

# Global Scoping of Initiatives to Support Survivors of Sexual Exploitation Abuse and Sexual Harassment (SEAH): From Reporting to Response

RSH Helpdesk Report 2

July 2020

## 1. Overview

The purpose of the scoping exercise is to better understand existing global and regional initiatives that aim to strengthen survivor support from reporting to response and identify what key weaknesses, barriers and gaps exist.

This rapid research presents an assessment of current sexual exploitation, abuse and sexual harassment (SEAH) survivor initiatives globally, which organisations have been leading these, and determines the key barriers and gaps.

A summary of the key findings:

- a. Global leadership is provided by several actors across multi-lateral, bi-lateral, non-governmental and inter-governmental landscape. The UN Inter-Agency Standing Committee (IASC), individual UN entities, OECD-DAC, DFID and several international NGOs have been very active in this area.
- b. Geographical focus of the multi-laterals and their partners has been on humanitarian settings and fragile and conflict affected states (FCAS). IASC and UN momentum is focused on countries where PSEA Networks are established. Within non-humanitarian development contexts there has been impetus behind establishing safeguarding and PSEA frameworks, but this is perhaps a little less visible than the work undertaken in humanitarian and FCAS settings.
- c. Barriers to effective reporting mechanisms and providing appropriate support services are many. These include how the survivor centred approach is interpreted, shortfalls in organisational capacity, difficulties in supporting downstream implementing partners, variable effectiveness of PSEA Networks, the ineffectiveness of some community-based complaints mechanism, poor understanding of survivors' experience of reporting, the lack of trust between survivors and organisations, gaps in ensuring survivor safety, and not adequately responding to the needs of particular vulnerable groups.
- d. Key gaps include the lack of a globally shared understanding of what a survivor centred approach entails, the scarcity of survivor support services, especially those that are actually survivor centred, poorly developed processes for prevention and risk management, under capacity in investigations, the lack of detection of SEAH, poor community involvement to find *culturally relevant* PSEA solutions, scarcity of effective Government partner



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engagement and an absence of fully matured ways to practically deliver a survivor-centred response remotely (for example in pandemics and conflict).

## 2. Methodology

The approach to conducting the scoping exercise was as follows:

- Structured interviews with 23 key stakeholders across multi-lateral, bi-lateral and non-governmental sectors.
- Desk review research of supporting documentation that would assist with developing an understanding of global survivor support initiatives and the identification of gaps, barriers and weaknesses.
- Rapid research over a period of ten days.

Key questions explored during the scoping exercise included:

- What (global and regional) initiatives are currently ongoing or have been completed since 2018 to support survivors of SEAH across reporting, survivor support services and investigations? What organisations/donors have been leading these? What countries have these initiatives focused on? What have been the key outcomes?
- What are the major barriers to effective reporting mechanisms and providing appropriate support services for survivors of SEAH (at scale)?
- What are the key gaps across the current and previous initiatives to support survivors across reporting, survivor support and investigations? What, if any, are the key regional geographical gaps? Are there any specific gaps for at risk groups across current initiatives?

## 3. Global initiatives and leadership in supporting survivors of SEAH:

The UN Inter-Agency Standing Committee (IASC) and UN agencies have been very active in this area. Large INGO's, for example Save the Children, Plan International, ActionAid, Care International and the Norwegian Refugee Council were also cited by respondents as demonstrating examples of good work with regards to survivor centred approaches.

Notably, Save the Children UK and Norwegian Refugee Council have played important convening roles – as too have Bond, InterAction and the Australian Council for International Development. In January 2020 the OECD-DAC established a PSEA Reference Group – providing additional space for dialogue on SEAH and survivor centred response. UK Aid Connects – Civil Society Effectiveness thematic area is developing guidance on case management survivor centred processes due around September 2020. For more detail on individual initiatives, please refer to the Annex at the end of this paper.

