

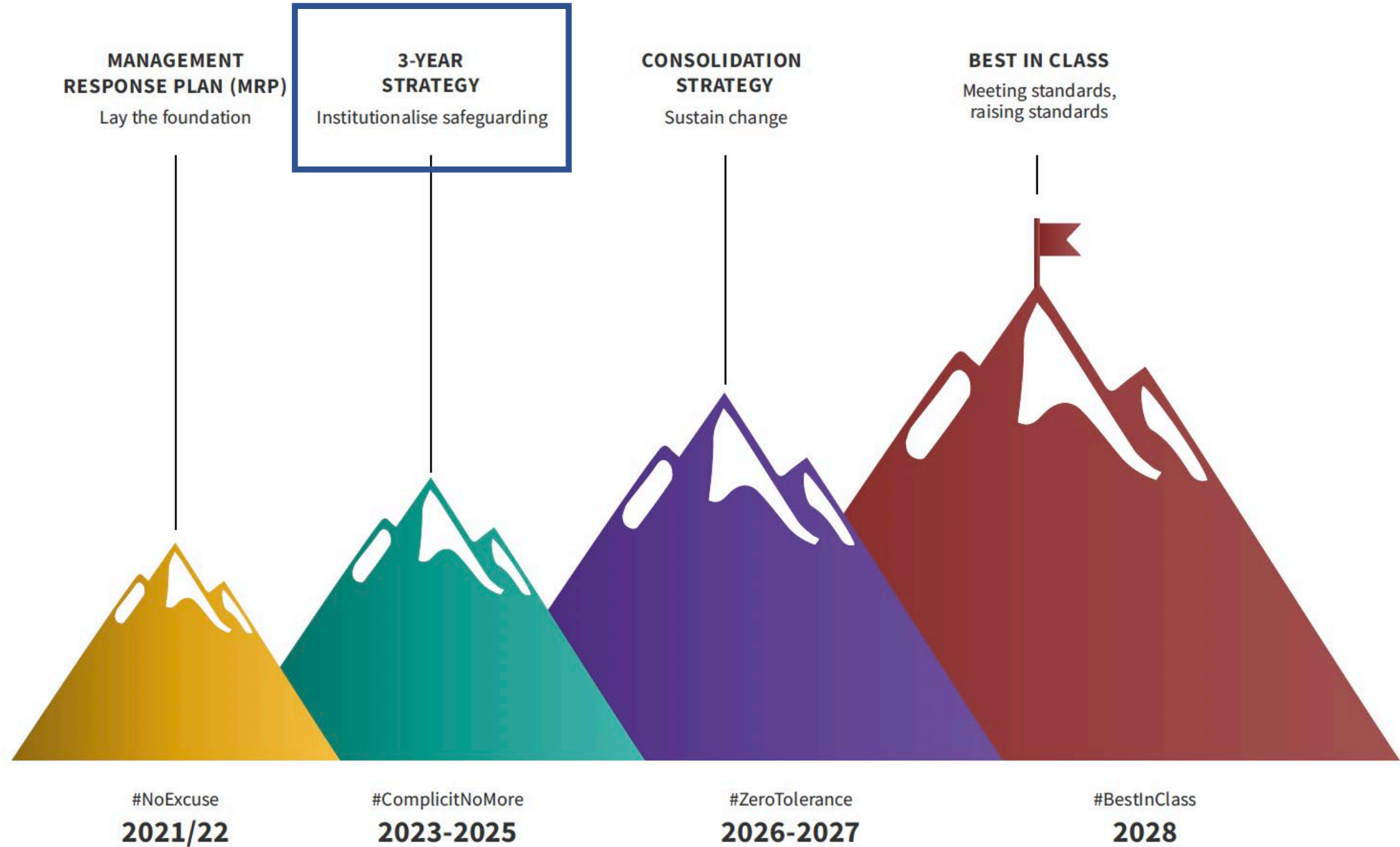
Quarterly Member States Briefing PRSEAH (Q1, 2024)

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Office of the Director-General



Please note that this event adheres to
the Code of Conduct to prevent
harassment, including sexual
harassment, at WHO Events

THE PATH



High level recommendations from annual PRS Review Conference, 2023



1. Accelerate institutional change

- Build on existing **good practices**, be more **joined up** across all humanitarian and development actors
- Acknowledge and promote the power of strong, positive and joyful **leadership**
- Address **SH and culture change** as a matter of priority across agencies
- Prioritize and **resource prevention & response in high-risk settings** including but not limited to health emergencies

2. Improve VSCA

- Radically review the **support we offer victims** and survivors
- Broaden our perspective on **survivors** aligning with the UN Victims Rights statement, including acknowledging their **agency and strengths** and empowering them to advocate for themselves
- Work through local organizations and deploy **social scientists** to better identify and address needs for at-risk populations and victims/survivors (Side meeting recommendation)

