

Guidance Note

INTER-AGENCY SEXUAL EXPLOITATION AND ABUSE REFERRAL PROCEDURES (IA SEARP)

IASC Technical Advisory Group

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Endorsed by IASC Deputies Group

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1. INTRODUCTION

The Inter-Agency Standing Committee (IASC) has been committed to the principle and delivery of an inter-agency community-based complaints mechanism (IA CBCM) since 2016.¹ A key priority under the [IASC PSEAH Vision and Strategy](#) (2022-2026) and the 2022-2023 IASC PSEAH Technical Advisory Group Work Plan, is to review and revise the IA CBCM approach, in recognition that IA CBCMs are not being systematically implemented in all responses, as envisioned by the IASC Principals in 2016.² The modalities of the revision are based on the [2021 IASC External Review of PSEA/SH](#), commissioned by UNFPA; a rapid survey of PSEA Coordinators commissioned by IOM, identifying challenges to implementing the IA CBCM approach and utility of the [Best Practice Guide](#); a two-day stakeholder dialogue with PSEA experts from IASC Members; and observations from the [IASC mapping](#). The overarching goal of the IASC PSEAH Vision and Strategy is that by 2026, Humanitarian Country Teams (HCTs) will be able to demonstrate that a fully resourced inter-agency community-based complaint mechanism is in place.

This Guidance Note has been produced and cleared by a Steering Committee comprised of the following members: CHS Alliance, IASC Taskforce 2 liaison (IASC AAP and OCHA AAP), IFRC, IOM, OCHA/IASC Secretariat, OHCHR, OSC SEA, OVRA, PSEA Coordinator Chad, SCHR, SCHR/WVI, UNFPA, UNHCR, UNICEF, WFP and WHO; overseen by the IASC TAG and endorsed by the IASC Deputies on behalf of the Principals. It has undergone extensive consultations with Steering Committee members, PSEA Coordinators and practitioners. Related tools have been developed and/or reproduced from tools used in the field, based on the needs identified by field operations.

Purpose and Scope

The purpose of this Note is to provide guidance on a standardised model of procedures for inter-agency referral of SEA complaints and survivors, for use when designing or updating country-level procedures. The objective is that *when an SEA complaint is received it is referred to any concerned entity for appropriate support to victim(s)/ survivor(s), follow-up and investigation*³ in accordance with a Victim/Survivor Centered Approach (see Section 3).⁴ It is aimed at a generalist audience with specific relevance for senior leadership (e.g. Humanitarian Country Teams) and technical PSEA actors in country.

IASC entities engaged in IA SEA referral are committed to prevent, respond to and mitigate risks of any form of SEA perpetrated by their personnel. This requires implementing their own internal policies, rules and procedures for handling complaints and responding to SEA incidents, including investigations and staff training. This Guidance Note in no way intends to replace or override internal policies. Rather, it describes procedures that arise from and supplement internal policies when entities are engaging in inter-agency cooperation for SEA referrals.⁵

IA SEA referrals are based on an entity's participation in PSEA Networks through the designation of a PSEA Focal Point.⁶ It is through a PSEA Network that entities will develop contextualized, country-level inter-agency SOPs based on the model described here (see Annex 3 for template for country-level SOPs).⁷ If based on this model, country-level SOPs will be consistent with the internal policy of IASC member entities and – for those entities with centralized policy – will not require endorsement from headquarters. If country-level SOPs are to deviate from this model, it should be raised and discussed with respective headquarters.

This Guidance Note is developed on behalf of the IASC as the key forum for humanitarian partners on coordination, policy, and decision-making, and is therefore designed for use in humanitarian contexts. However, noting that many of the procedures may be applicable in transition and development contexts, and taking into account the broad scope of PSEA obligations in international legal instruments, this Guidance Note may have application more broadly.⁸

What is not within the scope of this guidance

This Guidance Note describes procedures that apply when an SEA complaint has been received **by an entity PSEA Focal Point or staff member who is trained to receive sensitive complaints and SEA referral procedures**⁹ and requires referral to another entity. It does not cover:

- **How to receive a complaint**, which falls within entities' own internal policy.¹⁰
- **How to set up a complaints and feedback mechanism (CFM)**. It is acknowledged that inter-agency referrals require safe and accessible feedback mechanisms, which is prioritised under Accountability to Affected Populations (AAP) and sensitised for SEA where appropriate by PSEA actors.¹¹

- **Information sharing protocols or procedures for sharing personally identifiable information (PII) on SEA complaints**, beyond referral to the entities responsible for follow-up. Complaint referral is distinct from information sharing on SEA (anonymized and aggregated) between entities and/or Resident Coordinators (RCs)/Humanitarian Coordinators (HCs) and PSEA Coordinators, for the purpose of understanding SEA trends and mitigating risk, or to inform leadership, which is also not covered by this Guidance Note. UN entities should be guided by the requirements and procedures for all United Nations entities on sharing of information on complaints of SEA related to United Nations staff and related personnel and implementing partner personnel with the most senior United Nations official in country.¹² See Annex 5: Distinction between different types of information-sharing.
- **Data protection standards and principles.**¹³
- **A standardised SEA reporting form.** Whilst this Guidance Note includes templates for sharing information to facilitate inter-agency referrals¹⁴ (see Annex 6), entities will determine their use of common harmonised frameworks such as the [CHS Alliance harmonised SEAH data collection and reporting](#) for NGOs and private sector organisations; and the [UN Incident Reporting Form \(IRF\)](#) designed for use by UN designated Information Receiving Officials (IROs) for referral of SEA cases involving the UN to [the Office of Internal Oversight Services \(OIOS\)](#) for investigation.¹⁵

2. ROLES AND RESPONSIBILITIES FOR INTER-AGENCY SEA REFERRALS

The Resident Coordinator/Humanitarian Coordinator (RC/HC) has system-wide responsibility for developing collective PSEA strategies and ensuring action plans are implemented.¹⁶ With respect to IA SEA referral procedures, there is a responsibility to advocate and lead all entities to engage in the PSEA Network and adequately finance and resource activities, including ensuring that inter-agency SEA complaint mechanisms are in place and functional. The RC/HC has overarching responsibility to advocate for the provision of assistance to victims/survivors (including GBV/child protection services) and reporting on actions taken in-country to prevent and respond to SEA.¹⁷ When an alleged perpetrator is affiliated with a government entity partnering with the UN, the RC/HC has the role to communicate and raise the situation with the government authorities at the appropriate level, in coordination with the relevant UN entity that is partnering with the government ([see §4.1.4](#)).

In a refugee operation, the **Refugee Coordinator** (UNHCR Representative) has overall collective responsibility for PSEA for the refugee operation, akin to the roles and responsibilities described above for the RC/HC. In countries where there is an RC/HC, the Refugee Coordinator ensures close collaboration with them including through regular briefings and updates on PSEA-related developments in the refugee response.¹⁸

The UN Country Team (UNCT) and Humanitarian Country Team (HCT) must promote PSEA activities across entities including that adequate time, finances and resources are contributed by participating entities to ensure that the following are prioritised: safe and efficient complaint and feedback mechanisms (CFMs); assistance services to support victims/survivors; and effective referral procedures. HCT responsibility for PSEA, AAP and GBV under the HC is outlined in [HCT compacts](#) and [standard terms of reference for HCTs](#).

