



NATIONAL POLICE SERVICE

**POLICARE
POLICY**

POLICARE POLICY

JUNE 2021



NATIONAL POLICE SERVICE

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POLICARE POLICY

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ACRONYMS AND ABBREVIATIONS

APS	Administration Police Service
COG	Council of Governors
CSO	Civil Society Organization
DCI	Directorate of Criminal Investigations
DNA	Deoxyribonucleic Acid
DIG	Deputy Inspector General
IG	Inspector General
KPS	Kenya Police Service
NLAS	National Legal Aid Service
NGAAF	National Government Affirmative Action Funds
NGCDF	National Government Community Development Funds
NGEC	National Gender and Equality Commission
NPS	National Police Service
ODPP	Office of the Director of Public Prosecutions
OSC	One Stop Centre
PCAK	Professional Criminologists Association of Kenya
SGBV	Sexual and Gender Based Violence
SOP	Standard Operating Procedure
SRHR	Sexual and Reproductive Health Rights
TWG	Technical Working Group

FOREWORD



This POLICARE Policy seek to address the endemic problem of Sexual and Gender- Based Violence (SGBV) in a more holistic and expeditious manner.

It is borne out of the realization that SGBV is multi-faceted problem that requires the concerted efforts of various actors.

In this regard, the NPS is currently in the process of operationalizing a “One-Stop” SGBV Response Centre, christened POLICARE (“Police Cares”).

The POLICARE model seeks to synergize and complement the existing NPS structures and programs by adopting a Multi-Sectorial (“Whole-of Government/Society”) approach to the management of SGBV.

The overarching objective of POLICARE is to provide a framework to support and strengthen the capacity of the NPS to effectively and efficiently prevent and respond to SGBV.

This Policy focuses on the following five key areas: provision of holistic services in a One-Stop Centre; enhancing collaboration and synergy within the Criminal Justice System; elimination of victimization and interference of victims and witnesses; facilitation of expeditious justice and closure of SGBV cases; and ensuring knowledge management and capacity building for effective victim support and justice.

It is hoped that the synergy among the stakeholders will bring success in all the focused areas. I therefore urge all members of the NPS and stakeholders to embrace POLICARE to ensure its successful implementation and sustainability.

HILARY N. MUTYAMBAI, MGH, nsc (AU)
INSPECTOR GENERAL -NATIONAL POLICE SERVICE

PREFACE



POLICARE, an acronym derived from the two words Police and Care, is a One-Stop Centre model geared at prevention and response to Sexual and Gender-Based Violence (SGBV) in our country. The model is an integrated National Police Service (NPS) led Multi-Sectoral Initiative seeking to harmonize and synergize SGBV interventions amongst all key policy stakeholders.

The initiative advocates for the expansion and strengthening of multi-sectoral comprehensive response mechanisms to ensure that survivors of SGBV receive the multiple forms of support they need to recover from the effects of abuse. The initiative will ultimately complement existing efforts, by state and non-state actors, to prevent and respond to SGBV in Kenya.

I am convinced that the establishment of sustainable POLICARE Centres nationally will inevitably restore priceless dignity to victims of SGBV. This will be achieved through thorough police investigations; witness protection; psychosocial support to victims and comprehensive data collection and management.

To realize the aspirations of the POLICARE model, there is need to formulate the requisite legal, policy and institutional frameworks, to harmonize and scale-up existing interventions, alongside mainstreaming inclusivity and creating synergy amongst SGBV actors under the overall stewardship of the National Police Service.

The sustainability of this initiative will certainly depend on adequate resource allocation, consistency in operations and upholding the requisite standards as stipulated by the framework documents.

I urge all agencies to embrace POLICARE as a professional, survivor-centered approach that will offer priceless dignity to victims of SGBV in our country.

A handwritten signature in red ink, which appears to read 'Edward N. Mbugua'. The signature is stylized and cursive.

**EDWARD N. MBUGUA, CBS, OGW, ndc (K)
DEPUTY INSPECTOR GENERAL-KPS.**

ACKNOWLEDGEMENTS

The NPS is grateful to individuals and institutions for their input at every stage of the POLICARE Policy development process as well as for their ongoing efforts to address Sexual and Gender-Based Violence (SGBV) in our country.

The policy would not have come to fruition without the commitment and dedicated leadership provided Mr. Hilary Mutyambai, the Inspector General, NPS, and Mr. Edward Mbugua, the Deputy Inspector General, KPS. The priceless support of Principal deputy to DIG, Ms. Mariam Muli, and NPS spokesperson Mr. Charles Owino has lasting ink on POLICARE.

The policy was developed through an extensive, inclusive and participatory process whereby consultations were held with a wide range of stakeholders drawn from the National and County levels. We owe our gratitude to the Technical Working Group led by Mr Daniel Wathome and comprising individuals drawn from the Government, Private Sector, Development Partners and Civil Society Organizations who worked tirelessly to ensure quality of the entire process.

We also appreciate the invaluable contribution of key partners during all the stages of developing and completing the policy. Specifically, we are grateful to Ministry of Public Service and Gender; Ministry of Interior; Ministry of Health; the Judiciary; National Gender and Equality Commission (NGEC); the Office of the Director of Public Prosecutions; Directorate of Children Services; Probation and Aftercare Service Department; Directorate of Community Policing, Gender and Child Protection; International Peace Support Training Centre (IPSTC); Professional Criminologists Association of Kenya (PCKA); Independent Medico-Legal Unit (IMLU); Susan Gitau Counseling Foundation; and Kirk TV.