3. Meaningfully engage stakeholders

- Accelerate the **involvement of Member states/government entities** where development & humanitarian agencies are operating
- Engage **civil society** thought the SM safeguarding cycle and not just for victim support
- Use existing **research** and contribute to developing the **evidence base** as required for this area of work

Feedback from Member States

PBAC & EB January 2024

Acknowledgement of progress

1. TYS, PRS Accountability Framework, Policy reform
2. Year 1 implementation
3. Transparency & accountability
4. MS engagement, communication
5. work with UN and partners
6. the PRS review conference
7. Risk assessments
8. Support to victims/survivors

Advise to strengthen

1. Culture change
2. Targeted and sustained training & awareness raising and address behaviour change
3. VSCA and support
4. End2End process, especially post investigation phase
5. Integrate all forms of abusive conduct not just SM

Key asks from PBAC/EB

1. Implementation of Member State accountability in accordance with the WHO accountability framework for the prevention of and response to sexual misconduct.
2. Ways in which PRSEAH can be funded in health emergencies, so that a minimum set of actions can be taken at the outset of such a response to safeguard against sexual misconduct

✓ **Both recommendations approved. Secretariat requested to develop proposals for both**



Follow up on PBAC/EB decisions

1. Member States/health sector roles, responsibilities, accountabilities

- a. Document review
- b. Consultation with UN and IASC partners (integrate into broader on-going system-wide efforts to engage governments, CAPSEAH, etc)
- c. Multi-stakeholder consultations
 - i. Quarterly member states briefings (Q2 and Q3)
 - ii. Webinar – Geneva Missions & PRSEAH experts
 - iii. Online consultation (web-based feedback on zero draft)
 - iv. Bilateral consultations during field missions
 - v. Crowdsourcing ideas from experts, partners, CSOs etc
- d. Proposal to be submitted to PBAC 2025 (Daft ready by October 2024)



PSEA Clause for Inclusion in UNSDCF

Final draft for endorsement

Protection from Sexual Exploitation and Abuse (PSEA) is a key priority for the UNCT [insert name], with a special focus on prioritizing victims' rights and creating an environment in which Sexual Exploitation and Abuse (SEA) does not occur. The UNCT and its partners will pursue all appropriate means to ensure the effective protection of the local population, particularly women and children, from sexual exploitation and abuse. SEA is unacceptable behavior and is prohibited for UN personnel and UN implementing partners.

In delivering on the obligations articulated in the present Cooperation Framework, the UNCT and the government of [insert name] reaffirm their commitment to, and will take collective action on, PSEA, by strengthening internal structures, reinforcing accountability measures, and establishing effective organizational capacities to prevent and respond to reports of SEA in connection with its personnel involved in common/joint projects. This entails (i) adhering to common values on PSEA (ii) taking preventive measures against sexual exploitation or sexual abuse, (iii) investigating allegations, and (iv) taking appropriate corrective action when incidents occur, including providing support to victims in accordance with a victim centred approach.

Next Steps

- The memo on the PSEA clause in the UNSDCF was signed and sent to OLA (22nd February).
- The OLA review is expected to take 3-4 weeks. The HLSG is expected to take place in the beginning of April.
- The UN Technical Working aims to have the agreed clause, and the finalized framework document, for review and endorsement by the HLSG.
- WHO and UNICEF will soon hold consultations with member states to obtain feedback on the development and planned roll out of a PSEA Government Cooperation framework –an interagency initiative to streamline UN engagement with governments and bolster capacity on PSEA.

Follow up on PBAC/EB decisions

2. Funding mechanisms for PRS work in health emergency and humanitarian response

1. Document review
2. Consultation with UN and IASC partners
3. Internal WHO consultation (EXT, WHE, Polio, FMN)
4. Consultation with Geneva Donor group on PSEAH
5. Bilateral and group discussions with donors
6. Proposal to be submitted to PBAC 2025 (Daft ready by October 2024)




5 Shifts for 2024



1. Risk assessment & mitigation (RAM)
2. Manage risk by IPs
3. Work with CSOs
4. Map Victim/survivor services
5. Closer work with UN/IASC
6. Three-level visits

