





This note sets out practical steps that can be taken by Humanitarian Coordinators (HC) and Humanitarian Country Teams (HCT) to ensure that Protection from Sexual Exploitation and Abuse (PSEA) is prioritised by senior leadership and implemented throughout the system-wide humanitarian response, with a survivor-centered approach, in line with the 2015 IASC Principals statement. This note is also aligned with the 2018 IASC Champion Strategy on PSEA¹, that set up three priorities: safe and accessible reporting; quality SEA survivor assistance; and enhanced accountability, including investigations. In the HCT terms of reference endorsed by the IASC Principals in 2017, PSEA is one of the four mandatory responsibilities along with the Centrality of protection, Accountability to Affected People (AAP) and Gender-Based Violence (GBV) and demands HCT members' collective approach to fulfil them. The IASC Principals committed to be held accountable for the progress on fulfilling four commitments on AAP and PSEA in November 2017 (known as the CAAP).

This note has benefited from inputs and extensive consultations with experts in headquarters and field operations, particularly Central African Republic, Chad, Democratic Republic of Congo, Mali, and Somalia. It has been developed in partnership with UNICEF as the current IASC PSEA and Sexual Harassment (SH) Champion and endorsed by the IASC AAP PSEA Task Team.

What is sexual exploitation and abuse (SEA) and why is it crucial for humanitarian leaders to prioritise this issue?

SEA consists of particular forms of gender-based violence (GBV) committed by aid workers, including humanitarian, development and peacebuilding actors. This term encompasses all persons involved in the humanitarian, development and peacebuilding responses and who have a contractual relationship with the organisation, regardless of payment or length of contract. It includes for example UN, International and National NGO staff and implementing partners, military members of national contingents serving in UN peacekeeping missions...

When aid workers and peacekeepers commit acts of sexual exploitation and abuse against affected population who look for protection and assistance, the values and principles of humanitarians are betrayed, and the trust and the credibility of the **entire system** is undermined.

The lack of protection offered to survivors and the poor follow up exercised to ensure that the perpetrator is held responsible in some recent cases are as scandalous as the SEA incidents themselves². It is one of the most basic failures of **accountability** to the people whom the humanitarian system is supposed to protect.

With regards of tremendous implications of such acts on the operations, it is critical for humanitarian leaders to be at the forefront of protection and response to SEA. HCs and HCTs, as the representatives of the strategic decision-making body in country, are particularly responsible to make PSEA coherent, systematic, and integrated into the broader humanitarian response.

Difference between Sexual Exploitation and Abuse (SEA), Gender-Based Violence (GBV) and Sexual Harassment (SH)

SEA and SH are forms of GBV perpetrated by specific actors against specific victims. All SEA is a form of GBV; however not all forms of GBV are SEA. Having a programme gendered approach is different from having specific strategies in place against GBV, SEA and SH. All these approaches are complementary³.

	Gender-Based Violence	Sexual Exploitation and Abuse	Sexual Harassment
Parties	Perpetrator: Anyone Survivor: Anyone	Perpetrator: Aid Worker Survivor: Affected People	Perpetrator: Aid Worker Survivor: Aid Worker
Definition	Any harmful acts perpetrated against women, girls, boys and men based on socially ascribed differences between males and females, including acts that inflict physical, sexual or mental harm and suffering and threats of such acts ⁴ .	Sexual Exploitation: Any actual or attempted abuse of a position of vulnerability, differential power, or trust, for sexual purposes, including, but not limited to, profiting monetarily, socially or politically from the sexual exploitation of another. Sexual Abuse: The actual or threatened physical intrusion of a sexual nature, whether by force or under unequal or coercive conditions ⁵ .	Any unwelcome sexual advance, request for sexual favour, verbal or physical conduct or gesture of a sexual nature, or any other behaviour of a sexual nature that might reasonably be expected or be perceived to cause offence or humiliation to another, when such conduct interferes with work, is made a condition of employment or creates an intimidating, hostile or offensive work environment ⁶ .