Further, we would like to thank some key opinion leaders who graciously supported the POLICARE initiative and are therefore our priceless champions. In particular, NPS would like to thank, Hon. Margret Kobia, Dr. Joyce Mutinda, Hon. Senator Johnson Sakaja, Hon. Senator Mutula Kilonzo Jnr, and the Nairobi County Member of Parliament Hon. Esther Passaris.

Finally, we deeply appreciate TETRATECH Chief Party Ms. Jaki Mbogo, through REINVENT program for the financial and consultancy services led by Dr. Roseline Odende. Complements to Mr. Victor Amwattah, program advisor and Ms. Zipporah Nderitu the concept initiator.

PRELIMINARIES

Section 10(1) (h) of the National Police Service Act, gives the Inspector General of Police power to organize the service at national level into formations, units, or components. Section 23(d) of the same Act empowers the DIG-KPS to establish a facility in each police station for receiving, recording, and reporting of complaints from members of the public. The establishment of POLICARE as a component of the NPS where members of the public can receive and record complaints relating to SGBV is therefore statutory.

VISION

The vision of POLICARE is to establish one-stop centres of excellence in every county where victims of SGBV can access justice easily and readily without suffering further indignity.

MISSION

The Mission of this Policy is to accelerate response mechanisms; coordinate and reinforce efforts and processes for response and prevention of SGBV, which shall improve the quality of life and wellbeing of all victims of SGBV.

MOTTO

"Priceless Dignity"

CHAPTER ONE

INTRODUCTION

1.1 Background

The NPS is established by the Constitution of Kenya (2010) and legislated through the National Police Service Act (2011). It is the unifying framework for the Kenya Police Service (KPS), the Administration Police Service (APS), the Directorate of Criminal Investigations (DCI) and the Internal Affairs Unit (IAU).

Under Article 244 of the Constitution, NPS is required to comply with constitutional standards of human rights, fundamental freedoms, and dignity, to strive for the highest standards of professionalism and discipline, to train staff to the highest possible standards of competence and integrity and to foster and promote relationships with broader society. Establishment of POLICARE falls within the NPS constitutional mandate.

This Policy constitutes a set of practical directions on how the NPS will establish, manage, and operate POLICARE POLICARE Centres for response to, and prevention of SGBV. POLICARE is an acronym for “POLICE that CARE”. It intends to promote the concept of a friendly caring police service as opposed to a police service that scares.

Coordinated response models, or “one-stop” services represent a promising model for providing comprehensive care to survivors of SGBV by offering them medical, legal, protection and psychosocial services either within one location, or through a referral system that links services. The main aim of the coordinated response model is to reduce trauma, increase victim safety and perpetrator accountability by coordinating and linking core services, including providing immediate to longer term health care, access to police, legal services, and cultural and age-appropriate counselling services.

The current structure for responding to SGBV cases is a multi-agency approach, which is both confusing and cumbersome for victims. SGBV is a very traumatic experience that leaves victims severely traumatized mentally, physically and emotionally. The current winding process of seeking redress adds to the trauma and erodes the dignity of victims. POLICARE seeks to streamline the process, reduce trauma, and restore dignity to victims.

Many cases fail to secure convictions due to lack of proper evidence collection especially forensic evidence. Cases also take long to conclude in court and usually some victims give up

in the court process. Attitudes of some officers towards cases of sexual violence have also been a barrier.

POLICARE in line with the NPS Constitutional mandate shall ensure that human rights and dignity are protected, and that services offered by NPS are of the highest standards of professionalism and discipline.

1.2 Rationale

The mission of the NPS is “To provide professional police service through community partnership and upholding the rule of law for a safe and secure society”. SGBV is predominant in the society and in homes, and people no longer feel secure whether in private spaces or in public spaces. The NPS need to develop an innovative structure for ensuring rule of law for a safe and secure society.

The constitution mandates the NPS to respect and protect human rights, fundamental freedoms, and dignity. Accordingly, NPS has established POLICARE, which is a one-stop centre that offers comprehensive coordinated response to victims of SGBV. At POLICARE centres victims will be offered protection, psycho-social, medical and legal services under one roof. This will ensure expeditious processing and closure of SGBV cases and ultimately accord victims priceless dignity, protect their human rights, and ensure safety and security of all members of the society. This policy therefore intends to put in place a framework to accelerate implementation of POLICARE.

1.3 Goal

The overall goal of this Policy is to guide the establishment and management of POLICARE centres in order to offer integrated services to victims and offenders of SGBV.

1.4 Purpose

The purpose of this Policy is to put in place a framework to accelerate implementation of POLICARE.

1.5 Objectives

The objectives of this Policy are to:

1. Provide a framework for establishment of POLICARE centres.
2. Facilitate cooperation, collaboration, and synergy amongst POLICARE centre service providers.
3. Provide a framework for the delivery of quality and comprehensive delivery services in POLICARE centre.
4. Provide a framework for the delivery of quality and comprehensive delivery services in POLICARE centre.
5. Assist in capacity building of POLICARE centre service providers.
6. Provide a framework for sustainability POLICARE centres.

