

COVID-19 and Prevention of Sexual Exploitation and Abuse (PSEA)
Guidance Note No 1
Lebanon In-Country PSEA Network
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“All people should remain safe from sexual exploitation and abuse while receiving humanitarian aid, including health services and treatment, (...). If sexual exploitation and abuse does occur, they should have access to safe and confidential reporting channels and services.”¹

The outbreak of COVID-19 is severely affecting everyone in Lebanon and around the world. Experience from previous health emergencies, such as the Ebola Virus Disease (EVD) epidemics in West Africa and the Zika virus outbreak, have shown that **sexual and gender-based violence (SGBV) is likely to increase as families are confined to their homes, schools are closed, movement restrictions increased and access to critical services and livelihoods may be compromised.**² Experience from previous health emergencies have also shown that **the risk of sexual exploitation and abuse (SEA) is exacerbated**, with affected populations expressing increased concerns over SEA.³ Overall, there are **increased risks, particularly for the most vulnerable, in crisis contexts and therefore strengthening our commitments to Accountability to Affected People (AAP) and Protection from Sexual Exploitation and Abuse (PSEA) is especially important.**

The **COVID-19 outbreak in Lebanon presents new challenges both for those responding to the health emergency and for those responding to pre-existing humanitarian and development needs.** This includes travel restrictions and stay-at-home orders, which impact the ability to monitor programmes in person; restrictions on in-person interaction with those receiving assistance and services due to efforts to minimize the spread of the disease; remote supervision of some frontline staff/volunteers; and increased restrictions on access to some communities. Disruptions to livelihoods and public services; closure of schools; unequal access to healthcare and food combined with increased needs; the impact of restrictions on freedom of movement and isolation measures on affected people’s access to services and assistance increase risks, as well as the potential for negative coping mechanisms. **Women, children, persons with disabilities and older people in particularly facing heightened protection risks.**

Given the current situation in Lebanon and a huge vulnerable population, including Syrian and Palestinian refugees, vulnerable Lebanese and migrant workers, with a large population dependent on humanitarian assistance, compounded by a severe economic crisis, **it is essential that humanitarian and development actors, including health responders, ensure prevention and response measures for sexual exploitation and abuse are part of all interventions.** The below considerations, recommendations, key messages and suggestions for reducing SEA risks are intended to support these efforts. See also the “Interim IASC Technical Note: Protection from Sexual Exploitation and Abuse (PSEA) During COVID-19 Response”, issued 31 March, for technical guidance.⁴

¹ Interim IASC Technical Note: Protection from Sexual Exploitation and Abuse (PSEA) During COVID-19 Response: <https://interagencystandingcommittee.org/other/interim-technical-note-protection-sexual-exploitation-and-abuse-psea-during-covid-19-response>

² See for example Gender Analysis: Prevention and Response to EVD in DRC, Nidha Kapur/Care International, January 2020: <https://reliefweb.int/report/democratic-republic-congo/gender-analysis-prevention-and-response-ebola-virus-disease>

³ See reports from the 2014–16 West Africa EVD outbreak and 2018–2020 EVD outbreak in Democratic Republic of Congo, including IRC’s report “Everything on Her Shoulders” (2019): <https://www.rescue.org/report/everything-her-shoulders-rapid-assessment-gender-and-violence-against-women-and-girls-ebola>

⁴ Interim IASC Technical Note: Protection from Sexual Exploitation and Abuse (PSEA) During COVID-19 Response: <https://interagencystandingcommittee.org/other/interim-technical-note-protection-sexual-exploitation-and-abuse-psea-during-covid-19-response>

Key considerations and recommendations:

- **Key staff:** Ensure key staff, including PSEA/Safeguarding and SGBV/protection staff are still working in the current context.
- **Organizational Code of Conduct:** Promote the organizational Code of Conduct, including measures and responsibilities regarding the prevention of sexual exploitation and abuse to all personnel, including temporary staff, contractors and volunteers.
- **Internal Reporting and Complaints and Feedback Mechanisms:**
 - 1) Review internal complaints handling procedures to ensure existing feedback mechanisms are still functional (e.g. hotlines are staffed, can responsible staff access complaints boxes, etc.) Where traditional reporting pathways (e.g. in person in Women and Girls Safe Spaces, community centres, in educational facilities/schools, etc.), are no longer accessible, consider putting in place alternative remote reporting options, for example via a telephone/hotline number, cases workers conducting remote follow up, etc. Ensure affected communities, in particular women and girls, are consulted on any changes to complaints and feedback mechanisms. Ensure any changes are communicated to affected communities in appropriate formats/ways.
 - 2) Check that internal reporting procedures are still fit for purpose with many key staff working remotely so that any complaints are safely, confidentially and quickly channeled to appropriate staff. If possible, ensure a variety of reporting channels.
 - 3) Promote safe, confidential complaints and feedback mechanisms with affected communities, making increased efforts to ensure those who are particularly at risk, such as persons with disabilities, children, adolescent girls, older people, child- or female-headed households, illiterate persons, LGBTQ community members, are aware of and have access to safe and confidential means for them to report concerns over sexual exploitation and abuse and other types of misconduct.
 - 4) With many key staff working from home, make sure that the complaint referral system within organizations and outside organizations are confidential and survivor-centred, for example, the IT infrastructure, record keeping, and office communication software are secure and in compliance with data protection standards.
- **Communicating with communities:** Ensure affected communities, including refugees and host communities, are informed of their rights and the standards of behaviour expected of all actors providing services and assistance. This can include through existing Facebook Groups, SMS or WhatsApp, information and/or flyers/information sheets included in packages of in-kind assistance, posters at relevant locations, and other means. Consult with affected communities on their preferred means of accessing information.
- **PSEA Trainings and support for national partners:** Provide staff and other personnel, including healthcare actors, with online training or refresher training with an emphasis on PSEA and wider safeguarding. This includes the PSEA core principles, internal reporting protocols, understanding referrals, ensuring a victim/survivor-centred approach, etc, also ensuring that frontline responders are aware of how to safely, appropriately and confidentially handle potential SEA disclosures. Consider increasing the number of trained safeguarding staff members. Provide support and training on PSEA to national partners, where required.

Online training resources include:

 - o <https://agora.unicef.org/course/info.php?id=7380> (UNICEF online training on PSEA, available in Arabic)
 - o <https://www.interaction.org/blog/no-excuse-for-abuse/> (6 min video, subtitles available in Arabic)

- **Ensure gender balance in team providing assistance:** Ensure gender-balance in teams providing assistance, in particular ensure that women are adequately represented in the provision of frontline services and assistance being provided, including in kind distributions and home visits, to address SEA risks.
- **PSEA risk assessment and mitigation measures:** Conduct a SEA risk assessment for the provision of services and assistance to identify potential SEA risks and to identify risk mitigation/management measures. All actors, including healthcare responders, should consider how different modalities for delivering assistance could inadvertently increase SEA risks within affected populations and identify appropriate and feasible measures to mitigate and address risks. This includes risks associated with the provision of in-kind and cash assistance, which is likely to increase in the coming period, and can expose women and girls and other at-risk groups to harassment and abuse. Measures such as ensuring gender parity in distribution teams, sensitizing teams to Codes of Conduct and PSEA, organizing separate distributions for at-risk groups, and ensuring information on PSEA and reporting options are readily available to all affected populations, including as flyers/leaflets within packages distributed (basic assistance, WASH, food, etc.) can help minimize SEA risks (please see Annex A for further guidance on SEA risk assessment and possible mitigation measures; see Annex B for suggested key messages).
- **Recruitment practices:** Ensure regular safeguarding practices continue to be applied during all recruitments. This includes conducting background and criminal checks for previous misconduct, including SEA.
- **Updated SGBV referral pathways:** Ensure relevant staff know how to respond if a case is reported and have access to an up-to-date version of the SGBV referral pathway during the COVID-19 situation; including the work modalities for provision of services (SGBV referral pathways are regularly updated through the SGBV Task Force and are also part of the Inter-Sector service mapping which will provide an online platform for available services).
- **Inter-agency SEA referrals:** The “Inter-Agency SEA referral pathway”, developed by the Lebanon PSEA Network, can guide referral of SEA allegations/cases between organisations (if an allegation is received by an organisation pertaining to a staff member from another organisation). The Inter-Agency PSEA Coordinator may also support inter-agency SEA referrals, if required (see contact details below). All inter-agency referrals should follow a survivor-centred approach and comply with confidentiality measures and data protection standards.
- **Key messaging:** Ensure key messages on PSEA is shared with affected communities and staff and promote a ‘speak up culture’. Please see Annex B for suggested key messages for communities and staff/personnel.
- **Coordinate with the PSEA Network:** Collaborate with the PSEA Network to share information on risks, prevention and response activities, communications and awareness raising, etc., as well as to receive support and guidance, including regarding investigations, if required. Contact the Inter-Agency PSEA Coordinator, Eva Modvig on modvig@un.org

