

***Operationalization of the UN Protocol on Allegations of Sexual Exploitation and Abuse involving Implementing Partners<sup>1</sup>***

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**I. Introduction**

Strengthening protection from sexual exploitation and abuse (PSEA) is a shared responsibility of the humanitarian and development community as a whole, including both the United Nations and its partners.

Due to the importance placed on PSEA, United Nations entities developed the [United Nations Protocol on Allegations of Sexual Exploitation and Abuse Involving Implementing Partners](#) (United Nations IP Protocol) in 2018, which outlines the requirements for the United Nations when working with its partners.

An integral part of the protocol is to assess the capacity of our partners to prevent and respond to sexual exploitation and abuse and to strengthen the joint capacity of United Nations entities and implementing partners, hereafter referred to as partners, to realize commitments to PSEA. Participating UN entities, including UNFPA, UNICEF, WFP, WHO and UNHCR are thus working with our partners using a [common assessment tool](#) developed in a consultative process between United Nations entities and partners. It consists of a set of eight core standards that look at the organizational policies and procedures a partner has in place to prevent and respond to SEA.

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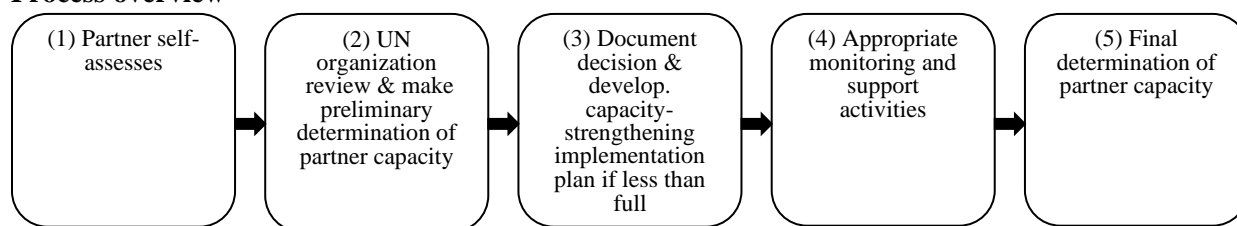
<sup>1</sup> Implementing partners are defined in the IP protocol as, “an entity to which a UN office or entity has entrusted the implementation of a programme and/or project specified in a signed document, along with the assumption of responsibility and accountability for the effective use of resources and the delivery of outputs. Implementing partners may include – but are not limited to - government institutions, inter-governmental organizations, and civil society organizations, including NGOs. Implementing partners’ subcontractors are subsumed within this definition”

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Participating UN entities and their partners will use the findings of the assessment to a) provide better targeted and coordinated support to PSEA capacity strengthening; b) inform selection of partners; c) develop a capacity strengthening [implementation plan](#) that reflects identified areas for improvement on PSEA of selected or existing partners who score less than full capacity on the assessment; and d) inform monitoring and measures to strengthen the integrity of programme delivery activities.

This document provides guidance to partners about the operationalization of the IP protocol, including the assessment process and its implications.

### Process overview



## II. Key information about the PSEA Assessment:

### General information:

- Participating UN entities require all of their implementing partners to eventually be assessed. The results of previously assessed partners are accepted by participating UN entities as long as the assessment covers the following standards: mandatory screening of personnel; mandatory training; adequate reporting procedures; appropriate action in past cases; adequate investigative and assistance capacities..
- International non-governmental partners:
  - To the extent possible, participating UN entities will coordinate the assessment of international NGOs. If more than one UN entity requests an assessment, the international NGO should alert them of the pending assessment.
  - Some international NGO partners have already been assessed at their headquarter-level. Other UN organizations may request documentation verifying the assessment, or additional supporting documentation of the implementation of some of the core standards at country-level (especially core standards 5, 6, and 7 which are inherently local in nature).
- At the country level, UN entities will, to the extent possible, undertake coordinated assessments of shared partners, so as to minimize duplication, by assigning one UN entity to conduct the assessment and lead on the verification and follow up activities. In most cases, a PSEA assessment will need to be completed *before* entering into a new partnership with a UN entity, as part of the selection process or, for existing partners, prior to continuation of the partnership for the following programme year.
- The PSEA Assessment covers 8 core standards: 1. Organisational Policy; 2. Organisational management – Subcontracting; 3. Human Resources System; 4. Mandatory Training; 5. Reporting; 6. Assistance and Referrals; 7. Investigations; and 8. Corrective Measures.
- The number of core standards met provides the basis for the partner’s “PSEA Capacity Rating” and reflects the partner’s current PSEA capacities, as follows:
  - Full capacity: Partner meets all 8 core standards;
  - Medium capacity: Partner meets most core standards (6-7), support required to address remaining gaps;

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- Low capacity: Partner meets few core standards (5 or fewer), urgent action needed to strengthen PSEA capacity.
- If a partner does not have contact with beneficiaries, the partner can disclose this on the self-assessment and does not need to complete the full assessment.
- The final determination of partner capacity based on the results of the assessment are valid for a period of five years unless an earlier re-assessment is considered necessary by a UN entity funding the partner (e.g., because of a significant change to a partner's organizational or management structure, or following an incident that calls into question the results of the assessment). The UN entity will continuously monitor partner capacity throughout the duration of the partnership.

### ***The process:***

This section outlines the main steps required to undertake the assessment, bearing in mind that each agency may require additional actions as part of their internal process. The self-assessment should take approximately 1-2 hours.

