

# INCREASING THE UPTAKE OF POST EXPOSURE PROPHYLAXIS (PEP) FOR RAPE SURVIVORS. THE ROLE OF THE GHANA POLICE SERVICE

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# BACKGROUND

- Survivors of Gender Based Violence (GBV) including rape and defilement experience physical and emotional trauma.
- In Ghana, most rape and defilement cases are not reported to the police.
- For cases that are reported, police referrals to health facilities are mainly for establishing that a crime has been committed, with no consideration for access to Post Exposure Prophylaxis (PEP).

## BACKGROUND 2

- Late reporting of cases to health facilities makes it almost impossible to administer PEP.
- The Police Service records between 280 and 376 rape cases yearly, with average of 1100 defilement cases yearly nationwide.
- However, referrals of survivors of sexual abuse for PEP services from 2010-2012 represented only 5.79%, 5.47% and 6.39% respectively of the total cases reported.
- Timely reporting of sexual abuse and empowerment of police in availing survivors with PEP services are essential to avoid HIV transmission and unwanted pregnancies.

## DESCRIPTION

- The Ghana Police Service AIDS Control Program with support from UNFPA held workshops for 190 police personnel in 6 Police Regions.
- Participants learned about the vital role of police in ensuring rape/defilement survivors are offered the lifelines of PEP.
- Emphasis was laid on promoting community involvement in timely reportage of sexual abuse

## DESCRIPTION 2

- Participants agreed on roles of the various police units and developed action points and monitoring systems for increasing PEP referrals.
- The police held meetings with community leaders and engaged local radio stations to educate communities on the need to protect rape/defilement survivors by facilitating access to prompt medical attention.
- Investigators and community members agreed on surveillance and reporting systems to ensure that survivors received timely and appropriate medical attention.

