

Assessing the Impact of Policy on Healthcare Resilience in Delivering Intimate Partner Violence Support Services Across Nigeria

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Introduction

Intimate Partner Violence (IPV) is a major public health concern in Nigeria, with **nearly 37% of women suffering emotional, physical, financial and sexual abuse**.¹ Although the Violence Against Persons (Prohibition) Act of 2015 aims to protect victims, its inconsistent enforcement limits effective healthcare support.

Healthcare systems play a crucial role in responding to IPV, as healthcare professionals are often the first point of contact, offering immediate medical assistance and long-term psychological support. Strengthening healthcare systems by integrating IPV policies is essential to guarantee that healthcare is inclusive and responsive to the needs of vulnerable populations.

The study aimed to evaluate how policy frameworks impact the resilience of healthcare systems in providing support to IPV victims across Nigeria

Methods

A three-pronged approach was used to obtain policy documents: email inquiries to state officials to request existing IPV policies, Freedom of Information requests to obtain official policy documents, and systematic web searches to gather publicly available documents from government and non-governmental organisations' websites. Policy documents from 17 states were analysed to assess their alignment with international standards for IPV management, focusing on healthcare support, accessibility, and coordination. The evaluation benchmarks were based on international World Health Organization and United Nations Women guidelines.

A qualitative framework analysis was employed for this study. The analysis focused on key elements such as the explicit definitions of all forms of IPV, the inclusivity of gender and relationship statuses and the provision of protection services. A set of 11 analytical questions guided the coding and thematic analysis of the policy documents. The questions were designed to evaluate how these fundamental aspects were addressed within the policies across various states.

Results

Out of the 37 jurisdictions encompassing Nigeria's 36 states and the Federal Capital Territory, only **45.9%** had accessible IPV policy documents.



Results Contd.

Definitions of IPV varied widely among states. Some states included comprehensive definitions covering physical, emotional, financial, and sexual abuse, while others had vague or incomplete definitions. This inconsistency affects the ability of healthcare providers to deliver appropriate support.

Support services, such as shelters, counselling, and healthcare, were found to be unevenly distributed. While some states provided robust services, others lacked basic infrastructure, resulting in inadequate support for IPV victims.

There was also a lack of integration between healthcare, social services, and the justice system which resulted in fragmented support.

Discussion

The findings highlight critical gaps in Nigeria's response to IPV, significantly impacting healthcare resilience. Inconsistencies in policy availability and definitions lead to unequal access to healthcare and support services for IPV victims.

For a healthcare system to be resilient and inclusive, there must be standardized frameworks that provide clear guidelines and accessible services for all victims. Integrating IPV policies into healthcare systems ensures that victims receive timely medical care, psychological support, and social assistance, thereby enhancing individual recovery and strengthens healthcare system's overall ability to respond to violence.

Without coordinated systems, many victims are left underserved and vulnerable, undermining the effectiveness of healthcare interventions.

Recommendations

- 1. Standardized Legal Framework:** Develop and implement a unified IPV policy across all states to ensure consistency in healthcare support and protection for victims.
- 2. Integration of Services:** Strengthen coordination between healthcare, social, and legal services to create a seamless network of support for IPV victims.
- 3. Investment in Support Services:** Increase funding for shelters, healthcare facilities, and counselling services to guarantee victims access to comprehensive and timely care.

Reference

1. Nigeria Population Commission, 2019. Nigeria demographic and health survey 2018. NPC, ICF.

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