#### **Step 1: Partner self-assesses:**

- The partner conducts a self-assessment, either when responding to an expression of interest/call for proposal, via a self-assessment template provided by the lead UN entity/office working with the partner, or as part of their registration in the UNPP (once available) using the technical guidance available in Annex I of this document.
- Upon receipt of the self-assessment form, the partner, either on its own or with assistance from the lead UN entity, completes the self-assessment for compliance with each core standard individually and rates with a “yes” or “no” (or “n/a” for core standards 2 and/or 8).
- There are two preliminary questions in the self-assessment:
  - If the partner has previously been assessed by another United Nations entity, the partner provides the date and the SEA capacity rating, along with all supporting documentation and evidence, and returns the form to the requesting UN entity, without completing the rest of the self-assessment.
  - If the partner does not have *any* direct contact with beneficiaries of assistance or populations of concern<sup>2</sup> as part of any of its operations (e.g. desk based research), the partner must indicate this on their self assessment and may optionally complete the full assessment. The partner will need to complete the full assessment if the nature of programmatic activities changes and there is direct contact with beneficiaries.
- The partner submits the completed self-assessment to the lead UN entity (or informs the UN entity it is ready for review in the UN Partner Portal ([UNPP](#))<sup>3</sup>), together with relevant supporting documents, as proof of evidence of meeting the required 8 core standards. A list of suggested supporting documents which should be gathered for the assessment are included in the self-assessment form. Partners can add different and/or additional documentation to support their self-rating.

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<sup>2</sup> Beneficiaries of assistance are individuals who are direct or indirect recipients of a partner's or the UN's action. In other words, this refers to people who a partner or a UN entity either works with and/or serves or seeks to assist and are typically in situations of vulnerability and dependence vis à vis the partner's or the UN entity's personnel. This includes any activities the partner undertakes under a contractual agreement with entities other than the UN entity. Therefore, the 'no contact with beneficiaries' rating applies only when the partner does not conduct any activity which involves contact with beneficiaries of assistance or other members of vulnerable communities, for example, desk-based research. However, if the same partner subsequently undertakes activities that involve contact with beneficiaries, the partner must undergo the assessment.

<sup>3</sup> PSEA module is scheduled to be launched by end 2022

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### **Step 2: The lead UN entity assesses and rates the partner's PSEA capacity and makes a preliminary determination of the partner's capacity:**

- Upon receipt of the completed self-assessment, the lead UN entity will review the self-assessment and supporting document and verify the rating. During this time, the lead UN entity may request clarification from the partner and/or additional supporting documentation.
- When the local office of an international NGO is being assessed, attention to relevant core standards already assessed at the headquarter level should be taken into account.
- Upon completion of its review, the lead UN entity will share the outcome (including the overall SEA capacity rating) with the partner and discuss areas of improvement.
- If a UN entity selects an implementing partner assessed as having capacity gaps in one or several areas, the IP protocol requires
  - a) the UN to justify its continued engagement with the partner notwithstanding its limited PSEA capacity,
  - the partner to address any gaps in its PSEA policies, procedures and systems within a set timeframe to bring the partner to full capacity (see Step 3 on how to address those gaps).

### **Step 3: Capacity strengthening implementation plan**

- The UN entity will work jointly with the partner to develop a capacity strengthening implementation plan (CSIP) to address gaps identified in the assessment within one month of the PSEA assessment verification date.
- Partners are encouraged to use the resources provided in the technical guidance as tools to develop or strengthen PSEA policies, procedures and systems.
- Depending on the partner capacity, the partner is expected to complete the activities in the CSIP and come to full capacity within 6 months (with the exceptional option to extend to 9 months).
- If the partner does not achieve full capacity within the 6/9 month time frame and the partnership continues, the two entities should continue working together to build capacity through a capacity strengthening implementation plan

### **Step 4: Monitoring:**

- For partners who score less than full capacity, the UN entity will monitor implementation of the capacity strengthening implementation as part of its regular programme monitoring. Monitoring of PSEA capacity is an important element of working with a partner. Therefore, monitoring must continue even after a partner reaches full capacity after the preliminary assessment or after completing the activities in the CSIP, the UN entity will continue to monitor the capacity of the partner to prevent sexual exploitation or abuse for the duration of the partnership. r to ensure they maintain compliance with the 8 core standards.
- Monitoring on SEA is key to determine: 1) the extent of compliance with, and effectiveness of its existing PSEA policy, procedures and systems; and 2) the implementation of a specific action plan developed for those CSOs classified as low or medium capacity.

### **Step 5: Reassessment:**

- If a partner does not have full capacity, within 6 months of its initial assessment (9 months if an exceptional 3 month extension is given after the first reassessment) the lead UN entity and the partner will jointly reassess the partner's PSEA capacity.

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- Participating UN entities may decide not to retain, renew, suspend or terminate partnership with partners who fail to reach full capacity after the reassessment.
- A reassessment will be considered necessary within the five year period, e.g. because of a significant change to a partner's organizational or management structure, following an incident that calls into question the results of the assessment, and/or based on the findings of a monitoring visit).

## **Annex I: Technical guidance**

### **Process Overview:**

The self-assessment constitutes the first step of the UN Implementing Partner PSEA Capacity Assessment process. During this step, each partner is invited to share their reflections and self-evaluation against the eight core standards listed in the assessment tool. For every core standard, the partner is expected to answer whether they meet the requirements or not, and according to the answer provided a score is given.