## 4. SEAH survivor support country focus and key outcomes

There is a strong focus on humanitarian and FCAS settings. In 2020, the countries having PSEA Networks<sup>1</sup> were - Afghanistan, Burkina Faso, Burundi, Cameroon, Central African Republic, Chad, Colombia, DR Congo, Ethiopia, Haiti, Iraq, Lebanon (humanitarian country team (HCT)/ Inter-Cluster Coordination Group (ICCG) data only), Libya, Mali, Mozambique, Myanmar, Niger, Nigeria (northeast only), occupied Palestinian territory, Somalia, South Sudan, Sudan, Syria (in country, regional, Gaziantep), Ukraine, Venezuela, and Yemen.

Each PSEA network is in varying degrees of development and their effectiveness is directly related to this. According to IASC data collected in late 2019 - only 12 (43%) of HCT operations had full-time inter-agency PSEA co-ordinator staff to support and facilitate the PSEA network and implementation. 12 HCT operations (43%) had inter-agency community-based complaints mechanisms for handling SEAH by humanitarian workers.

In addition, half or less of HCT operations had accountability to affected population frameworks (AAP), used GBV Information Management Systems, had a strategy for mainstreaming GBV-related actions, or inter-agency referral mechanisms for handling SEAH complaints.<sup>2</sup> All operations had Inter-Cluster/Sector Coordination Groups but only 61% of these had workplans and 39% performance monitoring.

Globally there exists a total of 287 clusters, sectors and areas of responsibility (AoR) in 25 operations. Of these, 54% had technical working groups (TWG) to support specific functions – including case management. National cluster leadership was provided by the UN in 75% of operations, INGOs being co-chair in 73% of operations, and leadership in technical working groups being provided by the UN in 48% of operations. There is no data on the number of technical working groups specifically for safeguarding or PSEA topic areas (including survivor centred approaches)<sup>3</sup>.

## 5. Major barriers to effective reporting mechanisms and providing appropriate support services for survivors of SEAH at scale

- a. **Interpretation of survivor centred approach:** Across the sector, there is no single, universally agreed, global survivor centred model or set of standards. Consequently, organisations are developing their reporting and response measures to reflect general principles associated with a survivor centred approach. This is in recognition of the fact that barriers to reporting often relate to the process and subsequent follow up, which in themselves can be harmful.

Within this, organisations are challenged by the extent to which they are willing to allow survivors to be engaged as participants in the process, and for decisions and choices to be made by the survivor. Agencies need to work out where they sit in relation to moving away from being driven by their organisational policies and procedures and the administrative responses they make to safeguarding incidents, and more towards ensuring survivors are at the centre of the process, kept safe as far as possible, informed, empowered, involved in choices and decisions, and so on. The term 'survivor centred' seems most widely adopted in the sector, although there are some distinctions drawn in this:

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<sup>1</sup> Reported by Wendy Cue, IASC / OCHA Senior Coordinator for Protection from Sexual Exploitation and Abuse (PSEA) and Sexual Harassment Inter-Agency Standing Committee (IASC) Secretariat, June 2020

<sup>2</sup> IASC (23 March 2020), *Note on IASC Coordination Structures at Country Level*, IASC

<sup>3</sup> Ibid.

- Survivor led – refers to an approach that empowers the survivor to take a role in decisions that affect them, for example ensuring survivors have a voice in their services and recovery and so is about empowerment and encouraging leadership and using the experiences of survivors to shape provision and support to others.
- Survivor centred – the needs of the survivor come first. The focus is on support and also empowering survivors as engaged participants in the process. This means that investigation and disciplinary action/sanction are not the first priority and should never be pursued over the safety, security and well-being of the survivor. When applied strictly, all actions taken require the consent of the survivor. This stems from the belief that acting without survivors’ consent will add to their sense of loss of control, erode their confidence and trust in the process and in turn reduce the number of incidents reported.

Both positions are not without the caveats of “where possible and appropriate to do so”<sup>4</sup> and open up public protection questions in particular, concerning under which circumstances the wishes of the survivor could be overridden? For example, should organisations refer the subject of the complaint to law enforcement against the wishes of the survivor? How long should organisations wait to obtain agreement from the survivor? How best should risk be assessed and managed by organisations in these situations?

