

Quarterly Member States Briefing PRSEAH (Q3, 2024)

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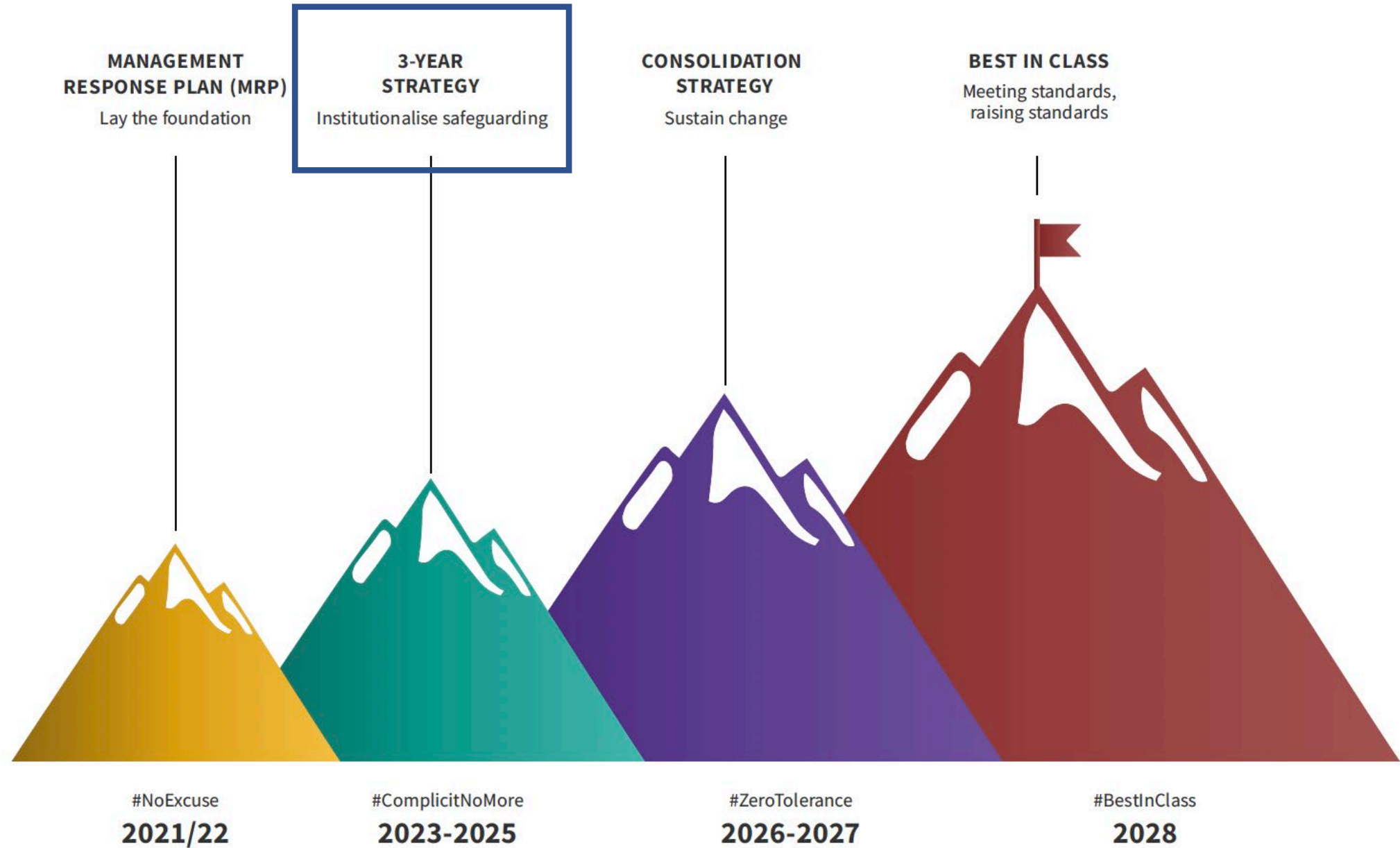


Please note that this event adheres to
the Code of Conduct to prevent
harassment, including sexual
harassment, at WHO Events



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THE PATH



Follow up on WHA 77/42

- **PRS Accountability framework for Member states for *joint MS-WHO work in the health sector***



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Climbing the ladder of responsibility



MS engagement on PRS via GBs

PBAC Report to the 154th session of EB

...requested the Secretariat to, amongst other actions, “elaborate proposals on how joint accountability of the Secretariat and Member States for safeguarding from sexual misconduct in WHO-led operations can be achieved”.

Prevention of sexual exploitation, abuse and harassment

Report of the Programme, Budget and Administration Committee of
the Executive Board to the Seventy-seventh World Health Assembly

WHA 77

...noted this report tasking the Secretariat to “continue to formulate proposed options for...ensuring Member State accountability for safeguarding joint government and WHO operations against sexual misconduct.”



