

# A checklist on Safeguarding: A resource for Local and National CSOs during COVID-19 response April 2020

#### Introduction

The COVID 19 global Pandemic is a public health, economic and social crisis. Local and national civil society will play a critical role in supporting their governments to respond. During this difficult time ensuring accountability to affected populations and prevention of and protection from sexual exploitation and abuse, while receiving assistance, is crucial.

## **Purpose**

The purpose of this checklist is to assist Local and National CSOs to reflect on what measures are already in place and what extra practices need to be put in place to reduce the risk and to respond appropriately to SEA during COVID 19. We recommend that the Senior Management and PSEA focal points work through the questions in each section, to ensure a systemic approach to dealing with SEA. This exercise will also help you to reflect on the additional resources that you may require from your partner and how you can include that in your partnership dialogue. This checklist has been adapted from the Interim Technical Note, *Protection from Sexual Exploitation and Abuse (PSEA) during COVID-19 Response*<sup>1</sup>, specifically for local and national actors. This guidance will assist you in continuing to promote the culture of safeguarding. The resource page provides additional documents and information on training that may be available. You should also connect with in-county PSEA network where it exists for resources available in country in appropriate languages. The IASC 6 Core Principles have been translated to over 100 languages.

#### **Increased risks**

Experience from past emergencies has shown that during scaling up of humanitarian response the risk of SEA increases. The surge in new responders, increase in staff, volunteers and non-traditional responders, combined with high demand and shortage and insufficient or unequal supply of food, health, hygiene and other supplies, increases risks.

The risks are particularly high for women and children who may have greater difficulty in accessing services. Children, older people and persons with disability may be at particular risk because of separation from caregivers due to quarantines or severe illness and death. It may lead to SEA against children, girls, including child/forced marriage or transactional sex<sup>2</sup>.

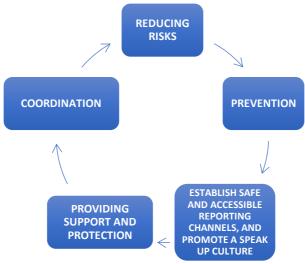
Disruption to livelihoods, public services, food supplies and freedom of movement can exacerbate SEA risks for already-vulnerable populations. Refugees, internally displaced in camps and outside, migrants, as well as other marginalised populations, will be particularly at higher risk. The power to decide who can access the scarce resources such as health care and food etc. can lead to abuse of power and SEA. Increased economic and legal vulnerability can lead to negative coping strategies, again increasing the risk of SEA.

<sup>&</sup>lt;sup>1</sup> Interim Technical Note - Protection from Sexual Exploitation and Abuse (PSEA) during COVID-19 Response, Version 1.0, March 2020, WHO, UNFPA, UNICEF, UNHCR, WFP, IOM, OCHA, CHS Alliance, InterAction, UN Victims' Rights Advocate

<sup>&</sup>lt;sup>2</sup> CARE, "Gender implications of COVID-19 outbreaks in development and humanitarian settings", March 2020. P4

#### RECOMMENDED ACTION

The measures below are recommended actions that can be taken to prevent and respond to SEA. The questions are there to guide you through various aspects of PSEA and help you think about the practices required. It is recommended that the management and PSEA focal points work together through these questions systematically. You may also consider working with others and your partners to maximise your resources.



Below are guiding questions to help you to take measures to reduce risks and to respond to SEA:

#### **REDUCING RISKS**

- Have you designated a PSEA Focal Point to work with staff and community (particularly women, children, older people, persons with disability and other vulnerable groups in your context) to identify SEA risks in designing and implementation of the COVID-19 response?
- Have you examined and mitigated potential SEA risks in aid and assistance delivery settings, including through comprehensive training of volunteers and personnel?
- Have you outlined actionable and feasible measures on how to minimize these SEA risks?
- Have you introduced or reinforced PSEA Codes of Conduct for all staff and volunteers?
- Have you set up access to safe and appropriate complaints and feedback mechanisms in programme settings? Have you checked with the target populations whether they consider them safe and appropriate?
- Have you Implemented risk mitigation measures in quarantine facilities and areas under curfew, especially for groups at heightened risk of Gender-Based Violence, including SEA?
- Are you extra vigilant in shelters, alternative care settings, transit centres, day-care facilities, and other settings where women and children depend on assistance?
- What action have you taken to Identify, and respond to, additional protection issues that may be required in your context?