- ✓ Balancing operations with institutional change
- ✓ Accelerated learning

New developments



1. Online tools for
- *Risk assessment*
- *Year 2 monitoring*

2. Expanding #NoExcuse
campaign

*Include all forms of
abusive conduct*

3. New
Evaluations/Reviews

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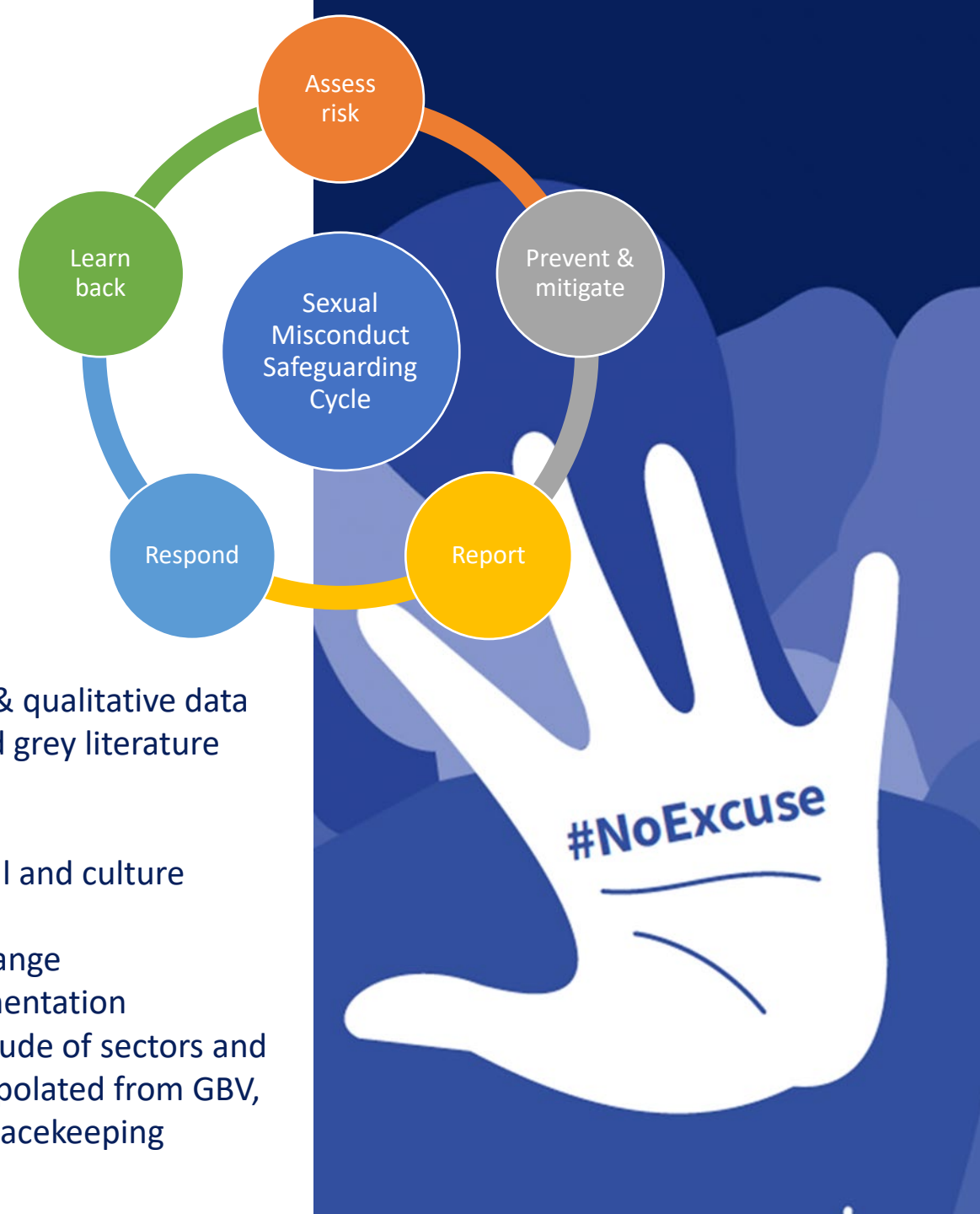
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4. Stronger
safeguarding measures
to technical
programmes

New technical work planned in 2024 -1

Technical consultation on **evidence for PRS** work – April

- Agree on framework for generating, retrieving and analyzing evidence across the sexual misconduct safeguarding cycle
- Scope out an evidence review exercise
- Identify research gaps
- Plan of action
- Global goods

