Country-Level Action Plan to Prevent and Respond to
Sexual Exploitation and Abuse
Haiti - 2024

The PSEA Country-Level model template outlines the priorities agreed by UNCT/HCT members to achieve jointly across countries with humanitarian[1], development and peace and security operations. This template provides the minimum requirements to review and analyse the effectiveness, impact, and progress on measures to prevent and respond to sexual exploitation abuse country wide. It serves as a model framework intended to be adapted and contextualised at the country level. The objective is to promote and document harmonized activities that contribute to implementing a robust action plan and provide the basis for tracking progress and provision/mobilization of required resources related to PSEA in countries with United Nations presence.

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Overview
The 2024 PSEA Action Plan aims to strengthen prevention, community engagement, and response efforts against sexual exploitation and abuse within the UNCT/HCT in Haiti. The plan prioritises comprehensive staff training, awareness-raising, and managerial commitment to create a culture of accountability. Focused on community engagement, it seeks to establish joint accessible reporting mechanisms, strengthen links with AAP initiatives, and set up interagency community-based complaint systems. In the response domain, the plan emphasises collaboration with the Protection, GBV and CP sectors, and building referral pathways. Key challenges include allocating adequate financial and dedicated human resources, accessing communities in hard-to-reach areas, building community trust and overcoming resistance to change.

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[1] This applies to refugee and humanitarian context which could be sub-national or regional in nature.

Desired outcomes	Indicators	Targets / Benchmarks[2] (Provide specifics)	Key actions	Timeframe (Indicate frequency of planned activities)	Budget (USD) / Funding Source (Allocated funding)	Lead agency(ies) per activity
Part A: Priority prevention outcomes for PSEA						
Outcome 1. Prevention. All United Nations staff and related personnel[3] know the UN standards of conduct for protection from sexual exploitation and abuse and understand their personal and managerial/ command responsibilities to address sexual exploitation and abuse and other misconduct.						
Output 1.1 Personnel understand the United Nations standards of conduct on the protection from sexual exploitation and abuse.	a. All UNCT/HCT personnel are provided with an induction briefing on conduct and discipline issues, including sexual exploitation and abuse.	100% of the staff including contractors, volunteers and staff coming on mission, surge, regional visit, etc	Systematic briefing on the Code of Conduct during onboarding. Provide briefing/induction training on the UN PSEA policy for new staff, surge personnel etc	Continuous		**All UN entities**

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[2] The targets provided in the model template are intended as illustrative examples. Actual targets would need to be determined at country-level.

[3] United Nations staff and related personnel include United Nations staff members, consultants, individual consultants/contractors, interns, national officers, United Nations volunteers, experts on mission and contingent members.

Desired outcomes	Indicators	Targets / Benchmarks[2] (Provide specifics)	Key actions	Timeframe (Indicate frequency of planned activities)	Budget (USD) / Funding Source (Allocated funding)	Lead agency(ies) per activity
	b. The UNCT/HCT personnel know the standards on sexual exploitation and abuse, mandatory reporting of SEA and the Protection from Retaliation Policy (training, leadership dialogues).	Four meetings at agency level per year PSEA awareness-raising materials are distributed to 100% of the personnel.	All-staff meetings on PSEA are organised regularly PSEA is added to the agenda of all-staff meetings in UN entities PSEA is a standing agenda item in UNCT/HCT meetings Develop and distribute awareness raising material including "no excuse" cards in Creole and French including reporting channels	Quarterly meetings on PSEA with all staff in every UN entity Once a year distribution of awareness raising material as well as for newcomers and visitors	OPS 5,000 IOM 5,000 UNDP IOM (material available) All UN entities	**RCO and All UN entities**
Output 1.2 Leadership and managers know their personal and managerial responsibilities to address misconduct and are aware of the	a. Managers monitor completion by all personnel in country of mandatory online and in-person training.	Training database is shared with management on a quarterly basis.	Share monitoring reports with management on a quarterly basis (excel sheet for online training, attendance sheets	Quarterly		All UN entities