Critical linkages between Accountability to Affected People (AAP) and PSEA

To ensure affected people are at the heart of any PSEA initiative, links must be made between AAP and PSEA actors and actions on the ground. AAP and PSEA are too often distinct and separated at field level, e.g. separate mechanisms for feedback and SEA complaints. HCs and HCTs must ensure AAP and PSEA strategies, networks and reporting mechanisms are strongly linked and build upon their respective added value. The IASC AAP/PSEA Task Team has developed a visual highlighting results of collaborative actions / linkages between AAP and PSEA, which is available here.

Specific responsibilities for HCs/RCs agreed at global level

The 2015 IASC Statement on PSEA calls for "reinforcing the responsibilities on PSEA for the Humanitarian Coordinator role to ensure that PSEA has a clear place within the humanitarian architecture and IASC system-wide responsibility for developing PSEA strategies and action plans is institutionalized". The ERC notified the HCs of this articulated responsibility in January 2016 and highlighted that the Statement includes the specific actions of developing inter-agency complaints mechanisms, ensuring survivors have access to appropriate immediate and longer-term assistance, coordinating inter-agency allegation referrals⁷, and reporting regularly to the ERC on PSEA in relation to humanitarian operations. Furthermore, PSEA is a standing agenda item at the HC annual retreat. The HC responsibilities are coherent with the Resident Coordinator PSEA responsibilities⁸ as stated in the 2015 statement, which themselves include activities such as ensuring that a network of focal points for implementing the SG's bulletin on SEA (2003) is operational, and for supporting the development and implementation of a country-level action plan to address SEA.

KEY STEPS FOR HUMANITARIAN COORDINATORS AND COUNTRY TEAMS TO PREVENT, PROTECT FROM AND RESPOND TO SEXUAL EXPLOITATION AND ABUSE

Humanitarian Coordinators and Humanitarian Country Teams have a specific responsibility to ensure PSEA is embedded in every aspect of a humanitarian operation. During its missions and webinars, the P2P team has identified that strong leadership on PSEA is critical to tackle this issue. This stance has been taken up by the global humanitarian community.

Some **key practical steps** every response should take on are:

A. HC AND HCT LEADERSHIP ON PSEA

- 1. Define roles, responsibilities, and lines of accountability at the most senior level (Special Representative of the Secretary-General (SRSG) and Deputies, RC / HC, and HCT), aligned with the global level policies (see "specific responsibilities for HCs/RCs" above). This should be done by including responsibilities towards PSEA in the HCT compact, the country-specific HCT ToRs and/or the Steering Committee ToRs (see below) for a mutual accountability approach 7. The HC is responsible for setting the tone from the top on PSEA, with regular communication to staff on commitments and recent developments.
 - In the case of integrated mission settings, ensure systematic coordination between the two entities. The HC should liaise with the SRSG to agree on respective responsibilities and invite the SRSG to HCT PSEA-focused meetings.

SOMALIA: HC AND HCT MEMBERS TAKING THE LEADERSHIP ON PSEA

In Somalia, an HCT compact has been adopted by the HCT members to ensure better accountability within the team. The Compact includes strong reference to and clear responsibilities on PSEA. UNHCR and IOM have volunteered as HCT co-chairs for PSEA, responsible for keeping PSEA on the HCT agenda and to follow up on decisions endorsed. A training on institutional and collective PSEA responsibilities of the HCT was held for the HCT members, for which the HC strongly advised all members to attend, encouraging a good participation.

2. Secure sustainable funding to implement the PSEA action plan. Consider using an earmarked PSEA budget in project proposals. The in-country Pooled Fund, the CERF or even the RCO budget could provide funding. Incorporate your PSEA action plan into the Humanitarian Response Plan (HRP) and include its budget into the overall country appeal. This serves to both secure funding and integrate PSEA into the entire humanitarian response.

