

REVISED CHS PSEAH INDEX (OCTOBER 2020)

CHS Indicator	PSEAH requirement	PSEAH Guiding Questions	Recommended evidence
Commitment 1: Communities and people affected by crisis receive assistance appropriate and relevant to their needs.			
1.2 Programmes are appropriately designed and implemented based on an impartial assessment of needs and risks and an understanding of the vulnerabilities and capacities of different groups.	Programmes need to be designed and implemented based on an assessment of SEAH risks and understanding of SEAH vulnerabilities of different groups.	<ul style="list-style-type: none"> • How are the vulnerabilities to SEAH of different groups identified and analysed? • How are risks related to SEAH identified and analysed? • How are programme designs and implementation assessed and adapted to mitigate SEAH risks and ensure SEAH risks are not created or exacerbated? 	<ul style="list-style-type: none"> • Context, stakeholder and vulnerability analysis. • SEAH risk assessment – either as a standalone SEAH risk assessment or integration of SEAH into broader risk assessment. • Procedure and associated tools to ensure programme designs respond to SEAH vulnerabilities and risks. This could include a standardised programme design template that includes this as a required section, and/or a programme design appraisal template that includes this as a required criterion.
Commitment 2: Communities and people affected by crisis have access to the humanitarian assistance they need at the right time.			
2.1 Programmes are designed taking into account constraints so that the proposed action is realistic and safe for communities.	Programmes need to take into account organisational and contextual constraints so that the proposed action is safe in relation to PSEAH for communities.	<ul style="list-style-type: none"> • How are organisational and contextual constraints relating to PSEAH identified and analysed? • How are programme designs adapted to safeguard affected people from SEAH? 	<ul style="list-style-type: none"> • SEAH risk assessment – either as a standalone SEAH risk assessment or integration of SEAH into broader risk assessment. • Documented procedure and associated tools to ensure programme designs respond to SEAH risks. This could include a standardised programme design template that includes SEAH risk as a required section, and/or a programme design appraisal template that includes SEAH risk as a required criterion.

Commitment 3: Communities and people affected by crisis are not negatively affected and are more prepared, resilient and less at risk as a result of humanitarian action.

<p>3.6 Programmes identify and act upon potential or actual unintended negative effects in a timely and systematic manner, including in the areas of people's safety, security, dignity and rights, sexual exploitation and abuse by staff, culture, gender, social and political relationships, livelihoods, the local economy, and the environment.</p>	<p>Programmes need to identify and act upon potential or actual unintended negative effects relating to SEAH.</p>	<ul style="list-style-type: none"> • Do project assessments, context and stakeholder analyses include potential risks of SEAH? • How do you continually monitor and identify potential or actual unintended negative effects of SEAH? • If negative effects relating to SEAH are identified, how are they acted upon in a timely and systematic manner? i.e. <ul style="list-style-type: none"> ○ How do you adapt the programme design? ○ How do you provide assistance to SEAH survivor/victims? ○ How do you respond where a staff member is the perpetrator? 	<ul style="list-style-type: none"> • Continual monitoring and risk assessments – as a mechanism to identify, assess and mitigate potential SEAH on an ongoing basis. • Whistleblowing Policy – as a mechanism to detect actual and potential SEAH. • PSEAH focal points – as a mechanism to monitor and respond to SEAH risks and incidents. • SEAH awareness raising among affected people – as a means to mitigating SEAH. • PSEAH training for staff – as a means to mitigating SEAH.
<p>3.7 Policies, strategies and guidance are designed to prevent programmes having any negative effects such as, for example, exploitation, abuse or discrimination by staff against communities and people affected by crisis, and to strengthen local capacities.</p>	<p>The organisation needs to have documented policy, strategies and guidance in place to prevent SEAH.</p>	<ul style="list-style-type: none"> • Do you have a policy that covers PSEAH? • Do you have documented guidance and a workplan to support the implementation of this policy? • Do you have strategies to prevent and address SEAH including a Code of Conduct, information campaigns, complaints mechanisms, and whistleblowing policy? • How is implementation of the policy and workplan monitored and assessed? • Do you have an Online Safeguarding policy? (for organisations that interact with affected populations online, or convene online groups (for example supporting young activists to form social media groups)? 	<ul style="list-style-type: none"> • PSEAH Policy or integration of PSEAH into broader safeguarding policy or equivalent • PSEAH implementation workplan • Whistleblowing or non-retaliation policy (or equivalent that protects staff and others disclosing misconduct and ensures non-retaliation) • Code of Conduct • Complaints Mechanism • SEAH Risk Assessment • SEAH Investigations Procedures • Survivor support / provision of assistance policy/guidance.