To complete the self-assessment, the partner gives itself a “yes”, “no” or “n/a” (n/a - Not Applicable is only available for core standards 2 and No Allegations - N/A is specific to core standard 8) self-rating for each core standard. A partner gives itself a “yes” self-rating if it meets the minimum requirements outlined below under each core standard. If a partner is unsure whether or not it meets the standard, the partner can add comments on the tool and request support from the UN entity undertaking the assessment. When the partner submits its self-assessment to the lead UN entity, it must also submit mandatory supporting documentation for each core standard to assist in the review and assignment of SEA capacity rating. Once submitted, the UN entity will verify and review the submitted documentation according to a unified and harmonized methodology and scoring and will communicate with each partner the result of their preliminary self-assessment determining their capacity levels. Unmet core standards will be reflected in the Capacity Strengthening Implementation Plan (CSIP) and partners will be supported by the UN entity to meet those standards as part of steps 3 and 4 of the assessment process.

### **Purpose of this Document:**

The purpose of this annex is to provide partners with guidance on how to successfully complete the self-assessment. It also indicates the minimum requirements needed under each core standard for it to be successfully met.

### **Initiation of the self-assessment:**

Prior to the completion of the self-assessment, there are two preliminary questions to be answered by the partner:

- If the partner has previously been assessed by another United Nations entity, the partner provides the date and the PSEA capacity rating, along with all supporting documentation and evidence, and returns the form to the requesting UN entity, without completing the rest of the self-assessment.
- If the partner does not have direct contact with beneficiaries of assistance (e.g. desk-based research), the partner makes note of this in the form and returns it to the lead UN entity. Although the partner does not have contact with beneficiaries, they may optionally decide to complete the full self-assessment. The partner may have to undergo PSEA assessment at a later time or with another UN entity if the nature of programmatic activities changes and there is direct contact with beneficiaries.

### **Completion of the self-assessment:**

#### General guidance on submitting documentation/evidence

1. Partners submitting third-party documentation as evidence, including third-party policies and procedures, will need to show evidence of internal application of such external documentation or

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mechanisms, in particular a) they have adopted the policy or procedure within the organization's systems or b) that they have formal membership in the third-party organization that requires the CSO to uphold the policy or procedure For example, an external or interagency training, Code of Conduct, or Standard Operating Procedure (SOP) for referral to victim services should be signed by the organization or accompanied by a memo or other supporting documentation showing that the organization has adopted the third-party policy as their own internal policy.

2. For every core standard, PSEA policies and procedures should be applicable to all personnel, including staff, interns, volunteers, consultants and any other related personnel. Evidence of this language should be clear. For example: if there are different types of contracts, all of them must include a PSEA clause.
3. All evidence submitted should be written and approved policy of the organization. Drafts in progress or written explanations via email will not be accepted.
4. Supporting documentation should be applicable for both children AND adults. When possible, a clear indication to this application must be made in relevant policies and procedures.

### **Tips for Partners:**

- 1- Ensure that the staff member completing the self-assessment is familiar and knowledgeable of the tool and the core standards included in it.
- 2- Prior to completing the self-assessment, ensure that all supporting documentation is available and ready to be submitted in accordance with every met core standard. For example, for Core Standard one on organizational policy, have the PSEA Policy ready for submission for ease of reference.
- 3- Ensure that only one self-assessment is submitted on behalf of the partner organization. For example, if your organization has offices at national and sub-national levels, only one self-assessment will be required.

### **Note:**

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- Some international NGO partners have already been assessed at their headquarter-level. They may be requested documentation verifying the assessment, or additional supporting documentation of the implementation of some of the core standards at country-level (especially core standards 5, 6, and 7 which are inherently local in nature)

### **1. Core standard: Organizational policy**

#### a) Assessment criterion:

“The partner has a policy document on PSEA. At a minimum, this document should include a written undertaking that the partner accepts the standards of conduct listed in section 3 of the [ST/SGB/2003/13](#).”

#### b) Minimum requirements:

Ideally, the implementing partner has a policy document policy statement on PSEA and/or a safeguarding policy, which meets the standards of conduct listed in section 3 of [ST/SGB/2003/13](#), which include at minimum:

- Definitions aligned with those of the United Nations ([ST/SGB/2003/13, 2003](#))
- An explicit prohibition of SEA / Zero tolerance towards SEA at all times
- Reporting obligations: the requirement that all allegations of SEA must be promptly reported

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As such, only in case all the minimum requirements listed above are met, the partner can self-rate “yes”,. If not, the partner self-rates as “no” and this standard will be added to the capacity strengthening implementation plan.

### Tips for Partners:

Although not mandatory, partners are strongly encouraged to develop a PSEA policy demonstrating a clear commitment to prevent and respond to SEA. Partners should include the following core aspects when creating or strengthening their policy documents:

- A clear definition of SEA (same as or substantively similar to the [United Nations definition](#));
- An explicit prohibition of SEA;
- Reporting obligations: the requirement that all allegations of SEA must be promptly reported;
- Whistleblower protection: individuals who report SEA must be protected from any form of retaliation;
- Clear roles and responsibilities: this may include designating PSEA focal point(s) to assume key responsibilities, such as the development of internal systems, training and awareness-raising of personnel, and coordination with other relevant actors (see [Generic Terms of Reference for PSEA Focal Points](#));
- Transparent and clear language, adapted to local context to ensure it is understood by all targeted audiences.

The partner can either revise its own existing documents, adopt the templates provided under resources to articulate its policy or create a stand-alone SEA policy, depending on its capacities and needs.