## **PREVENTION**

- Have you circulated PSEA Codes of Conduct (CoC) and other safeguarding measures and verbally reminded staff of their obligation?
- Have you reaffirmed the zero tolerance commitments in respect of SEA?
  - Are your PSEA focal points and management responsible for investigating SAE on high alert, given the heightened risks of SEA?
  - Are you making every effort to ensure complaint channels remain open and perpetrators are held accountable?
  - Are you ensuring that regular safeguards are maintained during recruitment procedures (in particular of health personnel and other personnel, in light of expedited recruitment procedures?) Is it clear that volunteers even if not paid or less so, are under the same obligations as others? Is PSEA an explicit part of their introductory briefing?

## **Communication**

- ➤ Are you ensuring that community sensitization and awareness-raising materials are available and visible in local languages, with clear information on how to report SEA in all your COVID response operations?
- Are your communication methods and materials accessible for women and girls, boys and other groups at heightened risks of SEA (in particular older people, persons with disabilities and other identified vulnerable groups in your context)?
- > Are you disseminating through channels deemed safe by affected communities and in line with public health safety measures?
- Are you adapting, translating and disseminating key messages on PSEA through appropriate channels available to you and your partner network? (radio, tv, social media, print and other mediums).

# Messaging

- Are you emphasizing that all kinds of humanitarian aid and assistance is free and that no sexual or other favour can be requested in exchange?
- > Are you sending out clear messages of zero tolerance of sexual exploitation and abuse?
- > Do people know that any case or suspicion of sexual exploitation and abuse by any assistance providers can be reported? Have you allocated a hotline or contact number of PSEA focal point/s?

# ESTABLISING SAFE AND ACCESSIBLE REPORTING CHANNELS, AND PROMOTING A SPEAK UP CULTURE

➤ Have you established or are you strengthening the existing complaints channels to receive and handle sensitive complaints, including SEA, across the COVID-19 response?

- > Where in-person complaints and feedback channels are suspended because of social distancing, are you working with the community to ensure that other channels are identified, with full attention to preserving safety, confidentiality and victim-sensitivity?
- Are you consulting on preferred alternatives involving women, girls, boys, older persons and person with disabilities and other vulnerable groups?
- > If there have been changes in your normal mechanism, have you informed the whole community about them, including identified vulnerable groups that you work with? What can you do to make sure they understand the changes?
- > Have you considered the most appropriate methods of communication to inform about these changes, so it can reach the affected population in the right languages and the right medium so they can comprehend the messages?

# PROVIDING SUPPORT AND PROTECTION

- > Are you aware of what assistance could be available for victims?
- Have you mapped the existing available support mechanisms at community level for health, psychosocial, shelter, economic and other needs in your locality?
- ➤ Have you trained all PSEA focal points on the requirements to promptly refer survivors of SEA for assistance through existing pathways?
- ➤ Are you working with the relevant government ministries and service providers, including the community based Gender-based Violence (GBV) and Child Protection groups who have been trained already, to integrate the referral pathways for assistance and support within PSEA complaint channels?

#### COORDINATION

- > Are you collaborating with other organisations in your locations, to identify high-risk areas and share information and communication campaigns?
- ➤ Have you Identified PSEA focal points within health structures in your locality and informed health staff about the role of PSEA focal points?
- Are you asking for support where needed from your partners and in-country PSEA network where it exists?

#### Resources

# IASC 6 Core Principles Relating to Sexual Exploitation and Abuse (SEA)

- 1. "Sexual exploitation and abuse by humanitarian workers constitute acts of gross misconduct and are therefore grounds for termination of employment.
- 2. Sexual activity with children (persons under the age of 18) is prohibited regardless of the age of majority or age of consent locally. Mistaken belief regarding the age of a child is not a defence.
- 3. Exchange of money, employment, goods, or services for sex, including sexual favours or other forms of humiliating, degrading or exploitative behaviour is prohibited. This includes exchange of assistance that is due to beneficiaries.
- 4. Any sexual relationship between those providing humanitarian assistance and protection and a person benefitting from such humanitarian assistance and protection that involves improper use of rank or position is prohibited. Such relationships undermine the credibility and integrity of humanitarian aid work.
- 5. Where a humanitarian worker develops concerns or suspicions regarding sexual abuse or exploitation by a fellow worker, whether in the same agency or not, he or she must report such concerns via established agency reporting mechanisms.
- 6. Humanitarian workers are obliged to create and maintain an environment which prevents sexual exploitation and abuse and promotes the implementation of their code of conduct. Managers at all levels have particular responsibilities to support and develop systems which maintain this environment."