Desired outcomes	Indicators	Targets / Benchmarks[2] (Provide specifics)	Key actions	Timeframe (Indicate frequency of planned activities)	Budget (USD) / Funding Source (Allocated funding)	Lead agency(ies) per activity
procedures, rules and actions required to respond to incidents of misconduct.	b. Leadership attends regular briefings/training on PSEA.	Four (4) Meetings between agencies' Management and PSEA Focal Points throughout the year.	Organize quarterly meetings[4] between management and PSEA FP. Include reviewing implementation of SEA action plan. Document in MoM	Quarterly	PAHO/WHO 1,000	All UN entities (Focal Points)
	c. UNCT/HCT leaders certify that all allegations of sexual exploitation and abuse relating to areas within their responsibility have been accurately and fully reported.	100% responses to RC/HC	Sign the Annual Letter of Declaration	January 15		All UN entities
Output 1.3 Training of personnel/awareness-raising on sexual exploitation and abuse policies is conducted regularly.	a. All UN staff and related personnel complete the mandatory in-year refresher training and/or awareness briefings.	Induction training for new staff is systematically included in onboarding 100% of staff completion rate for online mandatory training 100% of staff attend at least one yearly in-person training/refresher training	Set up system with HR for systematic induction training on PSEA Monthly monitoring of training completion (online and in-person)	Monthly monitoring Biannual in person training (UNICEF)	UNICEF 10,000 (in person) Online platforms available for free (Agora also available for partners/guests)	All UN entities
Part B: Priority response outcomes for PSEA						

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[4] Meetings can be substituted with training for management when needed, or when new procedures are rolled out.

Desired outcomes	Indicators	Targets / Benchmarks[2] (Provide specifics)	Key actions	Timeframe (Indicate frequency of planned activities)	Budget (USD) / Funding Source (Allocated funding)	Lead agency(ies) per activity
Outcome 2. Safe and accessible reporting. Every child and adult recipient of United Nations assistance has access to a safe, gender and child-sensitive pathway to report sexual exploitation and abuse (including through community-based complaints mechanisms)[5] that lead to assistance and are appropriate to the context and accessible to those in the most vulnerable situations.						
Output 2.1. Safe, accessible, child-sensitive mechanisms are in place for reporting sexual exploitation and abuse[6], particularly in high-risk areas.	a. UNCT/HCT Inter-agency SOPs on community-based complaint mechanisms and/or networks (CBCM/CBCN[7]) on PSEA are established following inclusive consultations with all relevant stakeholders, including communities, disseminated and rolled out, and appropriate staff trained.[8]	Interagency CBCM Standard Operating Procedures (SOPs) are endorsed by all UN entities members. 100% of agencies have internal complaint handling procedures	Finalize (ongoing) Interagency CFM Consultations with communities, and adjust interagency SOP Validate SOPs and disseminate across PSEA networks	January 30 April 30 March 30	(TBC) IOM 5,000 PAHO/WHO 1,000.00 (contribution to the consultation process)	All UN entities

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[6] Type of mechanism and targeted locations to be determined by each UNCT/HCT based on context and existing channels/mechanisms for reporting already functioning. These could include, for example, phone hotlines, SMS, PSEA focal points, service points, etc. This could involve broader complaint channels that are strengthened with the necessary safeguards for reporting sexual exploitation and abuse, or training of PSEA focal points within protection-related services to support reporting and referrals, and/or other systems, and/or a combination of the above, as appropriate per the country context.

[7] Community-Based Complaint Networks (CBCNs) support communications with complainants and victims while allegations are being investigated, facilitate the provision of assistance and support to victims and their reintegration into their communities. The UN has engaged with local and international organizations and representatives of communities to develop formal and informal structures and channels that are safe, confidential, and easily accessible to women, men, girls and boys to report misconduct, specifically sexual exploitation and abuse, and follow up on the status of reported incidents and receive support.