1.6 Guiding Principles

- a) Equality
- b) Integrity
- c) Accountability
- d) Confidentiality
- e) Professionalism
- f) Timeliness
- g) Justice
- h) Equity
- i) Inclusivity
- j) Empathy

1.7 Approaches

This policy will be guided by the following approaches:

- a) The Human Rights Based Approach, which identifies rights holders and duty bearers and their respective entitlements and obligations.
- b) The Trauma Informed approach which realizes the widespread impact of trauma and understands potential paths for recovery, recognizes the signs and symptoms of trauma in clients, witnesses, families, staff, and others involved with the system, Responds, by fully integrating knowledge about trauma into policies, procedures, and practices, and seeks to actively resist re-traumatization.
- c) The victim-centered approach which prioritizes rights, needs, and wishes of the survivor.
- d) The gender-responsive approach, which recognizes the gender dynamics, impacts and consequences of SGBV.
- e) The preventive approach, where actors focus on activities that lead to reduction of the incidence of SGBV.
- f) The evidence-based approach which focuses on using factual and timely data to inform policy formulation and programming.
- g) Integrative and collaborative approach, which recognizes the complexity and multi-dimensional nature of SGBV and seeks to create linkages and logical chains of collaboration between actors in the different sectors.

CHAPTER TWO

LEGISLATIVE, POLICY AND INSTITUTIONAL FRAMEWORKS

2.1. International Legislative Framework

Globally, the Beijing Declaration and Platform for Action of 1995, the UN Convention on the Elimination of All Forms of Discrimination against Women, the UN Convention on the Rights of the Child¹, the UN Declaration on the Elimination of Violence against Women² affirms that SGBV constitutes a violation of the rights and fundamental freedoms.³ Further, the African Union (AU) adopted the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo Protocol) in 2003 which was ratified by Kenya in 2010 devotes Article 4 entirely to the topic of SGBV calling for a range of state measures to address violence which takes place "in private or public", including the punishment of suspects, the identification of causes of violence against women and the provision of services for victims.⁴

2.2. National Legislative Framework

The Government has put in place the following legal framework to address issues of SGBV. The Constitution of Kenya; the Penal Code; Criminal law (Amendment) Act 2003 which amended the Penal Code to enhance sentences on sexual violence; the Criminal Procedure Code; and the Sexual Offences Act, which among other things broadens the definition of sexual offences; the Sexual Offences (Amendment) Act, 2011 which strengthened the 2006 Act; the Sexual Offences Regulations 2008; and the Sexual Offences Dangerous Offenders DNA Data Bank Regulations, the Counter Trafficking in Persons Act (2011) and the Prohibition of Female Genital Mutilation (FGM) Act 2011. The impact of these laws is however hampered by inadequate enforcement and gaps in various respects.

2.3. National Policy Framework

In addition, the government has developed policies to address sexual violence including: National Gender and Development Policy (2020), National Policy for Prevention and Response to Gender based Violence (2014), National Adolescent Sexual and Reproductive Health Policy (2015), National Guidelines on the Management of Sexual Violence (2014), Vision 2030

Second Medium Term Plan (2018 - 2022), Sexual Offences (Medical Treatment) Regulations (2012), The National Reproductive Health Strategy (2009-2015), the National Social Protection

¹Convention on the Rights of the Child, CRC/C/OPAC/BEL/Q/1/Add.1, 3 April 2006.

²UN Declaration on the Elimination of Violence against Women, General Assembly Resolution 48/104, dated 20 December 1993

³UN Declaration on the Elimination of Violence against Women, General Assembly Resolution 48/104, dated 20 December 1993

⁴Assembly of the African Union, Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa, Maputo, 11 July 2003, Article 4.

Policy, 2011, National Policy on the abandonment of FGM, 2010, the National Guidelines on the Management of Sexual Violence, 3rd Edition 2013; and multi-sectoral Standard Operating Procedures for Management of Sexual Violence.

2.4. National Institutional Framework

The key government institution charged with coordination of SGBV prevention and response interventions in the country is the State Department of Gender Affairs, under the Ministry of Public Service and Gender. Other key institutions include the National Gender and Equality Commission (NGEC) with a responsibility of oversight on gender issues; the Ministry of Health with the responsibility of delivery of quality services for GBV survivors/victims; the criminal justice system for enforcement of law and order including the Judiciary, Office of the Director of Public Prosecutions, Prisons Department, Department for Probations and Aftercare, Ministry of Labour and Social Protection: State Department of Children Services and the National Police Service.

The NPS has established structures to deal with GBV cases. Both KPS and APS have a directorate of gender and community policing and a child protection unit at their respective headquarters, which coordinate response to GBV across the country. Equally, the DCI has an Anti-Human Trafficking and Child Protection Unit which collaborate other national and international entities in the investigation of child abuse and exploitation cases. Besides, every police station across the country has a dedicated gender and children desk which has officers dedicated to their peculiar needs. The POLICARE model and policy shall therefore complement and supplement the existing NPS structures by adopting a multi-sectorial approach to management of SGBV cases.

2.5. Initiatives to Address SGBV

In the security sector, programmes have included the establishment of Gender Desks at police stations and the development of a training curriculum on SGBV for police officers and the continued sensitization of police officers. An SGBV manual for prosecutors has also been launched and prosecutors deployed to specifically deal with SGBV cases in areas with high prevalence. Other initiatives include the use of sector specific Codes of Conduct, multi-sectoral Standard Operating Procedures for SGBV Prevention and response, SGBV workplace policies,

sexual harassment policies, men to men programmes and male involvement programmes. The office of the Director of Public Prosecutions (ODPP) has appointed special prosecutors to prosecute cases of sexual violence.

CHAPTER THREE

POLICY PRESCRIPTIONS AND ACTIONS

3.1. Overall Objective

The overall objective of POLICARE is to provide a framework to support and strengthen the capacity of NPS to effectively and efficiently prevent and respond to SGBV.