In the absence of an agreed model and associated standards, guidance, tools etc. organisations are likely addressing these dilemmas in a variety of ways and in line with a range of advice and direction.<sup>5</sup>

- Organisational capacity to deliver the survivor centred approach:** This capacity varies significantly from organisation to organisation and may be particularly challenging for those that are less well resourced. Due to the lack of resources and capacity, the implementation of a survivor centred approach is often inconsistently applied.
- Cascading of responsibilities downstream and the shifting of liabilities:** NGOs live in fear of a scandal and are conscious of how liabilities are shifted downstream. This “liability dumping” adds to the anxiety of overstretched and under-resourced organisations struggling to find the capacity in this area to adequately implement their frameworks and also support partners to do so.
- Quality and effectiveness of PSEA Networks is variable:** In-country PSEA networks<sup>6</sup> (see footnote for list of 2020 locations) are not always fully supported and resourced and UN agencies and NGOs may end up implementing safeguarding standards in less than coordinated ways, including establishing effective reporting mechanisms. As mentioned in section 4 (above), only 43% of HCT operations had full-time inter-agency PSEA co-ordinator staff roles.
- Effectiveness of Community-based complaints mechanisms (CBCM):** There has been a lot of effort to ensure that community-based complaints mechanisms and AAP structures are participatory and community led. Nonetheless, respondents largely reported that they are on a learning curve with regards to this. What effectiveness is or how it is measured is something that raises a lot of questions, for example - do CBCM make people safer? What should a needs assessment look like?

<sup>4</sup> Oxfam GB (May 2018), Protection from Sexual Exploitation and Abuse Policy, Oxfam GB. To be found at: <https://www.oxfam.org.uk/~media/Files/OGB/What%20we%20do/About%20us/Plans%20reports%20and%20policies/Safeguarding/PSEA%20Policy%20approved%20May%202018.ashx>

<sup>5</sup> Guidance exists in case management, Child Protection, GBV and VAWG sources but is not consolidated/adapted to SEAH

<sup>6</sup> Afghanistan, Burkina Faso, Burundi, Cameroon, Central African Republic, Chad, Colombia, DR Congo, Ethiopia, Haiti, Iraq, Lebanon (HCT/ICCG data only), Libya, Mali, Mozambique, Myanmar, Niger, Nigeria (northeast only), occupied Palestinian territory, Somalia, South Sudan, Sudan, Syria (in country, regional, Gaziantep), Ukraine, Venezuela, and Yemen.

- f. **Understanding social silence and why survivors do not report:** Respondents recognised the complexity of this as a subject matter. Even in the UK context, around 5 in 6 victims of sexual offences (83%) did not report their experiences to the police.<sup>7</sup> With this in mind, there have been few efforts to fully understand this as a subject area within the humanitarian and development communities, and as a result the cases reported may well only represent the tip of the iceberg.
- g. **Supporting and building trust with survivors:** It was felt there needs to be greater levels of professionalism in how reports are handled and that this needs to be standardised throughout the sector, for all organisations, in all settings, so that survivors have faith and trust in the people and organisation they turn to for help. Questions of how to ensure this level of trust and putting survivors at ease were seen as paramount to facilitating reporting. Directly linked to this is the quality of an organisations culture – unhealthy organisations provide fertile soil for unhealthy behaviours and there should be more emphasis on creating caring and compassionate organisations.<sup>8</sup> Organisations also spoke of the perception a survivor may have of causing trouble or the fear they may have of losing their job, and of conflicts with an organisation’s accountability and global assurance needs. For example, do mandatory reporting mechanisms deter survivors from reporting?
- h. **Gaps in safety and security and preventing reprisals:** This was seen as a large gap amongst all respondents asked. A survivor’s fear of reprisals – whether perceived or real – acted as a major deterrent to reporting in both humanitarian and development settings. Organisations’ support in this area was dependent on referral pathways and availability of, for example safe houses such as those in Iraq run by local women’s organisations. Unfortunately, in-country realities mean that there are often huge limitations as to the services available. This scarcity of support is often compounded when consideration has to be made toward (a) specialist care or (b) specific vulnerable groups, for example sex workers and drug users, whose actions may mean they come into conflict with the law.
- i. **Gendered discourse is both a positive and a negative:** Whereas women and girls do encounter the majority of SEAH in all settings, it is felt that in planning survivor support services, this detracts from the importance of addressing SEAH for other vulnerable populations – persons with disabilities, the elderly, and boys / men. As noted above, other groups whose behaviours are criminalised are unlikely to report and are effectively denied access to statutory referral mechanisms and services.