Steps to support staff/personnel

- Where not already done, designate a PSEA Focal Point (or, if possible, multiple focal points – at national and field level) so staff may ask questions and have ongoing support;
- Ensure all staff/personnel are trained on PSEA and their roles and responsibilities, and ensure all staff are fully aware of internal reporting obligations and means for reporting on SEA allegations.
- Ensure Codes of Conduct are shared, explained to and signed by all personnel;

- Ensure all frontline staff understand key concepts and definitions related to PSEA and that relevant staff are trained on how to safely and confidentially handle complaints from SEA survivors and make referrals via SGBV referral pathways, according to the wishes of the survivor. Ensure PSEA focal points and other designated staff have received the UN Protocol for Providing Assistance to Victims of Sexual Exploitation and Abuse.⁵

Key definitions

Sexual Exploitation and Abuse⁶: Particular forms of GBV that have been reported in humanitarian contexts, specifically alleged against humanitarian workers.

- Sexual Exploitation: Any actual or attempted abuse of a position of vulnerability, differential power, or trust, for sexual purposes, including, but not limited to, profiting monetarily, socially or politically from the sexual exploitation of another.
- Sexual Abuse: The actual or threatened physical intrusion of a sexual nature, whether by force or under unequal or coercive conditions.

See below, Annex C for the IASC's Six Core Principles on PSEA.

Contact: Eva Modvig, Inter-Agency PSEA Coordinator for Lebanon - Modvig@un.org

Annex A – Sample Risk Assessment Tool for Interventions/Programmes

Note: The below is not intended as an exhausted list of potential questions or considerations. Also, SEA risks should be considered at all stages of the programme cycle or a particular intervention.

Focus	Key points to consider for risk mitigation	Possible Risk Mitigation Measures
Profile of groups receiving assistance	<ul style="list-style-type: none"> • Who will directly or indirectly be benefiting from this programme/intervention (e.g. what is the age (groups), gender, background, status, disabilities, etc.)? • What are some of the main characteristics that may render them more susceptible to SEA? Some individuals may have overlapping (inter-sectional) vulnerabilities (e.g. mothers with disabilities, ethnic minority women, girls subjected to child marriage, etc.). 	<ul style="list-style-type: none"> • Adapt awareness-raising efforts on SEA, including where and how to report misconduct, to meet specific needs of affected populations (e.g. language, approaches). • Consider targeted messaging for those groups that are highly susceptible to SEA. Consult with target groups to ensure communication approaches are relevant and meet their respective needs.