3.1 Policy Objective 1: Provide a Framework for Establishment of POLICARE Centres

To achieve this objective, the NPS shall:

- a) Establish fully equipped and resourced POLICARE Centres providing medico- legal, psycho-social and forensic services across the country.
- b) Develop capacity of NPS officers in SGBV related psycho-social support.
- c) Sensitize officers on the SOPs for handling and storage of forensics, as contained in the NPS SOPs for Prevention and Response to SGBV.
- d) Develop a database of pro-bono lawyers and paralegals to assist victims.
- e) Develop a database of volunteer counsellors.

3.2 Policy Objective 2: Facilitate cooperation, collaboration and synergy amongst POLICARE centre service providers

To achieve this objective, the NPS shall:

- a) Partner with ODPP to timorously respond to requests for prosecution and advice.
- b) Partner with judiciary to station judicial officers at the centre.
- c) Partner with national Legal Aid Service (NLAS) to offer legal support.
- d) Partner with Kenya Prisons and Probation and Aftercare Services to promote the rehabilitation and reintegration of SGBV offenders into the community.
- e) Establish a multi-sectoral committee to ensure continued synergy.
- f) Develop a fully integrated data management system that can be accessed by all sector actors.

3.3 Policy Objective 3: To provide a framework for the elimination and victimization and interference of victims and witnesses

In this regard NPS shall:

- a) Together with strategic partners like NGECC carry out sensitization and awareness campaigns.
- b) Partner with the Witness Protection Agency to shield witnesses who need protection.
- c) Partner with providers of safe shelters to offer victims a safe space from which to operate and to reduce interference.
- d) Partner with pro-bono legal aid providers to obtain restraint orders against the offender, his family and proxies.
- e) Empower victims to understand their rights so that they are not misled into withdrawing charges.

3.4 Policy Objective 4: Provide a framework for the delivery of quality and comprehensive delivery services in POLICARE centre

Under this policy, the NPS will:

- a) Develop a protocol for case management and tracking, with a monitoring system.
- b) Enhance capacity of NPS officers in SGBV investigation and evidence collection.
- c) Partner with ODPP to ensure timeous prosecution of cases.
- d) Partner with judiciary to establish special or fast track courts for SGBV.
- e) Develop a monitoring and evaluation tool.

3.5 Policy Objective 5: Assist in capacity building of POLICARE centre service providers

To realize this objective, the NPS shall partner with POLICARE service providers and other stakeholders to:

- a) Conduct a training needs assessment of POLICARE service providers on SGBV.
- b) Develop a capacity building plan on SGBV.
- c) Mobilize resources for SGBV capacity building programmes.
- d) Conduct capacity building programmes on SGBV.
- e) Continuously monitor and evaluate SGBV capacity building programmes

3.6 Policy Objective 6: Provide a framework for sustainability POLICARE centres

To actualize this objective, the NPS shall:

- a) Ensure continuity by regularly consulting and referring to the SGBV strategy during planning exercises.
- b) Allocate adequate resources to POLICARE centers
- c) Refer to the SGBV strategy in project proposals and emphasize activities addressing gender inequality.
- d) Identify new or emerging SGBV issues and develop appropriate responses.
- e) Continuously monitor and evaluate performance of the POLICARE center.
- f) Bridge gaps in SGBV expertise by drawing on agreements and rosters with state and non-state agencies and to complement existing capacity.
- g) Seek support from relevant Ministries and partner agencies to enhance the operations of POLICARE centers.

The logo for POLICARE POLICY is centered on the page. It features the words "POLICARE" and "POLICY" stacked vertically in a bold, sans-serif font. The text is surrounded by several concentric, light-colored circular lines that create a sense of depth and focus. A small, solid-colored circle is positioned to the right of the text, partially overlapping the circular lines.

POLICARE
POLICY

CHAPTER FOUR

POLICY IMPLEMENTATION FRAMEWORK

4.1. Introduction

The implementation of this policy will adopt a multi-sectoral and multi-stakeholder approach. The process shall be guided by the preventive and responsive objectives and strategies of this policy that will be undertaken by National Police Service, Government, and stakeholders. The stakeholders comprise state actors, non-state actors, development partners and citizens. The policy will be implemented within the framework of the Constitution, Statutes and Policies. Implementation will be coordinated by the National Police Service.

For POLICARE to operate effectively it will have to be named as a component of the NPS to give it a legal structure within the NPS. Section 10 (1) (f) of the NPSA gives the Inspector General the power to name components and units of the NPS.

4.2. Role of State Actors in the Implementation of the Policy

The National Police Service will facilitate partnership building and inter-agency cooperation among all key stakeholders identified in this policy. This entails creating favorable legal and policy frameworks; maintenance of essential infrastructure for the operationalization of the policy and provision of adequate resources for the roll-out of the policy. Specific areas include establishing the POLICARE infrastructure, cascading all activities and initiatives to the County level; fostering research and data gathering; training and capacity building.

4.3. Stakeholders Involved in the Policy Implementation

Successful implementation of the policy will be the responsibility of state and non-state actors. The role of each stakeholder in the process is summarized in the implementation matrix and is briefly explained below.

4.4. Role of Stakeholders in the Implementation of the Policy

1. National Police Service

- a) Provide infrastructure and space for establishment of POLICARE Centers.
- b) Overall leadership and coordination in policy implementation, and Resource mobilization, data aggregation and analysis.

- c) Investigate SGBV offenses and collaborate with the ODPP in prosecution of the cases.
- d) Conduct forensic investigation through the DCI.
- e) Implement the SOPs on SGBV and POLICARE

2. Ministry of Health

- a) Integrate the health information management systems (HIMS) and Gender-Based Violence Information Management System (GBVIMS) into the integrated data management system created by NGECC.
- b) Elaborate the Standard Operating procedures on clinical management of SGBV and set standards.
- c) Deliver SGBV health related services at national and county level such as psychosocial support and treatment of victims.
- d) Effective participation within the multi-sectoral referral infrastructure.
- e) Second medical personnel to the POLICARE centre.