[8] UNCT/HCT SOPs can be adapted from the global IASC SOPs. The SOPs provide the basis for inter-agency referral, sharing of information on and handling of sexual exploitation and abuse allegations, as an integral component of UNCT/HCT prevention and response to sexual exploitation and abuse. The SOPs require all signatories to have an established internal sexual exploitation and abuse complaint handling procedure in place.

Desired outcomes	Indicators	Targets / Benchmarks[2] (Provide specifics)	Key actions	Timeframe (Indicate frequency of planned activities)	Budget (USD) / Funding Source (Allocated funding)	Lead agency(ies) per activity
	b. A variety of reporting channels appropriate to the local context is in place to fill reporting gaps as identified by mapping.	Mapping of existing complaint and feedback mechanisms updated on a quarterly basis. Multiple confidential reporting channels are available which cater to the diversity of the population and differing levels of access	Map existing reporting channels Assess functionality and quality regularly (random checks) Update mapping on quarterly basis	February 29 Monthly March, June, September, December (TBC by OCHA)	PAHO/WHO 2,000	BINUH PAHO/WHO WFP IOM OCHA (AAP sector)
	c. Percentage of children and adults which have access to a safe channel to report sexual exploitation and abuse.[9]	100% of the affected population have access to at least one safe and accessible channel to report sexual exploitation and abuse.	Integrate PSEA messages across all sectors and clusters Inform beneficiaries of their rights, reporting channels and services available Assess accessibility of the population	Continuous Continuous Quarterly	(TBC) IOM 2,000	All UN entities

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[9] Access would be defined within the country context taking account of the type of complaint channels in place. This could include, for example, report to individual directly, phone access, taking account of age, gender, literacy, disability, etc., and/or a combination of factors. Please also note that this indicator refers to the estimated coverage of the population by the CBCM.

Desired outcomes	Indicators	Targets / Benchmarks[2] (Provide specifics)	Key actions	Timeframe (Indicate frequency of planned activities)	Budget (USD) / Funding Source (Allocated funding)	Lead agency(ies) per activity
	d. Percentage of allegations reported to the PSEA Network per month and responded to within seven days (Disaggregated by age, sex, and type of complaint (less than 18; 18 and above).[10]	100%	Train all staff on internal PSEA SOPs Additional training for staff responsible for handling allegations		(TBC)	All UN entities
Output 2.2. Community mobilisation, consultation and awareness-raising on PSEA in each community receiving and/or affected by United Nations assistance. Where there is an HC/HCT this would apply to all humanitarian partners.	a. Number of adults and children (disaggregated by gender and age) reached through consultation in the establishment of community-based complaint mechanisms, awareness activities and community mobilisation interventions on PSEA, including how to report SEA-related complaints.[11]	Consultations with affected populations inform the establishment of CBCMs. Evaluation of existing CBCMs for effectiveness and compliance with human rights principles.	Organise community consultations Develop appropriate/preferred CBCM in at least 10 communities across the country Include consultation and mobilization on PSEA in Community-Based Protection Training		50,000 10,000 (more funding to be confirmed)	UNICEF PAHO/WHO UNWOMEN OHCHR

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[10] This indicator is intended to allow HCs/HCTs to track and measure the use of SEA-related complaint channels by affected populations, including by those who are most vulnerable, as a core component of their overall effectiveness. This indicator is to be read together with related indicators to understand the overall accessibility, trust in, and effectiveness of SEA-sensitive complaint channels by and for affected communities. It is not intended to replace or duplicate the external reporting obligations that agencies hold, for example the UN reporting of sexual exploitation and abuse allegations to the UN Secretary-General on a quarterly basis.

[11] This should include the consultation of communities, particularly women and children, in the design of SEA-sensitive community-based complaint mechanisms.

