**Prevention of Sexual Exploitation and Abuse, HCT – Somalia**

***Standard Operating Procedure; March 2019***

# Introduction

**Background:** Sexual Exploitation and Abuse (SEA) by aid workers directly contradicts the principles upon which humanitarian action is based and represents a protection failure on the part of the aid and peace keeping community. SEA inflicts harm on those whom humanitarian community are seeking to protect, as well as jeopardizes the credibility of all assistance agencies. The revelations of the extent of the problem in West Africa in 2002 led to a number of initiatives by the humanitarian community to address the matter.

In recognition of the global concern over SEA, the Inter-Agency Standing Committee (IASC) has prioritized efforts to prevent and respond to these abuses at both the agency level and through collective efforts in the field. In 2002 the IASC adopted six core principles intended to set forth standards to prevent SEA:

**Six Core Principles Relating to Sexual Exploitation and Abuse**

1. Sexual exploitation and abuse by humanitarian workers constitute acts of gross misconduct and are therefore grounds for termination of employment.

2. Sexual activity with children (persons under the age of 18) is prohibited regardless of the age of majority or age of consent locally. Mistaken belief regarding the age of a child is not a defense.

3. Exchange of money, employment, goods, or services for sex, including sexual favours or other forms of humiliating, degrading or exploitative behaviour is prohibited. This includes exchange of assistance that is due to beneficiaries.

4. Sexual relationships between humanitarian workers and beneficiaries are strongly discouraged since they are based on inherently unequal power dynamics. Such relationships undermine the credibility and integrity of humanitarian aid work.

5. Where a humanitarian worker develops concerns or suspicions regarding sexual abuse or exploitation by a fellow worker, whether in the same agency or not, he or she must report such concerns via established agency reporting mechanisms.

6. Humanitarian workers are obliged to create and maintain an environment which prevents sexual exploitation and abuse and promotes the implementation of their code of conduct

These principles were incorporated into the UN Secretary General’s Bulletin on SEA in 2003. The bulletin outlines a zero-tolerance policy toward SEA, obliges UN staff to report incidents of abuse, and is binding on all UN staff, including all agencies and individuals who have cooperative agreements with the UN. Subsequent voluntary agency commitments, such as the 2006 Statement of Commitment on Eliminating Sexual Exploitation and Abuse by UN and Non-UN Personnel, as well as internal agency policies, have substantially broadened the international commitment to fight SEA and have established standards of conduct that are applicable to all “personnel” and at all times.

Despite this collective articulation of commitment, abuses by aid workers continue. The 2015 independent Whole of System Review of Protection in Humanitarian Action noted that despite progress, “systematized engagement with affected populations and peer-to-peer accountability is still lacking.” Researchers noted concerns that PSEA requires a specialized approach, including confidential complaints and investigations procedures at both the system and individual agency level. In 2012 the IASC Task Force on PSEA identified inter-agency cooperation in the creation and maintenance of community-based complaints mechanisms (CBCMs) as a key component in the prevention and response to SEA. For complaints to come forward, local communities need to be informed that humanitarian assistance is free and never conditioned on sexual favors. Beneficiaries of humanitarian assistance and humanitarian staff both need to be informed how to access the appropriate complaints mechanism if SEA occurs, especially in a humanitarian response situation where multiple agencies are present. Furthermore, an effective CBCM requires inter-agency coordination to ensure consistent messaging and that access to the mechanism is as broad and straightforward as possible for potential complainants.

HCT support the vision of a humanitarian environment in which people caught up in crises feel safe and respected and can access the protection and assistance they need without fear of exploitation or abuse by any aid worker, and in which aid workers themselves feel supported, respected and empowered to deliver such assistance in positive working environments.

Sexual Exploitation and Abuse (SEA) must not be tolerated. It is an unacceptable breach of the fundamental rights of the people we serve and of those with whom we work, as well as a deep betrayal of our core values.

As part of the measures to protect staff and beneficiaries of assistance and the populations of Somalia, the HCT in Somalia established a Task Force on Prevention of Sexual Exploitation and Abuse (PSEA TF) in July 2017 with IOM and UNHCR identified as co-chairs of the taskforce. One meeting was convened in December 2017, with a very low participation. Somalia had been in a reaction mode following the global attention on the issue and the need for a stronger HCT engagement was identified. This commitment was reiterated at the March 2018 HCT retreat as well as at the self-assessment workshop led by Peer to Peer Mission in July 2018.

