**Protection against Sexual Exploitation and Abuse**

Inter-Agency Standing Committee (IASC)

Indicators Guidance Note

IASC PSEA Country-Level Framework

**September 2020**

**Table of Contents**

[**Acronyms** 3](#_Toc82691348)

[**Purpose** 5](#_Toc82691349)

[**Intended Audience** 5](#_Toc82691350)

[**Results Structure relevant to the HRP** 5](#_Toc82691351)

[**Monitoring Progress** 6](#_Toc82691352)

[**IASC PSEA Country-Level Framework for HRP proposals** 7](#_Toc82691353)

[**Indicators Guidance** 7](#_Toc82691354)

[**Priority Results for PSEA** 7](#_Toc82691355)

[**OUTCOME 1. Safe, accessible, child-sensitive mechanisms are in place for reporting SEA, particularly in high-risk areas.** 7](#_Toc82691356)

[Output 1.1. Safe, accessible, child-sensitive mechanisms are in place for reporting SEA, particularly in high-risk areas. 7](#_Toc82691357)

[**Output indicator 1.1.2.** Number and Percentage of children and adults who have access to a reporting mechanism that can handle SEA complaints. 7](#_Toc82691358)

[Output 1.2. Community mobilisation, consultation, and awareness-raising on PSEA in each community receiving and/or affected by humanitarian assistance. 9](#_Toc82691359)

[**Output Indicator 1.2.1.** Percentage of the affected population (disaggregated by sex and age) reached through consultation in the establishment of community-based complaint mechanisms (CBCMs), awareness activities and community mobilisation interventions on PSEA including how to report SEA-related complaints. 9](#_Toc82691360)

[**Output indicator 1.2.2.** Percentage of sites reached with communications materials on PSEA, how to report on SEA and how to access victim/survivor-centred assistance (disaggregated by type of PSEA communication materials developed for each population group identified). 9](#_Toc82691361)

# **Acronyms**

|  |  |
| --- | --- |
| AAP | Accountability to Affected Population |
| CBCM | Community-Based Complaints Mechanisms |
| CBPF | Country- Based Pooled Fund |
| CERF | Central Emergency Response Fund |
| CHS  CP | Core Humanitarian Standards  Child Protection |
| HC | Humanitarian Coordinator |
| HCT | Humanitarian Country Team |
| HRP | Humanitarian Response Plan |
| IASC | Inter-Agency Standing Committee |
| MOS  NGO | Minimum Operation Standards  Non-Government Organisation |
| PSEA | Protection against Sexual Exploitation and Abuse |
| RC | Resident Coordinator |
| RCCE | Risk Communication and Community Engagement |
| SEA  SH | Sexual Exploitation and Abuse  Sexual Harassment |
| SOP | Standards Operation Procedures |

# **Purpose**

The objective of Inter-Agency Standing Committee (IASC) Protection Against Sexual Exploitation and Abuse (PSEA) Country Level Framework is to track progress on [the acceleration of PSEA within humanitarian response at country-level](https://interagencystandingcommittee.org/system/files/iasc_plan_for_accelerating_psea_in_humanitarian_response.pdf) in order to inform where further action is needed. The indicator guidance is also intended to support the integration of PSEA within the humanitarian programme cycle.

# **Intended Audience**

The IASC PSEA Indicator Guidance note is intended for Humanitarian Coordinators (HCs), Humanitarian Country Team (HCTs), PSEA Coordinators, PSEA Network and/or Task Force to guide them on PSEA monitoring of progress. It follows the [2017 IASC Standard Terms of Reference for HCT](https://interagencystandingcommittee.org/system/files/hct_tors.pdf) that made PSEA a mandatory responsibility and requires a collective mechanism and approach to address SEA. The guidance also aligns with [IASC principals plan to accelerate PSEA in humanitarian response](https://interagencystandingcommittee.org/system/files/iasc_plan_for_accelerating_psea_in_humanitarian_response.pdf) at country-level[[1]](#footnote-1). The plan outlines priority outcomes for HCs and HCTs to deliver with the support of a dedicated inter-agency [PSEA coordinator](about:blank) and [PSEA network](about:blank).