<p>3.8 Systems are in place to safeguard any personal information collected from communities and people affected by crisis that could put them at risk.</p>	<p>The organisation needs to have systems in place to safeguard personal information relating to SEAH incidents that could put affected people at risk.</p>	<ul style="list-style-type: none"> • Do you have a policy and guidance to ensure the safeguarding of sensitive personal information related to SEAH incidents? • What systems do you have to ensure the security of sensitive personal information related to SEAH incidents? • What systems do you have to ensure delegated oversight and confidentiality requirements for staff managing SEAH incidents? • Do you have a policy or guidance which relates to gathering personal information for the purpose of communications materials, research etc., which covers: <ul style="list-style-type: none"> ○ informed consent for use of images and information gathered ○ guidance on including sensitive information such as if an individual is a survivor of GBV or SEAH. 	<ul style="list-style-type: none"> • Data Protection Policy • Documented data protection protocols e.g. locked filing cabinets, password protected and delegated access to electronic data storage. • Delegated authority for overseeing SEAH investigations
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Commitment 4: Communities and people affected by crisis know their rights and entitlements, have access to information and participate in decisions that affect them

<p>4.1. Information is provided to communities and people affected by crisis about the organisation, the principles it adheres to, the expected behaviours of staff, and its programmes and deliverables.</p>	<p>Information provided to communities needs to cover the organisation's commitment and expected staff behaviours in relation to PSEAH.</p>	<ul style="list-style-type: none"> • How is information on the organisation's commitments and expected staff behaviour related to PSEAH communicated to affected people and made public? • How is this contextualised and shared in accessible and appropriate ways? • How do you monitor that this information is understood by affected people? 	<ul style="list-style-type: none"> • Documented procedure that ensures systematic sharing of information with affected people through variety of forums and mediums to ensure access to all. • code of conduct which includes expected staff behaviours. • Posters or brochures that communicate expected behaviours to affected people in appropriate language and formats
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<p>4.5. Policies for information-sharing are in place, and promote a culture of open communication.</p>	<p>The organisation needs to have an information sharing policy that addresses PSEAH.</p>	<ul style="list-style-type: none"> • How does your information sharing policy or guidance address information relating to PSEAH? • How is implementation of this policy monitored and assessed? 	<ul style="list-style-type: none"> • Information Sharing Policy or equivalent
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Commitment 5: Communities and people affected by crisis have access to safe and responsive mechanisms to handle complaints.