Since its reinstatement, the PSEA TF recruited a taskforce Coordinator, and conducted a mapping of agency specific actions on PSEA and developed a PSEA Focal Points ToR (Annexed).

This Standard Operating Procedures (SOPs) have been developed to facilitate joint actions by humanitarian agencies/organizations in response operations to protect beneficiaries from SEA, establish a common HCT response system to ensure coordinated and effective responses to potential SEA cases, and enhance the collective capacity of the agencies and affected populations to prevent and respond to SEA committed by aid workers. This SOP address some aspects of the functioning of the PSEA TF and the CBCMs in general terms. A context specific SOP for each CBCM site will subsequently be developed.

The SOPs will serve as a guidance for inter-agency cooperation on PSEA as experience has shown that coordination is vital for effectively operationalizing the humanitarian community’s commitment to PSEA.

# Objectives:

The objective of this SOP is to provide system-wide clarity on a general model of PSEA work in Somalia by facilitating joint efforts in response to protecting beneficiaries of Aid and those staff delivering Aid. The process of developing this SOP has therefore been collaborative and has incorporated feedback from HCT members and endorsed by the Steering Committee (The HCT).

It is important to note that the SOP is in no way intended to change or override the existing organizational specific internal policies on PSEA. Rather, they are procedures to supplement internal policies and reinforce common action to prevent and respond to SEA as one aid community.

**Scope:** This SOP covers and provides clarity on the following areas in the context of Somalia:

* Roles and responsibilities of PSEA stakeholders;
* Key principles in preventing and responding to SEA; and
* A common procedure for responding to SEA complaints:
  1. Receiving and referral of SEA complaints;
  2. Victim assistance provision; and
  3. Investigations.

The SOP covers all HCT members in Somalia, and their personnel, including contractors and volunteers.

# Definitions

**Sexual Exploitation and Abuse (SEA):** Particular forms of gender-based violence that have been reported in humanitarian contexts, specifically alleged against humanitarian workers, including contractors and volunteers.

**Sexual Exploitation**: Any actual or attempted abuse of a position of vulnerability, differential power, or trust, for sexual purposes, including, but not limited to, profiting monetarily, socially or politically from the sexual exploitation of another.

**Sexual Abuse:** The actual or threatened physical intrusion of a sexual nature, whether by force or under unequal or coercive conditions.

**Protection from SEA (PSEA):** Policies, guidelines, procedures, mechanisms, systems, and activities to reduce the risk of SEA and mitigate the effects caused by violations.

**Sexual Harassment versus SEA:** Sexual exploitation and abuse occurs against a beneficiary or vulnerable member of the community, while sexual harassment occurs when one employee makes continued, unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature, to another employee, against his or her wishes. It is important to note that sexual harassment is not covered by this SOP. It is equally prohibited under UN policies. The distinction between the two is important so that agency policies and staff trainings can include specific instruction on the procedures to report each.

**Locations with elevated risk:** Specific locations in Somalia determined by the PSEA Task Force to have elevated risk due to the presence of Aid Personnel and local population, as well as the type of interactions between them. The number of these locations is limited to ensure focused collective action and accountability.

**Victims/survivors:** Anyone who experiences an incident of sexual exploitation and sexual; abuse or someone who has experienced an attempt of SEA against him/her.

**Perpetrator**: A person (or group of persons) who commits an act of SEA or other type of crime or offence.

**Complainant:** Person who brings an allegation of SEA to attention in accordance with established procedures. This person may be a SEA survivor or another person who is aware of the wrongdoing.

**Subject of the Complaint (SOC):** Person alleged to have perpetrated the misconduct in the complaint.

**Community-Based Complaints Mechanism (CBCM):** A CBCM is a system blending both formal and informal community structures, where individuals are able and encouraged to safely report incidents of SEA. Local communities are involved in developing and approving the CBCM so that the structure is both culturally and gender-sensitive. The mechanism should have multiple entry points, allowing both beneficiaries, communities and staff the opportunity to report at the organizational level – internally through the network’s or field agency focal points – or at the community level. The primary concern of the mechanism is to aid known and potential SEA survivors, and also fulfill a prevention function through awareness-raising efforts. A PSEA CBCM should not be a separate, parallel system to other complaints and feedback structures in a given area, but rather link to and build on existing structures to create one system for handling feedback and complaints.