Heads of Entities in country (as members of the HCT or UNCT) are accountable for PSEA within their organisations and are responsible for overseeing their entity's engagement in PSEA. This engagement includes endorsing country-level SOPs; establishing and maintaining CFMs; ensuring that victims have access to assistance and support; ensuring personnel understand codes of conduct and PSEA complaint policies; and due diligence to prevent re-recruitment of offenders. Heads of Entities must designate PSEA Focal Points for their entity and determine who will represent the entity in the PSEA Network.¹⁹

Inter-Agency PSEA Coordinator has the role of supporting the PSEA Network to draft country-level SOPs based on this Guidance Note. In coordination with Protection, Gender-Based Violence (GBV), Child Protection (CP) and Senior Victims' Rights Officers (SVRO)/Victims' Rights Advocates (VRA)/Victims' Rights Focal Points (VRFP) (where deployed), the PSEA Coordinator ensures that country-level SOPs incorporate Protection, GBV and CP referral pathways for the provision of assistance to victims/survivors of SEA.²⁰ When an entity is not identified in an SEA complaint, the PSEA Coordinator has a role to identify and refer to the concerned entity or investigative body ([see §4.1.5](#)). Where it is appropriate, the PSEA Coordinator has a role in receiving complaints from the community directly, for instances in the absence of other neutral channels, or in cases where a PSEA Focal Point is not in place within an entity. Where there is no PSEA Coordinator in place, another actor ('alternate') must be identified in-country to perform this role.²¹

Inter-Agency PSEA Network includes all designated PSEA Focal Points of entities in the response, and representatives of other relevant working groups/clusters/networks (e.g. Protection, GBV, CP, Accountability to Affected People (AAP), Cash etc.) within country.²² The inter-agency PSEA Network has the task of establishing and maintaining inter-agency referrals of SEA through agreed SOPs in line with this Guidance Note. The inter-agency PSEA Network will support to ensure IA SEA referral procedures are effective and timely and in coordination with GBV/CP and other service providers; and ensure that all personnel understand referral pathways and procedures for assistance/services and for investigative follow up.²³

Entity PSEA Focal Points (FP) are personnel of an organisation tasked with leading/coordinating the implementation of PSEA in direct coordination with their Head of Entity, both internally and as an active member of the PSEA Network. PSEA Focal Points are responsible for knowing their entity's procedures and their obligations to report and refer an incident. They may receive SEA complaints and are responsible to ensure safe reception, referral and follow-up of SEA complaints as needed; so that victims/survivors have access to support services through the GBV and CP referral pathways and to investigation or accountability processes, based on their informed consent, and in accordance with the referral procedures and internal procedures of their entities. It is not the responsibility of PSEA Focal Points to conduct investigations and/or try to verify the validity of a complaint.²⁴

PSEA Focal Points should ensure that all their entity personnel can identify SEA; are aware of relevant PSEA Focal Points; understand how to report SEA concerns and complaints; and are aware of services and assistance. The nomination of a PSEA Focal Point does not relieve the Head of Entity of their ultimate responsibility for PSEA but supports the Head of Entity in that role.²⁵

Senior Victims' Rights Officers (SVRO), Victims' Rights Advocates (VRA) and Victims' Rights Focal Points are appointed within UN Country Teams to champion victims'/survivors' rights, where deployed. They ensure that a gender- and child-sensitive, non-discriminatory and victims'/survivors' rights approach is integrated into United Nations' support of victims/survivors of SEA.²⁶

GBV/CP Coordinators work with PSEA Coordinator/PSEA Network/PSEA Focal Points to ensure that they understand the referral pathways and that all personnel know/understand basic services and assistance available for survivors. If there are no adequate services in place, GBV/CP Coordinators and the PSEA Coordinator/PSEA Network can identify gaps and advocate for additional services. GBV/CP Coordinators and Focal Points can collaborate with PSEA Coordinators to integrate responding to SEA into GBV SOPs and ensure that GBV/CP service providers are trained how to handle SEA cases.²⁷

GBV/CP Service Providers provide services and assistance to victims/survivors based on their consent and in line with a Victim/Survivor Centered Approach and the principle of best interests of the child.²⁸

Human Rights Representatives including international actors (OHCHR) or national human rights actors (e.g. national human rights institutions) can advise on the normative frameworks applicable to SEA complaints at the national and international levels, and in relation to acting with respect for informed consent, confidentiality and protection in reporting complaints for criminal investigation.

AAP Working Group / Focal Points work with PSEA Network and PSEA Focal Points to support the regular mapping, reinforcement and establishment of feedback mechanisms; to identify where there are gaps or barriers for the affected population's safe access to report SEA; and to sensitise CFMs for SEA where appropriate. Inter-agency AAP Coordinators and entity AAP Focal Points should also work with the PSEA Network/PSEA Focal Points on engaging and consulting communities on PSEA. See Collective AAP Framework for more information on their role.²⁹

3. MINIMUM STANDARDS AND GUIDING PRINCIPLES UNDERLYING SEA REFERRAL

IASC 6 Core Principles:

All entities should institutionalise and promote within their entity the IASC Six Core Principles relating to PSEA. All personnel should understand and sign their entity's code of conduct, or equivalent, setting out the standards of acceptable and unacceptable behaviour. All entities are responsible for ensuring that all their personnel have comprehensive training and information on PSEA. They must understand the obligations under mandatory reporting and who they should report to, a Victim/Survivor Centered Approach and GBV and Child Protection referral pathways.

Zero tolerance of inaction: All entities should be committed to institutionalizing zero tolerance of inaction against SEA.

Collaboration among country-level SOP signatories: All entities can receive a complaint against another entity and act in accordance with the referral procedures as set out in this Guidance Note and as integrated into country-level SOPs.³⁰

A Human Rights-Based Approach and Victim/Survivor Centered Approach:³¹

IASC members are committed to applying an end-to-end Victim/Survivor Centered approach to SEA.³² This includes offering holistic assistance and support to all victims/survivors irrespective of whether the victim/survivor initiates or cooperates with an investigation or any other accountability or resolution procedure. Some of the key principles are set out below:

- **Safety, Security and Well-Being:**³³ Ensure the safety and security of the victim/survivor as a primary consideration, taking into account their familial, social and cultural context. Adhere to the principles of “Do No Harm” and refrain from any action that jeopardizes the safety, security and emotional well-being of the victim/survivor. Assess potential risks for victims/survivors and ensure all contact, communication and support to a victim/survivor is provided in a manner which seeks to uphold their rights, needs, safety, dignity and emotional well-being and protects them from stigmatization, discrimination, retaliation and retraumatization.³⁴ Victims/survivors and complainants should be protected from retaliation for reporting SEA.³⁵
- **Confidentiality:**³⁶ Confidentiality covers the identity of those who have provided the information, as well as the information itself. Victims/survivors have the right to choose to whom they will or will not tell their story, however, victims/survivors must be informed of the limits of confidentiality, including informing them

when mandatory reporting procedures are in place and what these imply. Outline the information that may be transmitted, to whom, and for what purpose, as early as possible and before the victim/survivor shares their personally identifiable information and incident details. Explain any implications on the scope and conduct of a possible investigation of a victim's/survivor's choice to keep information confidential. Ensure that robust data protection measures are in place.³⁷ All information contained in a complaint, or a report, must remain confidential and information is shared with the minimum number of people necessary, strictly on a need-to-know basis, for the purpose of referral and service provision, based on the informed consent of the victim/survivor.³⁸