The <u>Core Humanitarian Standard on Quality and Accountability (CHS)</u> sets out core commitments and provides a principled and people-centered approach. As the world races to respond to the global outbreak of COVID-19, it is vital that the views and rights of affected people are respected. Key CHS PSEA commitments relevant to this response include Commitment 3: Humanitarian response strengthens local capacities and avoids negative effects and Commitment 5: Communities and people affected by crisis have access to safe and responsive mechanisms to handle complaints. Commitment 6: Humanitarian response is coordinated and complementary <u>IASC Minimum Operating Standards on PSEA</u> ensure there is a common set of requirements that all agencies follow.

<u>United nations protocol on the provision of assistance to victims of sexual exploitation and abuse, 12</u>

<u>December 201</u>9. Also available in French, Spanish, Arabic and Russian

<u>Gender Based Violence tools and resources for COVID-19 response</u> Includes Guidance Note on GBV Service Provision and <u>Case studies/best practices/examples from the field</u>

<u>COVID-19 resources to address gender-based violence risks</u> This page contains COVID-19-specific resources and pulls from the knowledge-base of Ebola, Zika and Cholera outbreaks.

<u>COVID-19: Inclusive Programming-Ensuring Assistance and Protection Addresses the Needs of Marginalized and At-Risk People</u>

guidance and messages from the ICRC Operations Diversity Inclusion, Sexual Violence and Protection from Sexual Exploitation and Abuse teams, in collaboration with the Global Adviser on Children.

**InterAction** No Excuse for Abuse Video (Subtitles available in Arabic, English, Filipino, French, Indonesian, Portuguese, Spanish, Swahili, and Turkish) is to educate staff, including contractors and short-term workers, on the six core principles of PSEA. <u>Training</u>: Courses and modules knowledge of sexual abuse and exploitation and how to address it.

**Bond UK:** has a set of guidance and toolkit that can be adapted for country context, <a href="https://www.bond.org.uk/resources-support/safeguarding">https://www.bond.org.uk/resources-support/safeguarding</a>

Safeguarding report-handling toolkit: This toolkit provides principles and a description of the core elements of a safeguarding report-handling mechanism. The elements and principles described in the toolkit can help you to evaluate the safeguarding reporting-handling mechanism you have to identify strengths, weaknesses, or gaps. <a href="https://www.bond.org.uk/resources/safeguarding-toolkit">https://www.bond.org.uk/resources/safeguarding-toolkit</a>

Case study: Working with partners to safeguard children and adults at risk ChildHope's approach to safeguarding <a href="https://www.bond.org.uk/sites/default/files/bond">https://www.bond.org.uk/sites/default/files/bond</a> case study - working with partners.pdf

# **Global Mentoring Initiative:**

GMI believes that organisations need robust policies and procedures, however, these are not enough. More focus needs to be centred on organisational and team culture. Many teams (especially in the non-profit sector) work in very difficult conditions under tremendous pressure and stress. They are just surviving. We have also observed how these external challenges often have negative consequences at a personal or interpersonal level, such as burnout, workplace harassment, breakdown in trust and relationships. Many organisations try to mitigate these by putting in place well-intentioned safeguarding procedures and policies, however, we have come to realize that these are only one dimension and temporary fixes at best. Too often the same issues resurface again and again because policies and procedures are not enough without change in attitude and mind-sets. We have concluded that the real solution must involve re-thinking and re-inventing the work environment we create as leaders and as team members. Only then will we be able to truly serve our staff, partners and communities in a sustainable way. GMI believe that organisations need robust policies and procedures, however, these are not enough. More focus needs to be centred on organisational and team culture.

Your feedback is always welcome, we would like to hear if this was a useful tool and how we can improve it. If you are looking for support on Safeguarding get in touch <a href="mailto:spatel@gmentor.org">spatel@gmentor.org</a>. We especially support local and national organisations to developed contextual policies and a culture of safeguarding through participatory processes. More information on <a href="mailto:equitable-partnerships">equitable-partnerships</a> and other resources can be found on <a href="mailto:www.gmentor.org">www.gmentor.org</a>.