INDIVIDUAL AND COLLECTIVE FUNDING FOR PSEA

In the **Whole of Syria response** (WoS), one agency wrote and sourced funding for a project to administer an inter-agency incountry PSEA programme. The project funds collective PSEA activities and the salary for dedicated PSEA Coordinators with direct reporting lines to the HCs in each hub and a WoS PSEA Coordinator who reports to the Strategic Steering Group.

In **DRC**, PSEA has been highlighted as an HCT priority during the L3 declaration. Based on that a part of the CERF allocation was directed to PSEA. A pooled-fund allocation has also been attributed to PSEA as part of the Protection strategy.

- 3. Develop the PSEA function of the HCT through a "Steering Committee" (SC), composed of the whole HCT, with two voluntary co-chairs. The SC is not a new body but a PSEA-focused HCT. Developing distinct TORs for when the HCT addresses PSEA allows for dedicated attention. The co-chairs will be responsible for supporting the HC in taking the PSEA agenda forward within the SC but also to mobilise other members to ensure they all fulfil their inherent responsibilities as members of the collective decision-making body. HC, HCT members, and Co-chairs responsibilities, as well as the procedure to call SC meetings, should be spelled out in the SC TORs.
 - The HCT should receive an initial **information session** including overview of the existing PSEA and AAP mechanisms in country and their specific leadership role, supported by the HC and the SC co-chairs.
 - ➤ Include PSEA as a standing agenda item in the HCT meetings or call ad hoc "Steering Committee" meetings. While it is good practice for PSEA to be a recurring item to keep it prioritized, ad hoc meeting can allow for sufficient time to dedicate to meaningful discussion. Ad hoc PSEA meetings also allow for inclusion of relevant stakeholders (e.g. organizations with PSEA initiatives not represented in the HCT). Monitor the implementation of the collective PSEA action plan (see below) and invite the PSEA Coordinator to share updates regularly, with support of the SC co-chairs.

CENTRAL AFRICAN REPUBLIC: LEADERSHIP ACTIVE COMMITMENTS ON PSEA

In Central African Republic (CAR), various actions have been taken to ensure PSEA is prioritised and implemented:

- PSEA is a fixed item on the HCT agenda and have been highlighted as a priority in the HCT annual action plan;
- The HCT is advocating towards national authorities to make the signature of the Country-wide PSEA code of conduct a requirement for NGO accreditation;
- A collective PSEA action plan has been adopted by the HCT and the MINUSCA, including joint prevention activities and missions, signature of an information sharing protocol and coordination of victim assistance.
- 4. Recruit a dedicated PSEA Coordinator, with appropriate seniority, that reports directly to the HC regardless of who holds the Coordinator's contract. The HC should work with the HCT to ensure funding for the position for minimum one year. The Coordinator will be responsible for leading the PSEA network under the overall guidance of the HCT, for referring complaints received by the network to the concerned agency, and for supporting the network to put PSEA systems in place⁷.

DEDICATED PSEA COORDINATOR

The humanitarian responses in **Chad, Bangladesh, Northern Syria and Somalia** benefit from a dedicated PSEA coordinator.

- 5. Advocate for all HCT members to meet the Minimum Operating Standards (MOS) on PSEA, including to have a code of conduct aligned with the IASC six principles, applying to all personnel and implementing partners, and an accessible internal reporting mechanism for PSEA^{9,10}. A common code of conduct can be developed at the country-level. It can be voluntarily signed by the Government and private actors to build a larger consensus. The organisation's inclusion in the HCT, clusters and access to the pooled funds should be conditioned to providing and meeting the expected standards of these mechanisms.
 - ➤ Ensure support is provided to local and national NGOs to put in place these systems, whether or not they are HCT members. National NGOs often don't have investigating capacities. This could be mitigated by supporting the recruitment of independent SEA trained investigators, by the creation of a standing pool of both culturally appropriate trained investigators and interpreters in country or by tapping upon the investigation capacity of UN or NGO partners¹¹¹.
- **6. Emphasize the importance of putting survivors' rights at the centre of the PSEA response**. Assistance to and protection of survivors should be prioritised at every step of the complaint handling and investigation. The HC and HCT should
 - Encourage coordination between the PSEA Network and the GBV and Child Protection (CP) actors to ensure that SEA survivors are referred systematically to available services and that GBV and CP specialists are trained to recognize SEA survivors and to refer them to the SEA complaint pathways¹².
 - Addressing funding gaps in GBV / CP sectors is imperative as they provide the basis for response to survivors of SEA.

