: The County Government should form a multi-sectoral task force with dedicated funding to address SGBV. This task force must include the Departments of Health, Gender, and Youth, along with law enforcement and the judiciary. Their mandate should be to coordinate a holistic government response, including the fast-tracking of investigations, prosecution, and victim support for SGBV cases. This will help to establish effective, community-based referral mechanisms.
- **Raising Awareness on Rights and Laws -** Policy Ask: The Departments of Health, Gender, Social Services, and Youth should collaboratively launch a digital and media-based public education campaign targeting men and boys. This campaign should utilize relatable content (e.g., short films, radio talk shows) to raise awareness about the Sexual Offences Act, Children's Act, and clear reporting pathways as a deterrent strategy.
- **Engaging Men and Boys** Policy Ask: The County Departments of Health and Gender should formalize and fund male engagement as a core component of their reproductive health and SGBV prevention programs. This includes establishing dedicated budget lines to support targeted sensitization forums that address the issue of sodomy among males and shift harmful masculinities. By involving men and boys, we can ensure they are part of the solution in protecting girls and women.

POLICY ASKS

- **Training and Deploying Paralegals** Policy Ask: The County Departments of Health and Gender should establish and fund male-specific Community Health Promoter (CHP) programs. These trained male champions can serve as peer educators and informal paralegals to track, report, and follow up on SGBV cases, particularly those involving male victims, and assist with reporting to formal channels.
- **Promoting Safe Spaces and Improved Survivor Support -**Policy Ask: The County Department of Health should implement clear guidelines to make health facilities more accessible and inclusive for adolescents and survivors of SGBV. This includes training health workers to offer non-judgmental and confidential services, and creating survivor-friendly spaces where victims can report abuse and access medical, legal, and psychosocial support- offering one stop service solution.
- **Mandating Reporting of Underage Pregnancies** Policy Ask: The Ministry of Health, in partnership with the County Department of Health, should issue a directive requiring all health facilities to record and report pregnancies in girls under 18 years as SGBV cases. This institutionalizes a clear protocol, enabling immediate follow-up and legal prosecution of perpetrators to ensure justice and prevent future abuse.
- **Zero-tolerance to Kangaroo courts:** Judiciary & policy must enforce a zero-tolerance approach to out-of-court SGBV case settlement & ensure protection for witnesses.

CONCLUSION

Sexual and Gender-Based Violence in Kisumu, Kakamega and Vihiga counties remains a pressing human rights concern that undermines the health, dignity, and future of women and girls. The insights gathered underscore the urgent need to strengthen access to justice for survivors, hold perpetrators of teen pregnancies legally accountable, and ensure widespread dissemination and enforcement of relevant policies and laws. Building stronger multi-sectoral coordination and collaboration is essential to fostering a survivor-centered, community-driven response—one that breaks the silence, delivers justice, and creates safer, more equitable communities.