# **Results Structure relevant to the HRP (focused on output one)**

The results structure is divided into two main parts. The first part is concerned with PSEA priority results: safe and accessible reporting, quality victim/survivor assistance, and accountability and investigations. The second part of the PSEA results structure focuses on PSEA inter-agency structure at country level. IN here we will address three indicators related to the first part relevant for your HRP submission, which pertain to Outcome one of the PSEA Country level framework:

**Outcome 1. Safe and accessible reporting:** Every affected child and adult recipient of humanitarian assistance has access to a safe, gender and child-sensitive pathways to report SEA (through community-based complaints mechanisms)[[2]](#footnote-2) that reach where humanitarian assistance reaches, are appropriate to the context and are accessible to the most vulnerable).

Output 1.1. Safe, accessible, child-sensitive mechanisms are in place for reporting SEA[[3]](#footnote-3), particularly in high-risk areas.

Output 1.2. Community mobilization, consultation, and awareness-raising on PSEA in each community receiving and/or affected by humanitarian assistance.

The results and indicators in the PSEA Country Level Framework are the HC minimum reporting requirements to ERC under 2015 Principals Statements and Acceleration Plan[[4]](#footnote-4) for priority countries in addressing SEA.

# **Monitoring Progress**

The following indicators are included as part of the vetting process of the HRP. The results will feed into IASC reporting on PSEA. It includes ongoing commitments under the IASC toward achieving the target described by the UN Secretary General’s Strategy on PSEA and outlined in his [2017 Special measures for protection from sexual exploitation and abuse: a new approach Report of the Secretary-General](https://undocs.org/A/71/818), [IASC Strategy for PSEA and Sexual Harassment (SH)](https://interagencystandingcommittee.org/iasc-champion-protection-sexual-exploitation-and-abuse-and-sexual-harassment/strategy-protection)[[5]](#footnote-5) and [IASC Plan for Accelerating Protection from Sexual Exploitation and Abuse in Humanitarian Response at Country-Level](https://reliefweb.int/sites/reliefweb.int/files/resources/iasc_plan_for_accelerating_psea_in_humanitarian_response.pdf). A set of key indicators within the IASC PSEA Country Level Framework will be visualized and regularly tracked on the IASC PSEA [Global Dashboard](http://app-psea.jebbjebcph-rz83yvo5p3d7.p.runcloud.link/dashboard).

**Modality and Frequency Reporting**: IASC PSEA Technical Expert Group through the Field Support Coordinator will collect data twice a year.Progress reports will be integrated into the Humanitarian Response Plan (HRP) reporting cycle**.**

**Baseline Data** for PSEA will be calculated based on country HRP target population from populations in need of humanitarian assistance. At country levels the designated PSEA target population.

**Target setting:** PSEA targeted should equal the total number of women, girls, men, and boys targeted by the HRP interventions across agencies/organisations. The actual number of people reached may not necessarily equal the target due to various factors (such as limited services in some locations, information sharing not meeting the quality standards, etc

# **IASC PSEA Country-Level Framework for HRP proposals**

***The PSEA Country-Level Framework template outlines the priority results that HCT members will work jointly to achieve in all humanitarian countries.[[6]](#footnote-6) It is intended to be further adapted and contextualised at the country level, as appropriate. It is not intended to capture the full range of activities that contribute to achieving the results below, which would be determined at country level in the country-level Work Plan (see attached). The framework provides the basis for tracking progress and resource needs on PSEA priority areas as identified in the IASC Acceleration Plan across all IASC humanitarian countries. Guidance on meeting Indicators of the Framework is provided in the accompanying Indicators Guidance Note.***