<p>5.1. Communities and people affected by crisis are consulted on the a. design, b. implementation, and c. monitoring of complaints handling processes.</p>	<p>Communities and affected people need to be consulted on how the complaints handling process will accommodate SEAH.</p>	<ul style="list-style-type: none"> • How are affected people consulted in the design, implementation and monitoring of complaints handling processes that specifically accommodate SEAH reports? • How are the preferences, particularly those related to accessibility, safety and confidentiality, of different groups taken into account in the design of complaints handling processes that specifically accommodate SEAH reports? 	<ul style="list-style-type: none"> • Guidance document on establishing complaints mechanisms • Evidence of consultations with affected people. • Interviews with staff that demonstrates they have consulted with affected people • Discussions with affected people that demonstrates they have been consulted and their views have been incorporated into the design, implementation and monitoring of complaints handling processes.
<p>5.2. Complaints are welcomed and accepted, and it is communicated how the mechanism can be accessed and the scope of issues it can address.</p>	<p>Complaints handling mechanism needs to welcome and accept reports relating to SEAH, and communities need to know how and what to report.</p>	<ul style="list-style-type: none"> • How do you create a culture where complaints/reports of SEAH are welcomed and accepted? • How do you explain how complaints can be made, on what issues, how responses are given, what complainants can expect when raising a complaint and how they are protected throughout the process? • Are awareness raising materials for complaints mechanisms in relation to SEAH adapted in local languages and made accessible to different groups? 	<ul style="list-style-type: none"> • Documented complaints, reporting and investigations system/procedure. • Evidence of consultations with affected people. • Posters/information about complaints mechanisms visible in public areas of communities or project sites.
<p>5.3. Complaints are managed in a timely, fair and appropriate manner. Complaints handling mechanisms prioritises the safety of the complainant and those affected at all stages.</p>	<p>Complaints or reports relating to SEAH need to be managed in a timely, fair, appropriate and safe manner.</p>	<ul style="list-style-type: none"> • How do your complaints handling mechanisms prioritise the safety of the complainant or victim/survivor and those affected at all stages? • Does the organisation have written guidance on the provision of survivor support/victim assistance that is victim/survivor-centred? How is it contextualised for different country contexts and all levels of the organisation (e.g. global to programme and local)? • What are the timeframes to investigate and resolve SEAH complaints/reports, and are these documented? • Are SEAH complaints/reports investigated immediately by staff with relevant competencies at an appropriate level of authority and expertise (e.g. trained investigators)? 	<ul style="list-style-type: none"> • Documented Complaints Handling policy, procedures and guidelines which covers SEAH specifically and outlines: <ul style="list-style-type: none"> ○ reporting and investigations system/procedures including timeframes ○ commitment to victim/survivor-centred approach ○ procedures for the provision of support/assistance for victims/survivors. • Victim/Survivor support policy which is victim/survivor-centred, rights-based, age, disability and gender sensitive, non-discriminatory and culturally appropriate.

		<ul style="list-style-type: none"> • How is the complainant or victim/survivor supported and kept fully informed (within the parameters of confidentiality) throughout the process? • How do you know whether complainants and potential users of the mechanisms feel their SEAH complaints have been or would be handled in a fair, appropriate and safe way? • How does your organisation ensure the implementation of its non-retaliation policy? 	
5.4. The complaints-handling process for communities and people affected by crisis is documented and in place. The process covers programming, sexual exploitation and abuse, and other abuses of power.	The organisation needs to have a documented complaints-handling and investigations process that addresses SEAH, is victim/survivor-centred, and sets out mandatory reporting obligations relating to SEAH.	<ul style="list-style-type: none"> • How does your Complaints Handling policy or documented process address SEAH? • How does your documented investigation procedure address SEAH? • What are the mandatory reporting obligations relating to SEAH and where are these documented? • Is the complaints handling process monitored and reviewed on a regular basis? • How do you ensure the organisation understands and meets its mandatory reporting obligations for SEAH in its head office country and other countries of operation including legal, statutory and donor requirements and risks in different contexts? 	<ul style="list-style-type: none"> • Documented Complaints Handling policy, procedures and guidelines which covers SEAH specifically and includes the investigations process. • Trained SEAH investigators are available to the organisation at all levels (e.g. internal investigators, arrangements with third party investigative bodies).
5.5. An organisational culture in which complaints are taken seriously and acted upon according to defined policies and processes has been established.	The organisation needs to have an organisational culture that takes SEAH complaints seriously and acts upon them according to its PSEAH Policy and processes.	<ul style="list-style-type: none"> • What does the leadership in your organisation do to promote an organisational culture in which SEAH complaints are taken seriously? • Do you have a dedicated PSEAH/Safeguarding focal point responsible for implementation of PSEAH policy and processes? • How is responsibility for PSEAH assigned to the organisation's governance structure? • Do you have mandatory reporting of SEAH incidents (with confidential information removed) to the organisation's senior management and governing body and as required to donors and statutory bodies? 	<ul style="list-style-type: none"> • PSEAH Focal person • SEAH Investigators • Delegated authorities with responsibility for oversight of SEAH incidents • Records showing SEAH incident resolution • SEAH incident reporting to the organisation's governing body or equivalent • Posters/information about complaints mechanisms visible in public areas of offices and at project sites.