SURVIVORS' SUPPORT

<u>The Trust Fund in Support of Victims of Sexual Exploitation and Abuse</u> can be mobilised to address service gaps in the provision of assistance and support for complainants, victims and children born as a result of SEA.

- 7. Develop a strategy for engagement with stakeholders, specifically with national and local authorities and the media.
 - Ensure transparent communication with the media, on the prevention of and response to SEA by humanitarian actors and peacekeeping personnel. Good relations with the media on actions the humanitarian community is taking to fight SEA should be attempted prior to the appearance of allegations if possible. When hearing about rumoured or 'in-the-air' allegations of sexual exploitation and abuse, including in the media, act immediately on the allegation by following-up personally with the PSEA network coordinator, the HCT SC co-chairs and the S/RSG if appropriate. Working together these actors can develop common PSEA messages in relevant languages and formats that can be circulated by existing media.
 - ➤ Ensure transparent collaboration with national and local authorities, keeping the appropriate counterparts informed on PSEA actions in place in the response. This is especially necessary if the network establishes a CBCM (see below) which may or the host government can perceive it may receive allegations of abuse against government actors¹³.

B. HC AND HCT ROLE ON IMPLEMENTING PSEA

- 8. Call for all organisations to appoint a PSEA focal point¹⁴, ideally with a gender-balanced alternate, with direct access to the most senior level in their organisation to ensure management supports the Focal Point in performing their role. In a decentralized response, an organisation could have various levels of focal points, at capital and field level. Focal Points should have formalised responsibility for PSEA in their job description, performance appraisal or similar.
- 9. Establish a PSEA network with ToRs composed of UN agencies and international and national NGOs operational in the response and attended by their PSEA Focal Points to address collective PSEA implementation. This network should include the peacekeeping mission's Focal Points where appropriate, and the GBV sub-cluster coordinator and the AAP Working Group coordinator should be invited for coordination purposes.
 - Where appropriate, and especially where the network membership is large or there is no PSEA coordinator in place, establish a technical Task Force with 3 to 6 focal points under the network, which meet more regularly to coordinate PSEA work, follow up the action plan for reporting to the HC/HCT and discuss emergencies.
 - Neither the network nor the Task Force are responsible for reviewing individual cases; each organization is independently responsible for handling allegations implicating their staff. The HC should regularly chair the network meetings to show leadership commitment.

LEADERSHIP SUPPORT TO COORDINATION AT FIELD LEVEL

In Somalia, the HC is regularly chairing the PSEA network meetings to emphasize the leadership support to PSEA.

In **Mali**, the HC requested that the PSEA network meeting attendance list is shared with her to ensure good participation. The PSEA coordinator reports directly to her on the progress made by the network every two months.