Desired outcomes	Indicators	Targets / Benchmarks[2] (Provide specifics)	Key actions	Timeframe (Indicate frequency of planned activities)	Budget (USD) / Funding Source (Allocated funding)	Lead agency(ies) per activity
	b. Community perceptions and communication preferences are captured on a regular basis (informally and formally through needs and risk assessments including SEA, surveys, focus group discussions, etc.), and used to improve services.	At least one interagency SEA risk assessment is conducted	Design and conduct interagency risk assessment Use results to improve services	Avril 30	PAHO/WHO 4,000	AAP OCHA UNFPA PAHO/WHO

Desired outcomes	Indicators	Targets / Benchmarks[2] (Provide specifics)	Key actions	Timeframe (Indicate frequency of planned activities)	Budget (USD) / Funding Source (Allocated funding)	Lead agency(ies) per activity
	c. Percentage of sites reached by communication on PSEA, how to report sexual exploitation and abuse and how to access victim/survivor-centred assistance. (disaggregated by type of PSEA communication materials developed for each population group identified).	100% of sites provide information on the prohibition of sexual exploitation and abuse, how to report and receive assistance. Age and gender-sensitive materials on how to report sexual exploitation and abuse and how to access victim/survivor-centred assistance developed and disseminated.	100% of accessible intervention sites receive awareness-raising materials[12] on PSEA. Include PSEA messages in distribution kits (UNICEF, stickers)	March 31 Cf distribution calendar	PAHO/WHO 5,000	UNICEF PAHO/WHO UNOPS IOM WFP UNDP
	d. Percentage of individuals within the affected population (disaggregated by age and gender) reached with key messages and awareness-raising material on PSEA.	75% of individuals reached with key messages	Integrate PSEA in all awareness raising activities conducted by UN entities	Continuous	PAHO/WHO 3,000	All UN entities

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[12] It is possible to find alternatives for hard-to-reach areas (recorded radio spots, in-person sensitization by trained community members, etc.).

Desired outcomes	Indicators	Targets / Benchmarks[2] (Provide specifics)	Key actions	Timeframe (Indicate frequency of planned activities)	Budget (USD) / Funding Source (Allocated funding)	Lead agency(ies) per activity
Outcome 3. Victims' right to assistance. Every child and adult victim/survivor/complainant is offered immediate, quality assistance (medical care, psychosocial support, legal assistance, reintegration support).[13]						
Output 3.1 Sexual exploitation and sexual abuse victim/ survivor assistance is provided through Gender-Based Violence (GBV) or Child Protection (CP) programming.	a. Mapping of the existing service providers (GBV and CP) and current gaps in SEA assistance coverage are identified and addressed.	Referral pathways for GBV and CP are available and updated on a quarterly basis	Coordinate with Protection, GBV and CP sectors Identify and address gaps in SEA assistance	January 31	5,000	UNFPA OHCHR UNICEF
	b. GBV SOPs integrate specificities of SEA cases and the coordination between GBV and SEA networks	Specificities of SEA cases are included in GBV SOPs	Coordinate with Protection, GBV and CP Cluster	March 31	25,000	UNFPA OHCHR UNICEF
	c. Number and percentage of SEA victims/survivors/complainants who have been promptly referred to quality assistance, as part of ongoing GBV and CP programming.	100% of victims/survivors are referred for assistance within 48 hours.	Cases are reported to PSEA Coordinator and SVRO Follow up as per SOPs	Continuous Monthly update	(TBC)	All UN entities
	b. Number and percentage of SEA victims/survivors who have accessed assistance (disaggregated by age and gender and type of assistance received).	100% of referred victims/survivors who received support.	Strengthen availability and quality of services to survivors including of SEA	March 31	PAHO/WHO 30,000	PAHO/WHO (health response)