**Whistle-blower**: For the purposes of this SOP a whistleblower is a type of complainant, not the survivor, who is a humanitarian aid worker making a report of SEA. Organizational whistleblowing policies encourage staff to report concerns or suspicions of misconduct by colleagues by offering protection from retaliation for reporting, and clarify the rules and procedures for reporting and addressing such cases. Therefore the definition, scope, and protection measures may differ between organizations. CBCM principles (e.g. confidentiality) apply to whistleblowers as they would to any complainant, and internal agency policies shall protect whistleblowers on SEA from retaliation, so long as the report is made in good faith and in compliance with internal agency policies.

**In-the-air allegation** refers to rumours or concerns of sexual exploitation and abuse (SEA) emanating within a particular setting but not necessarily directly reported by anyone, and where the institutional affiliation of the alleged perpetrator(s) is uncertain or unknown.

# Principles

All members agree to cooperate and assist each other to the fullest extent in preventing and responding to SEA, while respecting prudent risk-management procedures.

**One HCT:** SEA is a collective responsibility of the humanitarian, development and peacekeeping actors. Each member of HCT is responsible for maintaining and mainstreaming its own internal mechanisms and procedures in its programmatic, operational and human resource management activities.

**Safety:** To avoid any additional harm, the safety of SEA victims shall be ensured at all times during reporting, investigation by the concerned agency, and victim assistance provision. Complaints mechanisms must consider potential dangers and risks to all parties involved, and incorporate ways to prevent additional harm

**Confidentiality:** The confidentiality of complainants, victims and other relevant parties must be respected at all times. All SEA-related information must be kept confidential and identities must be protected. Where physical records are kept, documents must be stored safely to prevent accidental disclosures. All complainants must be made aware of confidentiality procedures. Obtaining consent of a whistleblower may not be required if his/her agency has a mandatory reporting policy for knowledge or suspicions of staff misconduct.

**Transparency:** The functioning of reporting mechanisms shall remain transparent. All potential and actual survivors of SEA must be fully informed about how the complaint mechanism works, including the reporting process. PSEA policies and reporting channels within agencies also need to be transparent, and communicated to those in the field, including every employee and contract worker.

**Survivor Centered Approach**: Humanitarian response agencies have committed to actively prevent and respond to SEA and to ensure that all responses are developed in a manner that balances respect for due process with a survivor-centered approach in which the survivor’s wishes, safety, and well-being remain a priority in all matters and procedures. Furthermore, all actions taken should be guided by respect for choices, wishes, rights and dignity of the survivor.

The SEA survivor/complainant has a right to:

be treated with dignity and respect -not exposed to victim-blaming attitudes

choose the course of action in regards to reporting to local authorities

privacy and confidentiality

non-discrimination (based on gender, age, race/ ethnicity, ability, sexual orientation, HIV status or any other characteristic)

receive comprehensive information to help her make her own decision

to receive feedback (process and outcome)

be informed about the investigation process

**Accessibility**: The mechanism must be accessible to all potential complainants and sufficient information must be given on how to access the complaints mechanism, making the process accessible to the largest possible number of people. This includes identifying and instituting various entry points that are both cultural and context-appropriate. To facilitate reporting and avoid stigmatization, anonymous reports must be treated with the same gravity as other cases.

**Accountability:** All HCT members in Somalia are held accountable for their PSEA actions through regular reporting.

# Roles and Responsibilities

The annual PSEA Taskforce is owned by the DSRSG/RC/HC, who is ultimately accountable for addressing SEA in the humanitarian sector in Somalia. To assist him/her in discharging this responsibility, the steering committee, comprising of heads of agencies/HCT, is responsible for overseeing the implementation of the Task force annual work plan. The PSEA Taskforce in Somalia comprises of PSEA focal points from all HCT agency members.

At the agency level, the Head of Office is accountable for addressing SEA in their agency. The PSEA Focal points assist him/her in implementing the individual agency PSEA work plans.

