



KENYATTA UNIVERSITY WEE HUB
PROCEEDINGS OF A STAKEHOLDERS WEBINAR
HELD
ON FRIDAY 9TH JULY 2021

**Impact of programmes and Initiatives addressing Sexual and
Gender-Based Violence as a constraint to Women Economic
Empowerment**

Contents

1.0	The Study Context	3
2.0	Webinar Purpose and Objectives	4
2.1	Presentations and Findings	5
2.2	Ministry of Public Service and Gender: National Policy Terrain on Prevention and Response to SGBV initiatives.....	5
2.3	Makueni GVRC.....	7
2.4	Nairobi Women’s Hospital GVRC	8
2.5	Life Bloom International (LBI).....	9
2.6	Center for Rights Education and Awareness (CREAW)	10
3.0	Webinar Conclusions	11
3.1	Recommendations.....	11
3.2	Action points/Way forward.....	12
	Appendices – List of participants	13
	Webinar Programme	Error! Bookmark not defined.

1.0 The Study Context

The KU-WEE Hub project entitled; ‘Initiatives for What Works for Women’s Economic Empowerment in Kenya’ is supported by the Bill & Melinda Gates Foundation and was launched in September 2020. This comprises of thirteen (13) specific five-year projects, that will be engaging and incorporating numerous partners, key among them The County Government of Tharaka Nithi, Kenya National Bureau of Statistics (KNBS) and the Institute of Economic Affairs (IEA Kenya). The project entails an evaluation of existing Women’s Economic Empowerment (WEE) policies and programmes in Kenya through engagement of relevant stakeholders for evidence-based policy uptake.

Under the project *Impact of Programmes and Initiatives Addressing Sexual and Gender-Based Violence (SGBV) as a Constraint to Women’s Economic Empowerment*, the expected outcome is “Increased Awareness, Reporting and Effective Action against SGBV by 30% for Women’s Economic Empowerment by 2025 in Tharaka Nithi County of Kenya”. In Kenya, and elsewhere in Africa, SGBV is widely condoned by individuals and communities, a reality that compromises its prevention and response. The latter for instance requires a multifaceted individual-based approach and a broad range of services including, medical, psychological (counseling), legal and financial.

The Kenya Government, at both National and County levels, is mandated by law to put in place structures to address SGBV (Sessional Paper No. 02 of 2019 on National Policy on Gender and Development). In response, the Government has numerous legal frameworks that address SGBV. In particular, the National Guidelines on the Management of Sexual Violence (3rd Edition, 2013); Multi-Sectoral Standard Operating Procedures for Management of Sexual Violence and National Guidelines on Establishment of Gender Violence Recovery Centres (GVRCs)(2020), and the Sexual Offences Act 2006.

NGEC (2016) for instance, recommended the establishment of GVRCs in all major County hospitals and emphasized the role of non-state actors in Rescue, Recovery and Rehabilitation Programs (RRRPs). Notwithstanding, only one County, Makueni, which has adhered, and RRRPs are run by non-state actors. Observably, the effectiveness of these initiatives is unclear as SGBV persists continuing to act as a barrier to Women’s Economic Empowerment (WEE). This study targets to evaluate such programs. This study is also cognizant that neither government nor other stakeholders have clearly articulated a model that enhances seamless prevention and comprehensive service delivery for those predisposed to SGBV, survivors as well as its perpetrators (NGEC. 2016, 2017). This study will thus be testing the acceptability and efficacy of an adapted Tamar Campaign Model in redressing SGBV, before it occurs. Packaged in a Reflect Circles’ set up, this method employs a holistic approach that embraces a social, cultural, economic and political dimension. Based on a Contextual Critical Consciousness that anchors on an interactive participatory reading of lessons derived from religious literature, cultural and

contextual realities, the modules will be tailor-made to provoke participants to reflect on SGBV. In this study, this Model will be adapted in light of the religio-cultural contexts of communities based in Tharaka Nithi County.

The study will be anchored on the National Policy for Prevention and Response to Gender- Based Violence (2014). The Methodological Design and Approach will include a mixed methods design that combines qualitative and quantitative approaches; firstly to conduct an exploration of the economic cost of SGBV on survivors and secondly, evaluate the effectiveness of existing RRR programmes in facilitating recovery and WEE. Thirdly, it will introduce an intervention to test the efficacy and acceptability of the Tamar campaign model in preventing SGBV. . The evaluation study will also employ a phenomenological approach/methodology to determine the effectiveness of the selected RRRPs namely Makueni GVRC and Life Bloom International services in helping SGBV survivors recover. The phenomenological approach, which brings out an ontological subjective experience, lays emphasis on personal perspectives and interpretation. This is powerful in bringing out women SGBV survivors' experiences within RRRPs/GVRCs and their feelings, without manipulation by either the researchers or the RRRPs/GVRCs' leadership. Ahead of the commencement of the study, and in order to ensure stakeholders' involvement, alignment with the approaches to the field, a Webinar involving the Women's Economic Project researchers and other stakeholders drawn from government, private practitioners and academic sectors was held on 9th June, 2021.