3. Ministry of Education

- a) Institutionalize a SGBV responsive quality curriculum in the sector
- b) Make all educational institutions gender, age and disability, stigma free in reporting SGBV
- c) Expand access to a gender sensitive and responsive quality education in all institutions

4. Office of the Director of Public Prosecutions

- a) Offer support and advice to the POLICARE team that shall enhance effective prosecution of SGBV cases.
- b) Train prosecutors on matters of sexual and gender-based crimes.
- c) Prosecute SGBV cases at POLICARE courts and ensure effective administration of Criminal justice system.
- d) Ensure full implementation of the Witness Protection Act in relation to sexual and gender based criminal cases.

5. Judiciary

- a) Enforce accountability for the SGBV suspects and promote the safety of victims.
- b) Establish special courts and/or sessions at the POLICARE Centers to hear and determine SGBV cases.
- c) Implement Bail, Bond and Sentencing policies to assist in determining cases of SGBV in a manner consistent with the law and constitution and ensure speedy determination of cases.

- d) Ensure that Magistrates and Judges are comprehensively trained on matters of sexual and gender-based crimes.

6. State Department for Gender

- a) Facilitate interagency and inter-sectoral planning for SGBV response in prevention, protection, and prosecution, monitor compliance with legislation and international conventions.
- b) Facilitate the development of interagency systems for incident reporting, documentation, referrals, information sharing, monitoring and evaluation, and coordination
- c) Facilitate access to resource and best practice materials, including new information available in newsletters, journal articles, and reports that disseminate best practices, lessons, innovations, and other practical tools.

7. Prison Department

- a) Facilitate the rehabilitation of SGBV offenders.
- b) Facilitate the reintegration of offenders with the society.

8. Probation and Aftercare Services

- a) Assist courts to make informed decisions on sentencing of SGBV offenders, the protection of SGBV victims, and on bail and penal release assessment of SGBV offenders.
- b) Facilitate the meeting victim-offender mediation programme, where necessary.
- c) Supervise convicted SGBV offenders.

9. County Governments

- a) Provide infrastructure and space for establishment of POLICARE Centres
- b) Establish safe homes for victims of SGBV in the Counties.

4.5 Role of Non State Actors in Implementation of the Policy

Non state actors play a significant role in implementing initiatives towards elimination of Gender Based Violence. This policy recognizes the strengths of these actors in designing and implementing prevention and response programs as well as organizing and interacting with community groups.

a) Civil Society Organizations

Civil Society Organizations shall:

- i) Provide SGBV services and participate in the SGBV referral infrastructure.
- ii) Mobilize resources for POLICARE Centre policy implementation.

- iii) Provide psychosocial support for SGBV victims at the POLICARE Centre's.
- iv) Establish safe havens for victims and set up kitties to support SGBV victims.
- v) Development Partners shall
- vi) Assist with co-funding of POLICARE centre's under the Aid Effectiveness Agenda.

b) Private Sector

The private sector shall

- i) Finance and support POLICARE programmes.
- ii) Participate in data collection on SGBV trends in the country.

c) Individuals and Communities

They shall:

- i) Participate in awareness- raising campaigns.
- ii) Reporting incidences of SGBV.
- iii) Discourage harmful cultural practices.
- iv) Utilize of already POLICARE facilities to address SGBV.

d) Media

The media shall:

- i) Create awareness on POLICARE.
- ii) Adopt gender responsive and sensitive coverage of SGBV interventions.

4.6 Policy Coordination Framework

This Policy recognizes the command structure of the NPS with regard to accountability, reporting and management lines, and further provides a structure that harnesses and synergizes SGBV prevention and responses through involvement of different stakeholders. Collaboration and coordination of state and non-state actors is key for effective and efficient planning, optimum utilization of evidence in informing programming as well as in ensuring efficient

utilization of resources and accountability. The coordination of the implementation of this Policy document shall be guided by the Policy's objectives and already existing legal and institutional frameworks.

The NPS shall spearhead the overall coordination of the implementation framework of this policy and shall work in close collaboration and consultation with all actors in ensuring effective SGBV

prevention, response and support for victims/survivors, their families and community at large. The purpose of a comprehensive coordination structure is aimed at ensuring the following.

1. Adequate and efficient utilization of public resources and mobilization of additional funds required for building and strengthening the infrastructure for SGBV response across sectors.
2. Timely uptake of response and support services by SGBV victims and their families and ultimately, access to justice.
3. Collection and collation of information on SGBV prevalence and interventions towards SGBV to inform policy and legal reforms as well as programming at national and county levels

To achieve the strategic objectives spelt out within this Policy, coordination will take place within and across various levels as follows:

4.6.1 National Steering Committee

This is the highest level of co-ordination for POLICARE. It is housed at the National Police Service and shall provide strategic and operational leadership for implementation of this policy at the national level. It will be chaired by the Inspector General. Other members shall be the DIG-KPS who is in charge of Public Safety and Security, DIG-DCI who is in charge of Criminal Investigations, Director Gender and Community Policing, one AIG from KPS and one AIG from DCI.

The committee will convene quarterly to consider reports received from the IASC, National POLICARE technical Committee and the County & Sub County POLICARE Implementation Committees.