- **Special Considerations for Child Victims/Survivors:**³⁹ Assistance and support to child victims/survivors (persons below 18 years of age) must be provided in a manner consistent with the Convention on the Rights of the Child (CRC), in particular the principle of the “best interests of the child”. Children have the right to have their best interests assessed and considered as a primary consideration in all actions or decisions that concern them. In addition, children shall be assured the right to express their views freely in all matters affecting them, their views being given due weight in accordance with the child's age and level of maturity. For children who are too young to understand information about their rights and service options, this information should also be shared with their trusted adult who can support the child to participate in making a decision. Efforts to design country-specific referral pathways should be done in consultation with actors who are trained to handle the special needs of child survivors of sexual abuse, and who are familiar with local procedures relating to the protection of children.⁴⁰
- **Informed Consent:**⁴¹ Consent is based upon the victim's/survivor's clear appreciation and understanding of the facts, implications and potential consequences of an action. Actively seek consent from victims/survivors on the possible use of the information they provide. Endeavor to make no information disclosure at any time to any party without the informed consent of the victim/survivor. Inform victims/survivors about their right to engage or not to engage in a process and the fact that the IASC entity may decide to pursue management action,⁴² without their consent and participation, to prevent further harm (see mandatory reporting below). A victim/survivor can withdraw their consent to participate in the process at any time, without impacting their right to assistance. In cases involving young children where informed consent is not possible, their informed assent may be sought in a manner consistent with their evolving capacity.⁴³

Mandatory reporting:

Mandatory reporting in a context of the Secretary-General's Bulletin on PSEA (2003) refers to an obligation to report SEA perpetrated by UN staff or related personnel, non-UN forces operating under a Security Council mandate, and implementing partner staff and related personnel in line with established reporting procedures.⁴⁴ Compliance with mandatory reporting of SEA complaints is a requisite for all UN entities, their partners, and IASC member entities; reporting obligations exist whether or not the alleged perpetrator is from the same entity.⁴⁵ All IASC member organisations are mandated to have protocols for responding to SEA.⁴⁶ Victims/survivors must be informed of entities' mandatory reporting obligations as soon as they come forward with a complaint.⁴⁷ Victims/survivors should also be informed of their rights related to informed consent and its implications; confidentiality protections; and that assistance is offered to victims/survivors irrespective of whether they initiate or cooperate with an investigation or other accountability procedure.⁴⁸

In some instances, national legislation and/or local customs may impact SEA complaint handling, including local mandatory reporting laws. **This should not be confused with the principle of mandatory reporting of SEA for humanitarian staff within their own entities or for inter-agency referral.** Understanding the implications of national legislation for the victims/survivors and their communities, and even for perpetrators, is crucial. In many countries mandatory reporting applies primarily to child abuse and maltreatment of minors, but in others it has been extended to the reporting of sexual assault and rape or intimate partner violence against any individual.⁴⁹ Country-level SOPs must have clear procedures in place for how to assist a complainant in filing charges with local law enforcement

if a crime is involved (see Annex 3. Country-level SOP template). Specialised entities in human rights, GBV and law can advise on the applicable national and international legal considerations regarding reporting cases to national authorities.

Information on complaints will only be shared with relevant authorities as appropriate, upon a protection risk assessment and in line with informed consent.⁵⁰ In the case that the SEA constitutes a criminal offence, if victims/survivors consent for their personally identifiable information to be shared with national law enforcement authorities, the entity will assist the victim/survivor through the process, including providing legal assistance, or referring to relevant actors for legal assistance/support, as appropriate.^{51,52}

Complaints and Feedback Mechanisms:

Recognising that functioning intake channels are the basis of inter-agency referrals, all entities who sign country-level SOPs, based upon these referral pathways, commit to having safe, confidential, accessible, disability-inclusive, child-friendly, responsive and multi-channel effective and high-quality complaint and feedback mechanisms (either entity-specific or inter-agency) and to ensure community engagement and awareness raising on PSEA.⁵³ The Collective AAP Framework commits entities to coordinating CFMs and putting in place a referral system that can manage complaints, including SEA, and can facilitate timely action (including course correctors in programme response). For further guidance on how to set up a CFM see the Collective AAP Framework and other resources and guidance.⁵⁴

4. INTER-AGENCY SEA COMPLAINT AND ASSISTANCE REFERRALS

[See Annexes 1 and 2 for referral flow charts]

4.1 Referral

SEA reports can come from anywhere and be received by any personnel. It is the responsibility of all entities to:

- Ensure that their personnel are trained in safe disclosure;⁵⁵
- Ensure their personnel understand institutional procedures for immediately reporting SEA for assistance services and potential investigation;⁵⁶
- Increase the numbers of staff that are trained to receive sensitive complaints and inter-agency SEA referral procedures (see [IASC 6 Core Principles](#)).

For the purposes of this Guidance Note the following referral pathways are intended to take effect **once a report is received by a staff member who is trained to receive sensitive complaints and inter-agency SEA referral procedures** (e.g. PSEA Focal Points, GBV or CP specialists, PSEA Coordinator, staff running a joint CFM, hotline operators, etc.).⁵⁷

Referral for victim/survivor assistance

The aim of a referral mechanism is to ensure that victims/survivors are supported and promptly referred so that they receive immediate assistance as soon as they come forward.⁵⁸ The responsibility to provide assistance and support begins as soon as information indicating that an individual may be a victim/survivor of sexual exploitation or abuse is received in any way or form, based on victim's/survivor's informed consent. This may involve referrals to service providers according to the needs and informed consent of the victim/survivor.⁵⁹ It does not require the receipt of a credible complaint of sexual exploitation or abuse.⁶⁰ The safety and confidentiality of victims/survivors of SEA must be central to the provision of assistance by all responsible organisations and service providers, in line with a Victim/Survivor Centered Approach.⁶¹

It is the responsibility of the PSEA Focal Point/trained staff to ensure that the victim/survivor/complainant has been informed about and offered assistance in line with a Victim/Survivor Centered Approach.⁶² If assistance has not previously been offered, or if the victim/survivor only now wishes it, the PSEA Focal Point/trained staff should make appropriate referrals using existing GBV/CP referral pathways, based on informed consent, as set out in country-level SOPs.⁶³

If victims/survivors do not want to access services, their wishes must be respected. Victims/survivors can still be provided with details of GBV service providers in their area in case they wish to access services in future.⁶⁴ When referred for assistance, the service provider receiving the survivor/complainant shall confirm to the referring personnel within 48 hours that the service referral was received, so s/he may fulfil the reporting duty to the concerned entity.⁶⁵ Guidance on principled receipt of a complaint from someone other than the victim/survivor is set out in Section 3 *Technical Note on the Implementation of the UN Protocol on the Provision of Assistance to Victims of SEA*⁶⁶

Inter-agency referral of complaints

In parallel with ensuring that victims/survivors have access to appropriate assistance, the following section describes the pathways for complaint referral according to different scenarios. Some entities' internal procedures require that the recipient report to their own investigative body, who would then refer the complaint to the investigative body of the concerned entity. Staff should always follow their own internal policies if in doubt of procedure.