2.0 Webinar Purpose and Objectives

The workshop's objectives were to:

1. Scan the policy terrain informing action against SGBV in Kenya.
2. Highlight the challenges experienced in implementing policies that address SGBV in Kenya
3. Examine the challenges faced by front line service providers in dealing with survivors in Gender Violence Recovery Centers.
4. Showcase the role of shelters while foregrounding the experience of practitioners in responding to SGBV and women's economic empowerment in programming.

The 2 hour workshop started with a preliminary session that involved registration and introduction of participants and their organizational portfolios. This was followed by the KU-WEE Hub-Leader's, Prof. Judith Waudu introductory remarks. In her exposition on the proposed evaluation aimed, Prof. Grace Wamue Ngare gave ascertained he Impact of Programmes and Initiatives addressing SGBV as Constraint to WEE. In this, she highlighted the primary outcome of the SGBV concept to be: Increased Awareness, Reporting and Effective Action against Sexual and Gender-Based Violence (SGBV) by 30% for Women's Economic Empowerment by 2025 in Tharaka Nithi County- Kenya.

Other workshop speakers followed up with presentations as tabulated below:

Title	Speaker	Organization
SGBV policy terrain, responsive and preventive initiatives in Kenya	Mr. Josephat Ileri	Ministry of Public Service and Gender, State Department for Gender
Challenges in dealing with SGBV survivors at the GVRC	Ms. Rebecca Gitau	Gender Violence Recovery Centre Nairobi
Shelter homes as a response to SGBV	Ms. Wangechi Wachira	Centre for Rights Awareness and Education (CREAW)
Experiences in responding to SGBV and women's economic empowerment	Ms. Catherine Wanjohi	Life Bloom Services International (Naivasha)

The presentations were intermittently followed by a question-and-answer sessions moderated by the KU-WEE Project leader Dr. Regina Mwatha, as the summary & way forward was presented by Dr. Pacificah Okemwa, Co-PI in the SGBV project. The Webinar closed with a vote of thanks from one of the SGBV team researchers' Dr. Isaac Kimunio.

2.1 Presentations and Findings

2.2 Ministry of Public Service and Gender: National Policy Terrain on Prevention and Response to SGBV initiatives

Representing the ministry Mr. Josephat Ileri, focused on two main areas: National Policy Terrain on Prevention and Response to SGBV initiatives initiated in the country. In his discourse, he emphasized that SGBV is a national development issue, a concern for all and a responsibility of both the National and Country Governments. He retaliated that SGBV prevalence in the country is high and the situation has been aggravated by the current COVID 19 pandemic due to the following factors:

- Closure of businesses affecting household incomes and occupations
- Reduction of business operation hours implying lengthy home stays
- Lengthy staying at home of children and other family members
- Rising tensions within the home set up, due to limited resources, including space.

In his observation, these factors have led to an increase in the level of violence especially emotional abuse. He indicated that there is slow response mechanisms among the first line duty bearers but this is changing slowly as more initiatives are put into place.

Ileri informed the audience that the country has substantial number of policies and initiatives that guide prevention and response to SGBV, highlighting:

- a) **National Policy on Gender and Development (2000):** Enacted in 2000, this policy was reviewed in 2019 and focuses towards creating a just, fair and transformed society that is free from gender- based discrimination in all spheres of life practices. The policy outlines areas of GBV and has a reflection on Beijing Platform for Action (1995) which, highlights 12 critical areas, key among them SGBV.
- b) **Kenya’s Vision 2030:** Mr. Ileri emphasized that the SGBV prevention and response initiatives are anchored on the Social Pillar of the Vision 2030 blue print within which SGBV is outlined as one of its flagships. To ensure this is articulated and pursued, SGBV has been included in the performance contract cycle. Further, within Vision 2030’s Medium term plan III, SGBV is discussed at length and interventions and stakeholders responsible are delineated. To support this, in other public institutions, gender has been mainstreamed and captured in the 2020/2021 performance contract cycle.
- c) **National Policy for Prevention and Response to GBV (2014):** This policy is currently under review to capture the emerging issues and align it to the 2010 constitutional requirements that may have been left out.
- d) **Country Government Policy on SGBV (2017) and Model Legislative Framework on Sexual and Gender Based Violence for County Governments (2017):** these policy and legislative framework are models developed by NGEC to support devolution and assist county governments in GBV work and facilitate development of gender policies at the counties.
- e) **National Policy on Abandonment of FGM (2019):** Overall FGM prevalence remains high in Kenya and is practiced across all Counties, with some of the counties experiencing 94% and 98% prevalence rates. The 2019 policy is aligned with impetus to accelerate FGM eradication, strengthen multi -sectoral interventions and partnerships as well as community participation in fighting the vice. This is used together with Anti-female Genital Mutilation Act (2011).
- f) **Multiagency Team during COVID 19 Pandemic:** this was established to deal with SGBV during COVID 19 and any other humanitarian issues or emergencies in the future where SGBV is likely to flare up.
- g) **Policare:** POLICARE has been coined from two English words: “POLICE” and “CARES”. Being a National Police Service (NPS) integrated response to Sexual and Gender Based Violence (SGBV) in Kenya, it is designed as a multi- agency victim centered “ONE STOP CENTER” service provider. All under one roof, the service providers include and not limited to Police, Forensic investigators, Health providers, Psychologists, DPP representative, a Magistrate on call, Medical-legal officers, Gender experts, Correctional personnel among others.
- h) **Standard Operating Procedures within Police Service (2019) in prevention and response to SGBV and Standard Operating Procedures in Health Sector on Management of Sexual Violence:** these provide a uniform approach in the prevention of Gender Based Violence.
- i) **Other policies and Acts in use within the country:**

