



Canada



ACCESSIBILITY AUDIT REPORT OF SEXUAL AND GENDER-BASED VIOLENCE RESPONSE AND REFERRAL CENTERS IN LAGOS AND ABUJA

JOINT NATIONAL ASSOCIATION OF PERSONS WITH DISABILITIES
(JONAPWD)

ABOUT THE PROJECT

The project, implemented by the Joint National Association of Persons with Disabilities (JONAPWD) with support from the Canada Fund for Local Initiatives (CFLI), focused on improving access to gender-based violence (GBV) referral pathways for women and girls with disabilities in Abuja and Lagos.

Overall, the project sought to address the systemic barriers, such as physical inaccessibility, communication gaps, stigma, and weak coordination that limit the ability of women and girls with disabilities to access GBV prevention, response, and justice services.

Key interventions included conducting accessibility audits of GBV referral centers, organizing national workshops and a gender-focused national conference to strengthen stakeholders' capacity, launching an accessible digital platform (JONAPWD Women's wing website) for advocacy and information sharing, and implementing media campaigns through radio and visual materials to raise public awareness. These activities brought together government institutions, service providers, civil society organizations, and organizations of persons with disabilities to promote a more coordinated and inclusive GBV response system.

The project achieved significant results, including increased knowledge and capacity of frontline responders, stronger collaboration between GBV actors and disability organizations, and concrete institutional commitments to improve accessibility and inclusion. It also led to the establishment of a Coalition of GBV Responders to sustain coordination and drive long-term reforms.

In addition, advocacy engagements with key government agencies strengthened policy dialogue and highlighted the need for disability-inclusive systems, better data collection, and survivor-centered approaches. Public awareness efforts helped challenge harmful stereotypes and amplify the voices of women with disabilities.

In summary, the project contributed to building a more inclusive, coordinated, and rights-based GBV response ecosystem in Nigeria, while laying the foundation for sustainable institutional reforms and improved access to services for women and girls with disabilities.

INTRODUCTION

The accessibility audit of sexual and gender-based violence response and referral centers in Lagos and Abuja was conducted to evaluate the accessibility and availability of services for women and girls with disabilities. This initiative is part of a project funded by the Canadian Fund for Local Initiatives (CFLI) under the theme “Enhancing Access to Gender-Based Violence (GBV) Referral Pathways for Women and Girls with Disabilities in Abuja and Lagos through Strengthened and Inclusive Service Delivery.”

The primary objective of this project is to ensure that services, facilities, and response and referral systems are not only seamless and accessible but also uphold the rights, dignity, and respect of women and girls with disabilities. The accessibility audit aims to identify existing gaps in facility and service provisions, assess the capacity of service providers, and offer actionable recommendations to enhance reporting and referral processes for survivors of gender-based violence.

This report presents the findings of an accessibility audit conducted across 13 selected facilities in Lagos and Abuja (8 facilities in Abuja and 5 facilities in Lagos) that provide services to survivors of gender-based violence. The audit aimed to assess the level of physical, communication, and service accessibility for persons with disabilities (especially women and girls with disabilities), in line with universal access standards. The assessment focused on access to buildings, movement within premises, use of services and facilities, safety and evacuation procedures, and the implementation of accessible information and communication systems. The audit reveals significant accessibility gaps across facilities. While some basic physical features (such as routes, entrances, and car parks) are partially in place, most internal accessibility measures (such as ramps, signage, tactile cues, lifts, toilets, receptions, and communication aids) are grossly missing or inadequate.

OBJECTIVES OF THE AUDIT

To evaluate the extent to which facilities meet national and international accessibility standards.

To identify existing gaps that hinder access for persons with disabilities.

To recommend measures that improve accessibility, safety, and inclusion within the facilities.

METHODOLOGY

The assessment was conducted using an accessibility audit checklist, observation, and structured inquiries with staff.

Key thematic areas evaluated include:

- Access to facilities and premises
- Circulation within buildings
- Use of services, equipment, and communication systems
- Safety and emergency preparedness
- Management practices affecting accessibility
- Data was captured using percentage indicators reflecting compliance levels across facilities.