4.1.1 Alleged perpetrator is affiliated with the same entity as complaint recipient

If the alleged perpetrator works in the same entity as the complaint recipient, the internal procedures of the entity should be followed, in accordance with a Victim/Survivor Centered Approach. For the purposes of complaint referral, "working for" an entity includes situations where the alleged perpetrator is a member of the affected community with a contractual link with the entity (e.g. community volunteer, incentive worker, community mobiliser, etc).

If a humanitarian worker believes that the primary reporting route for their entity is compromised, or that they would be victimised, or they have no confidence in the local management structure, they can use any of the other reporting options available to the community (see [Complaints and Feedback Mechanisms](#)). The staff member retains the right to report anonymously and is owed the same protections as any complainant.

4.1.2 Alleged perpetrator is affiliated with a different entity that has signed the country-level SOPs

If the complaint is related to a different entity, the PSEA focal point/trained staff should complete the referral form and refer to the SEA complaint-handling body of the concerned entity.⁶⁷

In limited situations where there is a conflict of interest or in situations where the complaint-handling unit's ability to handle the complaint may be compromised (e.g. the complaints relate to a country director or other senior staff), the complaint may be referred to the RC/HC (or equivalent⁶⁸), who in turn will share it at the appropriate level for action, based on informed consent by victim/survivor.

4.1.3 Alleged perpetrator is affiliated with an entity that is not a member of the PSEA Network or a signatory to the country-level SOPs

If the complaint involves personnel from an entity that is not yet a member of the PSEA network nor a signatory to the country-level SOPs, the PSEA Focal Point/trained staff member will fill out the referral form and share the complaint with the RC/HC (or equivalent⁶⁹), or to the PSEA Coordinator if delegated by the RC/HC; based on informed consent by the victim/survivor. The RC/HC will share the complaint with the country director or senior most responsible person of the concerned entity in country. Alternatively, when the PSEA Focal Point /trained staff member does not have direct access to the RC/HC, the complaint may be shared with the PSEA Coordinator.

In instances when the alleged perpetrator is the country director, the RC/HC will share the complaint directly with the entity's complaint handling unit, board of the organisation, or other pre-identified focal point, if safe to do so.

4.1.4 Alleged perpetrator is affiliated with a host government entity

PSEA actors should understand relevant national laws and government structures for accountability for alleged misconduct by host government personnel. It is important to agree on referral procedures with the relevant host government authority(ies) in advance where possible/appropriate, for inclusion in the country-level SOPs, to allow for timely referral of urgent cases.

When a PSEA focal point/trained staff receives a complaint regarding a government employee (or community or local leaders appointed by the government) the following steps will be taken:

- a) The PSEA Focal Point/trained staff will complete the referral form and refer the complaint to the PSEA Focal Point/trained staff of the entity partnering with the government authority where the alleged perpetrator works. This is so that the entity partnering with the government can assess the situation to identify actions to be taken to stop misconduct and to provide protection and assistance to victims/survivors.⁷⁰
- b) The entity partnering with the government will share the complaint with the RC/HC (or equivalent⁷¹). The RC/

HC will share the complaint officially with the relevant government counterpart for investigation and action. Complaints should only be shared with the government based on the survivor's informed consent and a protection risk assessment for the survivor, witnesses, and other parties to the complaint.⁷²

- c) The RC/HC should coordinate with the relevant entity partnering with the government, if applicable, who can support the government to ensure accountability and victim/survivor assistance.

In instances where the entity has a formal agreement with the government on the handling and investigation of such complaints, the entity will follow the existing agreed protocol and concurrently inform the RC/HC of the same.

4.1.5 Alleged perpetrator's entity is unknown or unclear

If it is unclear who the alleged perpetrator is or to which entity the alleged perpetrator belongs, the PSEA Focal Point/trained staff should complete the referral form and share with the PSEA Coordinator (or alternate as agreed within the PSEA Network), based on informed consent by victim/survivor. The PSEA Coordinator should conduct a basic inquiry⁷³ (not an investigation) to discover any information that would identify the concerned entity to make referral possible. Such a basic inquiry shall prioritise the best interest of the victim/survivor and the need to minimise interviews in order to avoid retraumatization. The PSEA Coordinator will refer the complaint to the concerned entity and cease their basic inquiry as soon as the entity of the perpetrator can be identified. If the perpetrator's entity cannot be identified, the PSEA Coordinator will refer the complaint to the RC/HC.⁷⁴ The PSEA Coordinator should inform the PSEA Focal Point/trained staff, or initial complaint recipient, of the referral if they are in contact with the victim/survivor.

If the identity of the alleged perpetrator is unknown but their entity is known, the PSEA Focal Point /trained staff will refer the complaint to that entity, according to the procedures as under [§4.1.2](#) above.

4.1.6 Victim's/Survivor's identity is unknown, or complaint is anonymous

When the victim's/survivor's identity is unknown (e.g. the complaint is reported by a third party who does not know the identity of the victim, or the complaint is made anonymously), but the alleged perpetrator and their entity is known, the complaint will still be forwarded to the concerned entity, as per [§4.1.2](#) above, for follow-up in accordance with its investigation policy and procedures, including to determine if administrative follow-up or investigation is possible/advisable.⁷⁵

4.1.7 Victim/survivor, alleged perpetrator and entity are all unknown

Where the identity of the victim/survivor, the identity of the alleged perpetrator and the concerned entity are all unknown, then there is no distinct SEA incident to refer and rather the PSEA Coordinator/Network shall treat it as a “rumour” or inconclusive information. The PSEA Network, through the country-level SOPs must determine a safe (Do No Harm) and effective procedure to inquire with community members about SEA (e.g. increasing community engagement, extra training for distributions staff) noting that “rumours” can be an opportunity to address SEA risk mitigation and safer programming.

4.1.8 Alleged perpetrator is a member of the affected community without a contractual link with an entity/organisation

If the complaint involves a community member who does not have a contract with the entity but is involved in, or is facilitating the delivery of aid (e.g. community leader or community volunteer without a contract),⁷⁶ the PSEA Focal Point/trained staff will follow the internal procedures of their entity for the referral of the complaint (as set out in §4.1.1) if the alleged perpetrator is associated with their entity. If the alleged perpetrator is associated with another entity the PSEA Focal Point/trained staff will refer the complaint to the complaint-handling body of the concerned entity (as set out in §4.1.2). Entities’ own policies will determine potential follow-up actions in the absence of a contractual relationship.⁷⁷ If the complaint involves a community member who neither has a contract with an entity nor any agreed role on behalf of the entity to provide or facilitate the delivery of aid, the incident will be dealt with as a GBV case.

In these instances, the PSEA Focal Point/trained staff should still offer referral for assistance services (as set out above) and may inform the PSEA Coordinator/Network of the anonymised GBV incident, to bring to the GBV Coordinator/sub-cluster/sub-sector for their awareness of potential GBV risks and offer access to GBV services as needed.