# **Indicators Guidance**

|  |  |
| --- | --- |
| **Priority Results for PSEA** | |
| **OUTCOME 1. Safe, accessible, child-sensitive mechanisms are in place for reporting SEA[[7]](#footnote-7), particularly in high-risk areas.** | |
| Output 1.1. Safe, accessible, child-sensitive mechanisms are in place for reporting SEA[[8]](#footnote-8), particularly in high-risk areas. | |
| **Output indicator 1.1.2.** Number and Percentage of children and adults who have access to a reporting mechanism that can handle SEA complaints. | |
| Definition and description | This indicator focuses on access to reporting SEA, and regular monitoring of this indicator is needed to respond to SEA risks that communities face in particular children and women. It also measures number of affected populations that have reasonable access to safe channels to report SEA and addresses the quality of established feedback mechanisms.  SEA complaints must be integrated into the overall complaint and feedback system. CBCM is not to set up a separate separated system for SEA, instead make it part of the overall community complaints system which is part of a larger system of accountability to the affected population. However, SEA should be clearly established as a specific type of complaint that can be received.  A community-based approach adds efficiency to the reporting mechanism by incorporating local solutions into the overall system. A successful complaints mechanism will ensure the full participation of the community, through integrating formal and/or informal community structures. These structures are fully accessible to community members and have authority, even though not always legally mandated. However, community structures within the overall complaint system must be identified and carefully assessed, built upon, and linked to other systems of the overall complaint and feedback mechanisms. Capitalizing on their access and authority will bring the added value of reducing underreporting of SEA[[9]](#footnote-9).  GBV and child protection interventions remains an essential entry point for reporting SEA allegations. HCT and partners are accountable to PSEA and must ensure that populations are protected from PSEA by UN and humanitarian workers.  Based on the country context, [complaints, feedback, and information requests](https://interagencystandingcommittee.org/system/files/2020-04/One-pager%20-%20Interagency%20Community%20Outreach%20and%20Communications%20Fund%20on%20PSEA.pdf) on PSEA could be received through a range of new or already established community feedback mechanisms such as:   * Hotlines, information centres * Assessments, surveys, focus group discussions * Digital engagement Platform (social media, radio) * Interactive messaging platforms (WhatsApp, Facebook, Twitter) * Media call-ins (TV, radio programs) * Community platforms, feedback boxes   Except for a joint hotline or call centre, individual Network member agencies are responsible for establishing such mechanisms. Linking all such mechanisms so that complaints may be referred to the concerned agency is accomplished by the CBCM SOPs.    [*PSEA Focal points*](about:blank) must be accessible to communities (example: if a target person is the PSEA Focal Point and communities have difficulties accessing the office – cannot be considered)[[10]](#footnote-10).  The first step is to identify and map points of contact with communities  **\*** Does this programme have direct contact with communities?  **\*** Are PSEA messages included in the programme interventions?  **\*** Do messages include at a minimum: i) key definitions of SEA and obligations of staff/partners; ii) 1 mechanism (hotline number, focal point, feedback box, etc.) for feedback or complaints.  **\*** Which channels are used to disseminate the messages?  \* Have feedback mechanisms been developed or strengthened and capacity built to include handling SEA reporting and referral? |
| Methods for data collection and calculation | The indicator calculates number and percentage of people that can reasonably access SEA reporting channels in each humanitarian operation supported community including children and women. For example, the indicator counts the   * number and percentage of users that can reasonably access a hotline or call centre that is capacitated to receive and refer victim/survivor of sexual exploitation and abuse * number and percentage of people reached with key messages and information about how to report sexual exploitation and abuse * number and percentage of persons that can be reached by HCT members and partners trained PSEA focal points in supported communities * number and percentage of people that receive services through HRP and other humanitarian assistance supported communities with clearly displayed phone number for how to report SEA and who have access to a phone to do so; etc.   A site is defined as a physical location receiving humanitarian support, such as a community centre, women centre, child-friendly space, etc.  The following steps could be considered to:   * Estimate the number of disaggregated data by sex and age of people in the areas targeted, using population data, and information on coverage of the delivery mechanisms. * Establish whether and how persons are aware that SEA concerns can be reported through such channels. * What procedures will be followed to access and use them (e.g. HCT and partner organisations conducted community sensitization, PSEA training, radio programming, etc.) to disseminate information about PSEA and how to report in a particular area. Provide estimations taking into account the ratings for specific media platforms they use and the frequency/length of exposure to the messaging. * 100% of children and adults who are aware of the PSEA reporting channels will not be able to access complaint mechanisms no matter how effectively designed or managed. * In coming to the final figure of target populations and reach, it is important to document the rationale for setting targets and reporting, including a short narrative in the report.   *Reasonable access should consider:*   * More than one complaint channel is available * Well established/trusted by women, girls, men, and boys, including the most vulnerable * 100% of people will not be able to access complaint mechanisms no matter how effectively designed or managed; Reported reach should be calculated based on this assumption and use estimates in line with other similar activities (e.g. RCCE, AAP, etc.). |
| Data Disaggregation | **Disaggregation:** by sex and age  Percentage of  Children (0-17 year): boys and girls >> boys + girls = total children  Adults (over 18 years): men and women >> men + women = total adults  Overall total = sum of adults and children of people in need of humanitarian assistance.  Total number of people targeted in HRP: [total number (all ages and both sexes) among overall targeted] |