4.6.2 Inter-Agency Steering Committee (IASC)

The Inter-Agency Steering Committee provides National level strategic direction and mobilizes resources for GBV prevention and response. The Committee will meet on a bi-annual basis to monitor progress towards achievement of the policy objectives as well as to share information on policy and legal decisions affecting SGBV prevention and response.

The Committee will be chaired by the NPS. Other members of this Committee include representation from Line Ministries: Health, Education, Interior and Coordination of National Government, and the National Treasury; the National Gender and Equality Commission and relevant Commissions; as well as representatives from the National Council for Children Services; National Council for Persons with Disabilities; the Government Chemist, National Referral Health Facilities; relevant civil society and faith based organizations; relevant private sector organizations and interested development partners.

The committee will file its reports with the National Steering Committee biannually.

4.6.3 National Technical Committee

The National Technical Committee is responsible for technical advice and resource mobilization towards implementation of this Policy at the national level. The Committee will meet on a quarterly basis to review progress and share experiences across sectors on implementation of the policy.

The Committee will comprise of nine members who shall be appointed by the Inspector General from persons with expertise in any of the following disciplines policing, management, counselling, psychology, law, SGBV interventions, resource mobilization, research & data collection, ICT, accounting, and medicine. The committee will serve a single term of five years. To ensure continuity in the operation of the Committee, when it is first constituted four members shall be appointed to serve for three years only.

The committee will file reports with the Inspector General on a quarterly basis.

4.6.4 County Implementation Committee

The County Implementation Committee will be reflected in each of the 47 Counties of Kenya and is responsible for technical advice and resource mobilization towards implementation of this Policy at the County level. The Committee will meet on a quarterly basis to share experiences and best practices in implementing POLICARE within the County. The results from this Committee shall be utilized to inform implementation. The Committee will report to the National POLICARE Steering Committee on a quarterly basis.

The Committee will be chaired by the County Police Commander. Other members of the committee include representatives as well as representation from County Government, County Health Facilities; Sub-County Police Commanders; the Judiciary; Probation, Chairperson-Court Users Committees; County Health Records Information Officers; Youth and Gender Officers; Social Development Officers; Civil Society and Faith Based Organizations; Chairperson of Community SGBV Committee; Chairperson of GTWG, Safe House operators, interested development partners and relevant private sector actors.

4.6.5 POLICARE Management Team

The POLICARE management team, shall oversee the day-to-day operations of POLICARE Centres. The team shall be under the command of the Officer in Charge of the Centre. Other members of the team shall comprise of such officers or non-officers assigned to POLICARE to be in charge of finance, procurement, client care and inter-agency co-ordination.

National Gender and Equality Commission

- a) Monitor, facilitate and advise on the integration of principles of equality and freedom from discrimination in the POLICARE policy and administrative regulations.
- b) Establish the Integrated Data Management System

4.7 Monitoring and Evaluation

The NPS will establish a monitoring and evaluation framework to ensure the policy objectives are monitored, tracked and evaluated by developing and implementing monitoring and evaluation tools and performance indicators that are integrated in the annual plans and development planning processes and developing and institutionalizing tools for effective monitoring and evaluation.

The M & E framework shall have regard to NPS M & E procedures. The monitoring and evaluation indicators will include:

- POLICARE commissioned as a component of NPS.
- A seamless and effective service for prevention and response to SGBV.
- POLICARE fully resourced and operational in all counties.
- Committees in place and facilitated to work.
- Easier and better coordinated access to services by victims of SGBV.
- POLICARE open, available and offering services to the public.
- POLICARE fully resourced and operational in all counties.
- Expeditious disposal of cases.
- Competent and professional service delivery.
- Improved prevention and response to SGBV.

Expected policy outcomes include:

- Enhanced criminal justice process for victims and perpetrators of SGBV
- Enhanced safety and security for victims and perpetrators of SGBV
- Well planned and staffed POLICARE centres across the nation for efficient service delivery
- Co-ordinated and efficient multi-sectoral collaboration in prevention and response to SGBV.
- Improved SGBV case management system.
- Improved SGBV case management system.
- Intelligence and evidence-based SGBV prevention and response strategies.
- Improved skills and competencies NPS officers.
- Efficient co-ordination for implementation of the Policy.

4.8 Resourcing Plan

The successful implementation of this policy will require adequate financial, human and technical resources to ensure effective and efficient implementation for desired policy outcomes. Funding will be sought from the National Treasury driven by the annual budgetary allocation of POLICARE vote head. Additional support will be sought from development partners and Non-State Actors.