4.1.9 It is unclear whether the complaint alleges SEA

In cases where it is unclear whether a complaint alleges SEA, PSEA Coordinators may provide support to the complaint recipient. No further information gathering shall be conducted, rather the complaint should be referred (as outlined in §4.1.2) for determination by the concerned entity’s investigation unit. When in doubt, it is good practice to behave as if SEA has been alleged, so services and follow up, including an investigation, can be triggered.

If it is determined that the complaint does not allege SEA, PSEA stakeholders still have a vested interest in timely and efficient referral for the survivor to access support services, as needed. PSEA stakeholders must be aware that community members may initially approach a mechanism or staff member with less sensitive complaints before the trust is built to raise an SEA complaint. Country-level SOPs should refer to other existing referral pathways for non-SEA complaints (e.g. joint CFM procedures by the AAP Working Group) or if none in place, identify the appropriate recipients for non-SEA referrals. In general, any complaint that does not involve SEA will be transferred directly to the concerned entity (if clearly indicated) or to the cluster/sector coordinating that response (e.g. Shelter, CCCM, etc.) so that the complaint can be forwarded to the relevant entity.⁷⁸

4.2 Response by the concerned entity

Upon receipt of the referral, the concerned entity should provide any additional assistance and support necessary to link the victim/survivor with the appropriate service provider(s) and, within two business days, send a confirmation to the referring personnel that the SEA complaint was received and that no further action is required by the referring personnel. This acknowledgement can be a standard notification stating that the complaint was received and the date. This should not be confused with the feedback on case status, or with entity feedback to the complainant/survivor, which are also encouraged and should be done in compliance with entity policies (see §4.4 below).

4.3 Identifying additional referrals

Given the nature of SEA and the contexts in which it occurs, an incident of SEA may not be an isolated incident, but part of a pattern of behaviour requiring additional referral and links to case monitoring systems. When drafting country-level SOPs, the PSEA Coordinator and Network should assess the context and identify fact patterns that would require additional referrals. This may include databases recording conflict-related sexual violence (e.g. [MARA](#)); violations of international human rights law and international humanitarian law may be reported to human rights actors including OHCHR.⁷⁹

4.4 Responding/providing feedback to complainants/victims/survivors

Feedback to complainants/victims/survivors of SEA is a two-fold responsibility: It is part of the required outcome of entities' investigations under international commitments, and it is part of victim assistance.⁸⁰ Victims/survivors have the right to be informed about the status of the investigative process and any other proceedings.⁸¹ Concerned entities

also have a responsibility to notify the victim/survivor in a safe and timely manner of the outcome of their investigation.⁸² Victims/survivors have the right to request that information is provided to them in a format and way preferred by the victim/survivor (e.g. by phone, in person, in writing, by a staff member of specified gender, at specific safe location), taking into account personal circumstances, age and disability.⁸³ Timely and thorough response to complaints is a meaningful part of building trust with communities.⁸⁴

The PSEA Coordinator/relevant PSEA Focal Point may support in providing feedback to the complainant, if requested by and dependent on the information shared by the investigating agency (i.e. basic status updates on the case). Complainants should be made aware of the limitations of providing feedback on SEA complaints, to manage expectations, and that any follow up will likely come directly from the investigation body. The alleged perpetrator also has an interest in the complaint filed against him/her, but this is not the responsibility of the PSEA Coordinator or PSEA Focal Points. Informing the subject of the complaint is the responsibility of the concerned entity in line with internal policies.

5. INVESTIGATIONS

While it is the responsibility of each concerned entity to adhere to internal investigation policies and procedures, investigations of SEA complaints should be undertaken with a Victim/Survivor Centered Approach, by dedicated and trained personnel of the concerned entity or by the established investigative body affiliated with the entity/provider.⁸⁵ It is not the responsibility of the PSEA Coordinator, PSEA Focal Points, Heads of Entities or anyone without a mandated investigation role to conduct investigations and/or try to verify the validity of a complaint.⁸⁶

Investigations must be conducted as soon as possible after the complaint is received and informed consent is given by the survivor. The timeline for conducting the investigation may vary.⁸⁷ IASC members are committed to

take appropriate disciplinary action in accordance with their own internal policies in cases where SEA has been proven.⁸⁸

If an entity does not have the capacity to safely, professionally and effectively manage an affiliated, accredited SEA investigation internally, nor have an agreement with an affiliated investigative body, the PSEA Coordinator/PSEA Network should explore options for support and guidance for the relevant entity,⁸⁹ including shared investigative capacity.⁹⁰ External specialist support (such as child protection specialists) may also be required in cases where the victim/survivor and any witnesses is a child and/or a person with a disability that affects hearing, seeing, communication or cognition.

DEFINITIONS

Definitions of terminology used in this Guidance Note are included here. For a full list of definitions relevant to this document see [Global SOPs on Inter-agency Cooperation on Community-Based Complaints Mechanisms](#), [IASC GBV Guidelines](#) and other resources.⁹¹

	Gender-Based Violence ⁹²	Sexual Exploitation and Abuse ⁹³	Sexual Harassment
Parties	<p>Perpetrator: Anyone</p> <p>Survivor: Anyone</p>	<p>Perpetrator: Aid Worker</p> <p>Survivor: Beneficiary or member of the community / affected population</p>	<p>Perpetrator: Aid Worker</p> <p>Survivor: Aid Worker*</p>
Definition	<p>GBV is an umbrella term for any harmful act that is perpetrated against a person's will and that is based on socially ascribed (i.e. gender) differences between males and females. It includes acts that inflict physical, sexual or mental harm or suffering, threats of such acts, coercion, and other deprivations of liberty. These acts can occur in public or in private.⁹⁴</p>	<p>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 another.</p> <p>Sexual Abuse: The actual or threatened physical intrusion of a sexual nature, whether by force or under unequal or coercive conditions.⁹⁵ All sexual activity with a child is considered as sexual abuse.</p>	<p>Sexual Harassment is any unwelcome conduct of a sexual nature that might reasonably be expected, or be perceived to cause offence or humiliation, when such conduct interferes with work, is made a condition of employment or creates an intimidating, hostile or offensive work environment. Sexual harassment may occur in the workplace or in connection with work. While typically involving a pattern of conduct, sexual harassment may take the form of a single incident. In assessing the reasonableness of expectations or perceptions, the perspective of the person who is the target of the conduct shall be considered.⁹⁶</p> <p>*For many organisations, Sexual Harassment as included in the spectrum of behaviours that are not acceptable conduct by staff, be it in the workplace or with affected populations.⁹⁷</p>

Table based on IASC P2P PSEA Guidance Note

For the purposes of this guidance note the definition of SEA follows the UN approach in that it occurs against a beneficiary or member of the affected/host community. Not all organisations make this distinction.⁹⁸

Complaint

Information provided, whether by a complainant or any other source indicating a breach of conduct but that has yet to be assessed. This could be a rumour, a concern or an incident relating to SEA.⁹⁹

Complainant

A person who brings an allegation of SEA in accordance with established procedures. This person may be an SEA survivor or another person who is aware of the wrongdoing.¹⁰⁰

Concerned entity

The entity that has a contractual affiliation with the alleged SEA perpetrator, giving the entity the ability and mandate to take administrative action upon misconduct, including

suspending employment, investigation, and disciplinary action where warranted.