## 6. Gaps for at risk groups across current initiatives:

### a. **Scarcity of survivor support and assistance that is survivor-centred**

- i. **Disclosure procedures:** Immediate survivor support in all settings (e.g. psychosocial first aid) is dependent on to whom the disclosure is made. In the vast majority of incidents, a process of survivor support is only kick-started once designated safeguarding personnel have been informed.
- ii. **Referral management:** It is standard practice for organisations to map, test and continually update referral mechanisms for all programming locations. Challenges exist with the

<sup>7</sup> Sexual offences in England and Wales: year ending March 2017: Analyses on sexual offences from the year ending March 2017 Crime Survey for England and Wales and crimes recorded by police.

<sup>8</sup> CHS Alliance (14 April 2020), Cultivating Caring , Compassionate Aid Organisations, To be found at: <https://www.chsalliance.org/get-support/article/cultivating-caring-compassionate-aid-organisations/>



scarcity of appropriate services and ‘making do’ when the quality of care is sub-optimal. This “making do” leads to the acceptance of greater risk than may normally be tolerated. Further complications may arise from, for example, within PSEA networks where roles and responsibilities not effectively mapped between organisations operating within this humanitarian context.

- iii. **Application of a survivor centred approach for different vulnerable groups:** Please refer to above paragraph 5i.
  - iv. **Ensuring a survivor’s immediate well-being, safety and security:** There are significant limitations on the services available in the vast majority of settings organisations operate in. For example, safe houses barely exist in the UK – let alone elsewhere. Few, if any, organisations have provisions to guarantee the personal safety and security of survivors that speak up, which can have the most serious consequences especially in contexts of armed conflict or where use of weapons is prevalent. In all settings, finding specialised support services for those – like sex workers, drug users etc – whose actions are against the law is difficult. Additionally, there is a lack of specialised skill throughout the sector in certain areas – for example, interviewing children, working with particular vulnerable groups e.g. LGBTQI. Language is a huge barrier, as too is culture that normalises harm for both men and women.
  - v. **Legal and justice assistance for survivors:** Allowing survivors to access their rights through legal and judicial assistance is also largely dependent on circumstance. Within safeguarding, impunity still exists and there isn’t a level playing field between survivors and perpetrators. Respondents noted that survivors within office settings needed to see accountability in action and Whistleblowing Policies being effective in-order to have faith in the system. For PSEA this is especially true, as survivors are rarely provided with support in this area.
  - vi. **Long-term assistance to help survivors reactivate their coping mechanisms:** Long-term assistance is applied unevenly throughout the sector in all settings. For many organisations, this is an area that hasn’t been considered and at best is still an area for discussion on what it actually means in practice. Organisations that have provided long-term assistance have done so with long-term psychosocial support, relocation, education fees, vocational training. Additional challenges remain in the nature of humanitarian response and how to feasibly apply long-term support outside of protracted emergencies.
- b. **Prevention and proper risk management:** For both humanitarian and development contexts, understanding what constitutes a safe programme or project is not universally shared or applied throughout the sector. The design of programmes to identify and mitigate SEAH risks and the need for programme or project adaptation and redesign is not a uniform feature across organisations and speaks to the need for SEAH policies to be fully integrated into all aspects of operations. This is also true for understanding how humanitarian aid provides opportunities for SEAH at different stages of the distribution process – for example – transportation, distribution of aid, storage of aid, registration exercises and so on.<sup>9</sup>
- c. **Lack of detection:** Reporting mechanisms have their limitations (see 5f above) and also place the onus on survivors to speak up. In recognition of this, some organisations mentioned the need to move toward detection. For example, technology has been used by police services to detect indecent images and the improper use of phones and laptops. Another example is