KEY FINDINGS

Getting to the Facilities

Most facilities are within accessible distance from public transportation routes, and the majority have surfaces suitable for wheelchair use. However, 20% of access routes contain barriers, including tree roots and debris.

While 80% of facilities have entrance signage, visibility remains insufficient, especially in shelter-type facilities where signage is intentionally limited for confidentiality purposes.

Main Entrances, Gates, and Parking

Although 80% of entrances are adequately lit, only 30% meet the width requirements for wheelchair access. Doorbells and entry systems are mostly absent, limiting independent access.

Car parks exist in most facilities, but only 30% offer designated accessible parking, and none meet universal signage requirements (i.e., marked with the universal accessibility sign). Pathways linking car parks to entrances are largely unmarked and inaccessible.

Access Inside Buildings

Doors are predominantly manual, with only 10% being automated. Maneuvering spaces beside door openings are inadequate in 70% of facilities, while handrails, tactile guidance, and colour contrast are largely missing in stairways and ramps.

Only 30% of facilities have ramps, and 90% of these do not meet gradient or dimension standards. Reception areas are often available but lack signage, accessible counters, and assistive listening systems.

Circulation and Mobility Within Premises

About 60% of floor surfaces are slip-resistant, but pathways and corridors often lack directional signage, tactile cues, or contrasting colour schemes.

No facility is equipped with an elevator to support internal mobility.

Use of Services and Facilities

Toilets: Only 10% have designated accessible toilets, none of which meet minimum dimension requirements. Fittings, grab rails, and alarm systems are inconsistent or absent.

Meeting rooms and learning spaces: 20% allow wheelchair circulation, but accessible communication technologies such as screen readers, JAWS, and hearing devices are largely unavailable.

Communication and signage: Only 10% of facilities provide Braille or large print materials, and sign language interpretation is available in limited cases.

Health Services and Equipment

Access to clinical services is significantly constrained by limited maneuvering space around examination rooms and patient beds. No facility offers accessible weighing scales, and only 20% have adjustable-height examination tables.

Emergency Preparedness and Evacuation

Emergency systems pose major accessibility challenges. 90% of escape routes are not clearly labelled, no alarm or warning systems exist, and evacuation plans for persons with disabilities are largely absent. The few facilities with contingency plans rely on alternative transport and referral arrangements rather than structural preparedness.