- 10. Task the PSEA network to develop a country-level action plan covering the four pillars of PSEA: 1° Management and Coordination; 2° Engagement with and support of local community population; 3° Prevention; 4° Response. Review and endorse the action plan at the HCT/SC level. The plan should include time frames and commitment by HCT member agencies to take the lead on each action point, to ensure financial and technical resources are in place to implement the plan. The HCT should monitor the action plan regularly. The plan is the vehicle to put in place an inter-agency Community Based Complaint Mechanism (CBCM)¹⁵, which includes:
 - Assessment of SEA risks and PSEA needs, and mapping of existing feedback and complaints mechanisms and gaps to
 inform the PSEA action plan. This mapping should also feed the Humanitarian Needs Overview (HNO).
 - o Endorsement of Standard Operating Procedures (SOPs)⁷, with minimum expected standards, to systematize referrals of SEA allegations between signatory organizations, while respecting organisations' internal SEA reporting procedures and data-protection policies. These SOPs will provide a frame to 1. Refer complaints received by an organisation to the concerned organisation; 2. Outline the various roles and responsibilities of actors, and 3. Share anonymised information with the PSEA network to build trends and create an evidence-base for decision-making. SOPs should include the peacekeeping mission in relevant contexts. Work with GBV and CP Coordination Bodies to link the PSEA SOPs to existing referral pathways for these services, to ensure that SEA survivors receive the same access to services as any GBV or child survivor.
 - Capacitation of feedback and complaint mechanisms already in place, such as inter-agency AAP/CWC reporting mechanisms and individual organisations' mechanisms, to receive and refer SEA sensitive complaints and to benefit the entire humanitarian community. Staff training will ensure appropriate referrals as agreed in the SOPs. Where needed, develop an inter-agency feedback and complaint mechanism, for example a toll-free number, based on the population's preferred ways of communication. But such a common mechanism is not a substitute for capacitating existing feedback channels to link up and form comprehensive coverage. Ensure there is no geographical or cultural "blind spot" in the country, where populations don't get access to a reporting option for SEA.
 - Development of collective awareness raising measures for affected people in coordination with AAP, GBV and CP actors, so that the population knows that it is strictly prohibited for aid workers to engage in SEA, that beneficiaries have rights to humanitarian assistance not conditioned on sexual favours, and how they can report incidents of SEA. They should also be briefed on the support they should expect to receive if they report. Each network member will have their own methods of conducting community engagement; the network should ensure that these engagements use common messages in appropriate local languages and benefit from jointly-created materials.
 - Regular PSEA trainings organised in country for all staff, in appropriate languages and formats, including a mandatory induction training for new comers highlighting the PSEA responsibilities of all staff including day labourers and incentive workers on how to recognize and report incidents. Again, member organizations are responsible for training their own staff; the collective role is to identify means to fill gaps in trainings in the response.
 - Establishment of a means of monitoring and tracking allegations received and referred in-country, to inform
 programme adjustment and targeted PSEA activities. The IASC Common Reporting Platform¹⁶ is available to all
 operations.

MAKING PSEA WORK INTO EXISTING SYSTEMS

<u>Using existing reporting mechanisms</u>: In **Democratic Republic of Congo** (DRC) and **Chad**, existing AAP/CWC reporting mechanisms, such as the WFP hotlines, are used by affected people to report cases of SEA. In **Iraq**, the operators of the interagency IDP call center have been trained to report safely sensitive complaints. In **CAR**, humanitarian operators can count on the strong MINUSCA community networks to ensure a good coverage of the country. In **Nigeria**, more than one million children and teenagers are registered on UNICEF mobile reporting tool "U Report".

<u>Using the integrated mission assets for awareness-raising:</u> In **Mali**, a film explaining PSEA was developed in partnership between UNICEF, UNFPA and CDT and showed across the country through mobile projections. Radio programmes have also been used to raise awareness on PSEA. MINUSMA supported these PSEA initiatives in country through its logistical support and the use of the mission's assets.

<u>Using security trainings to brief staff on PSEA:</u> In **Libya**, the UNDSS mandatory induction training includes PSEA. In **CAR**, security briefings delivered to NGOs also include PSEA.

ESSENTIAL IN-COUNTRY PROTOCOLS

- HCT Compact with reference to PSEA, or Steering Committee ToRs
- Terms of reference PSEA Focal Points
- Terms of reference PSEA Network
- Terms of reference dedicated PSEA coordinator
- PSEA Action Plan + budget
- PSEA SOPs, including linkage to GBV
- Internal agencies policies, such as code(s) of conduct and complaint handling protocols