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<sup>9</sup> Global Women’s Institute – Empowered Aid – To be found at : <https://globalwomensinstitute.gwu.edu/empowered-aid> Accessed June 2020.

provided by schoolteachers keeping a mood journal of their pupils to identify if a child becomes unhappy, withdrawn and in need of support, which could indicate abuse.

- d. **Poor integration with communities:** How best to leverage community support to address SEAH is a poorly developed subject area within both development and humanitarian contexts. Communities exist at the grass-roots level and largely access community justice and community support services at that level. However, there is a very western based concept of what “support” should look like and this can sometimes work in conflict with communities’ own realities and their perceptions of what support should be. Aside from support services and in terms of detecting incidents, one respondent talked of community peer systems in which peers were designated within communities to support and listen to people. Another respondent mentioned community questionnaires that contain numerous questions concerning programmes with one unassuming SEAH related question placed to gauge the level of incidents.
- e. **Pandemics:** COVID-19 and Ebola are two recent pandemics that presented challenges for organisations in providing survivor centred approaches. Referral services may close or reduce capacity and there would also be a reduction in face to face contact – having implications for case management service provision and investigations – increasing the need for remote service delivery through the use of various technology channels. Pandemics also increase people’s vulnerability to harm. Isolation increases the possibility of family separation (through quarantine, illness, or death) and increases incidents of violence against women, children and other vulnerable populations. Isolation also reduces individual’s potential to seek help and mitigate such harm.

Pandemics reduce economic activity and impact incomes – leading communities to revert back to old economic coping mechanisms – for example, child marriage. Respondents felt that the application of remote safeguarding measures is something that could be applied to conflict settings and other areas where access and face to face contact is an issue. Additionally, COVID-19 has provided the impetus to revisit safeguarding in the sector as a whole, both in humanitarian and development contexts.
- f. **Investigations:** Investigative capacity was reported to be a challenge for most organisations in all settings but most notably in FCAS settings. Whereas some organisations have their own investigations staff, this was far from representative of the sector as a whole. Key challenges remain in harmonising standards, aligning methods, ensuring consistency, strengthening capacities and integrating a survivor centred approach within investigations. Additional challenges came from meeting the specific gender, race and language requirements of investigations.
- g. **Accountability of partner Governments to safeguarding and SEAH standards:** By nature of their mandate, multi-laterals and bilaterals work to support host governments. Respondents reported that there was little engagement with government partners on their adoption of safeguarding / SEAH measures.