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Desired outcomes	Indicators	Targets / Benchmarks[2] (Provide specifics)	Key actions	Timeframe (Indicate frequency of planned activities)	Budget (USD) / Funding Source (Allocated funding)	Lead agency(ies) per activity
	d. Percentage of the affected population, particularly women and children, that can access GBV assistance.[14]	Percentage of survivors satisfied with assistance received following a complaint of sexual exploitation and abuse.	Measure survivors' satisfaction including through qualitative indicators and recommendations Set up a system to track access to services	Case-basis April 30		BINUH UNCT
	e. Funding/resources for assistance to victims/survivors of sexual exploitation and abuse is available.	Assistance to victims is provided through the global Trust Fund	Advocate for more funding based on survivors' needs	April 30		RCO BINUH
Output 3.2 PSEA Networks have referral pathways for victim/survivor assistance in place, as part of an integrated approach with GBV services.	a. Status of implementation by PSEA Network of protocol for referral and provision of services for sexual exploitation and abuse victims/survivors (in line with GBV referral pathways).[15]	GBV and CP referral pathways annexed to PSEA Network SOPs. 100% of PSEA Focal points are trained on referral pathways	Train all PSEA Focal points on referral pathways	May 31	(TBC)	UNFPA UNICEF PAHO/WHO

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[14] The tracking of access to services is a core function of the PSEA Network's role in strengthening response to sexual exploitation and abuse. Current gaps in SEA assistance coverage (as provided through GBV/ CP programmes) should be systematically addressed by UNCT/HCT members, as well as through CERF/CBPFs. There should be a tracking system maintained by the UNCT

[15] See the UN Protocol on the provision of assistance to victims of sexual exploitation and abuse ("UN Victims' Assistance Protocol"), 12 Dec 2019. This could include, for example, the inclusion of reference and procedures for referrals and accessing services.

Desired outcomes	Indicators	Targets / Benchmarks[2] (Provide specifics)	Key actions	Timeframe (Indicate frequency of planned activities)	Budget (USD) / Funding Source (Allocated funding)	Lead agency(ies) per activity
	b. Training of PSEA focal points on GBV guiding principle/ survivor-centred approach, referral pathway and GBV available service, protocol for victim's assistance	50% of PSEA Focal points are trained	Train PSEA Focal points on GBV guiding principle/ survivor-centred approach, referral pathway and GBV available service, protocol for victim's assistance Coordinate with Protection Cluster and PSEA network	June 30	14,000	UNFPA
	b. Tracking and data collection on victims and victim assistance (please indicate the system in place, what information is collected and frequency of maintenance).	System to track victim assistance is in place.	Develop system to track victim assistance and collect data	February 15		PSEA network
Outcome 4. Accountability and investigations. Every child and adult victim/survivor of sexual exploitation and abuse who is willing has their case investigated in a prompt, and safe way in accordance with a victims'/survivors' rights approach.						
Output 4.1 PSEA Networks adopt uniformed protocols for prompt, safe and victim/survivor-centred assistance during investigations at country-level.	a. Percentage of UNCT members and local partners who have personnel trained on SEA guidelines and protocols for victim/survivor-centred investigations.	50%	Organize training on survivor-centred SEA investigations	June 30	TBC PAHO/WHO 5,000.00	BINUH

Desired outcomes	Indicators	Targets / Benchmarks[2] (Provide specifics)	Key actions	Timeframe (Indicate frequency of planned activities)	Budget (USD) / Funding Source (Allocated funding)	Lead agency(ies) per activity
Output 4.2 Sexual exploitation and sexual abuse victims/survivors informed of and/or supported in relation to investigations and accountability processes.[16]	a. Percentage of victims/survivors who are informed of the outcome of the investigations.	100%	Inform survivors of the outcome of the investigations	On a case-by-cCase -basis		All UN entities
Output 4.3 When working with partners and contractors, safeguards are in place and action is taken related to sexual exploitation and abuse	a. The UNCT/HCT has policies on reference checking and vetting for former misconduct or supervision and performance appraisals related to UN Implementing Partner PSEA Capacity Assessment and they are shared with UNCT/HCT.	100% of Job applicants and contractor personnel are screened for history of misconduct/SEA issues before recruitment	Set up HR system for documented screening of misconduct for all applicants prior to recruitment Conduct random checks of recruitment files Procurement contracts include clauses or relevant references to UN standards of PSEA	March 31 Continuous Continuous	PAHO/WHO 5000.00	All UN entities (each agency can choose the most convenient system)

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[16] This may include civil and criminal proceeding, as well as other redress measures.