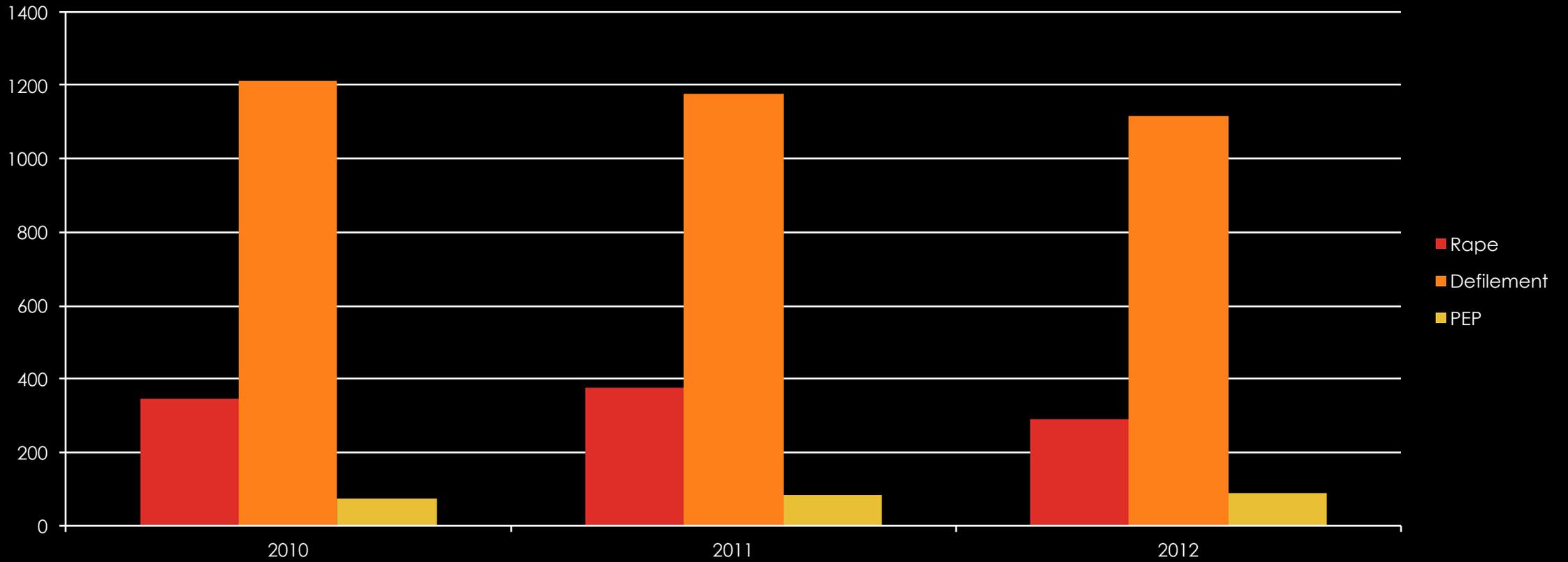
## RESULTS

- Police returns (monitoring) indicated a sharp increase for survivors accessing PEP services from
- **6.39% in 2012 to 24.25% in 2013 and 27% in 2014.**
- Notwithstanding these achievements, it was observed most of the perpetrators of the abuses were close relations of survivors, resulting in fear that reporting to the police might attract harsh punishments and affect family cohesion.

# RESULTS (BEFORE INTERVENTION)

2010			2011			2012		
Rape	Defilement	PEP	Rape	Defilement	PEP	Rape	Defilement	PEP
345	1214	76	376	1176	85	292	1117	90