⁵ UN Protocol for the Provision of Assistance to Victims of Sexual Exploitation and Abuse (Dec 2019): <https://www.un.org/en/pdfs/UN%20Victim%20Assistance%20Protocol%20-%20Final%20Endorsed.pdf>

⁶ IASC PSEA Inter-Agency Cooperation in Community-based Complaints Mechanisms, Global SOPs (2016) https://reliefweb.int/sites/reliefweb.int/files/resources/iasc_psea-global_standard_operating_procedures_june_2016_1.pdf See also the Secretary-General's Bulletin (ST/SGB/2003/13) Special Measures for Protection from Sexual Exploitation and Abuse: <https://undocs.org/ST/SGB/2003/13>

		<ul style="list-style-type: none"> • Ensure specific interventions take into consideration and are adapted according to the needs, requirements and abilities of different groups; ensure different groups are consulted.
<p>Profile of personnel involved in the delivery of assistance / services</p>	<ul style="list-style-type: none"> • Which staff/volunteers/contractors are delivering goods and services? Is there adequate gender balance, particularly for staff directly engaging with affected women, children and other vulnerable groups? • Have staff/personnel/volunteers, been sufficiently vetted as part of the selection/recruitment process? • Have all staff/personnel/volunteers/contractors been explained and signed the organizational Code of Conduct and trained on PSEA? 	<ul style="list-style-type: none"> • Re-adjust gender balance of program staff to include more female staff, if required. • Conduct trainings or refresher trainings on SEA, including for the potential risks associated with the particular programme/ service delivery. • Ensure Codes of Conduct are fully explained to all new staff/personnel, and that CoCs are signed. • Review HR files of staff/ personnel and conduct additional screening for previous misconduct, where needed.
<ul style="list-style-type: none"> • Programme activities / interventions 	<ul style="list-style-type: none"> • What is the size and scale of the programme? Will the programme or intervention create or exacerbate existing imbalances between programme staff/volunteers and members of the community, or within the community? All programming should follow a 'do no harm' approach. • Does the programme involve direct interaction between staff/personnel and children, or other highly vulnerable groups? • How are staff delivering goods and services (e.g. in private or in public)? Will it involve accessing the homes of vulnerable persons? Could the process of in-kind distributions expose women and adolescent girls/children to increased risks of harassment and abuse? • Would there be witnesses in case of an SEA incident? Are staff working in pairs (ideally gender-mixed or female frontline workers, particularly when interacting with highly vulnerable groups)? • Does the process for providing assistance and services enable staff 	<ul style="list-style-type: none"> • Analyse contextual issues (see below) to ensure interventions do not inadvertently exacerbate existing tensions or vulnerabilities, in line with do no harm and conflict sensitivity approaches. • Arrange periodic site visits by PSEA focal point, protection staff or other independent observer to monitor for possible SEA risks or incidents. • Change location(s) of distribution to make it more public. Where relevant/possible, include local women leaders or community representatives as part of the process. In some cases, specific distribution times and points specifically for women may be considered. • Identify alternative/additional channels for making complaints safely and confidentially. • Ensure frontline staff, including healthcare actors, are trained on PSEA how to handle potential

	<p>and affected people to raise concerns or make complaints in a safe, confidential manner (through hotlines, designated and trained personnel, trained frontline workers, sharing the contact information of PSEA focal points, etc.)?</p> <ul style="list-style-type: none"> • Do staff wear uniforms, organizational t-shirts and/or other forms of identification when conducting program activities? • Will the modality for delivery require vulnerable persons (e.g. women and girls) to travel on their own to access the distribution point, potentially requiring the use of taxis or other means of accessing and exposing them to abuse and harassment in the process? 	<p>SEA disclosures safely, appropriately and confidentially.</p> <ul style="list-style-type: none"> • Request staff to wear forms of identification when conducting program activities (and provide such forms of identification where needed). • Consider providing transportation support to women/girls to access assistance. Or changing the location / modality for delivery of assistance, as required.
<p>Context</p>	<ul style="list-style-type: none"> • What is the type of location for project (camp, informal settlement, host community, rural/urban setting, etc.)? • What is the affected community's attitude towards GBV concerns? How comfortable would they be reporting SEA concerns, noting there are typically significant barriers to reporting, including stigma, fear of reprisals, a culture of acceptance, lack of knowledge and/or access to reporting mechanisms, etc? • What are specific risks associated with the location for the programme (e.g. lack of availability of mechanisms for prevention and redress, insecurity, traditional justice structures, etc.)? 	<ul style="list-style-type: none"> • Create a more secure environment at programme location (e.g. install lights, hire night guards), if required. • Work with communities to adapt feedback and complaints mechanisms to meet their needs. In the current COVID context, consider how remote/online feedback and reporting can be strengthened or introduced in the absence of access to in-person reporting. • Work with Protection and SGBV partners, PSEA Network, local women's rights groups, relevant government counterparts and other stakeholders to identify appropriate solutions, advocate for change, where required, and mitigate risks.