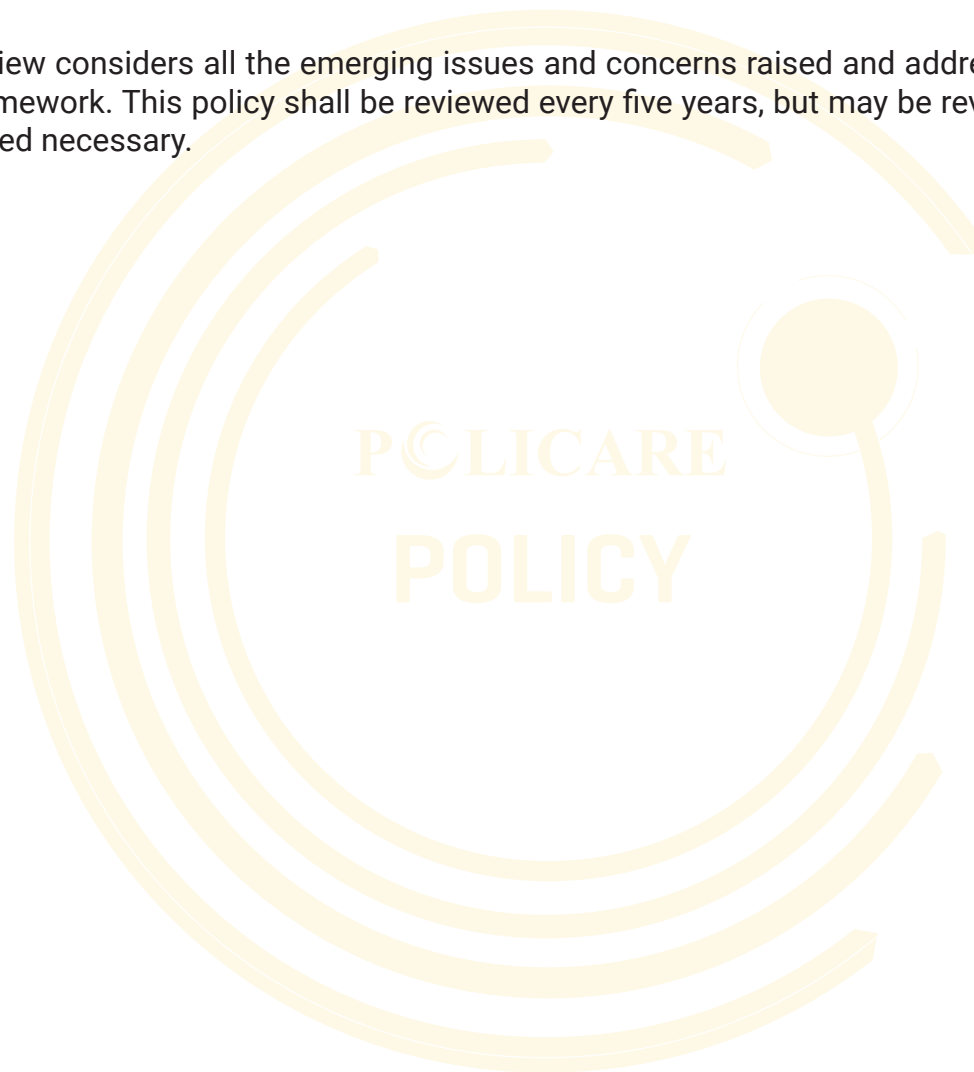


The strategies include:

- a) Budgetary allocation from the National Treasury.
- b) Partnerships through bilateral agreements and support by other international development and grants agencies.
- c) Support by Regional Development partners.
- d) Partnerships with Faith based Organizations, Civil society Organizations, privatesector institutions and other funding agencies.

4.9 Review

Policy review considers all the emerging issues and concerns raised and addressed within the policy framework. This policy shall be reviewed every five years, but may be reviewed sooner if it is deemed necessary.



APPENDIX 1: POLICY IMPLEMENTATION PLAN

Policy Objective 1:

To provide a framework for the comprehensive delivery of quality and comprehensive services in POLICARE centres

Activity	Responsibility	Output	Outcome	Indicator	Timeframe
Delineate POLICARE as a component within NPS	Inspector General/DIG-KPS	Directive of the IG	POLICARE will have a defined legal status within the NPS structure.	POLICARE commissioned as a component of NPS.	30 Days
Equip and resource the model one stop centre providing medico-legal, psycho-social and forensic services across the country	Inspector General/DIG KPS	Budgets for resourcing, equipping and running POLICARE allocated.	Enhanced criminal justice process for victims and perpetrators of SGBV, Enhanced safety and security of victims and perpetrators of SGBV.	A seamless and effective service for prevention and response to SGBV.	3 months
Set up the committees stated in the Policy as necessary for coordinating implementation	Inspector General/DIG-KPS	Directive of the IG setting up the committees.	Efficient co-ordination for implementation of the Policy.	Committees in place and facilitated to work.	30 days
Develop a staff establishment for POLICARE.	NPSC DIG – KPS	A clear organogram for POLICARE	Well planned and staffed POLICARE centres across the nation for efficient service delivery.	POLICARE fully resourced and operational in all countries.	60 days

Commission opening and start of service delivery at model POLICARE	IG	Directive for commissioning of POLICARE.	Enhanced safety and security for victims and perpetrators of SGBV.	POLICARE open, available and offering services to the public.	90 days
Develop a database of pro-bono lawyers and paralegals to assist victims	POLICARE management team	Database of pro-bono lawyers and paralegals to assist victims.	Improved clearance of SGBV cases	Legal assistance to victims provided	Continuous
Develop a database of volunteer counsellors	POLICARE management team	Database of volunteer counsellors established	Reduction in stress among victims	Counselling services offered to victims	Continuous

Policy Objective 2: Facilitate cooperation, collaboration and synergy amongst POLICARE centre service providers

Activity	Responsibility	Output	Outcome	Indicator	Timeframe
Partner with ODPD to timorously respond to requests for prosecution and advice	Inspector General/Director DCI POLICARE management team	Partnerships with ODPD established	Reduction in number of SGBV cases	Enhanced prosecution of SGBV cases	Continuous
Partner with judiciary to station judicial officers at the centre	Inspector General/DIG-KPS POLICARE management team	Partnerships with judiciary established	Reduction in number of SGBV cases	Increased convictions for SGBV perpetrators	Continuous
Partner with national NLAS to offer legal support	Inspector General POLICARE management team	Partnerships with NLAS established	Reduction in number of SGBV cases	Legal supports to SGBV victims provided	Continuous