**HCT Members in Somalia:** Individual agencies are responsible for SEA investigations and sanctions against personnel found responsible for SEA according to their own policies and procedures. They participate in the work of the PSEA Task Force under its ToRs, comply fully with these SOPs and support joint PSEA action as agreed, including support for CBCMs. Agencies are responsible for sharing relevant information with the PSEA Task Force according to the SOP. They meet once a quarter to review the implementation of the PSEA Task force workplan and share internal agency work on PSEA

**Steering Committee:** This body is comprised of the high-level management (i.e. head of office or sub-office) of HCT agencies at the country or sub-office level to guide and support the design, implementation and monitoring of the PSEA activities. Steering Committee members facilitate the identification or nomination of Focal Points from their respective agencies, take PSEA-related decisions on behalf of their agencies, implement accountability and quality standards, and mobilize resources to support the implementation of PSEA systems and mechanisms. See Annex 2 for detailed responsibilities

**Co-chairs of the PSEA Task Force:** Ensures that the Task Force works according to its ToRs.

**Taskforce Coordinator**: The Coordinator is fully dedicated to initiating, overseeing, and coordinating PSEA activities in Somalia. He/she is responsible for engagement with the Humanitarian Country Team in order to advocate for high-level commitment and broad engagement at the country level. The Coordinator will also notify the IASC Task Team on AAP/PSEA to ensure that global level forums maintain a current understanding of country-based activities and that operational agencies’ headquarters are informed and can make sure that their Heads of Office at country level understand the need to actively participate.

The Taskforce Coordinator has a holistic view of PSEA issues in Somalia, liaises between agencies and with the host government, conducts regular inter-agency meetings, and generally keeps PSEA momentum moving forward. She/he reports on PSEA activities to the HCT and any other appropriate structures on a regular basis, and advice and assist members as required, as well as coordinate with the UNSOS/UNSOM’s actions on PSEA activities. She/he is a sufficiently senior staff member who is well-trained in PSEA, data protection, victim assistance, and confidentiality measures.

The Coordinator is neutral, acting on behalf of the taskforce, regardless of his/her employing agency. In this capacity, one of the functions of the Coordinator is to review the complaints received through the CBCM for referral to the concerned agency and victim assistance, and consolidate the SEA statistics to feed into annual SG’s PSEA report. Given this review and referral function, the Coordinator is a permanent position, and not a function in addition to other job duties. .

**Integrated Office (DSRSG/HC/RC)**: Supports the taskforce work at the HCT and allocates resources for PSEA work in Somalia

**PSEA Focal Points:** The PSEA Task Force, in consultation with HoAs, designate PSEA Focal Points, who form the PSEA Taskforce in Somalia. The Focal points lead PSEA activities within their agencies and common activities in Somalia and report on progress and on specific cases to the Task Force as required. Agencies are encouraged to nominate their own PSEA Focal points in every field office location. (See Annex 1 for a detailed PSEA Focal Point TOR)

**PSEA CBCM Focal points**: In the areas where PSEA CBCM are established, the local level focal points, with support from the PSEA coordinator, will agree on the PSEA CBCM Focal points (maximum of 3). The Local CBCM focal points will manage, and support local channels and procedures to receive allegations, assess, document cases using an agreed upon incident report form, and refer for immediate assistance if needed. A specific CBCM SOP will also be developed for the specific locations where PSEA CBCMs will be established. The CBCM team will refer all complaints that are received through the CBCM for referral and investigation through the PSEA coordinator at the national level as required by these SOPs.

# Procedures

**Setting up CBCMs and designating Focal Points**: The PSEA Task Force will ensure that joint CBCMs are established and CBCM focal points are designated in all locations identified by the taskforce members (Locations with elevated risk). The names and contact information of the CBCM focal points must be disseminated to all HCT members with a presence in the location. A lead agency/agencies will be identified in the CBCM location. The lead agency/agencies will coordinate, with other actors in the location, PSEA/CBCM activities to raise awareness, and to enable and facilitate any allegation of SEA complaints in the location through CBCMs.

**Receiving and assessing complaints through CBCMs:** The primary concern when establishing SEA reporting channels for affected populations in communities in specific locations is that multiple entry points exist allowing different methods of reporting. For Somalia, with inputs from community members in locations with elevated risks, SEA concerns or cases can be reported through a common telephone hotline, women and girls’ friendly spaces, suggestion boxes, verbal complaints through CBCM focal points including trusted community leaders in the specific locations and any other locally agreed upon mechanism. With the support of PSEA Taksforce at the national level, the lead agency/agencies in a site will design a context specific CBCM following good practices and global commitments to prevent and respond to SEA. The Local PSEA CBCM focal points will manage, and support local channels and procedures to receive allegations, assess, document cases using an agreed upon incident report form, and refer for immediate assistance if needed. A specific CBCM SOP will also be developed for the specific locations where PSEA CBCMs will be established. The CBCM focal points will refer all complaints that are received through the CBCM for referral and investigation through the PSEA Taskforce Coordinator at the national level as required by these SOPs. The Taskforce Coordinator will in turn refer the SEA allegations to the concerned agencies for investigations according to internal policies.

