

Defining linkages to better assist survivors of sexual exploitation and abuse

The Tip Sheet is a handy reference that provides key points to guide PSEA and GBV coordinators and other practitioners when coordinating and responding to SEA in humanitarian settings on the following topics:

- ❑ Providing quality assistance to SEA survivors according to their needs, rights and wishes.
- ❑ Prioritizing survivors' needs, rights and wishes with regards to SEA mandatory reporting requirements.
- ❑ Applying a survivor-centered approach to SEA Investigation processes.
- ❑ Linkages between PSEA network coordination and GBV sub-cluster coordination in humanitarian contexts.

BUILDING BRIDGES BETWEEN GBV AND PSEA ACTORS

The Tip Sheet summarizes key challenges and recommended actions related to linkages between GBV and PSEA in coordinating and responding to SEA for PSEA and GBV coordinators, and other practitioners.

The key challenges and recommended actions were **informed by 80 consultations with 105 PSEA/GBV experts across six regions**, including regionally based experts and from 26 countries¹ (including countries from the 35 PSEA priority countries for the IASC) as well as headquarters. In addition, 12 group case management consultations were conducted with 105 people from GBV case management organizations as well as Interaction's Survivor Support Sub-Working Group, the GBV AoR, and IASC MHPSS Reference Group.

The consultation exercise with PSEA and GBV experts was one of UNFPA's activities under the 2021 IASC PSEAH Championship as part of the commitment to **strengthen quality information and access to quality assistance for survivors² of SEA**.

The key challenges and recommendations in this Tip Sheet intend to **strengthen PSEA-GBV collaboration to better assist SEA survivors**. Working together is particularly important for ensuring prompt and survivor-centred quality assistance in line with the UN Protocol on the Provision of Assistance to Victims of Sexual Exploitation and Abuse³.



SURVIVOR-CENTERED APPROACH: GBV GUIDING PRINCIPLES

SAFETY

refers to both physical safety and security and to a sense of psychological and emotional safety.



CONFIDENTIALITY

refers to a person's right to choose with whom she will or will not share her information and details about the incident.



RESPECT

for the choices, rights and dignity of women, girls and SEA/GBV survivors means that survivors are the primary actors in all aspects of GBV service delivery.



NON-DISCRIMINATION

GBV and PSEA staff should be equipped with knowledge, skills and attitudes on inclusive programming.



1. The countries are Afghanistan, Bangladesh, Pakistan, Myanmar, Philippines, Nepal, Sri Lanka, Palestine, Lebanon, Iraq, Libya, Yemen, Jordan, Syria, Turkey, South Sudan, Ethiopia, The Democratic Republic of Congo (DRC), Central African Republic (CAR), Mali, Mozambique, Haiti, Nigeria, Venezuela, Ukraine and Trinidad and Tobago.

2. For the purpose of this Tip Sheet the term 'survivor' (rather than 'victim') is used in order to reinforce the concept of resilience and the survivor-centered approach to coordination and service delivery. The term 'victim' is used in this section only where needed to refer to language in specific policy documents.

3. The [UN Protocol on the Provision of Assistance to SEA, Dec. 2019](#).

Providing quality assistance to SEA survivors according to their needs, rights and wishes



Key Challenges

- Funding for GBV life-saving services, which address the needs, rights and wishes of SEA survivors, continues to be inadequate, poorly prioritized and sometimes nonexistent.
- There are limited lessons learnt available on the impact of the projects funded by the Trust Fund in Support of Victim of SEA⁴ on the lives of SEA survivors.
- Victim assistance funding⁵, if allocated to target only SEA survivors, will draw more attention to the survivor from the perpetrator as well as from unsupportive family and community members, or others, which can compromise the safety of the survivor and can infringe on confidentiality.
- In-country PSEA focal points often lack capacity on how to receive disclosure of SEA and refer accordingly.
- GBV sub-clusters and PSEA networks lack clarity on SEA data sharing protocols at the country level which creates confusion and dilemmas for GBV sub-cluster coordinators. For example:
 - GBV sub-cluster coordinators feel unease about sharing SEA related data to the PSEA network, pointing to the importance of data sharing protocols being survivor-centered and compliant with guiding GBV principles, including confidentiality (e.g. non-identifiable info).
 - Country level PSEA network work plans often include indicators on reported numbers of SEA incidents; it is not necessarily understood that the number of reported cases is not indicative of SEA prevalence.