| Output 1.2. Community mobilisation, consultation, and awareness-raising on PSEA in each community receiving and/or affected by humanitarian assistance. | |
| **Output Indicator 1.2.1.** Percentage of the affected population (disaggregated by sex and age) reached through consultation in the establishment of community-based complaint mechanisms (CBCMs), awareness activities and community mobilisation interventions on PSEA including how to report SEA-related complaints. | |
| Definition and description | The indicator tracks the percentage of the affected population reached through consultation in establishing CBCMs, awareness and community mobilisation on PSEA (e.g. face to face, digital, etc.). Collective awareness-raising activities should be integrated into the PSEA Network Work Plan to ensure appropriate and consistent PSEA messaging to communities as in community engagement initiatives described in the forthcoming [IASC PSEA Website](https://psea.interagencystandingcommittee.org/).  **Disaggregation:** By sex, by age (Under 18; 18 and above), by types of community mobilisation interventions, including sensitization of adult and children in HRP supported sites such as schools, Child-Friendly Spaces, transit centres, children’s clubs etc. |
| Methods for data collection and calculation | Count the percentage of children and adults by age and sex who received by phone, online, radio, TV, community loudspeakers or in-person community-based PSEA including SEA related complaints.  Disaggregation of numbers & percentage of targeted/reached through direct or indirect support must be documented to capture the support children, and women received.  Aggregate the percentage of adult and children who participated in awareness activities and those who were reached through community mobilisation interventions.  Percentage of adult and children reached through awareness activities, and PSEA Network supported community mobilisation interventions on PSEA.[[11]](#footnote-11)  Percentage of PSEA network supported sites/localities which have communications materials on how to report on SEA and victim/survivor-centred assistance.[[12]](#footnote-12) |
| Data Disaggregation | Percentage of persons supported = men+ women +girls + Boys among targeted communities  Percentage of children (0-17 year): boys and girls >> [boys + girls = total children]  Total percentage of adults (over 18 years): men and women >> [men + women = total adults] |
| **Output indicator 1.2.2.** Percentage of sites reached with communications materials on PSEA, how to report on SEA and how to access victim/survivor-centred assistance (disaggregated by type of PSEA communication materials developed for each population group identified). | |
| Definition and description | The indicator focuses on communications activities through messaging on the prevention of SEA and access to services. Modalities for risk communication and community engagement could, depending on country context, include:   * mass media channels (e.g. TV and radio programs, spots, advertisements, PSAs, journal articles) * distribution of IEC materials, leaflets, posters * social media and webpages * street announcements (loudspeaker/ megaphones) * songs, street theatre, other creative media * SMS, rob calls/automated messaging |
| Methods for data collection and calculation | **Target setting:** The target for humanitarian response PSEA indicator should be equal to the total number of women, girls, men, and boys targeted by all HRP supported and other communities’ interventions. The actual number of people reached through HRP may not necessarily equal the target due to several factors such as limited services, or external funding to the HRP that might increase the number of reached population.  **Method of calculation:** The first step is to identify and map all communities in each cluster (this information is usually available in HRP as well as OCHA monitoring and reporting reports). Other interventions beyond HRP funded response can be added if the information is available. The second step is to report the actual percentage of people reached with PSEA messages (e.g. viewers, receivers, listeners, readers, etc.).  It is possible that the same people could have been reached through multiple channels. To the extent possible, double counting of persons should be avoided. The highest number of people reached in a given geographical location or targeted group will be reported.  PSEA interventions should identify direct contact with communities:  \* PSEA messages included in humanitarian interventions  \* Quality of messages which should include at a minimum key definition of SEA and obligations of humanitarian personnel; at least one mechanism for feedback or complaints (e.g. focal point, feedback box, hotline number etc.). The [UN Glossary on SEA](https://hr.un.org/sites/hr.un.org/files/SEA%20Glossary%20%20%5BSecond%20Edition%20-%202017%5D%20-%20English_0.pdf) includes UN-approved, SEA-related definitions. More inter-agency related, IASC-endorsed definitions are in the [Global SOPs](https://interagencystandingcommittee.org/accountability-affected-populations-including-protection-sexual-exploitation-and-abuse/documents-51).  \* Channels used to raise awareness on SEA such as visual support, phone/remote interaction; face to face, radio/media communication etc.  The indicator counts women, girls, men, and boys that can reasonably access to at least one SEA reporting channel in HRP supported communities: e.g.  \* Percentage of users that can reasonably access a hotline, call centre or in-person for a face to face to get information on SEA and actors who have been capacitated to receive and refer victim/survivors to SEA.  \* Percentage of children and adult that can reach PSEA network focal points of GBV services at a physical location receiving humanitarian support, such as a community centre, child-friendly space, feeding centre, WASH, school, health centres, refugee or IDP camps etc. Other location where assistance is provided could be defined as a village, town or city that has trained focal points that can receive and respond to SEA, which are accessible to children and adults.  The following step might be considered to estimate the number of persons reached by:  \* Estimating the number of children and adults in the areas targeted, using population data, and information on coverage of the humanitarian assistance delivery mechanisms.  \* 100 per cent of children and adults who are aware of PSEA reporting channels will unlikely have access to complaints and feedback mechanism.  \* To come up with the final number of targeted and reached, rationale for setting the targets should be based on HRP targets.  Percentage of persons reached in sites/communities targeted for humanitarian response. |
| Data Disaggregation | Children (0-17 year): boys and girls >> boys + girls = total children]  Adults (over 18 years): men and women >> men + women = total adults  Overall total = sum of adults and children |

