



European Union



Establishing a Sexual Assault  
Referral Center (SARC)

# Critical considerations for state governments and line ministries



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## 1. Agreement and partnership among line ministries / key stakeholders (Ministry of Justice, Ministry of Health, Hospital Management Board or its equivalent, the hospital that will house the SARC, Ministry of Gender/Women's Affairs etc.) to establish a SARC



Have you established 'buy-in' from all stakeholders and agreed clear roles, responsibilities and budget commitments that will ensure both the effective day today running of the SARC and long- term sustainability of the SARC?



Have you developed a Memorandum of Understanding (MoU) between the above stakeholders, which has been signed by all parties?



Have you agreed a system of management and oversight of the day to running of the SARC?

Have you agreed a plan of action for ensuring the sustainability of the SARC?

## 2. Allocate an appropriate facility to be used as a Sexual Assault Referral Centre (SARC)

An ideal space should have the following features:



**Access to hospital facilities:** Located within the premises of a state funded hospital with free access to the hospital's diagnostic/laboratory facilities if any and

access to the hospital's in-patient facilities, including beds and on-call medical staff. Must be able to leverage on existing water, electricity, cleaning and security structure of the hospital, at no cost to the SARC or to the client.



**Offer client privacy:** Where possible, for the privacy of the client, the allocated space should be slightly removed from the hospital's general reception or A&E area, with its own separate entrance and exit. Where possible, it should be located away from general corridors and walk-ways. A stand-alone block behind or off the main hospital building would be ideal.



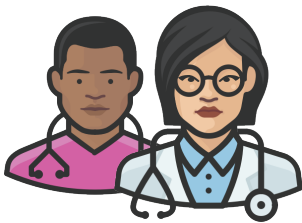
**Functionality of the space:** The allocated space should have potential to be partitioned into 4 rooms (including a reception area + medical examination room + counselling room + a room for prosecutors/legal support services area) + toilet + bath stall. Where possible, the space should be located on the ground floor, with all rooms, door entrances, exits, walk-ways and corridors large enough to be wheelchair accessible.



**Sustainable:** Long term commitment by State Ministry of Health demonstrated by a letter from the Ministry/Hospital Management Board allocating the specific space and granting permission for the space to be refurbished and used as a SARC for an indefinite period of time, for the benefit of the general public.

**3. Identify medical and counselling personnel (who are already on the payroll of the State Ministry of Health/Hospital Management Board AND currently on the payroll of the State Ministry of Women Affairs) who will work at the SARC on full time or rota basis.**

**Considerations:**



At least 2 qualified doctors (at least 1 female) who must currently be employed by the hospital within which the SARC is located OR currently employed within a neighboring state - funded hospital.



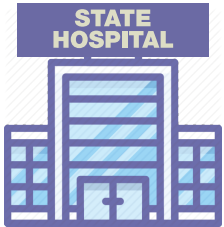
At least 2 qualified nurses (at least 1 female) who must currently be employed by the hospital within which the SARC is located OR currently employed within a neighboring state - funded hospital

**4. Train appropriate medical and counselling personnel.**

**Medical and counselling personnel who will work in the SARC will receive 5-day training to equip them with the knowledge and skills to deliver services in a SARC.**



The expectation is that all participants will have been carefully chosen by respective State ministries and will be allowed to employ their newly acquired skills in the SARC, without the risk of being held back or transferred elsewhere by their ministries.

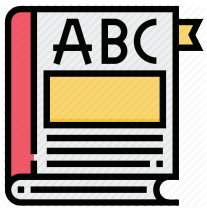


Participants nominated to receive this training **MUST** be currently employed as medical staff within a state-funded hospital OR as counselling staff/social workers under the state ministry of women affairs, where the training they receive will be directly relevant.

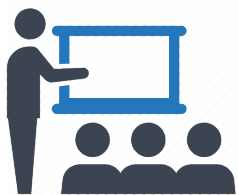


The selection process should seek to balance the number of male and female training participants.

The language of delivery will be English and training participants will be expected to be fluent in English.



Participants who receive the training will be expected to share their learning as appropriate with colleagues within the hospitals where they work.



Participants will be expected to attend the full duration of the training. Only those who provide 100% attendance will be presented with a certificate of attendance

## About the RoLAC Programme

The Rule of Law and Anti-Corruption (RoLAC) is a 4-year (2017 – 2021) European Union-funded programme that is implemented by the British Council. The programme aims to enhance good governance in Nigeria by contributing to the strengthening of the rule of law and curbing corruption, as well as supporting reform initiatives that are led by the Federal and State criminal justice institutions, anti-corruption agencies, civil society, citizens, and the media. RoLAC's interventions are implemented in 5 states – Adamawa, Anambra, Edo Kano, Lagos – and at the Federal level.

RoLAC has supported initiatives that have resulted in the adoption of laws and practices that facilitate access to justice for women, children, and persons with disabilities; and is now focused on supporting state governments and civil society in the implementation and embedding of these laws and practices.

### For more information

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