#### c) Supporting documents:

The following is a list of suggested documentation which can be used to support the self-assessment rating:

- Code of Conduct (internal or interagency/third party if adopted by the partner organization- see above note about third-party documentation);
- PSEA policy;
- Documentation of standard procedures for all personnel to receive/sign PSEA policy and/or personnel contracts that include a prohibition on PSEA and mandatory adherence to the code of conduct or PSEA policy.

#### d) Resources:

The following resources are available as references or capacity building material to help develop the implementing plan and meet the core standard.

- [PSEA Policy Template](#)<sup>4</sup>: encompasses all core elements listed above. Partners can adapt this PSEA policy in their internal framework;
- [Code of Conduct Template](#)<sup>5</sup>: partners can adapt this code of conduct in their internal framework.

Other useful resources:

- [Minimum Operating Standards \(MOS\)-PSEA](#) and [Guidelines to implement MOS-PSEA, 2013](#) (p. 11);
- CHS Alliance, [PSEA Implementation Quick Reference Handbook](#), 2017. (p.12);
- Interaction, [Interaction Step by Step Guide to Addressing Sexual Exploitation and Abuse](#), June 2010.

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<sup>4</sup> For other sample PSEA policies, see [CESVI PSEA Policy](#), the [International Federation of Red Cross and Red Crescent Societies \(IFRC\) Secretariat PSEA Policy](#).

<sup>5</sup> For other sample codes of conduct see: International Rescue Committee (IRC), [the IRC Way. Our Standards for Professional Conduct the Code of Conduct for Norwegian Refugee Council \(NRC\) Staff](#), which includes references to PSEA.



## **2. Core standard: Organizational Management – Subcontracting**

a) Assessment criterion:

“Partner’s contracts and partnership agreements include a standard clause requiring sub-contractors (excludes individuals as they fall under personnel) to adopt policies that prohibit SEA and to take measures to prevent and respond to SEA.”

b) Minimum requirements:

Partners are responsible for the technical and professional competence of their subcontractors. The use of a subcontractor does not relieve the partner of its obligations under the agreement vis a vis the UN entity. This means that subcontractors, too, must take all appropriate measures to prevent SEA of anyone by its employees. The clause should include at minimum:

- A clear prohibition of sexual exploitation and abuse;
- Definition of SEA aligned with those of the United Nations ([ST/SGB/2003/13, 2003](#))
- Obligation to inform the partner upon reception of SEA allegations
- The obligation to take appropriate measures to prevent sexual exploitation and abuse and to take appropriate corrective measures when SEA occurs.

If the implementing partner has subcontractors and can demonstrate that it has included a standard clause requiring sub-contractors to adopt policies that prohibit SEA and to take measures to prevent and respond to SEA, in line with the above noted minimum requirements, the partner can self-rate with “yes”. If not, the implementing partner self-rates with “no” and this standard is added to the capacity strengthening implementation plan. If the partner does not have subcontractors, the partner can self-rate with “n/a”. However, if this situation changes and the same partner subsequently subcontracts activities to another entity, this would warrant a re-assessment.

### **Tips for Partners:**

Ideally, appropriate measures by subcontractors to prevent sexual exploitation and abuse by its employees should include, as relevant: (1) A clear prohibition of sexual exploitation and abuse; (2) Mandatory screening of personnel; (3) Mandatory SEA training for its personnel; (4) Mandatory reporting of all SEA allegations; (5) Referring victims of SEA for immediate professional assistance; (6) Investigating any allegation of SEA. Such expectations from subcontractors could also be included in the partner’s own PSEA policy (see Core Standard 1).

If the partner plans to sub-contract activities to another entity, the partner must have the necessary reporting mechanisms in place to prevent and respond to incidents of SEA.

c) Supporting documentation:

The following is a list of suggested documentation which can be used to support the self-assessment rating:

- Contracts/partnership agreements for sub-contractors
- Evidence that subcontractors/partners are required to follow the organization’s PSEA policy which includes above mentioned elements

d) Resources:

Partners can refer to the resources provided in this guidance to strengthen different aspects of its subcontractors PSEA capacities. Article 11 of the UN Supplier’s Code of Conduct provides useful elements when designing a standard clause.

## **3. Core standard Human Resources Systems**

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a) Assessment criterion:

“There is a systematic vetting procedure in place for job candidates through proper screening. This must include, at minimum, reference checks for sexual misconduct and a self-declaration by the job candidate, confirming that they have never been subject to sanctions (disciplinary, administrative or criminal) arising from an investigation in relation to SEA, or left employment pending investigation and refused to cooperate in such an investigation.”

b) Minimum requirements:

Partners must implement adequate safeguards to avoid hiring individuals with a past record of sexual misconduct. Screening of personnel for past SEA violations must be a mandatory component of the recruitment process. At minimum, screening must include all of the following:

- Job candidates should be required to self-declare prior involvement in sexual misconduct and consent to the disclosure of any such information by former employers during the verification of references;
- Reference checks with former employers should form a mandatory part of the recruitment process;
- All contracts (staff, volunteer, intern, individual consultant) signed include a **PSEA clause that lays out specific PSEA obligations** (see point 4 below).\* A Code of Conduct may be accepted instead of the PSEA clause, as long as it integrates specific PSEA obligations and has a signature page.