- Sexual Offenses Act (2006) – this is under review
- Protection Against Domestic Violence Act (2015)
- Children Act (2012)
- Prison’s Act (2009)
- Trafficking in Persons Act (2010)

Key Outputs: Grey Areas in SGBV Policy Development

The government representative highlighted the following as grey areas:

- There are no laws governing establishment, management, maintenance and the standard operating procedures of safe spaces, shelters and GVRCs. Currently shelters are run and managed by CSOs and Private enterprises. These embrace different approaches and models.
- Lesbian, Gay, Bisexual, Transgender, and Queer (LGBTQ): This remains a sensitive issue in the country due to religio-cultural beliefs and practices The Constitution of Kenya (2010) provides for inclusion and non-discrimination of all people in the country, hence the LGBTQ remains an issue still under discussion and concern.
- There are slow response mechanisms to SGBV among the first line duty bearers but this is changing slowly as more initiatives are put in place.
- Alternative Dispute Resolution (ADR) continues to undermine the laws and policies governing prevention and response to SGBV. Though the law provides for ADR for some cases, it does not give room to its application in regards to SGBV. The application of ADR in resolving SGBV cases is a pointer to weak enforcement of existing policies and laws that should be addressed.

2.3 Makueni GVRC

The County was represented by Ms. Peninah Ndonge, elaborated on the work of the Makueni GVRC located at the Makueni County referral hospital, which was established with the assistance of the Nairobi Women’s GVRC.

- This GVRC is still at its nascent stage and currently offers clinical management services to survivors of SGBV especially those who present themselves within 72hrs subsequently treated as an emergency.
- The center has a team comprising of medical doctors, social workers, psychiatrists, clinical officers, and psychologists to ensure holistic SGBV management.
- A desk exists at the GVRC branded as ‘Policare’ that offers specialized service through police stations that are in proximity and particularly Makueni police station. The Policare center and the team of police officers help in judicial management of SGBV.

- Makueni County has an established temporal shelter for survivors without safe residence where they are housed for 14 days as they seek further help. While at the shelter, survivors are guided and counseled.
- Makueni GVRC works together with the Ministry of Gender and also the Ministry of Education owing that most of the cases handled at the recovery center affect students in primary and secondary schools.
- The center learns and embraces the best practices of the Nairobi GVRC among other recovery centers countrywide. It has a comprehensive programme involving meetings with community leaders who are sensitized on SGBV risk factors . Other plans rotate around partnering with more organizations to build sponsorships and support training for the medical and social workers in Makueni.

2.4 GVRC affiliated to Nairobi Women’s Hospital

Speaking on the above, Ms. Rebecca Gitau informed the audience that:.

- The GVRC is the other arm of the Nairobi Women’s Hospital and is a charitable organization that implements SGBV response programs to Nairobi Women’s Hospital, a private entity offering medical care services to private patients.
- Challenges in delivery of service to SGBV survivors include single visits by those affected, most of who do not follow-up on appointments. In response to this challenge, the GVRC has started group therapy and structured SGBV service provision in a staggered manner to ensure survivors make follow- up visits to access comprehensive package of interventions.
- Transportation for survivors to and from the GVRC for services is common, a key challenge that occasions the GVRC to include a transport reimbursement kitty.
- Often, survivors do not disclose their perpetrators to the clinician especially when these are close relatives (e.g. spouses) while others deny been at all violated, even when that is absolutely visible. In response to this challenge, the NWH does routine screening of all patients seeking treatment. Unfortunately, this is complicated by the fact that not all clinicians are trained to detect signs of SGBV.
- Many women SGBV survivors are unable to proceed with or pursue legal justice. In such cases, the GVRC has to provide insights on legal redress while encouraging them to pursue justice.
- Delivery of comprehensive intervention service is hampered by focus on only physical elements of SGBV at the expense of psychological and emotional assistance by many survivors, yet this support is key in achieving total recovery.