“Do No Harm”

The principle of “Do No Harm” means taking all measures necessary to avoid exposing victims/survivors to further harm as a result of our actions, when providing assistance.¹⁰¹ This means protecting victims/survivors from further harassment, intimidation, retaliation, trauma or victimisation. Actors can reinforce the principle by following the GBV Guiding Principles.¹⁰²

Entity

An all-encompassing term to refer to organisations, agencies, funds, and programmes, including UN entities, international NGOs and local NGOs.

Investigation

Investigation refers to a legally based and analytical process to gather information to determine whether wrongdoing occurred and, if so, the persons or entities responsible.¹⁰³

Personnel or staff

For the purposes of this Guidance Note, 'personnel' or 'staff' is a broad and inclusive term to refer to any person engaged by any entity/service provider to support, provide services and offer protection to the affected community, whether internationally or nationally recruited, whether as an employee, volunteer, intern, contractor or service provider, or engaged from the community with a contractual link with the entity, remunerated or not (e.g. community volunteers, incentive workers, community mobilisers, etc).¹⁰⁴

Assistance referral

The processes by which a victim/survivor gets in touch with professionals and/or institutions regarding their case and the processes by which different professional sectors communicate and work together, in a safe, ethical and confidential manner, to provide the victim/survivor with usually a multisectoral response including several services.¹⁰⁵

Assistance referral pathway

A referral pathway is a flexible mechanism that safely links survivors to supportive and competent services, such as medical care, mental health and psychosocial support, police assistance and legal/justice support.¹⁰⁶

PSEA standard operating procedures

These are the agreed and formalised way of working together on collective commitment to SEA complaint and assistance referral, as endorsed by senior leadership in-country. The SOPs can include agreed-upon referral procedures for complaints handling and referral between organisations and how victims/survivors will be linked to assistance services by incorporating GBV/CP referral pathways, as well as the roles of in-country stakeholders, and the standards and principles that underlie complaint handling and referrals.¹⁰⁷ See Annex 3. Annotated country-level SOP template.

Victim/Survivor

of SEA is a person who is or has been sexually exploited or abused.¹⁰⁸

A Victim/Survivor centered approach

places the rights, wishes, needs, safety, dignity and well-being of the victim/survivor at the centre of all prevention and response measures concerning sexual exploitation and abuse (SEA).¹⁰⁹

LIST OF ANNEXES

1. Referral decision tree
2. Referral procedure flowchart
3. Country-level SOP template
4. Briefing note for senior leadership
5. Distinction between different types of information-sharing
6. SEA complaints referral form template
7. Flow chart of survivor journey from a victim/survivor perspective

FOOTNOTES

1. The Principals endorsed the IA CBCM approach in 2016, articulated in the [Global SOPs on Inter-Agency Cooperation on Community-Based Complaints Mechanisms, 2016](#) and [Best Practice Guide: Inter-Agency Community-Based Complaints Mechanism, 2016](#) and summarized in the [IA CBCM Guidance Note, 2022](#)
2. For a list of acronyms see [Global SOPs on Inter-Agency Cooperation on Community-Based Complaints Mechanisms, 2016](#)
3. As set out in the [IASC PSEAH Vision and Strategy](#) and further defined in the [Ways Forward on the Revision of the IA CBCM](#), 26 October 2022
4. The Inter-Agency Standing Committee (IASC) is committed to applying an end-to-end Victim/Survivor Centered Approach to sexual exploitation and abuse. This document is consistent with the IASC principles and definition of a Victim/Survivor Centered approach.
5. This Guidance Note can be considered as a living document. Implementation at the country level will be regularly reviewed to identify challenges and respond accordingly.
6. Focal Points should be appointed by Heads of Entities at a suitable level to support decision making on behalf of the entity within the PSEA Network.
7. [Best Practice Guide: Inter-Agency Community-Based Complaints Mechanism, 2016](#) includes guidance on drafting country SOPs for inter-agency referral – to be updated to reflect this Guidance Note
8. Scope as set out in [Global SOPs on Inter-Agency Cooperation on Community-Based Complaints Mechanisms, 2016](#)
9. E.g. PSEA Focal Points, GBV or CP specialists, PSEA Coordinator, staff running a joint CFM, hotline operators, etc.
10. Every humanitarian worker must be aware of the proper reporting procedure for when they learn of or witnesses an SEA incident in-person. A humanitarian worker may use any of the reporting channels available to the affected population, but the main point of contact should be the established reporting channels of their entity/organisation. It is necessary that each entity have a confidential internal complaints system set up. See section 4.2 [Global SOPs on Inter-agency Cooperation on Community-Based Complaints Mechanisms, 2016](#)
11. For resources on the role of PSEA actors to sensitize appropriate intake channels for SEA, see the [FAQs](#) on inter-agency PSEA, and the update of the Best Practice Guide (forthcoming)
12. **Updated Guidance Note: Requirements and procedures for all United Nations entities on sharing of information on allegations of sexual exploitation and/or abuse related to United Nations staff and related personnel and implementing partner personnel with the most senior United Nations official in country (8 June 2023)**
13. See [IASC Operational Guidance on Data Responsibility in Humanitarian Action](#); See [Global SOPs on Inter-Agency Cooperation on Community-Based Complaints Mechanisms, 2016](#) for reference to data protection principles in the use of personal data: “every participating organization shall adhere to its Data Protection Principles in the event that it collects, receives, uses, transfers, or stores any personal data of a complaint.”
14. See [Best Practice Guide: Inter-Agency Community-Based Complaints Mechanism, 2016](#) Annex 4 p. 85-89 for other templates, to be updated to reflect this Guidance Note
15. See [UN Guidance on the IRF](#)
16. [Management and Accountability Framework of the UN Development and Resident Coordinator System, 2021](#); [Protection from Sexual Exploitation and Abuse: Statement by the Inter-Agency Standing Committee, 2015](#)
17. [Technical Note UN Victim’s Assistance Protocol, 2021](#), p17
18. The existing guidance on the refugee coordination model (which also includes the overall role of Refugee Coordinators) is [Refugee Coordination Guidance | UNHCR](#) although not specific reference to PSEA (to be updated)
19. For more on the responsibilities of UN/HCT members / Heads of Entities in relation to IA-CBCMs, see [Global SOPs on Inter-agency Cooperation on Community-Based Complaints Mechanisms, 2016](#)
20. As set out in the In-country PSEA Coordinator’s role Generic TOR’s [here](#); and [Technical Note UN Victim’s Assistance Protocol, 2021](#), p17
21. For more on the In-country PSEA Coordinator’s role see Generic TOR’s [here](#).
22. This includes PSEA inter-agency coordination structures which may be named differently depending on the country context (e.g. PSEA Taskforce)
23. For more on the Network’s role see Generic PSEA Network TOR’s see [here](#)
24. The PSEA Focal Point does not have an investigative role as such. However, the PSEA Focal Point of an organisation without a separate HQ investigation unit may also have an internal investigation role, if trained and qualified as an SEA investigator. Source: In-country PSEA Focal Points’ ToRs (2021) [here](#)
25. For details of PSEA Focal Points see TORs. In-country Focal Point, Generic Terms of Reference (ToRs) are intended to support organisations that do not already have TORs in place; they are not intended to replace the ToRs of organisations that already have such guidance.
26. For more information about these roles see [Frequently Asked Questions on the Role of the Victim’s Rights Advocate and the Senior Victims’ Rights Officers](#) [here](#)
27. For more information on roles of GBV actors see GBV AoR [Handbook for Coordinating GBV Coordination in Emergencies, p34](#); See also GBV AoR and UNHCR, [GBV SOPs Resource Package](#) (forthcoming) [here](#)
28. For more information on roles of GBV actors see GBV AoR [Handbook for Coordinating GBV Coordination in Emergencies, p34](#)
29. [Collective AAP Framework](#) includes links to resources on CFM (pending endorsement)
30. As set out in the [IASC Six Core Principles](#)
31. This section is based on the [IASC’s Definition and Principles of a Victim/Survivor Centered Approach, 2023](#) and [Policy on Integrating Human Rights-Based Approach to United Nations efforts to Prevent and Respond to Sexual Exploitation and Abuse, 2021](#); [United Nations Protocol on the Provision of Assistance to Victims of Sexual Exploitation and Abuse, 2019](#); UNHCR, [Policy on a Victim-Centered Approach in UNHCR’s response to Sexual Misconduct](#) [UNHCR/HCP/2020/04]; CHS Alliance [Victim/Survivor-Centered Approach to protection from Sexual Abuse, Exploitation and Harassment in the aid sector, 2023](#); GBV AoR, [The Inter-Agency Minimum Standards for Gender-Based Violence in Emergencies Programming, p2](#).
32. The [IASC’s Definition and Principles of a Victim/Survivor Centered Approach, 2023](#)
33. [IASC’s Definition and Principles of a Victim/Survivor Centered Approach, 2023](#)
34. [IASC’s Definition and Principles of a Victim/Survivor Centered Approach, 2023](#); See also [Global SOPs on Inter-agency Cooperation on Community-Based Complaints Mechanisms, 2016](#) on safety, security and well-being for survivors; and the [SG Bulletin \(2019\)](#) for responsibility of heads of entities (para 5.7)
35. In relation to UN personnel, see [Secretary-General’s Bulletin: Protection against Retaliation for Reporting Misconduct and for Cooperating with Duly Authorized Audits or Investigations \(ST/SGB/2017/2/Rev.1\)](#)
36. [IASC’s Definition and Principles of a Victim/Survivor Centered Approach, 2023](#); See [Global SOPs on Inter-Agency Cooperation on Community-Based Complaints Mechanisms, 2016](#) for more detail on confidentiality requirements
37. See [Global SOPs on Inter-Agency Cooperation on Community-Based Complaints Mechanisms, 2016](#) for reference to data protection principles in the use of personal data: “every participating organization shall adhere to its Data Protection Principles in the event that it collects, receives, uses, transfers, or stores any personal data of a complaint.”
38. [Global SOPs on Inter-agency Cooperation on Community-Based Complaints Mechanisms, 2016](#)