### **Tips for Partners:**

All PSEA-related documents should be kept on personnel file/record to ensure individuals will not be re-hired if allegations are substantiated based on a robust investigation or if individual left the organization while an investigation was taking place. In general, self-disclosure of prior involvement in SEA on its own is not sufficient to fully achieve the minimum requirements for this standard. To the extent legally possible, this should be accompanied by a requirement for PSEA-sensitive reference checks and/or official background checks. For example, the inter-agency [misconduct disclosure scheme](#) adopted by the Steering Committee for Humanitarian Response (SCHR) establishes a minimum standard for organizations to share information as part of their recruitment process about people who have been found to have committed sexual abuse, sexual exploitation or sexual harassment “misconduct” during employment.

Only in case all the minimum requirements listed above are met, the partner can self-rate “yes”. If not, the partner self-rates with “no” and this standard will be added to the capacity strengthening implementation plan.

c) Supporting documentation:

The following is a list of suggested documentation which can be used to support the self-assessment rating:

- Reference check template including check for sexual misconduct (including reference from previous employers and self-declaration);
- Recruitment procedures.

d) Resources:

Resources are location specific and can be obtained from the UNCT and/or the relevant UN PSEA focal point.

- <https://www.interaction.org/resource-library/psea-in-the-employee-lifecycle-action-against-hunger/>

### **4. Core standard: Mandatory Training**

a) Assessment criterion:

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“The partner holds mandatory trainings (online or in-person) for all personnel on PSEA and relevant procedures. The training should, at a minimum include: 1) a definition of SEA (that is aligned with the UN's definition); 2) an explanation on prohibition of SEA; and 3) actions that personnel are required to take (i.e. prompt reporting of allegations and referral of victims).”

### b) Minimum requirements:

- 1) A policy/procedural document is present (PSEA policy, training policy/plan, HR manual, SOP) **requiring mandatory training on PSEA** both during the onboarding process and on a regular basis (ideally once a year) for all personnel (e.g., employees/staff, consultants, contractors, volunteers, interns etc.)
- 2) Partners should organize mandatory induction and refresher trainings on PSEA for all personnel on a regular basis. Such training should include, at minimum:
  - A clear definition of SEA (same as or substantively similar to the UN's definition);
  - An explicit prohibition of SEA;
  - The requirement that any allegations of SEA must be promptly reported;
  - The presentation of available reporting channels accessible to staff and beneficiaries
  - The requirement that alleged victims of SEA shall be referred for immediate, professional assistance.

Only in case all the minimum requirements listed above are met, the partner can self-rate “yes”. If not, the partner self-rates with “no” and this standard will be added to the capacity strengthening implementation plan.

### c) Supporting documentation:

The following is a list of suggested documentation which can be used to support the self-assessment rating:

- Annual training plan;
- Training agenda;
- Training package (see above note about third-party documentation if relevant);
- Policy requirement to take attendance and sample attendance sheet or template;
- Sample training certificates;
- Training report.

### d) Resources:

Where a partner has not put in place its own training, it may use any of the training material available at the following URL to fulfill its training-related obligations hereunder:

- IASC, [‘Saying No to Sexual Misconduct’ –an Interagency Training on Protection from Sexual Exploitation and Abuse \(SEA\) and Sexual Harassment \(SH\) for partners](#), May 2020;
- UN Online Training on [PSEA](#);
- Interaction, [Interaction Prevention of Sexual Exploitation and Abuse Training Guide](#), December 2013.

## 5. Core Standard: Reporting

### a) Assessment criterion:

“The partner has mechanisms and procedures for personnel, beneficiaries and communities, including children, to report SEA allegations that comply with core standards for reporting (i.e. safety, confidentiality, transparency, accessibility).”

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### b) Minimum requirements:

Partners must 1) have adequate mechanisms accessible for personnel and beneficiaries to report SEA or safeguarding violations against children and adults, and (2) be actively raising awareness among beneficiaries on how to access reporting channels.

1) Reporting mechanisms to receive SEA allegations should, at a minimum, incorporate the following core elements:

- Accessibility: Reporting mechanisms should be easy to use, widely publicized and promoted to personnel, recipients of assistance and local communities. Potential barriers for usage should be removed (e.g. difficult or foreign language, costs and time needed for using them), keeping in mind the target audiences, including people of different ages, genders, educational backgrounds and abilities.
- Responsiveness: A properly functioning complaint mechanism needs to provide a timely response, be adequately resourced and operated by appropriately trained individuals.
- Safety: Partners have to ensure safety for those reporting allegations and concerns. This includes whistleblower protection, personal safety and data protection. Protection measures must be set up before promoting the use of a reporting mechanism.
- Confidentiality and anonymity: Complaints have to be handled strictly confidentially and appropriate safeguards should be put in place to prevent disclosure of information. Complainants should also be advised of the possibility of lodging a complaint anonymously, and of the implications of such a procedure, including the consequences for follow up of the complaint.
- Transparency: Partners should explain procedures to all complainants, including how information will be shared, with whom and for what purpose, for investigations and assistance to survivors. This also includes notice of the organization's obligations for mandatory reporting.

Additionally, partners can build the capacity of reporting mechanisms for SEA allegations, by using both internal and external reporting mechanisms to facilitate reporting of SEA allegations or concerns by personnel and recipients of assistance. Where possible, they should seek to incorporate PSEA reporting mechanisms into broader feedback or complaints mechanisms in order to benefit from these channels' levels of trust, discreteness, and resources.

2) Implementing partners have a duty to report to the UN entity they have an agreement with. If they conceal information, do not report, or intentionally give incorrect information, it may result in sanctions according to the cooperative agreement. Reporting mechanisms should have the ability to refer SEA allegations to the UN.