2.5 Life Bloom International (LBI)

The founder and Director, Ms. Catherine Wanjohi, gave overview coverage on the NGOs Experiences' in responding to SGBV and Women's Economic Empowerment. In her response, she noted:-

- LBI focuses much more on women who have unwillingly entered into prostitution, been trafficked and or domestic workers all who are exploited in different ways. The characteristics of these women, she noted are: low literacy levels, education background, self-esteem, lack of job skills, inadequate resources and hazardous work places/experiences ; for instance bars where sexual harassment is rife. These survivors who mostly have suffered rejection from society, manifest multiple needs, and are looking for safe spaces (where there is unconditional acceptance).Considering that majority are teenage moms needing support and guidance, these women have self-condemned themselves harshly.
- Leveraging on the above context, LBI gives them a holistic package, with an economic empowerment component. They have a six-step in-house curriculum as a one stop center, namely: Life skill and counselling; Vocational skills for empowerment (hairdressing, catering, computer training), Financial literacy; Parenting skills and Transformative leadership.
- **Sustainability;** To be sustainable, LFI has a Mentorship programme, currently with 25 mentors, where the organization out-sources mentors and staff for this. In the Parenting mentorship program, each of the 12 mother- mentors has 5 women supporting them with parenting skills; In the Professional Volunteers; they do advocacy and policy inclusion within Nakuru County, where they ensure that gender issues are included in programming and budgeting. As she noted, strong stakeholder involvement with CSOs, government is evident.

Some of the constraints faced by LFI were highlighted as:

- **Beneficiary Constraints:** Relapse- some women are in a cycle of abuse; hence they receive assistance, revert back to practices that promote abuse only to come back to rehabilitation, sometimes, in deeper problems. This is addition to low personal commitment where survivors register but do not show up. Survivors also are compounded by numerous drawbacks that hinder participation due to multiple gender roles, which mostly include parenting and other duties in the household. Limitations due to cultural barriers, e.g. perceptions that loans are for men and a dependency syndrome which makes them think that they have a right to free assistance. Coupled with low literacy levels, all these pose as a major constraint to the rehabilitation and recovery of survivors.
- **Constraints at organizational level:** Limited centers for rescued women exist in Kenya (LBI is a halfway house and not residential place where day work is the norm). IN addition, there is lack of tested and proven curriculum for survivors' rehabilitation, which, as she suggested could be one of their expectations from the KU Hub. There is also the challenge of addressing all f SGBV cases in their area , which have increased due to COVID 19. This has been coupled by inadequate resources.

2.6 Center for Rights Education and Awareness (CREAW)

According to the Executive Director, Ms. Wangechi Wachira, CREAW works in prevention of violence against women and girls in 10 counties in Kenya. It has offices in 5 counties. Founded in 1999, their work is mainly legal representation, psychosocial support, supply of dignity kits and advocacy. In addition, they have a toll-free number for reporting SGBV.

- CREAW uses a SASA! Model for community intervention in SGBV. They have also set up a new model for addressing Domestic Violence known as – *Indashyikirwa*.
- She noted that the vice has tremendously increased during the COVID 19, subsequently having 9,500 reported cases during the lockdown, according to Government's reports, CREAW, itself has recorded a 64% increase in reported SGBV cases as compared to 2019.
- The organization is currently using cash transfers to address SGBV and boost economic empowerment. In 2020 in a period of 2 months, it reached 5,000 and 2,000 women in Nairobi and in Kilifi/Mombasa respectively. CREAW has over time established strong connection between economic crises/ lack of employment and SGBV out of a realization that most women are stuck with men in abusive homes with no income. Notably, financial independence helps women make choices in opting out of violent spaces.
- In relation to the concept of shelters, CREAW representative informed the audience that these were critical during lockdown as it allowed women to have safe spaces and make informed decisions. Noting that home is not always the safest place for women, the With their limited space that accommodates only 30 – 50 women in different counties, the speaker urged the government to invest in shelters as the existing 48 Non-Governmental based within 17 out of 47 Counties in Kenya are inadequate. The government, incidentally has only one county-based and run by the Makueni County government, which is at its infant stages. In addition, she noted, shelters require holistic services including qualified personnel subsequently making them an expensive enterprise. Key among their services, they noted, was training women in economic empowerment before providing startup grants for businesses.

In highlighting the gaps and action points, Ms. Wangechi noted that:-

- Government needs to set aside funds for shelters as there is a funding gap in their sustenance.
- There is no legal framework to support the shelters which are currently registered as societies or community-based organizations. A legal framework should be comprehensively reviewed for strengthening shelters.
- Children moving into shelters with their mothers who have encountered SGBV should be comprehensively taken care of.
- Increased funding should also target mental health as SGBV survivors suffer psychological stress, which, at times is prolonged by the experience.
- A kitty needs to be set up for WEE as it ensures that women survivors of SGBV have an exit plan after shelters that enables them progress into meaningful productive lives.
- Finally, setting up funds for psycho-social and legal support for SGBV survivors was considered inevitable. This should be a prerogative of the government.