Annex B - Suggested Key Messages on PSEA

Key messages for communities

Raising awareness among local populations about their rights and entitlements, the expected behavior of humanitarian staff and how to complain about any misconduct is essential to Protection from Sexual Exploitation and Abuse (PSEA).

- Abuse of power of any kind over local populations is prohibited. At all times the local population must be treated with respect and dignity. All humanitarian and development workers are required to abide by the highest standards of conduct.
- You should never need to exchange sexual or other favours to receive any kind of humanitarian or development assistance, employment, goods or services. If you experience any kind of sexual violence or abuse, it is not your fault, and you are not alone.
- Sexual activity by aid workers with anyone under the age of 18 is prohibited, regardless of consent. Sexual activity includes touching or other sexual behavior.
- You have the right to be informed about services and assistance being provide in your area, to complain and to report any inappropriate behavior, sexual exploitation or abuse by any humanitarian or development worker, regardless of who they work for.
- All reporting will be treated safely and confidentially. Reporting will not prevent you from getting assistance or services.
- If you experience any form of sexual exploitation and abuse, you have the right to access protection, medical, psychosocial and other support.
- To safely and confidentially report any misconduct please contact ***[insert organizational Complaint and Feedback mechanism information – hotline number, PSEA focal point contact, etc.]***
- All reports of misconduct, including sexual exploitation and abuse, are taken extremely seriously and will be independently investigated. If proven, severe sanctions will be taken against perpetrators.
- The safety, protection and wishes of the victim of sexual exploitation and abuse is central to any investigation process.
- These rules apply to all UN, national and international NGO staff, partners, consultants, community volunteers and contractors.

Key Messages for staff

- Engaging in any form of discrimination, harassment, abuse, intimidation or exploitation, or in any activity that undermines affected people's ability to exercise their human rights is strictly prohibited and may be grounds for summary dismissal;
- Exchange of money, employment, goods or services for sex, including any humiliating, degrading, or exploitive behaviour is strictly prohibited;
- Asking for or inviting any personal payment, service or favour from affected people, without exception, in return for assistance, support, goods or services of any kind, is misconduct;
- Sexual exploitation and abuse is serious misconduct and grounds for disciplinary measures, including summary dismissal and/or legal action. **The UN and humanitarian community have a policy of zero tolerance of sexual exploitation and abuse.**
- Sexual activity with children (persons under the age of 18) is prohibited, regardless of the age of majority or local age of consent. Mistaken belief in the age of the child is not a defence;

- Any sexual relationship between those providing humanitarian and development assistance and protection and a person benefitting from such assistance and services that involves improper use of rank or position is prohibited. Such relationships undermine the credibility and integrity of humanitarian aid work.
- Workers providing assistance to beneficiaries of humanitarian assistance are obliged to create and maintain an environment that prevents sexual exploitation and abuse.
- Where a staff member or associate has concerns or suspicions regarding sexual exploitation or abuse by an aid worker, he/she must report such concerns via organizational established procedures. If you see or hear an allegation regarding sexual exploitation and abuse, you must report it. If you see something, say something!
- The safety, protection and wellbeing of survivors of sexual exploitation and abuse, or sexual harassment and abuse, shall be paramount to any intervention.
- 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.”
- SEA jeopardizes the credibility and reputation of all organizations involved in the response and causes irreparable harm to survivors of sexual exploitation and abuse and to the faith and trust in humanitarian/development actors’ relationship with the affected population.

Annex C – Protection from Sexual Exploitation and Abuse: IASC Six Core Principles

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.”

(IASC, September 2019)