Desired outcomes	Indicators	Targets / Benchmarks[2] (Provide specifics)	Key actions	Timeframe (Indicate frequency of planned activities)	Budget (USD) / Funding Source (Allocated funding)	Lead agency(ies) per activity
	b. UN Implementing Partner PSEA Capacity Assessment guidelines are implemented.	Implementing partners assessments are centralised and shared with UNCT/HCT.	All partners are assessed using the common tool, supported to elaborate an action plan and results uploaded on UNPP. Share list with HCT members	Continuous	TBC	All UN entities working through implementing partners
	c. Follow-up is established for the implementing partners that do not meet the minimum threshold.	Actions in line with the implementing partners protocol are taken against those implementing partners that do not meet the required standards.	Train PSEA Focal Points on Implementing Partner Protocol	April 30	TBC	
Part C: PSEA Country-Level Structure						
Outcome 5. PSEA inter-agency country-level structure. The DSRSG/Resident/Humanitarian Coordinator and UNCT/HCT are supported at senior management and technical-levels to lead, oversee, and deliver on the above four PSEA Outcomes.						

Desired outcomes	Indicators	Targets / Benchmarks[2] (Provide specifics)	Key actions	Timeframe (Indicate frequency of planned activities)	Budget (USD) / Funding Source (Allocated funding)	Lead agency(ies) per activity
Output 5.1 The role of the RC/HC as PSEA lead is clear to all PSEA stakeholders.	a. The RC/HC takes an active lead on PSEA and, where relevant, coordinates with the SRSG.	RC/HC circulates code of conduct or the IASC Six Core Principles on PSEA. RC/HC supports implementation and monitoring of PSEA Strategy including leadership role of the RC/HC and UNCT/HCT.	PSEA is a standing agenda point on UNCT/HCT meetings	Continuous		RCO
	b. Country Directors/ Representatives share appropriate information with the RC/HC immediately when they become aware of an SEA allegation involving UN staff and related personnel where there is sufficient information to identify an act of SEA against an identifiable perpetrator or identifiable victim.	Country Directors/ Representatives share the information in line with the annex found in the *Guidance Note to UN Entity Field Operations on Sharing Incident Information on Sexual Exploitation and Abuse with the Senior Most UN Official in-Country*	Reminders to Heads of Agencies to share information as per the procedure Annual Letter of Declaration is disseminated and signed PSEA focal points remind their management to inform DSRSG/RC/HC of every allegation	Continuous January 15 During PSEA-Management meetings		All UN entities
Output 5.2 Members take on the PSEA role	a. Designate agency chairs for the PSEA Steering Committee	Chair and Co-chair are designated for	Joint and bilateral consultations	February 29		PSEA Network

Desired outcomes	Indicators	Targets / Benchmarks[2] (Provide specifics)	Key actions	Timeframe (Indicate frequency of planned activities)	Budget (USD) / Funding Source (Allocated funding)	Lead agency(ies) per activity
to support the Resident/Humanitarian Coordinator to deliver on PSEA at the UNCT/HCT level and the PSEA Network at the technical level.	(principal level, UNCT/HCT) and the PSEA Network (technical level).	the PSEA Steering Committee Chair and Co-chair are designated for the PSEA Network	Include tasks and responsibilities in the Network ToRs	March 31		
Output 5.3 A full-time PSEA Coordinator (with medium to long-term secured funding) is in place, with a direct reporting line to the HC/RC.	a. Status of deployment of a full-time PSEA Network Coordinator (with clear ToRs). **See generic ToRs** at Link	P4 level full-time PSEA Coordinator is in place PSEA Coordinator reports directly to the RC/HC.	Ensure funding to sustain the position Focal points support advocacy to fund the position	March 31	TBC	
	b. The PSEA Coordinator, takes an active lead in supporting senior leadership in developing and implementing PSEA Strategy, Network TORs, based upon the inter-agency PSEA Network risk assessment.	PSEA National Strategy is developed and endorsed PSEA Network ToRs are endorsed		Feb 29 March 31		
	c. On request, the PSEA Coordinator provides expert guidance and technical support to Network members and other relevant entities operating in the context to strengthen their internal PSEA programs in line with good practice and standards.	100% of Network members requests for technical support are answered	Expert guidance and technical support is provided by the PSEA Coordinator to Network members as needed	Continuous		