Only in case all the the minimum requirements listed above are met, the partner can self-rate "yes",. Adequate reporting mechanisms should demonstrate the following elements: (1) existence of reporting channels for personnel of the organization, (2) for beneficiaries of the organization's programmes, and (3) that the organization is actively raising awareness among its beneficiaries on how to access reporting channels. For centralized INGO assessments, it is important that evidence of reporting channels are from the country-level and available in local language. If not, the partner self-rates with "no" and this standard will be added to the capacity strengthening implementation plan.

### c) Supporting documentation:

The following is a list of suggested documentation which can be used to support the self-assessment rating:

- Internal Complaint and Feedback Mechanism;
- Participation in joint reporting mechanisms or interagency community-based complaint mechanisms (CBCMs) (see above note about third-party documentation);
- Communication materials;
- PSEA awareness-raising plan;

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- Description of reporting mechanism;
- Whistle-blower policy.

### d) Resources:

The following resources are made available to the partners as references or capacity building material to help the partner develop the implementing plan and meet the core standard.

- [IASC Best Practice Guide Inter-Agency Community-Based Complaints Mechanisms](#), September 2016;
- [IASC Global Standard Operating Procedures on Inter-Agency Cooperation in Community-Based Complaint Mechanisms](#), 2016;
- Save the Children, [Programme Accountability Guidance Pack. A Save the Children Resource](#), 2013 (particularly chapter 4 “Handling feedback and complaints”, p. 25-42)
- UNHCR, [Operational Guidance on Accountability to Affected People](#), September 2020.
- [Global Dashboard of PSEA in Humanitarian Response](#)
- [InterAction Community Based Safeguarding Visual Toolkit](#)

## 6. Core Standard: Assistance and referrals

### a) Assessment criterion:

“To be consistent with the IP Protocol and other UN SEA instruments, the partner has a system to refer SEA victims to locally available support services, based on their needs and consent. This can include actively contributing to in-country PSEA networks and/or Gender based violence (GBV) systems (where applicable) and/or referral pathways at an inter-agency level.”

### b) Minimum requirements:

It is the responsibility of the partner to ensure that victims of SEA allegedly perpetrated by their personnel receive immediate professional assistance, either by providing them with direct services or referring them to relevant service providers where consent is given.

Partners must: (1) clearly lay out their commitment to systematically provide victims of SEA with any assistance required - either directly or through a referral - based on their needs and consents (victim-centered approach) AND (2) have a referral mechanism and procedure in place.

Tips for Partners:

Partners must adhere to the following principles ([Victim Assistance protocol](#)) when facilitating assistance:

- Assistance and support will be made available to all victims of SEA irrespective of whether the victim initiates or cooperates with an investigation or any other accountability procedure.
- Assistance and support shall be provided in a manner that is victim-centred, rights-based, age, disability and gender sensitive, non-discriminatory and culturally appropriate. The rights and best interests of victims shall guide how assistance and support are designed and provided. Assistance and support to child victims (under age 18) shall be provided in a manner consistent with the rights enshrined in the Convention on the Rights of the Child, in particular the “best interests of the child”.
- Assistance provided to victims shall adhere to the principle of “do no harm” and be provided in a manner which seeks to uphold their rights, dignity and well-being. This may entail provision of safety measures to protect against retaliation, re-victimization and re-traumatization.
- The rights of victims to privacy, confidentiality and informed consent in respect of assistance shall be respected. Victims (or their parents/caregivers where appropriate) have the right to decide on the assistance they need, and information should be provided on the full range of options available. Victims should be informed of the progress and outcomes of actions or processes that concern them.

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- Victims are entitled to pursue applicable accountability measures, including legal redress where desired.

Common services for victims/survivors of SEA include:

| Type of service                              | Description  |
|--|--|
| Safety and Protection                        | <ul style="list-style-type: none"><li>• Immediate safety or protection measures for survivors and witnesses to address the risk of retaliation or further violence, such as survivor safety planning, safe shelter (i.e. space that offers temporary safety to individuals fleeing harm), relocation support</li></ul> |
| Medical care                                 | <ul style="list-style-type: none"><li>• Medical care, including post-exposure prophylaxis (PEP) to prevent HIV (within 72 hours of possible exposure); treatment for Sexually Transmitted Infections (STIs), pregnancy care, emergency contraception</li></ul>   |
| Psychosocial support                         | <ul style="list-style-type: none"><li>• Mental health care, emotional and practical support, either individually or community-based</li></ul>  |
| Legal services                               | <ul style="list-style-type: none"><li>• Legal assistance services, including free legal counselling, legal representation and other.</li></ul>   |
| Basic material assistance                    | <ul style="list-style-type: none"><li>• Provision of food, clothing, shelter, school re-integration and livelihood support to the survivor</li></ul>   |
| Support for children born as a result of SEA | <ul style="list-style-type: none"><li>• Medical and psychosocial care and pursuit of paternity and child support claims, in conjunction with relevant national governments</li></ul>   |

- Partners should have an updated list of local service providers, which should include options for both children and adult survivors where relevant (e.g. names of a pediatric and adult medical care provider). In many cases, partners can use or adapt the mapping of existing GBV and child protection services and referral pathways of relevant inter-agency bodies, such as the in-country PSEA Network and in-country GBV and child protection coordination groups. Especially in cases involving children, partners should also consult with UNICEF country offices.<sup>6</sup>
- Where there are gaps in service coverage and needed services are unavailable, assistance and support should be provided to victims using partner’s internal resources. Additional resources to address gaps in service coverage may be provided through, for example, the [Trust Fund in Support of Victims of Sexual Exploitation and Abuse](#).
- A set procedure should guide the referral process that is aligned with existing inter-agency or multi-agency procedures and protocols. The process should outline the steps that adequately trained personnel need to take.

