IA PSEA Coordinators Meeting 13 August 2024 14:00-15:30 (GVA/CET)

Meeting Summary

Agenda

- 1. Updates from the field (PSEA Coordinators)
- 2. **PSEA deep dive review (South Sudan):**
 - Presentation by South Sudan PSEA Coordinator
 - Q &A Session
- 3. Funding Country-level PSEA action plan
 - Example from OPT
 - Discussion with coordinators
- 4. SANAD Network: Risk Communication & Community Engagement (OPT)
- 5. **AOB**
 - PSEA Coordinator generic email address
 - Platform for information-sharing

1. Updates from the field (PSEA Coordinators)

PSEA Coordinators from 17 countries provided their monthly update on key activities, as well as challenges/next steps. A key activity carried out by many Coordinators was training, with trainees including local investigators, government stakeholders, UN and NGO focal points, law and order forces. Mental health, resilience and stress management training, and UN Victim Assistance Protocol training were also carried out. Other activities carried out by Coordinators included mapping existing services and structures, validating SOPs, merging disparate complaints mechanisms, and conducting bilateral advocacy with donors. PSEA communication strategies and materials were also developed, as well as the collation of common IASC PSEA materials for adults and children.

The most common challenge remains resource mobilisation and a lack of funding for PSEA activities outlined in country-level Action Plans, with a focus in some contexts on resources for capacity building. This links to capacity challenges, with it also being highlighted that local partners have very limited funds and capacity for PSEA. High staff turnover and an inability to conduct meetings or community sensitisation in person in some contexts, due to security limitations on field movements, was another challenge identified. Community understanding of what constitutes SEA was also identified as something to work on in a few contexts, alongside a downward trend in cases being reported. Finally, the challenge of PSEA networks transferring the responsibility of different agencies was highlighted, as well as the discontinuation of supporting technology and apps due to existing hosting arrangements coming to an end.

The IASC PSEAH Team highlighted that support is available by the TAG leads of the SEA Referral Procedures for PSEA Coordinators who want to update their SOPs on referral, explaining that this support has already been given to Sudan and will also be provided for Chad and Burundi. The IASC PSEAH Team also emphasised the need for Coordinators to start engaging within their respective Intercluster Coordination Groups on the HPC process, by

asking OCHA Offices in their respective countries about the HPC calendar for 2025. The IASC PSEAH Team also highlighted the MSNA guidance to which PSEA Coordinators had contributed will be shared with REACH at the global level and that a French version will be produced in the coming months.

2. PSEA deep dive review (South Sudan):

• Presentation by South Sudan PSEA Coordinator

The deep dive review began in November 2022 and has recently finished. The review was funded by ECHO and other members of the Humanitarian Donors Group. Fieldwork was conducted for the review, which analysed outputs for prevention, safe, accessible, and appropriate reporting, victims' right to assistance, and inter-agency PSEA country level structure and strategy. For each of these four categories, a gender-balanced team assessed progress made and came up with recommendations for further improvement. For prevention, 3 out of 4 outputs were labeled as 'moderately satisfactory'. For reporting, there was partial alignment to international standards and variable progress on CBCMs. For victims' right to assistance, South Sudan now meets 7 out of 9 benchmark criteria, an improvement from 0 in 2021, however they still need to address some issues regarding victim safety. For structure and strategy, 4 out of 6 outputs were rated as moderately satisfactory, but there is an uneven buy-in to the PSEA mechanism and not enough engagement outside Juba. The lessons learnt from the deep dive will be used to develop a new systemwide PSEA strategy for 2025–2029, as well as for the 2025 PSEA Action Plan.

• Q &A Session

Florence was asked whether the deep dive could take place over a shorter timeframe of 2–3 months, but Florence said the process should not be rushed and buy-in from all stakeholders must be obtained. A pitfall that Florence highlighted was inadequate resources and a reliance on the support of PSEA network members for logistics. As the integration of PSEA into cluster programming was also part of the review, the IASC PSEAH Team briefed on linkages with the WFP Championship work with clusters on PSEA integration, with support on risk assessments for different programme modalities and creating tip sheets on working with empowered aid. A follow-up conversation between the PSEA Coordinator of South Sudan and the Championship initiative could be a useful opportunity to learn from the field and get the perspective to further enrich this championship initiative.

3. Funding Country-level PSEA action plan

• Example from OPT

Marta Agosti Pinilla, PSEA Coordinator for Palestine (OPT), gave a presentation on the resource mobilisation in OPT to fund the annual action plans. Marta noted that overall funding for PSEA in OPT has been stable for the past four years and that personnel costs are covered through set-aside funding from UNICEF, including the PSEA Coordinator position itself. Although these can lead to double hatting, the position itself is stable as a consequence. Marta outlined that funding from a small first investment was initially used for activities that provide evidence of impacts, such as the provision of safe and accessible reporting channels for the community. Evidence generated by these activities attracted the attention of Canada as a donor, who provided flexible funding that could be used to address specific issues and provide more evidence for activities. More funding was obtained from the CERF/Humanitarian Fund

allocation. Marta presented a roadmap to the HCT for what was being built, and matched allocations. She also talked about obtaining standalone PSEA funding requests, saying that despite them being for a small amount of money, they help organisations to start having small budgets for PSEA resources and add to the impact that can be shown in donor discussions. Marta also suggested that activities mainstreaming PSEA and linking it to the centrality of protection and AAP should be emphasised, because this can lead to tangible results showing community connections to donors. She mentioned that as a consequence of this funding, the collective PSEA system for Palestine is very localised, with engagement being obtained from the community on difficult subjects. This leads to effective risk mitigation and risk assessments, as well as improved safe programming and child safeguarding.