The PSEA Task Force will work with local level agency focal points to agree on members of the local PSEA CBCM Focal points (maximum of 3).

Information will be made available to the community about whom they should report to and what assistance they can expect from the existing GBV referral mechanisms (health, legal, psycho-social, security, and other sectors). All potential and actual SEA survivors will be fully informed of the status of their case handling, and the case handling process. All complainants and survivors have the right to receive feedback on the development and outcome of their cases.

**Receiving and assessing allegations/complaints through internal agency mechanisms:** SEA allegations received directly by agency staff will be dealt with according to internal agency procedures and policies, and coded details shared with the PSEA coordinator for consolidation of statistics and accountability.

**Referring allegations to other agencies/members of HCT:** All HCT members must convey all relevant information received about allegations involving other agencies to taskforce coordinator, who will in turn refer to the agencies that are subject to these allegations without delay, including information from whistleblowers. The Task Force Co-chairs and NGO consortium are encouraged to exchange similar information with non-HCT members as relevant. Once a case is referred to the relevant entity, PSEA Focal person representing this organization is obliged to report to the PSEA taskforce coordinator on the investigation process taken within the organization for accountability and follow up purposes. Periodicity of submitting report on the follow-up should be agreed upon, at the time, the complaint is referred to the organization.

The taskforce coordinator is responsible for referring specific cases to the agency with an email to the representative or executive director with a copy to the designated PSEA focal point in the concerned entity. All allegation and complaints concerning any HCT members must be duly reported and considered by the agency that receives the allegation, according to its own rules and procedures. The entity is also obliged to inform the PSEA Task force coordinator for accountability and follow up purposes.

In the case that the SEA constitutes a criminal offense, it is the decision of the entity conducting the investigation to refer cases to the proper law enforcement authorities in conformity with their internal procedures and with informed consent from the survivor. Given the gravity of SEA and the vulnerable nature of SEA survivors, the complaint mechanisms should refer complainants to legal, psychosocial assistance and other services, when appropriate (for instance through GBV sub-cluster members). In the event that a complaint does not warrant a referral or full investigation, the PSEA Task Force, nonetheless may decide on steps to address concerns in other ways, (for example, addressing matters of poor practice via training, a change in working arrangements or a change in procedures).

Anonymized information about case may be brought up in meetings of the PSEA Task Force as required.

**Referring” in-the-air” allegations to the PSEA Task Force:** All HCT members must convey all relevant information to the PSEA taskforce coordinator about any allegations where it is not certain or where it is unknown, which agency may be responsible for the alleged violation. Furthermore, agencies may also convey information about any allegations that are deemed significant in other ways, including information about non-HCT members. The PSEA Task Force coordinator advise HCT/Steering committee on follow-up and assist as required.

**Informing the HCT leadership in Somalia:** Any HCT member that is the subject of complaints or allegations or conducts SEA related investigations must inform the HCT leadership in Somalia (DSRSG) about this as required, and according to their own policies and procedures. The PSEA Task Force coordinator must inform the HCT leadership about all SEA cases and in-the-air allegations.

**Rapid mutual support for victims of SEA:**

**a. Conducting preliminary assessment:** Any agency receiving a complaint or allegation of SEA should prioritize victim/survivor’s immediate protection needs and physical, emotional and social wellbeing. If they do not have the capacity to do so, an immediate request should be made to another relevant agency for assistance (GBV actors). All assessment of SEA victims/survivors should be done by someone trained or by a designated PSEA focal person, taking into account the need for safety, confidentiality, respect and non-discrimination. Complainants who are not alleged victims, including whistleblowers, may also require a physical security assessment and other safeguards to protect their interests.

**b. Facilitating access to essential services**: Based on identified needs and the consent of victims/survivors of SEA, they should be referred for essential services including medical care, psychosocial support, safety and security or legal assistance. Where applicable, GBV programs and staff should serve as entry points for facilitating essential services for victims/survivors of SEA. If there is no GBV program or protection related staff in the location, SEA victims/survivors should be referred as appropriate to other locations to access essential services in a safe and confidential manner.