Only in case all the minimum requirements are met, the partner can self-rate “yes”. For centralized INGO assessments, it is important that evidence of reporting channels are from the country-level and available in local language. If not, the partner self-rates with “no” and this standard will be added to the capacity strengthening implementation plan.

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<sup>6</sup> In some cases, organizations may also be able to access additional funding to provide specialized services through the Trust Fund in Support of Victims of Sexual Exploitation and Abuse (the “Trust Fund”) established by the Secretary-General. For more information on the Trust Fund, see: <https://conduct.unmissions.org/remedial-trust-fund>.

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### c) Supporting documentation:

The following is a list of suggested documentation which can be used to support the self-assessment rating:

- Internal or Interagency referral pathway (see above note about third-party documentation);
- List of available service providers in the relevant locations;
- Description of referral pathways or Standard Operating Procedures (SOP);
- Referral form for survivors of GBV/SEA;
- Applicable guidelines on victim assistance and/or training on GBV and GBV case management principles.

### d) Resources:

The following resources are made available to the partners as references or capacity building material to help the partner develop the implementing plan and meet the core standard.

Assistance for all survivors:

- [UN Protocol on the Provision of Assistance to Victims of Sexual Exploitation and Abuse](#) (Victim Assistance Protocol);
- Technical note on the implementation of the Victim Assistance Protocol (forthcoming);
- [Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action Reducing risk, promoting resilience and aiding recovery](#), IASC, 2015;
- [SEA Victim Assistance Guide: Establishing Country-Based Mechanisms for Assisting Victims of Sexual Exploitation and Abuse by UN/NGO/IGO Staff and Related Personnel](#), ECHA/ECPS UN and NGO Task Force on Protection from Sexual Exploitation and Abuse, April 2009;
- [Minimum Standards for Prevention and Response to Gender-based Violence in Emergencies](#), UNFPA, 2015.
- [UN Comprehensive Strategy on Assistance and Support to Victims of Sexual Exploitation and Abuse by United Nations Staff and Related Personnel](#), 2007.
- [Inter-Agency Gender-Based Violence Case Management Guidelines](#), 1 January 2017.
- [Sexual and Gender-Based Violence against Refugees, Returnees and Internally Displaced Persons. Guidelines for Prevention and Response](#), UNHCR, May 2003.
- [Policy on the Prevention of, Risk Mitigation and Response to Gender-Based Violence](#), UNHCR, 2 October 2020.
- [Policy on a Victim-Centred Approach in UNHCR's Response to Sexual Misconduct](#), 1 December 2020.
- [Global Dashboard of PSEA in Humanitarian Response](#)

Assistance for child survivors:

- [Caring for Child Survivors of Sexual Abuse: Guidelines for health and psychosocial service providers in humanitarian settings](#), International Rescue Committee/UNICEF, 2012;
- [Inter-agency Guidelines for Case Management and Child Protection. The Role of Case Management in the Protection of Children: A Guide for Policy and Programme Managers and Caseworkers](#), The Child Protection Working Group, January 2014;

## 7. Core Standard: Investigations

### a) Assessment criterion:

“The partner has a process for investigation of allegations of SEA and can provide evidence. This may include a referral system for investigations where in-house capacity does not exist.”

### b) Minimum requirements:

Partners must have (1) an internal procedure in place to review reported cases and conduct investigation and (2) internal or external investigation capacity. The internal procedure to review and investigate cases must include the following:

- Process to review received reported cases



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- Process of investigation
- Information on how to ensure confidentiality in the investigation process.
- The list of investigation follow-up actions (disciplinary actions, information sharing, etc.).<sup>7</sup> Disciplinary actions should be described in the HR procedures/policies.

### **Tips for Partners:**

Partners are required to ensure that professional investigations of allegations of SEA involving their personnel take place without delay and with due attention to the safety and wellbeing of all persons involved. Timely and professional investigations are essential to ensure accountability of perpetrators, justice for victims and to enforce the zero-tolerance policy of the UN and its partners. Investigations should be conducted with due regard to a number of key principles including, at a minimum, but not limited to:

- Confidentiality, safety, impartiality, objectivity, thoroughness, timeliness and respect for the due process rights of all involved;
- Adequate protection and referral to support services for victims and witnesses throughout the investigation process, as needed;
- Regular communication and follow-up with witnesses and victims of investigative process and outcomes, as appropriate;
- Appropriate follow-up, including disciplinary/contractual action when allegations are substantiated;
- Referral of cases to competent national authorities for criminal investigation and prosecution, as appropriate;
- A set of standard procedures detailing the investigative process, including roles and responsibilities of investigation participants to ensure due process for all involved.

If the implementing partner can demonstrate it has a process in place to investigate allegations of SEA and can provide evidence the partner can self-rate with “yes”. If not, the partner self-rates with “no” and this standard is added to the capacity strengthening implementation plan, upon the entity’s review.

Conducting investigations requires trained professional investigators and can be a complex and oftentimes costly undertaking. It is therefore essential for partners to assess their investigation capacities early on. Where in-house capacity is lacking (i.e. established internal investigative procedures and dedicated investigations or employees officially charged with carrying out internal investigations), partners have to ensure rapid access to a professional investigation service or consultant investigators familiar with conducting investigations in development or humanitarian settings. This may involve contracting a professional service provider on a retainer basis to ensure prompt deployment if and when needed. The cooperative agreement gives the UN entity the right to conduct investigations and the partner to consult with or request the UN entity to conduct investigations.