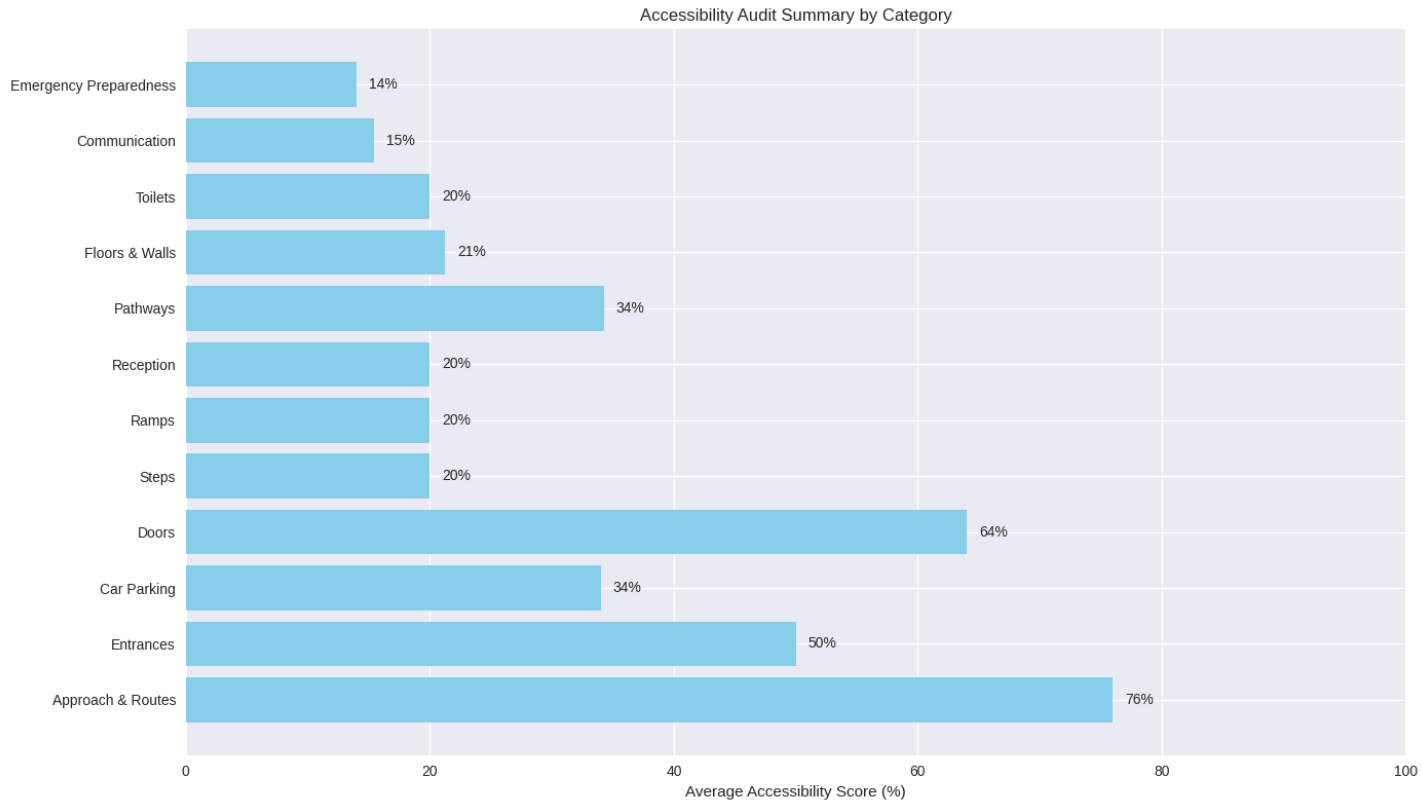
Management and Future Planning

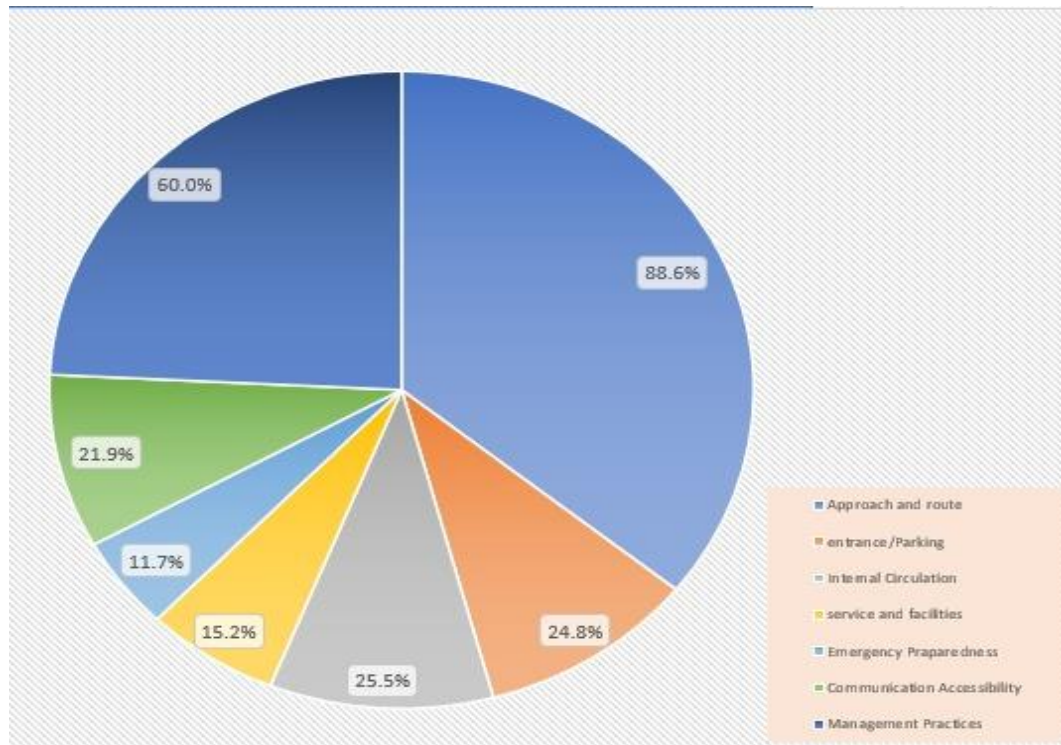
Management structures vary, with many facilities operating from rented premises, posing challenges to long-term accessibility modifications. However, 50% have intentions to relocate to accessible structures, reflecting growing awareness and commitment to inclusive development.