## Annex – Overview of Initiatives

1. There is not one global body dedicated to oversight of all in-country PSEA implementation; **the Office of the Special Coordinator (OSC) on SEA** is dedicated to improve the UN-wide response on SEA, and **the Office of the Victims Rights Advocate** is dedicated to improving a UN-wide response for victims' rights. **The Inter-Agency Standing Committee (IASC)** is dedicated to strengthen the humanitarian sector's approach to PSEA (both UN and non-UN entities). Therefore, reporting on in-country collective SEA prevention and response activities is done through the regular accountability lines of Resident and Humanitarian Coordinators. In an emergency context this is done through the Humanitarian Coordinator to the IASC Chair, the Emergency Relief Coordinator.
2. **The United Nations Victims' Rights Advocate** – Jane Connors – supported the finalisation of the 2019 United Nations Protocol on the Provision of Assistance to Victims of Sexual Exploitation and Abuse.<sup>10</sup> This protocol began its roll out in 2020 with the aim to provide consistent direction across the United Nations system. Other initiatives include the mapping of services available to survivors of SEAH and the establishment of Field Victims' Rights Advocates<sup>11</sup> in the Central African Republic, the Democratic Republic of the Congo, Haiti and South Sudan. Challenges exist with regards to the huge gaps in service provision, legal support, protection (safety and security of survivors) and the long-term support needed to reactivate a survivors' coping mechanisms.
3. **The Group of UN Representatives of Investigation Services (UN-RIS)** was established in 2015 and comprises the head of oversight of 24 investigations services and is chaired by the Director of the Office of Internal Oversight Services, Investigations Division – Ben Swanson. In 2017, a joint taskforce was established to strengthen and harmonise investigations into sexual exploitation and abuse (SEA). Guidelines – *Uniform Principles and Guidelines for Investigations on Sexual Exploitation and Sexual Abuse* - were developed and represent a practical tool for investigations within the survivor centred approach. Reported in November 2018, were actions to be coordinated by the *IASC and the UN Chief Executives Board Task Force on Addressing Sexual Harassment in the UN System*. These were steps to recruit additional capacity, strengthen training, develop performance indicators for investigations, develop a shared methodology on approaches to investigations, define common terminology, integrate a survivor centred approach to investigations, establish consistent evidentiary rules, address bias / stereotypes, promote partnerships and identify optimal practices for pooling investigators.<sup>12</sup>
4. The *Inter-Agency Standing Committee's Championship Strategy on PSEA and Sexual Harassment* (2018) details three key outcomes needed at the country level in humanitarian settings:
  - a. Safe and accessible reporting – encouraging survivors to come forward and a speak-up culture. IOM is exercising a unique mandate in providing technical assistance on request to in-country PSEA Networks and Humanitarian/UN Country Teams on collective PSEA activities, including establishing inter-agency community-based

<sup>10</sup> United Nations Protocol on the Provision of Assistance to Victims of Sexual Exploitation and Abuse - To be found at: [https://www.un.org/en/pdfs/UN%20Victim%20Assistance%20Protocol\\_English\\_Final.pdf](https://www.un.org/en/pdfs/UN%20Victim%20Assistance%20Protocol_English_Final.pdf)

<sup>11</sup> UN Victim Rights Advocate (2019), Annual Report, UN To be found at: <https://www.un.org/preventing-sexual-exploitation-and-abuse/sites/www.un.org.preventing-sexual-exploitation-and-abuse/files/un-ovra-annual-report-2019-online.pdf>

<sup>12</sup> IASC and UN Chief Executives Board Task Force on Addressing Sexual Harassment in the Organisations of the UN System (26 Nov 2018), Meeting of Investigatory Bodies on Protection from Sexual Exploitation, Abuse and Harassment, p. 5





complaints mechanisms.<sup>13</sup> On the 9<sup>th</sup> June 2020 they announced PSEA Coordinator Training aimed at equipping existing and potential PSEA Coordinators with the skills needed. Due to COVID-19 restrictions, this year's course will be online and requires a commitment of 28 hours over the 4 weeks (27/8 to 24/9/2020).

- b. Improving quality assistance for the survivors of SEA, and
- c. Strengthened vetting, reference checking, disciplinary measures and enhanced accountability, including investigations at the country level.

At a meeting in May 2018, the **IASC Principles** committed to immediate collective action to<sup>14</sup>:

- a. Ensure a survivor-centred approach to addressing SEA and sexual harassment (SH);
  - b. Promote positive change in organizational culture through strategic communications and role modelling;
  - c. Improve referencing systems to stop transgressors from moving through the humanitarian sector;
  - d. Strengthen sector-wide investigations capacity;
  - e. Support collective activities of in-country networks to SEA and SH.
5. Based on the IASC Championship Strategy on PSEA and Sexual Harassment is the scale-up plan – the IASC Plan for Accelerating Protection from SEA in Humanitarian Response at Country-Level (2018).<sup>15</sup> This plan focuses on the achievement of the three key outcomes detailed in the IASC Championship Strategy on PSEA and SH.