Eligible partners may also qualify for funding through [the OCHA fund](#) for investigations into sexual exploitation, abuse and sexual harassment, which can be used by IASC organisations and affiliated partners that do not have dedicated investigations capacity, or have limited investigations capacity.

Partners may also identify other options to meet their needs and capacities (e.g. using pro-bono legal services, requesting a partner to sponsor/deploy investigator or use pools of investigators).

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<sup>7</sup> Disciplinary actions should be described in the HR procedures/policies.



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Partners are required to keep the UN entity they work with informed during the conduct of the investigations and, at the conclusion of the investigation, provide a complete and unredacted copy of the investigation report to the UN entity that they work with.<sup>8</sup>

### c) Supporting documentation:

The following is a list of suggested documentation which can be used to support the self-assessment rating:

- Written process for review of SEA allegations;
- Dedicated resources for investigation(s) and/or commitment of partner for support;
- Misconduct investigation procedures that include SEA or SEA investigation policy/procedures;
- Contract with professional investigative service.

### d) Resources:

The following resources are made available to the partners as references or capacity building material to help the partner develop the implementing plan and meet the core standard.

Complaints and investigation processes:

- IASC, [Model Complaints and Investigation Procedures and Guidance Related to SEA](#) (Draft), 2004.
- IASC, [Guidelines to Implement the Minimum Operating Standards for PSEA](#), March 2013.
- IASC, [Fund for Investigations into Sexual Exploitation, Abuse, and Sexual Harassment](#), April 2019
- Keeping Children Safe, [Management of Child Safeguarding Allegations](#), 2016.
- WHO, [Ethical and safety recommendations for researching, documenting and monitoring sexual violence in emergencies](#), 2007.
- CHS Alliance, [Investigation of Cases of Sexual Exploitation and Abuse by Aid Workers: Challenges and Recommendations](#), Background paper to 2016 CHS Alliance PSEA Conference 5-6 September 2016: Bangkok, Thailand.
- CHS Alliance, [Guidelines for Investigations - A guide for humanitarian organisations on receiving and investigating allegations of abuse, exploitation, fraud or corruption by their own staff](#), 2006 (revised in 2015).
- International Council of Voluntary Agencies (CVA), [Building Safer Organisations: Training materials on receiving and investigating allegations of abuse and exploitation by humanitarian workers](#), 2007.

Investigations involving child survivors and witnesses:

- UNICEF/UNODC, [Handbook for Professionals and Policymakers on Justice Matters involving Child Victims and Witnesses of Crime](#), Criminal Justice Handbook Series, UN, New York, 2009, as well as its [child-friendly version](#)).

## 8. Core Standard: Corrective measures

### a) Assessment criterion:

“The partner has taken appropriate corrective action in response to SEA allegations, if any.”

### b) Minimum requirements:

Partners are required to disclose any past SEA allegations involving its personnel and evidence of corrective measures and actions taken in response thereto.

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<sup>8</sup> For additional information on partners’ obligations regarding investigations based on which UN entity the partner is working with, please see the following documents: [UNICEF’s General Terms and Conditions](#), [UNFPA’s General Terms and Conditions](#), [UNHCR Partnership Agreements](#) and [WFP’s General Conditions of the Field Level](#).

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Partners with a past record of SEA are considered high-risk. A number of corrective actions need to be taken before the PSEA capacity rating can be changed and the partner is no longer considered high risk..

Information related to past allegations and corrective action taken accordingly will be accepted anonymously/without personal data and compliant with national labour regulations in the country.

Below is a non-exhaustive list of factors that may be considered in making this determination:

- The partner has promptly informed UN of the SEA allegation<sup>9</sup>;
- A thorough and transparent investigation of the SEA allegation involving the partner has been undertaken;
- The outcome of the investigation/s on the SEA allegation have been shared with the UN.
- Appropriate action has been taken towards the perpetrator, if the allegation was found to be substantiated;
- Adequate assistance and protection have been provided to the (alleged) victim/s of SEA;
- A time-bound action plan has been implemented to address systemic issues and key gaps.

If the implementing partner had past cases of SEA and it can prove it has undertaken adequate corrective measures the partner can self-rate with “yes” and provide relevant supporting documentation of the process itself<sup>10</sup>. If not, the implementing partner self-rates with “no”. Following the UN entity’s review of the adequacy of partner’s response, if it is determined the corrective measures undertaken by a partner were inadequate, an existing partnership must be suspended, whereas a new partner cannot be engaged, until it can satisfactorily show it has taken adequate corrective measures. If the partner has not had any past SEA allegations the partner can self-rate with “no allegation”. The partner will get ‘1’ point for this core standard if they self-rate “n/a”.

### c) Supporting documentation:

The following is a list of suggested documentation which can be used to support the self-assessment rating:

- Evidence of implementation of corrective measures such as a completed PSEA Action Plan;
- Specific measures to identify and reduce risks of SEA in programme delivery.

### d) Resources:

There are no resources available for this assessment criterion as it concerns the partner’s past allegations of SEA and corrective action taken in response. If you have a question about how to answer this core standard, please reach out to your UN entity focal point.

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<sup>9</sup> Existing partners with past allegations of SEA must be reported to the respective investigative services offices of each UN entity.

<sup>10</sup>The partner does not need to submit documentation on the allegation itself. Rather, the UN is looking to see how the partner responded to the allegation and what corrective actions were taken.

# CONTRIBUTORS