		<ul style="list-style-type: none"> • Do substantiated SEAH complaints result in either disciplinary action or contractual consequences consistent with the allegation? • Does your enterprise level risk management framework include SEAH risks? • What policies or guidance set out staff obligations to report incidents or suspicions of SEAH or other abuses of power by others, including colleagues, partner staff etc? • Are staff (or third party investigative bodies) designated, trained and resourced to investigate SEAH complaints in line with legal standards, local laws and best practice? 	
5.6. Communities and people affected by crisis are fully aware of the expected behaviour of humanitarian staff, including organisational commitments made on the prevention of sexual exploitation and abuse.	The organisation needs to ensure that affected people are fully aware of the expected behaviour of staff in regards to PSEAH, and organisational PSEAH commitments.	<ul style="list-style-type: none"> • How do you ensure staff appropriately contextualise and share information with communities, about the expected standards of staff behaviour and commitments on PSEAH? Do you have guidance on this? • How do you monitor and assess that affected people understand the expected behaviours of staff in regards to PSEAH, and organisational PSEAH commitments? • How do you ensure affected people know how the organisation will handle sensitive information, maintain confidentiality and provide support to them in regards to SEAH complaint? 	<ul style="list-style-type: none"> • Evidence of consultations with affected people. • Posters or information outlining expected staff behaviours and organisational commitments to PSEAH visible in public areas of communities or project sites • Discussion with affected people which demonstrates their understanding of expected behaviour of humanitarian staff, including organisational commitments made on the prevention of sexual exploitation and abuse.
5.7. Complaints that do not fall within the scope of the organisation are referred to a relevant party in a manner consistent with good practice.	The organisation needs to refer SEAH complaints/reports that do not fall within the scope of the organisation to a relevant party in a manner consistent with good practice.	<ul style="list-style-type: none"> • Do you have a documented referral system for SEAH complaints/reports? • What other relevant organisations and services do you refer to that are safe and appropriate for different profiles of SEAH victims/survivors? • Do you have organisational and country specific rules and processes of mandatory reporting including on how and when staff should liaise with appropriate authorities in cases of criminal activity or where international law is broken, including incidents of SEAH? 	<ul style="list-style-type: none"> • Documented referral system • Distribution of referral system to relevant staff • Interviews with staff which demonstrates their knowledge of this requirement and of other relevant organisations and services.

Commitment 6: Communities and people affected by crisis receive coordinated, complementary assistance.

<p>6.1 The roles, responsibilities, capacities and interests of different stakeholders are identified.</p>	<p>The roles, responsibilities and capacities of partners and other stakeholders to prevent SEAH need to be identified.</p>	<ul style="list-style-type: none"> • How do due diligence or partner capacity assessment processes assess your partners' PSEAH systems and capacity? • How do you ensure that your organisation and partner organisations understand SEAH mandatory reporting obligations, legal and contextual implications and risks for all countries of operation? 	<ul style="list-style-type: none"> • Due diligence processes and templates that address SEAH • Partner capacity assessment processes and templates that address SEAH.
<p>6.4 Information is shared with partners, coordination groups and other relevant actors through appropriate communication channels.</p>	<p>Information relating to PSEAH needs to be shared with partners, coordination groups and other relevant actors.</p>	<ul style="list-style-type: none"> • How do you ensure coordination and sharing of information on PSEAH with partners, coordination groups and other actors? • Do you coordinate in joint screening and field-level joint reporting mechanisms regarding PSEAH? • Does your organisation participate in inter-agency SEAH misconduct data sharing? 	<ul style="list-style-type: none"> • Membership in coordination bodies and networks relating to PSEAH or safeguarding. • Minutes of coordination meetings.
<p>6.6 Work with partners is governed by clear and consistent agreements that respect each partners mandate, obligations and independence, and recognises their respective constraints and commitments.</p>	<p>The organisation needs to have clear and consistent agreements with its partners specifically addressing PSEAH obligations.</p>	<ul style="list-style-type: none"> • How do you address PSEAH obligations in written agreements with partners? • How is partner compliance with PSEAH obligations monitored? 	<ul style="list-style-type: none"> • Partner agreement template and/or examples of signed partner agreements.