Key Recommended Actions

- Bolster GBV case management services to ensure SEA survivors safely receive a comprehensive assistance that is tailored to their needs.
- Ensure GBV services are offered to all survivors through one system and package of available services⁵ to the extent possible.
- Maximise existing PSEA resources to support comprehensive GBV case management with survivors of SEA.
- Promote sustainable capacity building for in-country PSEA focal points on how to receive disclosures of SEA and how to safely refer or access GBV referral pathways.
- Include in GBV standard operating procedures how GBV sub-cluster coordination members interact with the PSEA network for survivors assistance, in addition to having PSEA-GBV data sharing protocols that ensure confidentiality.



4. <https://www.un.org/preventing-sexual-exploitation-and-abuse/content/trust-fund>

5. The Trust Fund projects target at-risk community members as well as PSEA survivors to avoid stigmatization.

Prioritise survivors' needs, rights and wishes with regard to SEA mandatory reporting requirements



Key Challenges

- The Mandatory reporting policy is intended to help escalate reports of SEA as quickly as possible in order to enable an organizational response. However, the mandatory reporting policy can be difficult to reconcile with the survivor-centered approach and with the survivor's wishes and rights to autonomy, confidentiality and self-determination.
- There is limited knowledge of the UN mandatory reporting policy ([SG Bulletin on Special measures for protection from sexual exploitation and abuse](#)), its complexity and impact.
- GBV practitioners feel especially uncomfortable with mandatory reporting when they know there are limited GBV support services available.
- GBV practitioners find it challenging to apply the mandatory reporting when the obligation to report is not clear (where/to whom, what information to share, how the information will be used, etc.) especially when they feel the environment is not safe for reporting SEA incidents.
- Most of the countries consulted reported a gap in feedback to SEA survivors on how they had followed up on a complaint. 'No one knows what's happening after cases have been reported' was commonly heard in the consultations.
- National law enforcement do not always guarantee the protection and respect for the rights of the survivors. (e.g. existing laws that criminalised adultery and transactional sex, etc.)



Key Recommended Actions

- Help protect the safety of the survivor by ensuring survivors, GBV case workers, and PSEA focal points are aware of the options to report SEA anonymously⁶.
- Inform survivors on available legal services⁷ and respect the choice of the survivor to pursue legal action or not. Prioritize actions that ensure the safety and protection of the survivor.
- Ensure every organisation allocates resources and implements measures to protect survivors of SEA.
- "Survivors must be informed immediately upon reporting an incident when mandatory reporting procedures are in place. Do not 'promise' confidentiality as it is not acceptable to make promises to survivors that you might not be able to keep. Instead, from the very beginning, be clear what confidentiality means and what the limits are in your context."⁸
- Encourage multiple channels (including formal and informal channels) for reporting SEA.
- Map all channels that can safely receive reports of SEA and link them to existing GBV referral pathways at the outset of an emergency response through active coordination between GBV and PSEA actors.



6. Reporting SEA allegations anonymously via email or a hotline is already possible across UN agencies. SEA complaints are receivable anonymously by policy. When reported anonymously, it helps to provide as much detail as possible so that an investigation can progress as quickly as possible and can take into consideration and/all protection needs.

7. This includes free legal counselling by an attorney/legal aid provider of their choice, legal representation, advocacy and other support.