Filippo Grandi, UN High Commissioner for Refugees, is until December 2020 the IASC Principals' Champion on PSEA and SH. In alignment with the IASC Championship Strategy on PSEA and SH, he put forward 5 initiatives (i) holding a self-reflective session on values, culture and attitudes with IASC Principals; (ii) making the IASC commitment more visible, during the visits of Principals to the field; (iii) facilitating the sharing of good practices and resources on improving workplace culture; (iv) developing an interagency training for partners on protection from sexual misconduct; and (v) establishing a PSEA community outreach and communications fund for small grants to field-based organisations.<sup>16</sup>

6. **UNICEF, IOM, UNHCR, WFP, OCHA, UN Women and UNFPA** are key UN agencies involved in the process.

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<sup>13</sup> IASC, Frequently asked questions on inter-agency PSEA – IOM's lessons learned from PSEA implementation in-country, To be found at: [https://interagencystandingcommittee.org/system/files/2020-04/IOM%27s%20FAQs%20on%20Inter-Agency%20PSEA%20%282019%29\\_0.pdf](https://interagencystandingcommittee.org/system/files/2020-04/IOM%27s%20FAQs%20on%20Inter-Agency%20PSEA%20%282019%29_0.pdf) Accessed June 2020

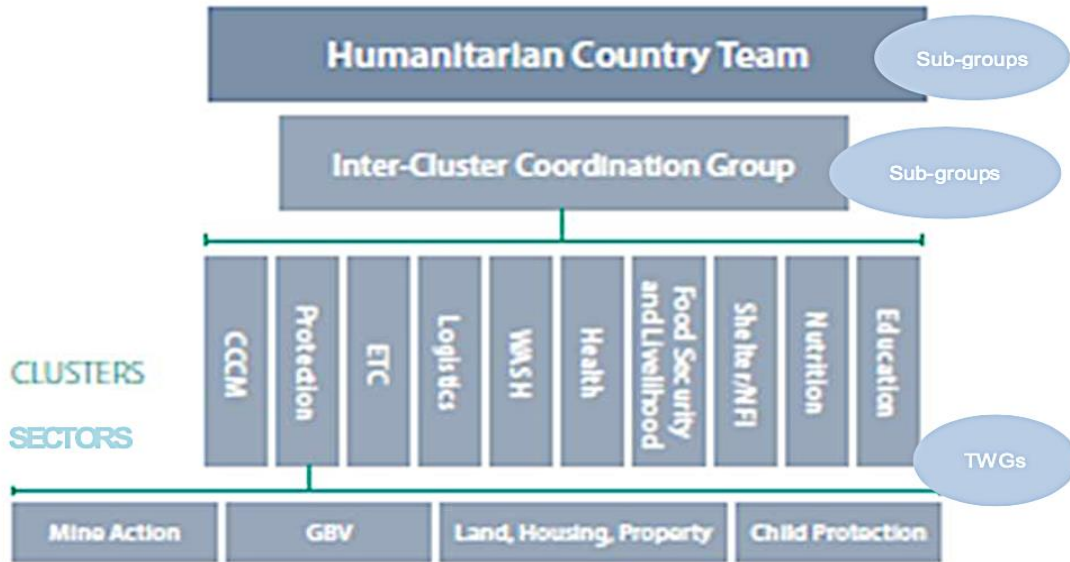
<sup>14</sup> IASC Champion on Protection from Sexual Exploitation and Abuse and Sexual Harassment. To be found at: <https://interagencystandingcommittee.org/iasc-champion-on-protection-from-sexual-exploitation-and-abuse-and-sexual-harassment> Accessed June 2020

<sup>15</sup> IASC Plan for Accelerating Protection from SEA in Humanitarian Response at Country-Level (2018), To be found at: <https://interagencystandingcommittee.org/iasc-champion-protection-sexual-exploitation-and-abuse-and-sexual-harassment/iasc-plan-accelerating> Accessed June 2020

<sup>16</sup> IASC Champion on Protection from Sexual Exploitation and Abuse and Sexual Harassment. To be found at: <https://interagencystandingcommittee.org/iasc-champion-on-protection-from-sexual-exploitation-and-abuse-and-sexual-harassment> Accessed June 2020



7. **IASC coordination structures** at the country level change quite rapidly in some contexts. Understandably this is a huge subject area itself and requires some scrutiny in order to understand the complexities fully. The standardised coordination structure is illustrated below<sup>17</sup>.



