

Issue Brief on Gender Based Violence in Kenya Report, 2014

Objective: To examine policies and programmes for effective interventions on gender based violence

Methodology: The study adopted a triangulated methodology research survey design. Qualitative data was collected from key informants drawn from criminal justice agencies, gender and social development departments, children departments and Non-Governmental Organizations. 819 respondents were interviewed with women constituting women constituted 80% (n=656) and men 20% (n=163). Target population was composed of both male and female between the ages of 12 – 64 years. Questionnaires and interview guides were used to collect data. Quantitative data was analyzed through SPSS while qualitative data analyzed through interpretation of key informants' responses along research themes. Data collected was analyzed using descriptive and inferential statistics.

Counties of study: Busia, Mombasa, Vihiga, Nairobi, Samburu, Machakos, Migori, Kilifi, Nyeri, Kisii, Nakuru, Kiambu and Meru.

Findings: there is need to have a strong linkage between legal and medical policies and programmes to ensure the health and safety of victims and dispensation of justice. A medical liaison strategy or service should be put in place because this would go a long way in assisting victims get justice while still not compromising their integrity. Further, there is inadequate financing to address Gender Based Violence prevention and response interventions. The study revealed that obtaining and testing DNA samples is expensive.

Adequate public and private financing of counter-GBV programmes would work to address the vice.

In addition, lack of a national framework and database for collating GBV is another limiting gap. In Kenya, there is no national framework with clearly defined indicators on GBV. The absence of a database affects the accuracy, validity and integrity of national statistics available on GBV.

Finally, NGOs' play a critical role in addressing cases of GBV in society. Some of the critical services offered to victims are counseling and victims and perpetrators reconciliation.

Conclusion:

There is a likelihood that GBV may emerge in new patters in future as men becoming vulnerable to GBV continue to increase. There is need therefore to monitor the trend of GBV in the country thus need for monitoring centres and finally invest in a GBV database. A public-private funding partnership would reduce the financial inadequacies.

References

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