WHERE TO GO FOR SUPPORT

Global IASC AAP PSEA Task Team:

helpdesk-aap-psea@unhcr.org

Or

PSEA-CBCM@iom.int

ENDNOTES

- ¹ For in-depth information on PSEA recent developments, see the IASC championship strategy
- ² As exposed in the <u>IASC Statement on Protection from Sexual Exploitation and Abuse</u>, 2015
- ³ Response to SH often differs from PSEA hence it will not be cover in this note.
- ⁴ See the <u>P2P practical note for HCs and HCTs on GBV</u> for more information.
- ⁵ IASC definition
- ⁶ Secretary General's bulletin, ST/SG/2008/5 (There is no official IASC definition for SH at the moment)
- ⁷ See also the <u>IASC Global Standard Operating Procedures (SOPs) on Inter-Agency Cooperation in CBCMs</u>, 2016
- ⁸ The RCs' ToRs are under review at time of the publication
- ⁹ As agreed with the 2013 <u>IASC Minimum Operating Standards</u> (MOS-PSEA), which sets minimum standards on four pillars: management and coordination; Engagement with and support of local community population; prevention; and response.
- ¹⁰ For NGOs, the guiding standard is also the CHS PSEA segment
- ¹¹ The IASC established an investigators' fund and CHS alliance can offer investigation trainings and capacity
- ¹² Guidance on good practices is available in the <u>IASC GBV Guidelines</u> and the <u>GBV Coordination Handbook</u>.
- ¹³ For more on engaging the Host Government, see the IASC CBCM best practice guide §A Chapter 3.
- ¹⁴ Generic Terms of Reference for PSEA focal points are available in the CBCM best practice guide Annex 4 p. 81, 2016
- ¹⁵ The ERC has requested to HCs to ensure operationalization of the CBCM best practice guide in all humanitarian operations (CBCM best practice guide); IASC MOS-PSEA indicator 5 obliges all actors to participate in joint CBCM
- ¹⁶ For more information, see the IASC <u>CBCM best practice guide</u> Annex 5

REFERENCES

- General Assembly Resolution 57/306 (2003), Resolution 70/286 (2016) and Resolution 71/278 (2017)
- Security Council Resolution 2276 (2016) addressing sexual exploitation and abuse by peacekeepers deployed under Security Council mandates
- Secretary-General's Bulletin on special measures for protection from sexual exploitation and sexual abuse, 2003 - 2017
- IASC statement on Protection from Sexual Exploitation and Abuse (PSEA) (2015)
- Statement of commitment on eliminating sexual exploitation and abuse by UN and non-UN personnel, August 2008
- IASC Community-Based Complaint Mechanism Best Practice Guide
- 2 P2P webinars on PSEA (available in <u>English</u> and French)
- IASC minimum operating standards for PSEA (MOS-PSEA) (2013)
- IASC Global Standard Operating Procedures (SOPs) on Inter-Agency Cooperation in CBCMs, 2016

- IASC Commitments on AAP and PSEA (CAAP), 2017
- "To Serve with Pride: Zero Tolerance for Sexual Exploitation and Abuse."
- CHS alliance, PSEA implementation quick reference handbook
- Statement of commitment on eliminating SEA by UN and Non-UN Personnel, August 2008
- The global review of protection from SEA by UN, NGO and IFRC personnel, July 2010
- IASC 6 core principles relating to SEA, June 2002
- UNHCR and Save the Children-UK, Note for Implementing and Operational Partners on Sexual Violence & Exploitation: The Experience of Refugee Children in Guinea, Liberia and Sierra Leone based on Initial Findings and Recommendations from Assessment Mission 22 October - 30 November 2001, (2002)
- HCT Generic Terms of Reference, IASC, 2017
- Code Blue Campaign

For more reference:

https://interagencystandingcommittee.org/accountability-affected-populations-including-protection-sexual-exploitation-and-abuse

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2P Support

The Peer 2 Peer Support team (formerly known as the Senior Transformative Agenda Implementation Team - STAIT) was created by, and reports to, the Emergency Directors' Group (EDG). It provides direct peer support to Humanitarian Coordinators and Humanitarian Country Teams to deliver effective, principled, quality, timely, and predictable collective humanitarian response in field operations. For more information, please visit: http://www.deliveraidbetter.org/