39. [IASC's Definition and Principles of a Victim/Survivor Centered Approach, 2023](#)
40. See [Technical Note UN Victim's Assistance Protocol, 2021](#); Section 3 Special Considerations for Child Victims of SEA; and [Global SOPs on Inter-Agency Cooperation on Community-Based Complaints Mechanisms, 2016](#)
41. [IASC's Definition and Principles of a Victim/Survivor Centered Approach, 2023](#)
42. Management action can include a range of actions including preventative actions, staff rotation, risk mitigation in programmes, in order to prevent further harm.
43. See UNICEF and IRC, [Caring for Child Survivors of Sexual Abuse. Guidelines for health and psychosocial service providers in humanitarian settings](#), table with snapshot of informed consent/assent guidelines on p.117
44. Source: [Technical Note UN Victim's Assistance Protocol, 2021](#); p.23
45. As set out in the [IASC Six Core Principles](#)
46. Source: [Technical Note UN Victim's Assistance Protocol, 2021](#)
47. For more information See [Technical Note UN Victim's Assistance Protocol, 2021](#); p.7 and p.11 §3.2
48. [IASC's Definition and Principles of a Victim/Survivor Centered Approach, 2023](#)
49. Source: [Technical Note UN Victim's Assistance Protocol, 2021](#)
50. see [IASC GBV Minimum Standards](#) Section on Mandatory Reporting. For more information on criminal accountability see [CHS Alliance Foundational Paper](#), p57;
51. In instances of SEA complaints involving UN personnel, where the conduct may also amount to a crime, the UN refers cases of SEA to national authorities for criminal accountability through the UN Office of Legal Affairs in New York. Referrals are always done with the victim/survivor's consent and following an assessment of risks to the victims/survivors and witnesses as well as possible mitigatory actions. See [Uniform Policy on balancing the disclosure of information for accountability for alleged SEA with principles of confidentiality](#), § 6.5
52. Source: [IASC's Definition and Principles of a Victim/Survivor Centered Approach, 2023](#); [UN Victims Rights Statement, 2023 para 3\)b, 3\)c](#)
53. See [Core Humanitarian Standard #5](#) Communities and people affected by crisis have access to safe and responsive mechanisms to handle complaints that describes the roles and responsibilities humanitarians have towards communities in relation to PSEA(H) reporting mechanisms. PSEA(H) is also mainstreamed in all 9 commitments of the CHS under Key Actions and Organizational Responsibility. For the full 22 indicators related to PSEAH, see specifically the CHS PSEAH Index here <https://www.chsalliance.org/get-support/resource/pseah-index/>
54. <https://aap-inclusion-psea.alnap.org/>; [Collective AAP Framework](#) includes links to resources on CFM (pending endorsement); [IFRC Guidance: How to Establish and Manage a Systematic Community Feedback Mechanism](#); <https://www.cdacnetwork.org/feedback-and-complaints>
55. All personnel should be capacitated to offer holistic assistance and support to all victims/survivors irrespective of whether the victim/survivor initiates or cooperates with an investigation or any other accountability or resolution procedure. See [IASC's Definition and Principles of a Victim/Survivor Centered Approach, 2023](#); [Technical Note UN Victim's Assistance Protocol, 2021](#); [IASC GBV Pocket Guide](#).
56. The lack of an understood or functional internal system for managing complaints in just one entity can jeopardize the credibility for multiple agencies, all the more so if that entity is signatory to the country-level SOPs.
57. As set out in the Generic PSEA focal points TORs, it is the role of PSEA Focal Points to **"act as a channel to receive allegations of SEA; Report and where relevant refer allegations to the organisation whose personnel are implicated, and survivors to assistance in line with internal procedure and available pathways."**
58. All entities are responsible for ensuring that victims/survivors of SEA perpetrated by their own personnel have access to appropriate assistance based on their informed consent. See [UN Victim's Assistance Protocol, 2021](#); §3.
59. [Technical Note UN Victim's Assistance Protocol, 2021](#); p.12
60. See [UN Victim's Assistance Protocol, 2021](#); §5. Referrals for assistance should be based on the existing services and programmes, such as the established gender-based violence and child protection referral pathways in-country. Source: §5.3
61. [Technical Note UN Victim's Assistance Protocol, 2021](#); GBV AoR [Handbook for Coordinating GBV Coordination in Emergencies](#) §1.8
62. The victim/survivor/complainant should have already been informed about and referred for services and assistance. [Technical Note UN Victim's Assistance Protocol, 2021](#); GBV AoR [Handbook for Coordinating GBV Coordination in Emergencies](#)
63. For more on the role of service providers see: GBV AoR [Handbook for Coordinating GBV Coordination in Emergencies](#) §1.8; Global SOPs §4.2.2(a) **Referrals for immediate assistance**. Note that case management is only to be provided by trained specialists. See also UNFPA Tip Sheet Defining Linkages to Better Assist Survivors of SEA (2022) [here](#)
64. For more information, please consult the GBV SOPs Resource Package (forthcoming)
65. Source: [Technical Note UN Victim's Assistance Protocol, 2021](#); p19.
66. Complainants who are not alleged victims, including whistleblowers, may also require a physical security assessment, and other safeguards to protect their interests. See [Technical Note UN Victim's Assistance Protocol, 2021](#); p19.
67. See Annex 7. SEA Complaints referral form template and Annex 8. Contact information of investigative bodies for inclusion in country SOPs.
68. An example may be the Refugee Coordinator if the alleged SEA took place in the context of a refugee response.
69. An example may be the Refugee Coordinator if the alleged SEA took place in the context of a refugee response.
70. The receiving entity may share the information with the PSEA Coordinator (or alternate) if this is consistent with their entity policy.
71. An example may be the Refugee Coordinator if the alleged SEA took place in the context of a refugee response.
72. See [Updated Guidance Note: Requirements and procedures for all United Nations entities on information on allegations of sexual exploitation and/or abuse related to United Nations staff and related personnel and implementing partner personnel with the most senior United Nations official in country](#), 8 June 2023
73. Description of scope of basic inquiry to be defined in country-level SOP template (Annex)
74. As set out in [Updated Guidance Note: Requirements and procedures for all United Nations entities on information on allegations of sexual exploitation and/or abuse related to United Nations staff and related personnel and implementing partner personnel with the most senior United Nations official in country](#), 8 June 2023; para 11. **"Where allegations of SEA have been received by an inter-agency PSEA coordinator or network, and where there is an insufficient level of information to refer such allegations to a responsible UN entity or Implementing Partner, such allegations will be shared directly with the RC/HC, in accordance with the standard information above. In the event the entity for whom the alleged perpetrator works becomes known, the RC/HC shall refer the allegation to the Country Director/Representative, for forwarding to the relevant entity's investigation services."**
75. Anonymous reports must be treated with the same gravity as other cases. However, investigations may be hampered if evidence cannot be independently verified.
76. Entities that are engaging community members to provide or deliver aid should seek to – as far as possible – put a contractual arrangement in place or at a minimum the signing of an undertaking/Code of Conduct), as a best practice to prevent SEA.
77. Noting that SEA investigation and disciplinary action will not occur under most entity procedures in absence of a contractual relationship.