3.0 Webinar Conclusions

It was noted that the government has a robust policy addressing all forms of SGBV, including a mandate to County governments, which have a reference document in the form of the Model Legislative Framework on SGBV (2017). This is a framework that Counties are expected to domesticate. Observably, as noted, there is slow response mechanisms among the first line duty bearers which should continually be improved. Activating and supporting multi-agency action and survivor support systems such as *Policare* has great potential.

From the webinar, it is also emergent that the model adopted by Life Bloom International is comprehensive combining psychological support, economic and capacity building which is ideal for the evaluative SGBV study by the KU Hub. The presentation by the CREAM further affirms the strong connection between economic crises/ lack of employment or work for women, which is noted to increase SGBV at household level. Their experiences during the COVID 19 where abuse escalated by nearly 95%, further grounds the SGBV study. It also shows that SGBV is deeply ingrained in the society where it is escalated by disaster and emergencies, which cause economic shocks at household and societal level. The Makueni GVRC, modeled after Nairobi Women's GVRC, provides temporal shelter and psychological support for survivors. It also links with communities in sensitization against SGBV with the aim of capacity building survivors to handle the vice. The Nairobi Women's GVRC has addressed stigma associated with SGBV with an outreach beyond Nairobi and the country. Their aim is to assist all Counties set up GVRCs with both technical and organizational capacity.

It was also noted that clear policies on running shelters are lacking, hence different actors are doing it without national or County-based frameworks. This poses a danger of poor coordination, and as noted, overreliance on donor support, which in many cases may be inadequate or inconsistent.

3.1 Recommendations

- i. There is need for government to fast-track the domestication of the model legislative framework on SGBV across all Counties.
- ii. The Kenya government should regularize for the purpose of monitoring or outlaw alternative dispute resolution trends that are often used in addressing SGBV. Considering the sensitivity of SGBV cases, the justice process needs to be timely and responsive.
- iii. Policy to outline the standards and operating procedures for RRRPs should be a priority. The government needs to incorporate stakeholders to ensure standard delivery of services and address aspects of dependency. The policy should spell out the funding gap in sustaining shelters.
- iv. A specially funded kitty for SGBV survivors should be established at the relevant ministry to enable them access funding for economic ventures for WEE and ensure the women have an exit plan after exiting shelters to start productive lives.
- v. As a model, the national and county government should set up RRRPs that offer comprehensive recovery and rehabilitation options for survivors. This should be coupled with mounted prevention campaigns while monitoring and evaluating progress which should be outlined in the policy framework.

- vi. In order to achieve the aspiration of the 2010 Constitution, there is need for a legislative framework to address matters of violence around LGBTQ persons, which are unique and often not brought to the fore due to stigma and discrimination.
- vii. In view that most survivors reporting to GVRCs do not make repeat visits and are thus not followed up, there is need to have a coordinated mechanism of reaching out to survivors to ensure they achieve full rehabilitation and recovery.
- viii. There is a need to fast track the review of the Sexual Offences Act (SOA) as well as the relevant penal code in cases of defilement and violence. Removing hurdles that inhibit justice to survivors is a priority especially considering the fact community-based forms of disenfranchisement are visible. This is a pointer that legal aid is currently not sufficient.
- ix. Strengthening and increasing mental, psycho-social and legal support systems for survivors of SGBV would ensure complete rehabilitation for many.
- x. Coordination among various stakeholders and timely interventions should be improved.

3.2 Action points/Way forward

- The Webinar proceedings informed the revision of the research tools and alignment to the field realities based on the gaps that were highlighted by both the state and non-state actors.
- The proceedings also pointed to an emergent need for policy makers to work with multiple actors in the field of SGBV. In each of the initiatives and programmes implemented by the actors represented in the webinar; successes, constraints and lessons are noted. To what extent are these utilized in informing policy and what works in successfully and meaningfully involving state and non-state actors in policy development? The KU-WEE hub will be addressing this in its policy docket.
- Robust policies and frameworks whose aim is to inform SGBV work exist, and more will be developed. However, there is need to establish the key elements that should be built into these to make them work. Each of the actors have developed approaches to respond to and prevent SGBV, however, its complexity, which is interwoven with other forms of disenfranchisement imply that one size does not fit all. Policies and initiatives should be tailored to address specific needs/ contexts; hence the more justification of this study.
- There are grey areas in terms of policy – the need for inclusion all persons specifically LGBTQ; how best can their needs be incorporated and taken care of to ensure their safety?
- Though shelters for SGBV survivors exist, the country has only a handful, which face the challenge of funding and staffing and can only accommodate short stays. Besides, the services offered therein should be comprehensive enough to help survivors overcome SGBV. This will facilitate and guide evidence building for policy guide.
- SGBV hinges on development, yet it is not well centralized and prioritized in most approaches. Could this be the missing link in efforts to address SGBV?