**Investigating SEA Complaints:** In line with internal complaint policies and procedures, every HCT member agency is responsible for conducting investigations of SEA concerns or allegations involving their own Personnel, contractors, consultants and volunteers, as provided for under this SOP. All investigations of SEA should be carried out in a safe, confidential, transparent and timely manner. Although SEA complaint handling procedures vary, agencies must communicate their investigation status and findings and must provide basic information on each incident and consolidated cases on a quarterly basis under this SOP to the Task Force Co-chairs. After the investigation, has been completed, the investigating entity should alert the relevant parties including the PSEA Task Force coordinator about the status of the investigation and action taken.

**Providing feedback on the status of the complaint:** The complainant and the victim/survivor (if separate) have an interest in receiving feedback on the case, including from the Task Force Co-chairs. The subject of the complaint also has interest to know the status of the case filed against him or her. It is the responsibility of the investigating agency to provide this feedback and to determine what information is provided.

**Recording and tracking SEA cases**: HCT members report the number and type of allegations, victims and alleged perpetrators (none identifying information if already with the specific agency) to the PSEA Task Force coordinator on incident cases and consolidated report on a quarterly basis, including information about new as well as on-going cases that remain under investigation. The reporting on specific cases may include: when the complaint was received; when/whether investigation has commenced; when the investigation is concluded; and the outcome of the investigation. The Task Force may engage with agencies to jointly analyze occurrences, patterns and general challenges and develop prevention and mitigation strategies. The Task Force report to the HCT and other relevant structures on a quarterly basis and to the HQ- IASC PSEA on an annual basis.

# Monitoring and evaluation

**The annual PSEA taskforce work plan** is drafted and shared with the HCT for endorsement. The taskforce collectively implements the workplan and meet monthly to share update on its implementation. e progress is updated quarterly and shared with the Task force steering committee.

**Individual agency work plans:** Each agency will draft its internal annual PSEA work plan and share with the HCT task force coordinator for support and peer accountability. The progress is updated quarterly and shared with the Taskforce coordinator, for collective update to the HCT/Steering Committee.

ENDORSEMENT- MARCH 2019

STANDARD OPERATING PROCEDURE

PREVENTION OF SEXUAL EXPLOITATION AND ABUSE IN SOMALIA

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| --- | --- | --- | --- | --- |
|  | **AGENCY** | **NAME** | **DESIGNATION** | **SIGNATURE** |
|  | DSRSG/RC/HC | George Conway | DSRSG/RC/HC |  |
|  | IOM | Dyane EPSTEIN | Chief of Mission |  |
|  | UNHCR | Takeshi Moriyama | Representative a.i |  |
|  | SOMALIA NGO CONSORTIUM | Nasra Ali Ismail | Acting Director /Deputy Director |  |
|  | USAID/OFDA | Jeffrey N. Bakken | Head of Development Cooperation |  |
|  | UNDP | Safio Esso OURO-DONI | Resident Representative a.i |  |
|  | OCHA | Justin BRADY | Head of Office |  |
|  | UNFPA | Anders Thomsen | Representative |  |
|  | WHO | Mamunur Malik | Representative |  |
|  | UNICEF | Jesper MOLLER | Representative a.i |  |
|  | WFP | Laurent BUKERA | Representative and Country Director |  |
|  | CARE INTERNATIONAL | Abdullahi Abdi Iman | Country Director |  |
|  | DANISH REFUGEE COUNCIL | Simon Muteti Nzioka | Country Director |  |
|  | NOMADIC ASSISTANCE FOR PEACE AND DEVELOPMENT (NAPAD) | Francis G. Kage | Country Director |  |
|  | NORWEGIAN REFUGEE COUNCIL | Victor Moses | Country Director |  |
|  | SAVE THE CHILDREN | Timothy Bishop | Country Director |  |
|  | FAO | Serge TISSOT | Representative |  |
|  | OHCR | Kirsten YOUNG | Representative |  |
|  | CANDLELIGHT FOR ENVIRONMENT, EDUCATION AND HEALTH | Abdirizaq Bashir Libah | Country Director |  |

# ANNEX 1. PSEA Focal Points TOR

# PSEA Focal Points

# Terms of References

# Role Description

PSEA Focal Points (FPs) are appointed by his/her Head of organization to coordinate the implementation of the Secretary-General’s Bulletin on Special Measures for Protection from Sexual Exploitation and Sexual Abuse (ST/SGB/2003/13). S/he will undertake this both within his/her agency/organisation and as a member of the HCT PSEA Taskforce.