1. See IASC Plan for Accelerating PSEA at country level, 2018-2020 [↑](#footnote-ref-1)
2. Community-based complaints mechanisms are a Complaints Mechanism system blending both formal and informal community structures, built on engagement with the community where individuals are able and encouraged to safely report grievances – including SEA incidents – and those reports are referred to the appropriate entities for follow-up. See further information https://interagencystandingcommittee.org/system/files/best\_practice\_guide\_inter\_agency\_community\_based\_complaint\_mechanisms\_1.pdf [↑](#footnote-ref-2)
3. Type of mechanism and targeted locations to be determined by each HCT based on context and existing channels/mechanisms for reporting already functioning as appropriate per the country context. [↑](#footnote-ref-3)
4. IASC Plan for Accelerating Protection from Sexual Exploitation and Abuse (PSEA) in Humanitarian response at Country-Level endorsed by IAC Principals on 3 December 2018. https://www.unocha.org/sites/unocha/files/IASC%20Plan%20for%20Accelerating%20PSEA%20in%20Humanitarian%20Response.pdf [↑](#footnote-ref-4)
5. IASC Strategy for Protection from Sexual Exploitation and Abuse and Sexual Harassment [↑](#footnote-ref-5)
6. This applies to refugee and humanitarian context which could either be sub-national or regional in nature. [↑](#footnote-ref-6)
7. [↑](#footnote-ref-7)
8. Type of mechanism and targeted locations to be determined by each HCT based on context and existing channels/mechanisms for reporting already functioning. This could include, for example, phone hotlines, SMS, PSEA focal points, service points, etc. This could involve broader complaint channels that are strengthened with the necessary safeguards for reporting SEA, or training of PSEA focal points within protection-related services to support reporting and referrals, and/or other systems, and/or a combination of the above, as appropriate per the country context.

   **For additional information and resources:**

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

   <http://www.pseataskforce.org/>

   <https://interagencystandingcommittee.org/system/files/best_practice_guide_inter_agency_community_based_complaint_mechanisms_1.pdf>

   <https://interagencystandingcommittee.org/system/files/2020-04/IOM%27s%20FAQs%20on%20Inter-Agency%20PSEA%20%282019%29_0.pdf> [↑](#footnote-ref-8)
9. Guidelines on Setting Up a Community Based Complaints Mechanism Regarding Sexual Exploitation and Abuse by UN and non-UN Personnel. https://pseataskforce.org/uploads/tools/1351822689.pdf [↑](#footnote-ref-9)
10. COVID-19 specific considerations: ensure that face to face interactions are in line with standards (i.e. do not create risks of transmission) through provision of PPE, sanitizing materials, physical distance [↑](#footnote-ref-10)
11. Disaggregated by age and sex: under 18; 18 and above; types of community mobilization interventions, including sensitization of children in Clusters / Sectors supported sites such as such as schools, Child Friendly Spaces, transit centers, children’s clubs etc. [↑](#footnote-ref-11)
12. Posters, child-friendly materials, etc. [↑](#footnote-ref-12)