Appendices

Team: Prof Grace Wamue- Ngare(PI) ; Dr. Pacificah Okemwa(Co-PI); Prof. Lucy W. Maina; Dr. Grace Mose Okong'o; Dr. Pauline W. Kamau; Dr. Jane Wanjira Njuguna; Dr. Isaac Kimunio; Dr. Simon Okumba Miruka; Ms. Lilian Kiruja (Other Researchers); Mr. Simon Peter Okoth (Graduate Student)

Appendix 1: Webinar Programme

SGBV Webinar

Addressing Sexual and Gender
Based Violence as a Constraint to Women's Work

Friday 9 th , July, 2021: Session Chair: Dr. Regina Mwatha	
8.30 -9.00 am	Arrival and Registration – Susan Kiambati
9.00-9.05	Welcome Remarks - Hub Leader Prof. Judith Waudo
9.05-9.25	Impact of programmes and Initiatives addressing Sexual and Gender-Based Violence as a Constraint to Women's Economic Empowerment Prof. Grace Wamue-Ngare Advocacy & Policy & Project PI
9.25- 9.45	SGBV Policy Terrain, Responsive and preventive initiatives in Kenya Ministry of Public service, Gender Affairs- State Department
9.45- 10.00	Challenges in dealing with SGBV Survivors' at the GVRC Rebecca Gitau -Nairobi Women's Hospital
10.00-10.15	Shelter Homes as a Response to SGBV Wangechi Wachira -CREAW
10.15- 10.30	Experiences in Responding to SGBV and Women's Economic Catherine Wanjohi -Life Bloom International
10.30-10.45	Q/A
10.45-10.55	Way Forward- Dr. Pacificah Okemwa
10.55-11.00	Votes of Thanks- Dr. Isaac Kimunio

Appendix 2: Webinar attendance report

First name	Last name	Email	Duration	Time joined	Time exited
			1 hr 23		
Peter	Baraka	pete*****@***.com	mins	08:31	11:06
Daisy	Chebet	dais*****@***.com	44 mins	10:11	11:04
			2 hrs 35		
Njoki	Eunice	njok*****@***.com	mins	08:25	11:06
			2 hrs 24		
Darmi	Fardha	darm****@***.com	mins	08:37	11:05
			1 hr 10		
Rebecca	Gitau	rgit**@***.ke	mins	09:11	10:22
Josphat	Ireri	njue*****@***.com	52 mins	10:14	11:06
			2 hrs 4		
Wambura	Kaguongo	wamb*****@***.com	mins	08:56	11:02
SUSAN			2 hrs 35		
KIAMBATI	KALANGI	kalangi.susan@ku.ac.ke	mins	08:25	11:06
			2 hrs 39		
Pauline	Kamau	paul****@***.ke	mins	08:25	11:05
			2 hrs 5		
isaac	kimunio	kimunio.isaac@ku.ac.ke	mins	09:02	11:07
			2 hrs 7		
Lilian	Kiruja	lili*****@***.com	mins	08:44	11:05
			2 hrs 17		
LUCY	MAINA	lucy*****@***.com	mins	08:50	11:07
	Makhamar				
Hilda Felistus	a	hilda.makhamara@ku.ac.ke	9 mins	09:42	09:51
			2 hrs 39		
Rubai	Mandela	rub*****@***.com	mins	08:26	11:05
			2 hrs 17		
m wesh	micheni	mwes*****@***.com	mins	08:48	11:06
Jacquie	Migide	migi***@***.com	18 mins	10:02	10:35
			1 hr 9		
Edna Jemutai	Moi	moi.edna@ku.ac.ke	mins	09:12	10:21
Grace	Mose	bon*****@***.com	32 mins	10:33	11:05
			2 hrs 34		
STEPHEN	MUATHE	MUATHE.STEPHEN@ku.ac.ke	mins	08:37	11:11
Martha	Muhwezi	pofa**@***.com	24 mins	08:56	09:19
Baron	Musyoka	bmus*****@***.com	46 mins	10:16	11:06
			1 hr 46		
PURITY	MUTHIMA	MUTHIMA.PURITY@ku.ac.ke	mins	08:59	11:06
			2 hrs 2		
sheila	mutuma	mutuma.sheila@ku.ac.ke	mins	09:03	11:06