SUMMARY OF ACCESSIBILITY COMPLIANCE

| Thematic Area | Compliance Trend | Key Limitation |
|-----------------------|-------------------------|--|
| Routes & Access | Moderate | Lack of tactile & visual guidance |
| Entrances & Parking | Low | Narrow gates, no signage, limited ramps |
| Internal Circulation | Low | No lifts, inadequate spacing |
| Services & Facilities | Low | Non-compliant toilets, limited assistive systems |

| | | |
|-----------------------------|----------|---|
| Emergency Preparedness | Very Low | No alarms, signage, or disability-inclusive plans |
| Communication Accessibility | Low | Limited Braille, captioning, sign language |
| Management Practices | Moderate | Renovation constraints in rented facilities |





RECOMMENDATIONS

1. **Structural upgrades:** Install compliant ramps, widen entrances, and provide grab rails and tactile surfaces.
2. **Accessible communication systems:** Expand use of Braille, large print, plain language, captioning, and sign language services.
3. **Inclusive toilets:** Remodel existing restrooms to meet dimensional and safety standards, including alarms and grab rails.
4. **Emergency plans:** Develop and display evacuation routes that include provisions for persons with disabilities.
5. **Parking and pathways:** Designate accessible parking spaces with universal signage and ensure clear accessible pathways.

6. **Capacity building:** Train staff on accessibility standards, disability etiquette, and inclusive safety procedures.
7. **Future facility planning:** Prioritize universal design in relocation or renovation decisions to reduce long-term modification costs.

CONCLUSION

Overall, the audit reveals significant accessibility gaps across facilities serving GBV survivors, particularly regarding structural mobility, accessible communication systems, and emergency preparedness. Nonetheless, the commitment expressed by facility managers to improve accessibility, especially through future relocation or renovations, provides a strong foundation for progress.

Implementing the recommended actions will support safe, independent, and dignified access to services for persons with disabilities.

ABOUT THE JONAPWD

The Joint National Association of Persons with Disabilities (JONAPWD) is the national umbrella organization that represents persons with disabilities in Nigeria. It brings together various disability clusters, including physical, visual, hearing, intellectual, and psychosocial disabilities, to promote a unified voice for advocacy, inclusion, and rights protection.

JONAPWD works to advance the rights and dignity of persons with disabilities by engaging government institutions, civil society, and development partners to influence policies, laws, and programs. A core part of its mandate is ensuring the implementation of disability-inclusive frameworks, particularly the Discrimination Against Persons with Disabilities (Prohibition) Act in Nigeria, and advocating for accessibility, equal opportunities, and social justice.

The organization operates through national, state, and local government structures, enabling it to mobilize grassroots participation while also engaging in high-level policy advocacy. Through its thematic arms, such as the Women's Wing, Youth Wing, JONAPWD addresses intersectional issues, including gender-based violence, economic empowerment, and access to education and healthcare for women and girls with disabilities.

In addition to advocacy, JONAPWD plays a critical role in capacity building and institutional strengthening of organizations of persons with disabilities (OPDs). It supports its members to participate meaningfully in governance processes, promotes leadership of persons with disabilities, and ensures that their voices are included in decision-making spaces.

Overall, JONAPWD serves as a key driver of disability inclusion in Nigeria, championing a rights-based approach and fostering collaboration to create a more equitable and accessible society for all persons with disabilities.