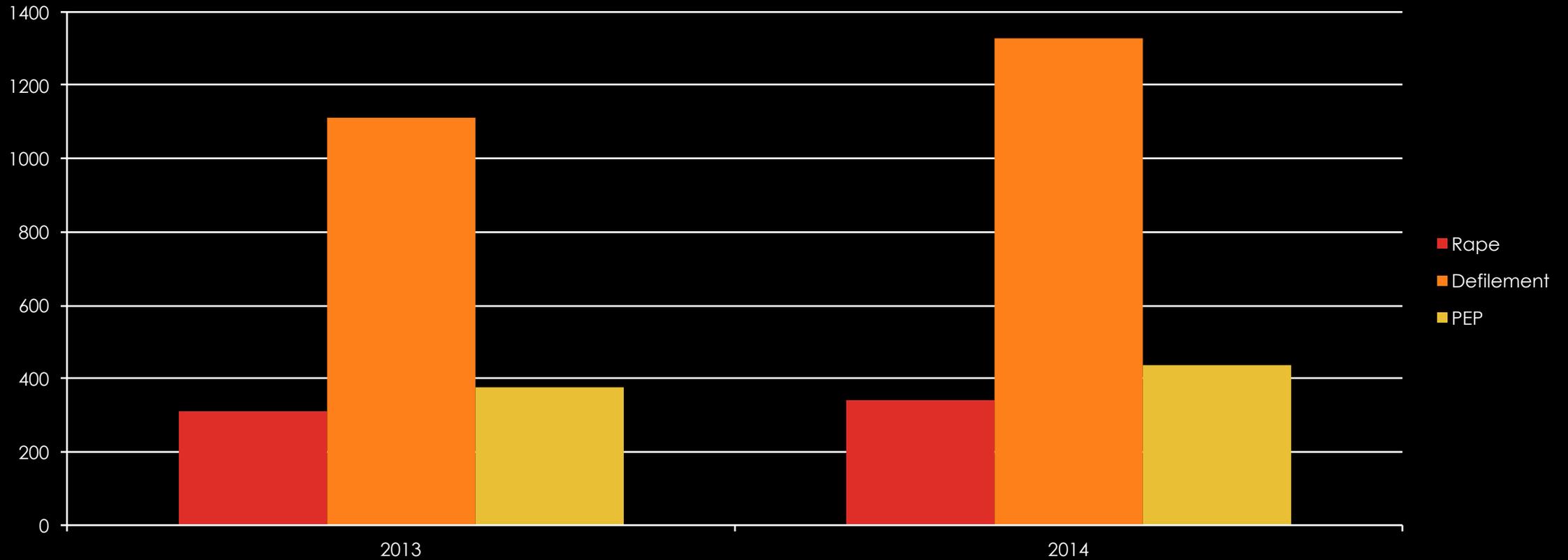
# RESULTS (2) BEFORE INTERVENTION



# RESULTS (AFTER INTERVENTION)

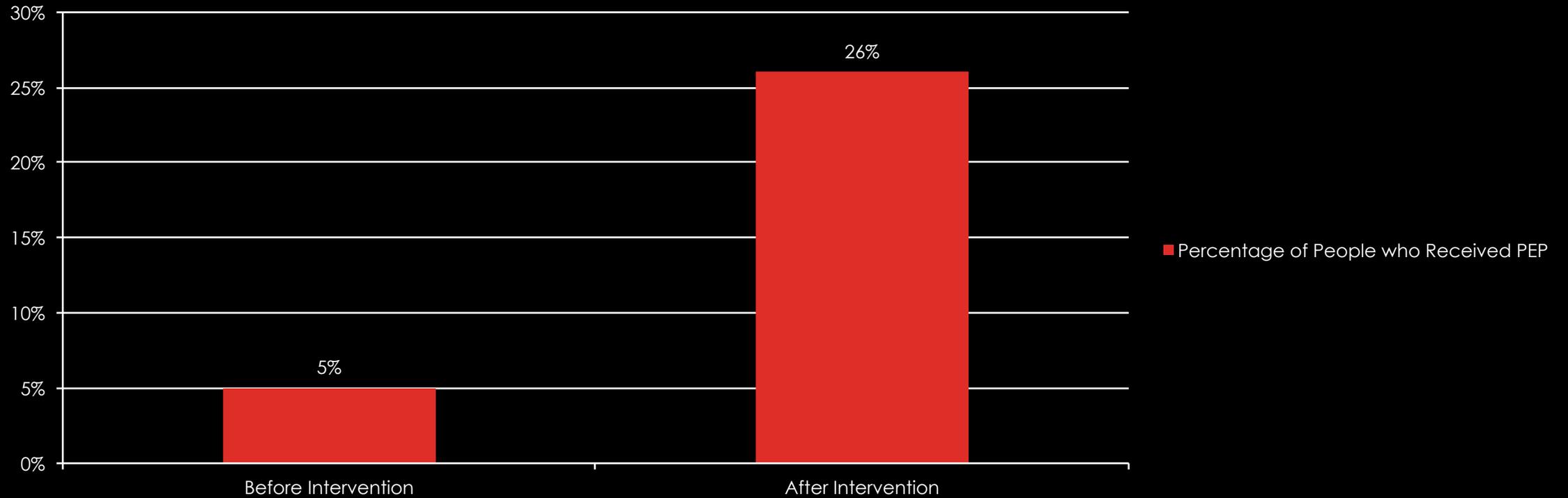
2013			2014		
Rape	Defilement	PEP(%)	Rape	Defilement	PEP(%)
312	1111	374(24.25)	342	1330	439(27)

# RESULTS (3) AFTER INTERVENTION



# RESULTS (4)

## Percentage of People who Received PEP



# CHALLENGES

- **Reluctance of the citizenry to report of sexual abuse to the police for the fear of stigma and discrimination.**
- **Most of the perpetrators of the abuses are close relations and therefore the fear that reporting to the police might attract harsh punishments which may affect family cohesion.**
- **Inadequate sensitization of citizenry on the benefits of PEP by health personnel**

# CONCLUSIONS

- Engaging the police in public education enhances uptake of PEP by rape/defilement survivors.
- Continuous police/community partnerships in addressing GBV prevention and management will increase access to PEP by survivors.
- Closer collaboration with community/opinion leaders enhances Public Health Outcomes

# NEXT STEPS

- **Education of DOVVSU and CPU personnel, as well as community members should be scaled up to increase access to Post Exposure Prophylaxis (PEP) services by survivors of sexual abuse.**
- **In this regard, UNFPA will continue to partner with the Ghana Police Service and mobilize additional financial and technical resources to evaluate and further scale up the program.**
- **With the ownership demonstrated by and support received from the police administration, the project is bound for tremendous success.**