Partner with Kenya Prisons and Probation and Aftercare Services to promote the rehabilitation and reintegration of SGBV offenders into the community	Inspector General POLICARE management team	Partnerships with Kenya Prisons Services and Probation and aftercare Services established	Improved integration of SGBV offenders with the community	Rehabilitation and integration programs conducted	Continuous
Establish a multi-sectoral committee to ensure continued synergy	POLICARE management team	Multi-sectoral committee established	Enhanced response and management of SGBV cases	Nature of relationship among POLICARE functionaries	Continuous
Develop a fully integrated data management system that can be accessed by all sector actors	POLICARE management team	Integrated data management system established	Swift response to SGBV cases	Quick access to SGBV information by all sector actors	90 Days
Policy Objective 3:					
To provide a framework for the elimination and victimization and interference with victims and witnesses					
Activity	Responsibility	Output	Outcome	Indicator	Timeframe
Establish linkages with witness protection agency, pro-bono lawyers and safe shelters to ensure safety of witnesses.	POLICARE management team	Clear protocol for providing protection for victims	Improved safety and security for victims and witnesses	Less interference With victims and witnesses	Continuous

Develop a protocol and an integrated data system, for case management and tracking, with a monitoring system	National Steering Committee POLICARE National Technical Committee	An integrated case and data management system.	Improved case management system	Expeditions disposal of cases	3 months
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Policy Objective 4:

To provide a framework for the comprehensive delivery of quality and comprehensive services in POLICARE centres

Activity	Responsibility	Output	Outcome	Indicator	Timeframe
Delineate POLICARE as a component within NPS	Inspector General/DIG-KPS	Directive of the IG	POLICARE will have a defined legal status within the NPS structure	POLICARE commissioned as a component of NPS	30 DAYS
Equip and resource the model one stop centre providing medico-legal, psycho-social and forensic services across the country	Inspector General/DIG-KPS	Budgets for resourcing, equipping and running POLICARE allocated	Enhanced safety and security	A seamless and Effective service for prevention and response to SGBV	3 months
Set up the committees stated in the Policy as necessary for coordinating implementation	Inspector General/DIG-KPS	Directive of the IG setting up the committees	Co-ordinated implementation of the Policy	Committees in place and facilitated to work	30 days
Develop a staff establishment for POLICARE	NPSC DIG – KPS	A clear organogram for POLICARE	Well planned and staffed POLICARE for efficient service delivery	POLICARE fully resourced and operational	60 days

Commission opening and start of service delivery at model POLICARE	IG	Directive for commissioning of POLICARE	Enhanced safety and security.	POLICARE open, available and offering services to the public	90 days
Develop and sign MOUs with various stakeholders	Inspector General. Implementation committees.	Negotiated and signed MOUs.	Co-ordinated and efficient multisector co-operation in prevention and response to SGBV.	Easier and better co-ordinated access to services by victims of SGBV	30 Days

Policy Objective 5:

To provide a framework for ensuring knowledge management and capacity building for effective victim support and justice.

Activity	Responsibility	Output	Outcome	Indicator	Timeframe
Undertake regular research and analysis of the data collected.	POLICARE management team.	Periodic detailed data analysis reports.	Intelligence and evidence-based SGBV prevention and response strategies.	Improved prevention And response to SGBV.	Continuous
Capacity building for NPS officers.	National Police Service Training Colleges	Curriculum developed for POLICARE.	Improved skills and competencies NPS officers.	Competent and professional service delivery.	Continuous

Policy Objective 6: Provide a framework for sustainability of POLICARE centres

Activity	Responsibility	Output	Outcome	Indicator	Timeframe
Budgetary allocations	IG	Vote head	Resourcing and day today running of POLICARE centres	Serviceability and maintenance of the centres	Annually

POLICARE

APPENDIX II: POLICARE TECHNICAL WORKING GROUP (TWG)

1. Mr. DANIEL Wathome	Chairperson
2. Ms. JUDY Lamet	Program Director
3. Mr. VICTOR Amwattah ,OGW	Program Advisor
4. Dr. ROSELINE Odende	Lead Consultant
5. Mrs. JACINTA Makhoha	Liaison
6. Mr PAUL Kuria	Member
7. Mr. MUNENE Mugambi	Member
8. Dr. RUTH Aura	Member
9. Dr. WILSON Muna	Member
10. Mr. MOFFAT Adika	Member
11. Mr. Alex Ndili	Member
12. Mrs. NAOMI Kinyanjui	Member
13. Ms. MUENI Mutisya	Member
14. Ms. ZIPPORAH Nderitu	Coordinator
15. Dr. KIRIMI Arimi	Secretary



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APPENDIX III: POLICARE NPS STEERING COMMITTEE

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|-----------------------------|---------------------|
| 1. Mr. VICTOR Omwattah OGW. | Program Advisor |
| 2. Dr. VINCENT Makokha | Member |
| 3. Mr. KIPRONO Langat | Member |
| 4. Mr. DAVID Wafula | Member |
| 5. Mr. GIDEON Kirui | Member |
| 6. Ms. ZIPPORAH Nderitu | Program Coordinator |
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APPENDIX IV: FRIENDS OF POLICARE

1. Tetra-Tech ,Reinvent Program
 2. State Department of Gender
 3. National Gender Equality Commission
 4. Kirk Tv, KTN, Nation Media Group
 5. Professional Criminologist Association Of Kenya
 6. International Peace Support Training Centre-Karen
 7. Rotary Club of Nairobi -Parklands
 8. Faraja Foundation
 9. Mrs. RUTH Njuguna
 10. Save The Children
 11. CREAW
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