Minutes of the IASC PSEA-focused Task Team Meeting, 25 January 2018

Introduction and Aim and Outline of Meeting
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In the November PSEA-focused meeting, members requested that a Task Team meeting be dedicated to SEA risk assessments; this session will therefore focus on this. From this discussion we expect to achieve some idea of how countries can measure and monitor the level of risk of SEA they may have. This is a relatively new concept; today's discussion is not about developing guidelines but will be used to identify existing practice and experience in the area.

Discussion - How can a country measure and monitor what level of risk of SEA they have?

A. Bangladesh inter-agency SEA risk assessment (UNICEF and IOM):
UNICEF started looking at work around GBV risk assessments and other mechanisms to see what could be learnt for SEA. An initial framework was then developed, in collaboration with IOM with 3 main components:

1. Contextual analysis: especially in terms of power dynamics, vulnerability, camp design that could lead to increased vulnerability, leadership and governance structures (formal and informal relationships between different actors; government, military, UN, NGOs) etc. Also looking at how the different stakeholders might address conflict; what community-based structures are in place to resolve disputes; existing complaints mechanisms; safety audits; human rights issues etc.
2. Internal mechanisms: Looking at how Codes of Conduct and recruitment procedures etc. relate to risk.
3. Inter-agency mechanisms: Need to also look at frameworks for operations, sectors and clusters etc.

The context analysis was carried out through (a) observations and informal interviews, (b) an analysis of existing protection reviews and (c) a self-reporting survey that was sent to members of the PSEA network. Through this, key issues were looked at. E.g. (a) Questions to medical teams such as 'would you know how to refer a survivor if you witnessed or have suspicions of SEA?' *To note: invariably the answer to this question was 'no'.* (2) Questions to women who volunteered to speak to them such as 'how would you best like to receive information from humanitarian agencies and what is your preferred means of communicating with agencies? Where would you bring a sensitive complaint if you felt your rights were violated?' *To note: women reported that they would bring their complaints to the informal hierarchy – the male self-elected community leaders; yet in studies these leaders had low levels of trust in the community*; this disconnect needs to be taken into account in the risk assessment. (3) Observations for example, when the military was handing out aid – were they touching the women etc.

In Bangladesh, there were already a number of protection assessments (CP, gender, GBV etc) that had been completed. These were reviewed as part of the process in order to avoid duplication and used to determine some key factors: e.g. gender implications on toilets; GBV findings on men entering safe spaces for children etc. The distinction in Bangladesh between a protection assessment and an SEA assessment became around the internal PSEA systems; this is where you see how prepared organizations are to assess and mitigate the risks of SEA. A 2-page survey was therefore developed; asking agencies to report against the Minimum Operating Standards on PSEA; for example: do you have a Code of Conduct that incorporates PSEA; do you have a nominated focal point and internal reporting channels; do you have reporting channels for the community that were designed in coordination with the community members etc? These questions led to concrete actions and steps for the PSEA Networks so that risk mitigation actions could be well informed.

Discussion:
- This framework was designed specifically with risks to children in mind and UNICEF's child protection mandate but can cover adults as well. On this, there are different areas we should consider e.g. sex in exchange for jobs; it could go in many different directions, depending on the context, but could potentially become a tool that could be used by PSEA networks.

- The assessment report is in draft form and is currently being refined and updated; at some point soon it will be signed off and adopted by the PSEA network. In addition, the protection working group has a database of all existing protection assessments; the document will 'sit' within this database. As the response is still in the early days, this should go some way to mitigate risk before the programmes get

fully implemented; however on the flip-side; it will need to capture future potential risks as programmes evolve; this will need to be a live document to be re-visited and updated over time.

- It would also be important to include human rights reports and analysis in the contextual part; around sexual gender-based violence; root causes and how these may fit in. Where OHCHR does not have a presence (e.g. in Bangladesh) we need to find ways of speaking to human rights actors; this could help shape mitigation strategies and responses.

- In Bangladesh there are a significant number of GBV risk assessments; however for PSEA it made more sense to have a separate SEA assessment that was informed by other assessments (including GBV) primarily because this is where the gaps were. In this context, as there were so many people being recruited (who may have not worked in the humanitarian context before) training was key on: Code of Conduct; what it means to be a humanitarian worker etc. The level of staff training raised a major flaw in the self-assessment component of the risk assessment. Of the 15 Agencies that self-reported; all said they had the capacity to train their own staff and most of their staff were trained and that PSEA was part of their Code of Conduct. However, it was observed that in Bangladesh international and national staff did not know what PSEA was; the risk assessment template needs to take this into account; and the self-assessment component needs to be strengthened to reflect a general lack of awareness around PSEA. The CHS self-assessment is one example of a tool that could be used.

- Moving forward, as the risk assessment framework is further developed: (a) the contextual analysis will build on specific issues, (b) the desk review can be used to triangulate this information and (c) the self-survey (building on the CHS self-assessment) will be used to look at organization's capacity to deal with SEA.

- **How risk assessment links to PSEA response and work of the PSEA networks:**
When a PSEA network exists but is not effective or organizations do not have the capacity to handle complaints or implement mitigation measures, the risk of SEA can increase. We need to see how we can use the analysis from the risk assessment to develop concrete actions for the establishment of PSEA networks and the criteria for their membership etc. How to keep a network accountable and active? In some countries (e.g. Iraq) they have decided to only include UN Agencies in the network (due to the huge number of NGOs in situ). What does PSEA membership mean? These questions should be answered context by context but there can be certain criteria. Through the CBCM training, they have found that the most important things we should be advocating for in a PSEA network is a strong and clear action plan and SOPs that are understood by all actors.

In Bangladesh, where there were capacity issues, the TORs stated that any organization is welcome to be a full voting member of the network as long as they have a nominated focal point committed to representing PSEA within their organization and collectively and an internal complaint handling policy/framework. There are now 14 member-organizations and 9 observer organizations (as they do not fulfil the membership criteria). Sector-leads are also invited to be members of the network. This is important due to the high risks associated with some of the sectors (e.g. food distributions).   A checklist on how to mitigate SEA within sectors could be annexed to any risk assessment template.

- **PSEA in Humanitarian Response Plans (HRPs)**
How to support partners to systematically include PSEA into their response? In Bangladesh, PSEA will be included in the coordination chapter of the HRP; this needs to be advocated for. One way of doing this is through needs assessments; the Task Team has been working on developing a menu of needs assessments aimed at doing this; these are almost ready for release but prior to this will be looked at one final time to ensure that PSEA is captured adequately. RC/HC's need to have concrete information on the risk of SEA; this enables them to promote PSEA and fundraise; however this needs to be done with caution to avoid complacency in cases where low numbers indicate low risk.

B. Other examples of SEA risk assessments:

Save the Children: Newly developed Rapid Assessment Framework including a set of questions for children and community members and leaders etc to build up a picture of the general risks and potential risks. This also

takes into account the 'time factor' of the response – e.g. when the risks of SEA may be greater (start of response etc). To note: this has not been used as a complete package yet. See attached.

IFRC uses a rapid assessment tool. See attached.

AOB

- Use of future meetings: It is critical right now to look at difference between sexual harassment and SEA. There are various working groups in the UN working on this.   Could look to link in and see developments in their work.
- Could the Task Team do a survey on capacities in our organizations to take some of these things forward, especially at the collective level.
- Future of the Task Team is still up for discussion pending a decision from the IASC regarding the status post 31 March.

Next Meeting dates:
- 15 February 2018   AAP/PSEA
- 8 March 2018   PSEA

Meeting Participants:

Organisation	Name
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Note: Apologies for any errors in above table