Commitment 8: Communities and people affected by crisis receive the assistance they require from competent and well-managed staff and volunteers

<p>8.1 Staff work according to the mandate and values of the organisation and to the agreed objectives and performance standards.</p>	<p>Recruitment, screening and staff performance processes need to promote safeguarding from SEAH</p>	<ul style="list-style-type: none"> • What recruitment and screening processes do you have for personnel and consultants that promote safeguarding from SEAH? • Does your organisation participate in inter-agency misconduct data sharing? • Do staff performance appraisals include adherence to the code of conduct, completion of associated trainings and commitment to PSEAH? • Does your human resource policy and employment contracts clearly outline disciplinary action and termination provisions for staff misconduct, including SEAH? • Does your organisation have examples of terminating employment in response to substantiated cases of SEAH? 	<ul style="list-style-type: none"> • Documented recruitment and screening procedures that include: <ul style="list-style-type: none"> ○ Job advertisements that reference the organisation’s commitment to PSEAH ○ Police or criminal history checks (where possible and safe) ○ Review of inter-agency misconduct data, where possible ○ Targeted interview questions relating to PSEAH ○ Written and verbal referee checks including targeted questions related to PSEAH. • Human Resources Policy • Employment Contracts
<p>8.2. Staff adhere to the policies that are relevant to them and understand the consequences of not adhering to them.</p>	<p>Staff need to adhere to PSEAH policies, including mandatory obligation to report and understand the consequences of not adhering to them.</p>	<ul style="list-style-type: none"> • How do you ensure that all staff at different levels and in different locations, receive induction and refresher training on PSEAH policies and reporting obligations and the consequences of not adhering to them? • Do staff contracts include reference to sanctions for failing to adhere to PSEAH policies and the code of conduct? 	<ul style="list-style-type: none"> • Induction process that includes orientation to PSEAH policy, complaints handling policy, whistleblowing policy and code of conduct and associated procedures.
<p>8.7. A code of conduct is in place that establishes, at a minimum, the obligation of staff not to exploit, abuse or otherwise discriminate against people.</p>	<p>The organisation needs to have a code of conduct that includes the obligation of staff and associated individuals and entities, not to sexually exploit, abuse or harass people and to comply with reporting obligations.</p>	<ul style="list-style-type: none"> • Do you have a code of conduct that establishes the obligation of staff and associated individuals and entities not to sexually exploit, abuse or harass people and to report allegations or suspicions of SEAH? • How do you ensure staff understand, sign and comply with the code of conduct? 	<ul style="list-style-type: none"> • Documented code of conduct that covers expected staff behaviours including the obligation of staff not to sexually exploit or abuse people to reporting obligations.

<p>8.9. Policies are in place for the security and wellbeing of staff.</p>	<p>The organisation needs to have policies in place for the safeguarding of staff to protect them from sexual exploitation, abuse and harassment, and retaliation, including a Whistleblower Protection policy.</p>	<ul style="list-style-type: none"> • Does your organisation have a staff safety policy that addresses the risk of SEAH to them? • Does your organisation have documented processes for the investigation of sexual exploitation, abuse or harassment against staff? • Does your organisation have a Whistleblowing Policy and how is it implemented? • Does your organisation undertake safety assessments for staff working in overseas contexts that includes the assessment of SEAH risk? 	<ul style="list-style-type: none"> • Staff Safety Policy • Sexual Harassment Policy • SEAH Training for staff • Whistleblowing Policy • Staff safety assessments
<p>Commitment 9: Communities and people affected by crisis can expect the organisations assisting them to manage resources effectively, efficiently and ethically.</p>			
<p>9.5. The risk of corruption is managed, and appropriate action is taken when corruption cases are identified.</p>	<p>Serious misconduct needs to be taken seriously and acted upon.</p>	<ul style="list-style-type: none"> • What does the leadership in your organisation do to promote an organisational culture where serious misconduct is taken seriously and acted upon? 	

For more information on the PSEAH Index and how it is used by organisations undertaking verification against the Core Humanitarian Standard on Quality and Accountability (CHS), please refer to the CHS Alliance Verification Framework at <https://www.chsalliance.org/get-support/resource/chs-verification-framework/>