Desired outcomes	Indicators	Targets / Benchmarks[2] (Provide specifics)	Key actions	Timeframe (Indicate frequency of planned activities)	Budget (USD) / Funding Source (Allocated funding)	Lead agency(ies) per activity
	d. SVRO position exists with a system-wide mandate to advise at the country level		SVRO ensures the rights of victims are protected	Continuous		
Output 5.4 An inter-agency PSEA Network is in place with the resources and expertise necessary to deliver on PSEA outcomes (above).	a. PSEA Network being established or in place.	PSEA Network is established and reports regularly to RC/HC via the PSEA Coordinator. PSEA Network includes all UNCT/HCT members, including representation from international and national NGOs.	Create a Steering Committee to lead on specific outcomes (strategy, Network ToR, etc) Set up the operational framework of the National Network	February 15 February 29	TBC	
	b. Integration of PSEA in the Humanitarian Response Plan (or similar), where relevant.	E.g., PSEA Action Plan is costed and resourced through HRP.	Integrate PSEA narrative and activities across HNRP 2024	November 30		RCO
Output 5.5 PSEA technical focal points from all UNCT members are in place and actively contribute to the PSEA Network's delivery of PSEA outcomes.	a. Percentage of UNCT/HCT members that have appointed a dedicated PSEA technical focal point to the PSEA Network (with clear ToRs).	100%	All UNCT and HCT members appoint a PSEA technical focal point ToR of the focal points include PSEA tasks and responsibilities	March 31		All UN entities

Desired outcomes	Indicators	Targets / Benchmarks[2] (Provide specifics)	Key actions	Timeframe (Indicate frequency of planned activities)	Budget (USD) / Funding Source (Allocated funding)	Lead agency(ies) per activity
Output 5.6 Country-level risk assessment in respect of sexual exploitation and abuse conducted on the basis of risk management tools	a. The inter-agency PSEA network carries out regular SEA risk assessments and shares the findings and recommendations with the UNCT/HCT.	SEA risk assessments findings and recommendations shared with the UNCT/HCT.	Carry out SEA risk assessment

Shares findings and recommendations with the UNCT/HCT. | April 30

May 15 | TBC | PSEA Network |
| | b. The inter-agency PSEA network provides technical support needed to mitigate risks of SEA, in collaboration with relevant stakeholders. | | | June 30 | TBC | PSEA Network |

Action Plan – Drafter

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For additional information and resources:
- [Management and accountability of the UN Development and Resident Coordinator System](#)
- [Knowledge Gateway](#)
- [Inter-Agency Standing Committee resources](#)
    a. [IASC Six Core Principles Relating to SEA (Revised 2019)](#)
    b. [IASC Minimum Operating Standards PSEA](#)
    c. [Guideline – Inter-Agency Community-Based Complaint Mechanisms – Protection against Sexual Exploitation and Abuse](#)
- [Guideline – Inter-Agency Community-Based Complaint Mechanisms – Protection against Sexual Exploitation and Abuse](#)
- [UN System Policies and Protocols on PSEA](#)
- [UN System Tools on PSEA](#)
- [Office of the Victims' Rights Advocate](#)