Raphael	Muya	rwm*****@***.com	2 hrs 29 mins	08:37	11:06
Germano	Mwabu	mwabu.germano@ku.ac.ke	1 hr 45 mins	09:20	11:06
MARY Regina Gathoni	MWANGI	MWANGI.MARY@ku.ac.ke	2 hrs 2 mins	08:58	11:06
PHOEBE	Mwatha	mwatha.regina@ku.ac.ke	2 hrs 39 mins	08:27	11:06
MARY	NALWA	NALWA.PHOEBE@ku.ac.ke	2 hrs 7 mins	08:59	11:06
Peninah jacquiline	NASIBI	NASIBI.MARY@ku.ac.ke	2 hrs 29 mins	08:37	11:06
jane	Ndonge	peni*****@***.com	2 hrs 37 mins	08:30	11:07
JOY	ngina	jacq*****@***.com	14 mins	09:00	09:14
Pacificah	njuguna	wanj*****@***.com	1 hr 28 mins	08:54	10:23
Simon JAMES OMBOGO	OBANDO	OBANDO.JOY@ku.ac.ke	1 hr 21 mins	08:42	10:03
SIMON	Okemwa	poke*****@***.com	2 hrs 27 mins	08:38	11:06
Mame	Okoth	simo*****@***.com	2 hrs 33 mins	08:32	11:06
Paul Kemboi	ONDITI	onditi.james@ku.ac.ke	3 hrs 47 mins	08:30	12:17
Caroline PROF CAROLINE	ONYWERE	ONYWERE.SIMON@ku.ac.ke	1 hr 56 mins	09:11	11:06
leah	Osman	osma*****@***.com	2 hrs 30 mins	08:36	11:06
John	Samoei	samo*****@***.com	1 hr 28 mins	08:34	10:49
Nancy PETER	Thoruwa	caro*****@***.com	2 hrs 3 mins	09:02	11:05
Grace	THORUWA	THORUWA.CAROLINE@ku.ac.ke	3 mins	08:40	08:43
	wachira	lwac*****@***.com	2 hrs 14 mins	08:52	11:06
	Wafula	name*****@***.com	1 hr 14 mins	08:46	10:00
	Wambere	wamb*****@***.com	2 hrs 19 mins	08:39	11:06
	WAMBUA	WAMBUA.PETER@ku.ac.ke	1 hr 1 min	08:39	09:49
	Wamue	WAMUE.GRACE@ku.ac.ke	2 hrs 24 mins	08:42	11:06

leah	wanjama	wanjama.leah@ku.ac.ke	1 hr 1 hr 41	08:59	09:59
RUTH	WANJAU	WANJAU.RUTH@ku.ac.ke	mins 2 hrs 22	08:58	10:50
Catherine	Wanjohi	kath*****@***.com	mins 2 hrs 14	08:44	11:06
JUDITH	WAUDO	WAUDO.JUDITH@ku.ac.ke	mins	08:52	11:06