8. Inter-Agency Minimum Standards for Prevention and Response to GBV in Emergencies, GBV AoR 2019 (page 49).

Applying a survivor-centered approach to SEA investigation processes



Key Challenges

- Having a gender-balanced team for investigating SEA is difficult given the number of investigators who are male.
- Investigation services are often contending with a high caseload of other types of wrongdoing, such as fraud, abuse of authority, etc.
- The backlog of complaints and pending cases, in some instances, slows down the investigation processes and survivors may feel that the investigative system is complex and distressing (e.g. having to repeat and provide several interviews).
- Organisations provide insufficient feedback on the investigation progress and case status updates to survivors, including acknowledgment that the allegation was received.
- There are limited opportunities for PSEA and GBV practitioners to discuss experiences in the implementation of the mandatory reporting requirements and this creates the potential for conflicted guiding principles with regard to respect for confidentiality, dignity and rights of survivors.
- The processes for avoiding putting survivors at risk of harm are not adequately defined, especially pertaining to risks associated with perpetrators, communities and referring criminal acts of SEA to national authorities.
- Jurisdiction over SEA allegations is not always clear when reporting, especially when there are multiple agencies in a given setting.



Key Recommended Actions

- Develop dos' and don'ts for investigators on interacting with SEA survivors and better addressing their protection needs⁹.
- Increase capacity building for investigators (experience, skills and attitudes), to understand and sensitively deal with SEA survivors (e.g. create the appropriate atmosphere to elicit information, know how to avoid re-traumatizing survivors).
- Where appropriate, consider alternatives to in-person interviews with survivors, such as interviews with GBV case management service providers and written statements based on the survivor's consent.
- Harmonise anonymous complaints procedures amongst humanitarian organisations and clearly communicate the option to raise anonymous complaints to community members.
- Ensure at all times, investigation processes are informed by the survivors' wishes, along with creating an internal risk assessment to identify the best options for providing support and services.
- Build the capacity of GBV legal service providers on PSEA investigation processes.
- When undertaking an investigation, the investigation team, when possible, should consult a GBV specialist to ascertain whether the investigation would draw attention and breach confidentiality, putting the survivor of SEA at risk of harm.
- Liaise with investigators or investigation services to understand how complaints can be made while also protecting the survivors.



9. Refer also to IASC/UNHCR SEA Investigations E-Learning for partners <https://interagencystandingcommittee.org/iasc-champion-protection-sexual-exploitation-and-abuse-and-sexual-harassment/investigating-allegations-sexual-exploitation-and-abuse-toolkit-partners>

Linkages between PSEA systems and existing GBV support services in humanitarian contexts



Key Challenges

- GBV referral pathways often do not include explicit information on SEA victim assistance, including how to report an incident.
- PSEA practitioners are often not accessing information on available GBV services to refer SEA survivors because these types of services might be informal or discreet due to their sensitive nature.
- Organisations' in-country PSEA focal points and other personnel in charge of handling SEA complaints do not always find existing GBV referral pathways easy to understand and use.
- GBV referral pathway information and barriers for SEA survivors to seek help, are often not incorporated in PSEA training and workshop materials.



Key Recommended Actions

- Coordinate with GBV sub-cluster coordinators to advocate for quality assistance based on the existing GBV support services.
- Ensure GBV services are offered to survivors of SEA through one system and available services to the extent possible.
- Share in-country updated GBV referral pathways (or a GBV SOP, if established) with PSEA coordinators and networks (also include HC/RCs where appropriate) at the earliest stage of an emergency.
- Ensure inclusion of Inter-agency SEA complaints mechanisms (e.g. hotlines) in the GBV referral pathways/GBV SOPs where possible.
- Coordinate with GBV sub-clusters to train in-country PSEA focal points on the use of the GBV referral pathways/GBV SOPs.
- Develop and maintain links between PSEA and GBV area of work by ensuring GBV practitioners are involved in developing PSEA SOPs.
- Develop joint guidance/technical notes related to risk assessments and mitigation measures to ensure coherence and consider joint efforts to standardise approaches.
- Promote joint PSEA/GBV learning opportunities at the global and field level.
- Ensure separation between PSEA and GBV coordination mechanisms. The PSEA coordinator should not be the same person as the GBV sub cluster coordinator.