78. If the concerned agency is clearly indicated, reports should be transferred directly to them rather than through the relevant cluster in order to minimize the number of persons involved in handling cases, as some non-SEA complaints may be equally sensitive or have protection implications.
79. See resources such as [UN CRSV Handbook](#)
80. [Best Practice Guide: Inter-Agency Community-Based Complaints Mechanism, 2016](#)
81. [UN Victims Rights Statement, 2023, para 5\)b](#)
82. [MQS-PSEA \(2012\)](#) #8, Indicator 5: "Investigations are commenced within 3 months and information about outcome is shared with the complainant". Statement of Commitment (2006).
83. [UN Victims Rights Statement, 2023, para 5\)d](#)
84. See [Global SOPs on Inter-Agency Cooperation on Community-Based Complaints Mechanisms, 2016](#)
85. See [Global SOPs on Inter-Agency Cooperation on Community-Based Complaints Mechanisms, 2016](#)
86. See [CHS Alliance Foundational Paper](#) chapter on investigations;
87. As set out in [CHS Alliance SEA and Harassment \(SEAH\) Investigation Guide](#)
88. See [Global SOPs on Inter-Agency Cooperation on Community-Based Complaints Mechanisms, 2016](#)
89. For more on how the PSEA Coordinator/Network can support investigation capacity, see the [FAQs on inter-agency PSEA](#) #38
90. See [CHS Alliance Investigator Qualification Training Scheme](#); [IASC, Investigating Allegations of SEA - A Toolkit for Partners](#); [CHS Alliance Investigators' Toolkit](#); [Safeguarding Resource and Support Hub support for local organisations](#)
91. Other resources include: [UN Protocol on the Provision of Assistance to Victims of SEA](#) and the [Technical Note on the Implementation of the UN Protocol on the Provision of Assistance to Victims of SEA](#); [UN PSEA Glossary](#); [CHS Alliance PSEAH Handbook](#)
92. Further information about how SEA is distinguished from other forms of GBV is in the [IASC GBV Guidelines](#) (pp. 8 and 322).
93. Source: [IASC's Definition and Principles of a Victim/Survivor Centered Approach](#)
94. Source: [IASC GBV Guidelines](#)
95. [Secretary-General's Bulletin: Special Measures for protection from sexual exploitation and sexual abuse](#) (ST/SGB/2003/13), Section 1.
96. Source: [IASC's Definition and Principles of a Victim/Survivor Centered Approach](#); See Annex 1 for complete definition of SH.
97. Source: [CHS Alliance PSEAH Quick Reference Handbook, 2020](#)
98. See definitions in [CHS Alliance PSEAH Quick Reference Handbook, 2020](#)
99. Source: [UN PSEA Glossary](#)
100. Source: [Global SOPs on Inter-Agency Cooperation on Community-Based Complaints Mechanisms, 2016](#)
101. Source: [Technical Note UN Victim's Assistance Protocol, 2021](#)
102. GBV Guiding Principles: All aspects of GBV programming are survivor-centred to preserve and promote the confidentiality, safety, non-discrimination and respect for the choices, rights and dignity of women and girls, including GBV survivors. [Inter-Agency Minimum Standards for GBV Programming in Emergencies, GBV AoR, UNFPA 2019, Page xi](#)
103. Source: [IASC External Review Global Report 2021](#)
104. [IASC External Review Global Report 2021](#) states the following: Humanitarian worker refers to any worker engaged by humanitarian agencies, whether internationally or nationally recruited, or formally or informally retained by the beneficiary community, to conduct the activities of that agency.
105. Source: [Technical Note UN Victim's Assistance Protocol, 2021](#)
106. Source: [IASC GBV Guidelines](#)
107. Source: [Technical Note UN Victim's Assistance Protocol, 2021](#); See [Global SOPs on Inter-Agency Cooperation on Community-Based Complaints Mechanisms, 2016](#)
108. Source: [IASC's Definition and Principles of a Victim/Survivor Centered Approach](#)
109. Source: [IASC's Definition and Principles of a Victim/Survivor Centered Approach](#)