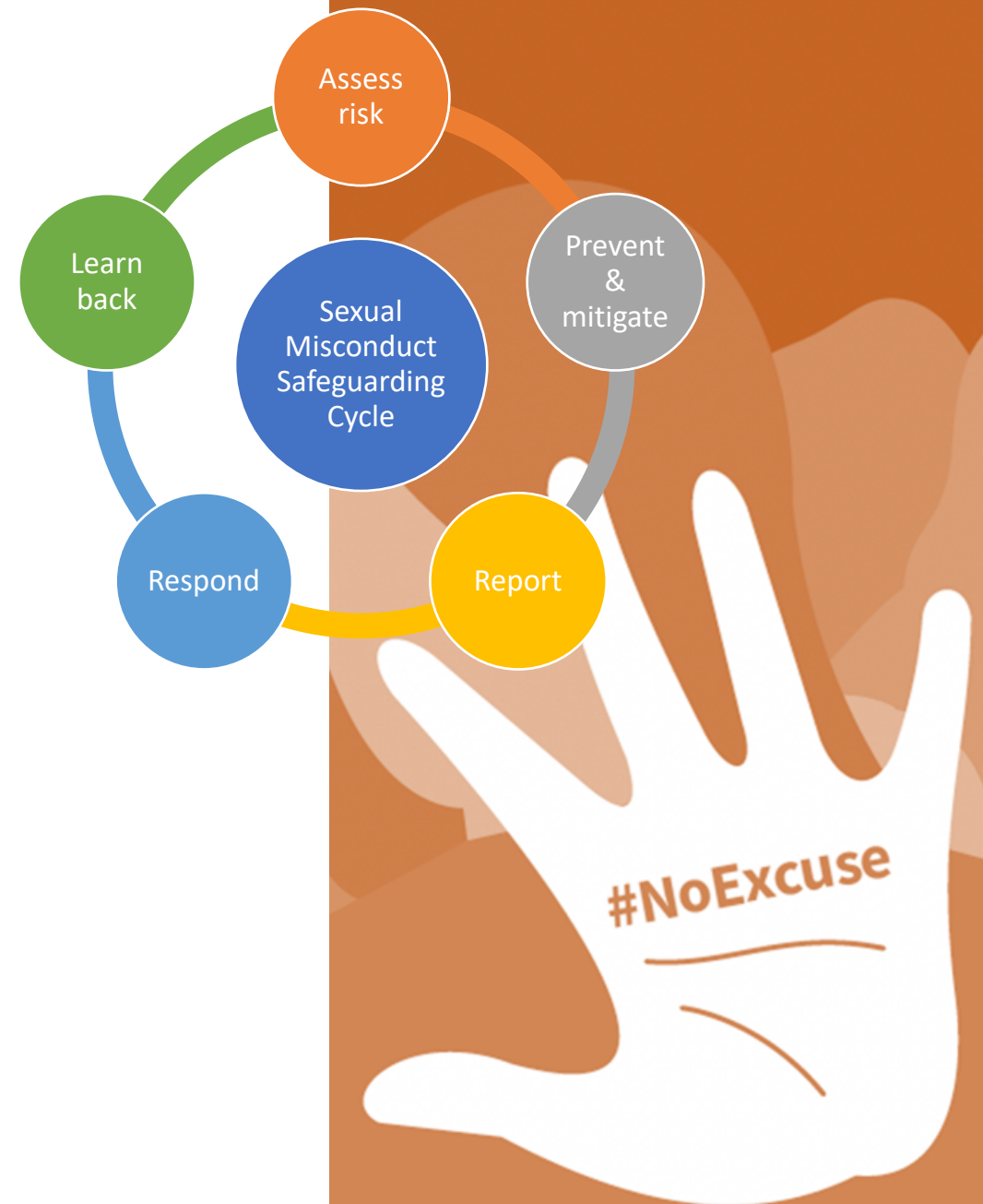


- ✓ Quantitative & qualitative data
- ✓ Published and grey literature
- ✓ Prevalence
- ✓ Drivers
- ✓ Organizational and culture change
- ✓ Behaviour change
- ✓ Policy implementation
- ✓ From a multitude of sectors and not just extrapolated from GBV, PRSEAH or peacekeeping

New technical work planned in 2024 -2

Technical consultation on engaging **Civil society** across the safeguarding cycle

- Take a true VSCA approach
- Leverage those who have the best connection and context for safeguarding from SM
- Consult WHO's CSO network, and networks of networks
- Enable evidence-informed actions
- Enhanced sustainability and community ownership
- More efficient use of resources





#NoExcuse Podcast

Tune in!

Dive into untold stories, challenge norms, and champion change against sexual misconduct committed by Aid workers. Join us on the journey to zero tolerance.



- E1. Dr. Gaya Gamhewage, WHO Dir PRS
- E2. Pascale Allotey, WHO Dir SRHR
- E3. ASC Jane Connors, UN Victim's Rights Advocate
- E4. Ibrahim Abu Khalil, WHO Technical Officer PRS
- E5. Erin MacDonald, WHO Technical Officer PRS
- E6. Dr. Eugene Kongyuy, UNFPA D.Dir Humanitarian Response Missions
- E7. Memory Kachmbwa, CSO Femnet Ex Dir
- E8. Dr Roopa Dhatt, WGH Co-Founder
- E9. Lisa McClennon, WHO Dir IOS



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