• Discussion with coordinators

A question was asked about who sends proposal to donors, noting that interagency structures need a 'host' to administer financial support once mobilised. Marta responded saying that because she is double-hatting with UNICEF she can use UNICEF's funding proposal programme. However, if a funding proposal is being made relating to health for example, she will use WHO as a 'host' agency for such a collective programming proposal. This shows the importance of building strong partnerships with other network members and in tying specific funding to specific activities. Marta agreed to share cluster monitoring examples and examples of successful resource mobilisation proposals. The IASC PSEAH team also directed coordinators to the HPC guidance note that contained HNRP indicators in the HPC guidance note. A review of CBPF (Country Based Pooled Funds) support for collective PSEA programming was also currently ongoing and, upon request from field coordinators, the IASC PSEAH team committed to explore the involvement of PSEA Coordinators into the exercise to share their experience and views.

4. SANAD Network: Risk Communication & Community Engagement (OPT)

Yasmine Qutob from SANAD Network spoke to coordinators about how PSEA is being used under the overarching theme of creating a community of care in Gaza. To do so, SANAD are sharing both standalone PSEA messaging and integrating it with other lifesaving information relating to GBV, health, and WASH. SANAD is working with UN agencies and Palestinian NGOs and CSOs to do this, engaging communities and partners in rights-based and humancentred material development. An example of PSEA-related material used was a children's story read in the field by MHPSS professional, which also covered sanitation practices. SANAD is trying to ensure trust develops with communities and partners through monthly content creation workshops, for example removing the word 'safety' when partners said it should no longer be used. In addition, Marta said that SANAD has triggered the interest of donors with the approach of getting all partners invested in the production of PSEA-related material.

5. AOB

a. PSEA Coordinator generic email address

Following a number of concerns/issues received, the IASC PSEAH team, in collaboration with the OSCSEA, proposes a survey on the creation of generic un.org email addresses in

accordance with the memo of 2 January 2024 shared by the OSCSEA with RCO. PSEA Coordinators have been invited to complete a survey on using a PSEA generic email address by 12:00 CEST on Wednesday, 14 August. The results will then be shared with the OSCSEA for follow-up action to support the coordinators best.

Action Point: PSEA Coordinators respond to the generic email address survey by 12:00 CEST on Wednesday 14 August.

b. Platform for information-sharing

The IASC PSEA team will share a survey asking Coordinators which platforms they would prefer to have information shared on specific technical questions so that this information can serve peers rather than only one coordinator.

Action Point: PSEA Coordinators respond to the information-sharing platform survey by 12:00 CEST on Wednesday, 14 August

No	Name	Country	
PSEA Coordinators and Acting Coordinators			
1.	Amina Elhouderi	Kenya	
2.	Ammara Aamer Khattak	Pakistan	
3.	Anil Chandrika	Iraq	
4.	Anna Posmykiewicz	Poland	
5.	Anna Turus	Slovakia	
6	Asli Velieceoglu Yonca	Poland	
7.	Benedetta Cocco	Bangladesh	
8.	Diana Alejandra ROJAS	Colombia	
9.	Diba Abunjela	Nigeria	
10	0. Elisa Cappelletti	Lebanon	
11	. Ephraim Karanja	Somalia	
12	2. Erica Talentino	UNICEF ESARO	
13	. Ernest Lukumwena	Mali	
14	. Fanny Dufvenmark	Syria WoS/NWS	
15	5. Florence Apuri Auma	South Sudan	
16	5. Francesca Paola Crabu	Democratic Republic of the Congo	
17	. Helga Gunnell	Mozambique	
18	B. Hyejeong Yoo	Iraq	
19	9. Issa Sadou	Niger	
20). Konstantina Loupeidou	Romania	
21	. Lamine Traore	CAR	
22	2. Lara Chlela	Haiti	
23	3. Marta Agosti Pinilla	Palestine (OPT)	

Annex:

24.	Mary Scheree Lynn Herrera Divinagracia	Philippines		
25.	Nancy Waleska Zuniga	Honduras		
26.	Pamela GODOY	Asia Pacific		
27.	Peride Blind	Guatemala		
28.	Serena Ricci	Egypt		
29.	Stella Okuni	Kenya		
30.	Ximena Alexandra Correal Cabezas	Colombia		
OCHA/IASC PSEAH Team				
31.	Charlotte Helletzgruber	PSEAH Advisor		
32.	Halid Zewdu Feleke	Associate Expert, PSEAH		
33.	Joe Levy Brown	Intern, PSEAH		
34.	Kirstie Farmer	PSEAH Advisor		
35.	Shazia Nigar	Intern, PSEAH		
36.	Yuliya Pyrig	Programme Management Officer, IASB		
OCHA Regional Office Focal Points				
37.	Truphosa Anjichi	ROSEA, Nairobi		
Additional Invitees				
38.	Yasmine Qutob	Palestine		