The UN is guided by the United Nations Protocol on Allegations of Sexual Exploitation and Abuse Involving Implementing Partners and the United Nations Protocol on the Provision of Assistance to Victims of Sexual Exploitation and Abuse.

8. **UN Women** have set out principles in relation to a survivor-centred approach which can be found on their End Violence Against Women and Girls Virtual Knowledge Centre.<sup>18</sup>
9. **OECD-DAC Recommendation on Ending Sexual Exploitation, Abuse and Harassment in Development Co-Operation and Humanitarian Assistance** was adopted on 12th July 2019 and sets out 6 pillars for SEAH prevention and response. Pillar 2 focuses on survivor centred responses and support mechanisms – providing for complaints mechanisms, response and protection, local services and network coordination. To support the implementation of the Recommendation, a Reference Group was established in January 2020. DFID is one of three co-chairs of the Reference Group and membership is drawn from representatives of international organisations, civil society, and non-DAC countries. The group itself provides a space for dialogue on issues relating to SEAH, including exchanging on shared practices and common challenges; it also supports the monitoring and learning process associated with the Recommendation and its six pillars. The Reference Group is also supported by the DAC Network on Gender Equality which examines gender equality and women’s empowerment within development cooperation more broadly.

<sup>17</sup> IASC (23 March 2020), Note on IASC Coordination Structures at Country Level, IASC

<sup>18</sup> More information can be found at: <https://www.endvawnow.org/en/articles/1790-victim-survivor-centred-approach.html?next=1789>

10. **UK Aid Connect** – Civil Society Effectiveness thematic areas include the Development Alternative, funded by DFID - a consortium that is committed to designing and testing new ways of delivering development that is truly led by young people and their communities. The consortium is led by Restless Development and is a collaboration of seven partners. Since the earliest concept phase, a commitment to safeguarding and preventing SEAH has been a prominent feature of the partnership. The consortium has a dedicated safeguarding working group which has a shared vision to build thought leadership, and develop and test best practice approaches to safeguarding in the sector.

The focus of the consortium is to improve civil society effectiveness. In keeping with this theme, the safeguarding work includes initiatives to develop best practice approaches to survivor focused case management and community driven protection systems. The Development Alternative Consortium offers the opportunity to leave a tangible safeguarding legacy which enables communities to hold the development, humanitarian and CSO sector to account for protecting them and preventing SEAH.

11. **Core Humanitarian Standards (CHS) Alliance** – areas include, a PSEAH Community of Practice for CHS Alliance members, the CHS PSEA Index which is a subset of the CHS indicators, and the PSEA Implementation Quick Reference Handbook (chapter on community-based complaints mechanisms, including survivor assistance). New initiatives in the pipeline include (a) 4 tiered investigators training scheme that will consist of online, residential and mentoring components; (b) revision of the PSEA Index (c) updating the PSEA Implementation Quick Reference Handbook including an emphasis on survivor centered approaches; (d) in partnership with the Institute of Social Studies at Erasmus University, the Alliance plans to conduct research and pilot innovative ways of improving PSEAH and AAP systems at a national level in three pilot countries (e) in partnership with the IASC PSEA Technical Working Group. guidance has been developed on COVID-19 and PSEA, and a PSEA staff pocket staff for all humanitarian is under consideration.
12. **The European Interagency Security Forum (EISF)** produced guidance on Managing Sexual Violence Against Aid Workers: Prevention, Preparedness, Response and Aftercare. The manual provided survivor centred guidance and was based on the survivor centred approach.

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