The Focal Point designation is a role or “hat” and not necessarily a position. It can either be assigned to existing personnel or new personnel can be hired to carry it out.

PSEA FPs represent their agencies at working level in the HCT PSEA TF and are jointly responsible for advising the TF Steering Committee on matters related to PSEA in the operation.

The FPs Share with the PSEA Coordinator / Taskforce Chair(s) relevant updates on PSEA activities of their agency. Additionally, they report back to their agencies on PSEA progress and knowledge gained from working with the Network.

Each HCT member agency should designate at least one Focal Point and an Alternate to carry out the PSEA responsibilities of the agency, according to their respective organisation profile and management structure to ensure the necessary level of decision-making to fulfil the responsibilities of the role. Wherever possible consideration should be given to the selection of both operational and human resource staff.

# Meetings

PSEA Focal Points shall attend the regular meetings (monthly and ad hoc meetings as necessary), convened by the PSEA task force coordinator, in order to share PSEA updates and experiences, confer with the PSEA Coordinator/co-chairs, and jointly address issues related to trainings, awareness raising activities, and complaints mechanisms when necessary. Regular meetings should facilitate information-sharing on each agency’s measures in place to prevent and address SEA, documented incidents (maintaining confidentiality), and incident follow-up.

# Responsibilities

|  |  |
| --- | --- |
| Institutional | * Work with senior management within their organization to strengthen structures under the Somalia PSEA SOP and implement internal PSEA Action Plan * Ensure that the identity of PSEA focal points is known throughout the organization and that contact details are made widely available * Make appropriate recommendations to own organization or agency management on enhancing prevention and response strategies eg PSEA content included in staff inductions, etc * Mainstream PSEA across all agency`s projects or activities |
| Awareness-raising activities | * Plan and organize trainings for personnel within their organizations (and partners where applicable) on PSEA, the agency’s code of conduct, and internal and joint complaint mechanisms * Plan and organize awareness campaigns for local communities on PSEA, which emphasize beneficiary rights and how to report SEA |
| Complaints | * Act as an in-person channel to receive SEA complainants and coordinate accordingly as per Agency reporting line for PSEA * Work with the PSEA Coordinator / GBV sub-sector to ensure that survivors are referred to appropriate assistance services * Ensure that all SEA involving Child survivor will be shared with UNICEF PSEA Focal Points * Share the SEA allegations received internally to taskforce coordinator for consolidation of statistics and peer accountability. These should be coded (non-identifying information only) |
| Coordination | * Serve as the main channel for sharing PSEA information between agencies at relevant coordination meetings * Respond to requests for information on PSEA activities |
| Joint complaint mechanism management | * Contribute to identification and establishment of joint complaint mechanisms in the Somalia operation * Contribute to the exchange of experiences and best practices during implementation, monitoring, and evaluation * Support the PSEA Coordinator in complaint monitoring and providing complainant/survivor feedback when needed |

PSEA Focal Points shall advocate with their Human Resources and/or senior management to ensure that the above PSEA responsibilities are reflected in their job evaluation. This is necessary so that they may devote the time for continued and meaningful engagement with the PSEA, including: attending coordination meetings, trainings, awareness-raising events for the community, and other PSEA activities.

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| --- |
| **A PSEA Focal Point should never investigate a complaint;**  **The Focal Point should not engage in counselling complainants (unless they are formally trained to do so and the responsibility is in their TORs).** |

# Profile

* The PSEA Focal Point must be a staff of a PSEA taskforce member agency. S/he must be able to easily access the management team and should be at a sufficient level to be able to initiate institutional change.
* The Focal Point must have the following skills and experience:
  + Proven integrity, objectivity, and professional competence
  + Demonstrated sensitivity to cultural diversity and gender issues
  + Ability to maintain confidentiality (i.e. trained in data protection)
  + Fluency in relevant languages
  + Demonstrated experience working directly with local communities

# Training

In addition to regular PSEA staff trainings, PSEA Focal Points must receive trainings to assist them in successfully fulfilling their inter-agency duties. These include:

* As the PSEA representatives of their agencies to the affected community, Focal Points must be trained in the guiding principles of complaint mechanisms, including the standards of confidentiality, safety, and health/psychosocial needs of survivors
* As the primary persons receiving complaints, Focal Points should be thoroughly familiar with the entire inter-agency complaint handling process
* Focal Points should be trained on other forms of misconduct in addition to SEA, in order to enhance their ability recognize SEA when it is mixed with other issues
* Focal Points should be familiar with the policies and procedures of other agencies in the Network, to ensure that accurate information is provided to complainants and so as to manage complainant expectations during intake
* Focal Points should also be familiar with general investigation procedures for the PSEA taskforce agencies, as well as international standards on evidence gathering, so that the intake process does not jeopardize subsequent agency investigation
* Where the state and/or local governments in which the complaint mechanism is situated has mandatory reporting laws related to SEA incidents, it is the responsibility of the PSEA Focal Points to be up-to-date on relevant national laws and to incorporate them into complaint mechanism procedures and information packages for survivors/complainants, as appropriate.

These Terms of Reference shall be reviewed on an annual basis and revised as appropriate.

# Contacts

PSEA Coordinator Miriam warui [Miriam.warui@one.un.org](mailto:Miriam.warui@one.un.org)

Co- chair(UNHCR) Andrea Bruhn Bove [bruhnbov@unhcr.org](mailto:bruhnbov@unhcr.org)

Co-chair (IOM) Yuko Tomita [ytomita@iom.int](mailto:ytomita@iom.int)

# Annex 2: PSEA Taskforce Steering Committee Roles

This body is comprise of the high-level management (i.e. head of office or sub-office) of HCT agencies in Somalia to guide and support the design, implementation and monitoring of the PSEA activities. The steering committee meets quarterly to review the implementation of the Task force workplan and share internal agency work on PSEA.

Steering Committee members have the following responsibility (mainly through the PSEA focal points):

1. To ensure that all staff within his/her agency read, understand, acknowledge, and adhere to his/her agency’s internal SEA complaints handling procedures, including the institutional Code of Conduct, internal reporting mechanism, victim assistance and support policy and procedures, and complaint management for staff. Staff involved in prevention of and response to SEA should in particular understand and sign a Code of Conduct (or similar) that adheres to international standards on PSEA.
2. To raise SEA awareness among staff through induction trainings for new personnel and refresher trainings for current staff on PSEA, the Code of Conduct, the importance of complying with SEA policies, and procedures to report incidents.
3. To support PSEA focal points and ensure they have direct access to the head of office (sub-office and country office) and agency headquarters to execute their functions:
   1. Ensure that both human resources and programmatic sides are engaged in PSEA;
   2. Ensure that the designated focal points are actively engaged in the inter-agency PSEA taskforce, and allotted the staff time to regularly participate in the taskforce meetings;
   3. Incorporate PSEA responsibilities into their performance evaluation reports.
4. To promote agency adherence to SEA prevention procedures as outlined in the IASC PSEA CBCM Best Practices Guide, including but not limited to:
   1. Due diligence to prevent re-recruitment of offenders;
   2. Ensuring that victim assistance services are provided;
   3. Forestalling retaliation for whistleblowing on SEA allegations; and
   4. Requiring adherence to PSEA clauses in cooperative agreements.
5. To raise the PSEA awareness and capacity of implementing partners (IPs) from the moment they are selected, including but not limited to:
   1. Ensure that IPs have a clear understanding of what SEA means and what their duties and responsibilities are in preventing and reporting cases;
   2. Encourage IPs to engage with the PSEA and create/strengthen their own PSEA policies; and
   3. Include IPs in PSEA trainings, as much as possible, to ensure adherence and commitment to PSEA.

# ANNEX 3: CASE MANAGEMENT FOR REPORTED SEA CASES

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| **Case Log of Reported SEA Cases to the PSEA Taskforce** | | | | | | | | |
| **Case no. & Agency of the alleged perpetrator** | **Date: Allegation received (TF Level)** | **Allegation reported to the agency respresentative on (Date)** | **Category of staff and number of subjects of complaints** | **Allegation (Brief and non-identifying information)** | **Expected feedback date** | **Progress( Investigation/status)** | **Results/outcome** | **Action** |
|  |  |  |  | Eg Transactional sex, rape, exploitative relationship, etc |  | * Investigation ongoing * Case closed before investigation | * Substantiated * Unsubstantiated- insufficient evidence * Unsubstantiated –allegations unfounded | * Closed * Pending * Disciplinary action ongoing |
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