Appendix 3: Webinar Screengrabs

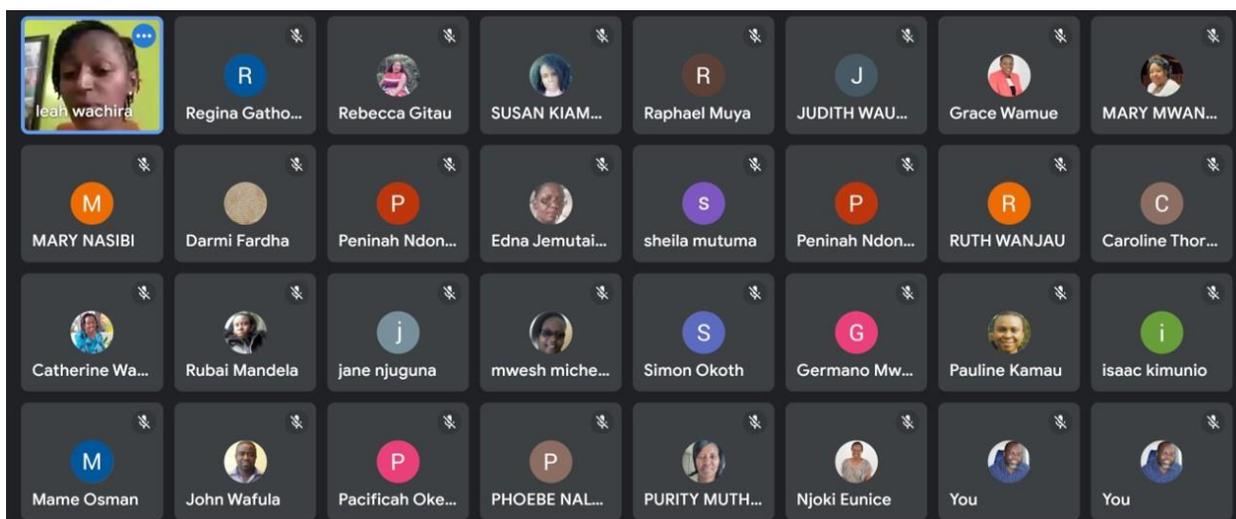


Photo 1: Ms. Wangechi Wachira from CREA W makes her presentation

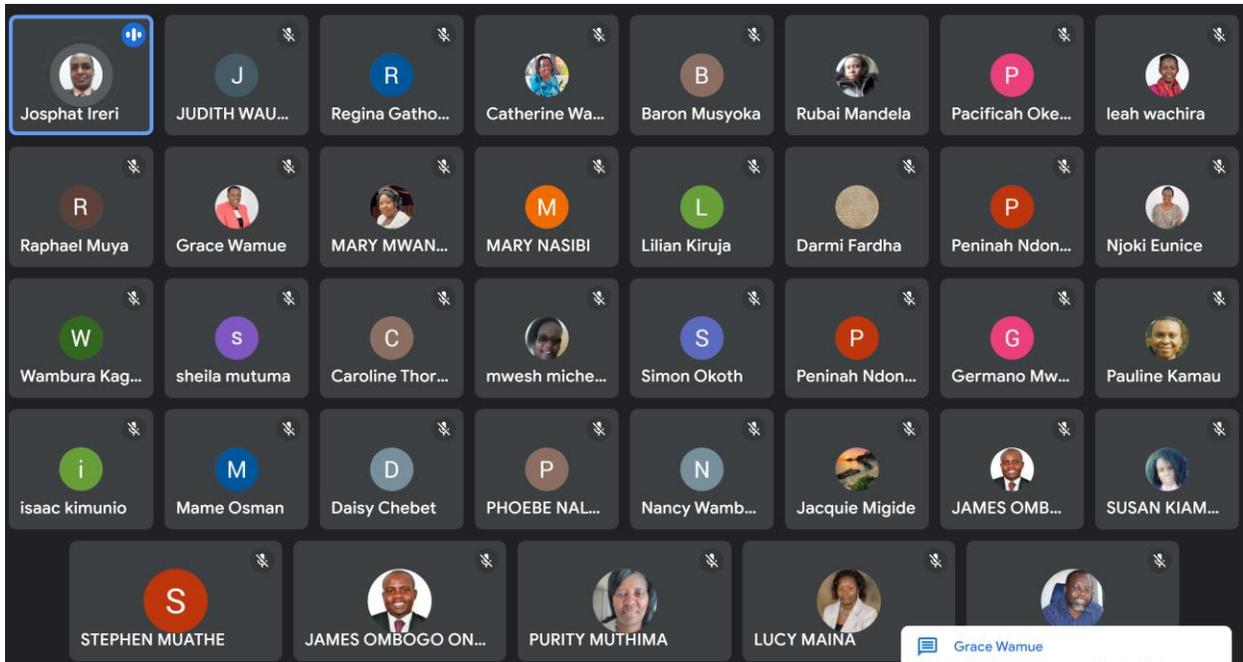


Photo 3: Mr. Josphat Ileri (Ministry of Public Service) gives his comments

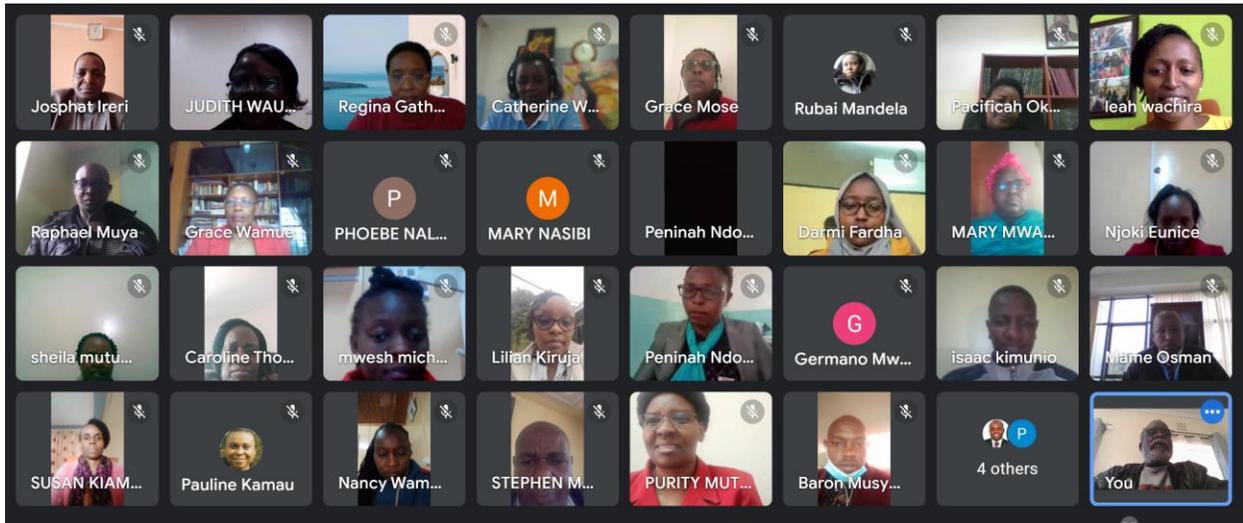


Photo 4: Webinar participants