How the Framework was developed

- i. Desk review - **existing requirements, standards, directives, protocols**, and guidance across the UN and Humanitarian systems, and non-UN references, including but not limited to OCED-DAC recommendations, MOPAN standards.
- ii. Interviews - UN and other development and humanitarian stakeholders, Member States, civil society, and academia, their **expectations from government/Member States**.
- iii. Conducted a dedicated session at the 2023 Annual **PRS Stakeholder Review Conference**.
- iv. Analyzed feedback from **WHO's country offices and workforce**
- v. Contributed to, aligned with, and drew upon **current work in the UN** for engaging governments on sexual exploitation and abuse



1. **Protect the populations** we serve and our personnel from SEAH/SM by our respective workforces, collaborators, and implementing partners. **Do no harm.**
2. A **minimum starting-point** to safeguard WHO-Member State collaboration from sexual misconduct, and to be strengthened and further developed over time, including with Secretariat support
3. Applies primarily to WHO and Member States' entities **joint work in the health sector**, but can be adopted by other sectors/ministries, in both development and humanitarian settings. **Development and humanitarian**
4. Is **non-binding**, owned by Member States, supported by WHO and aimed at strengthening institutional capacity for PRS in health sector work across stakeholders.
5. Is **aligned** to **WHO's PRS** Accountability Framework and with ongoing **UN efforts** for government roles and responsibilities in PRS; and draws on existing international standards and requirements (IP protocol, CAPSEAH, OECD-DAC Recommendations)

Purpose, scope & approach





Chapter 2: UN DEVELOPMENT SYSTEM SUPPORT TO THE 2030 AGENDA

Focus: Outline and justify the selection of priorities of UN development system support to the country to accelerate progress towards the 2030 Agenda and SDG targets

2.1. From CCA to Cooperation Framework Priorities

Proposed inclusion of PSEA

Annex 5: Programme Management & Accountability in the Cooperation Framework

- *Protection from Sexual Exploitation and Abuse (PSEA) is a key priority for the UNCT entities, with a special focus on prioritizing victims' rights and creating an environment in which sexual exploitation and abuse (SEA) do not occur. SEA is unacceptable behavior and is prohibited for UN personnel and UN implementing partners. The UNCT entities will therefore pursue all appropriate means to protect against, prevent and respond to SEA, and will require a similar commitment from its partners.*
- *In delivering on the obligations articulated in the present Cooperation Framework, the UNCT and the government of [insert name] affirm their commitment to preventing and responding to reports of SEA in connection with their personnel involved in common/joint projects. It is understood that this would entail the need to:*
 - *(i) adhere to common values on PSEA,*
 - *(ii) take preventative measures against SEA*
 - *(iii) investigate allegations, and*
 - *(iv) take appropriate corrective action when incidents occur, including providing support to victims in accordance with a victim-centred approach*

Schedule for signing UNSDCF

- **13 countries in 2024**
- **40 countries in 2025**



In many countries, the Ministry of Health or its equivalent is **already implementing prevention and response** actions. In others, the MOH is spearheading this work across the government and influencing other ministries.

Examples:

- Syrian Arab Republic
- Malawi
- Jordan

It is already happening !



Member State Accountability Triad for safeguarding from sexual misconduct - Draft 1

1. Policy

Code of conduct, standards of expected behaviour, prevention and response standards



Codification of intent

2. Training

Sensitization
Training
For personnel & collaborators



Create awareness
knowledge &
skills

In WHO-Govt joint
work/operations

Mutually reinforcing



3. Incident management capacity

Victim support
Investigation
Disciplinary measures



Put the pieces
into place for
response

The Proposed Framework

A77/42



Policy and standards

- A written and agreed policy for the prevention and response to sexual misconduct by own workforce and implementing partners, distinct from or complementary to the existing policies related to the broader issue of gender or gender-based violence.
- Code of Ethics, Code of Conduct and related consequences for not adhering to them.
- Minimum standards and interventions for the prevention and response to sexual misconduct

Workforce capacitation (personnel and collaborators)

- Sensitization and training on policies and standards for personnel
- Sensitization and training on policies and standards for implementing partners and collaborators
- Plans for repeated and sustained learning for workforce
- Special training prior to health emergencies response
- Special training targeted at specialist functions such as investigations, victim/survivor support and skills for managers

Incident management

- Establishing safe and accessible reporting mechanisms and communication to at-risk populations and workforce
- Provision of Victim/survivor-centered support and services regardless of state of investigation
- Transparent mechanisms for holding perpetrators accountable when allegations are substantiated, including administrative actions or referral to local or national judicial systems.

What we have learnt about Cross-cutting Requirements



- ✓ MoH as a path-finder/lead for safeguarding from sexual misconduct for government entities.
- ✓ For joint WHO-Govt activities and operations
- ✓ Adapting to country context. But using universal principles and norms
- ✓ WHO to support with
 1. Standard setting
 2. Tools for self assessment (individual and institutional)
 3. Capacity development support from policy to practice
 4. Align with broader UN requirements

Other updates

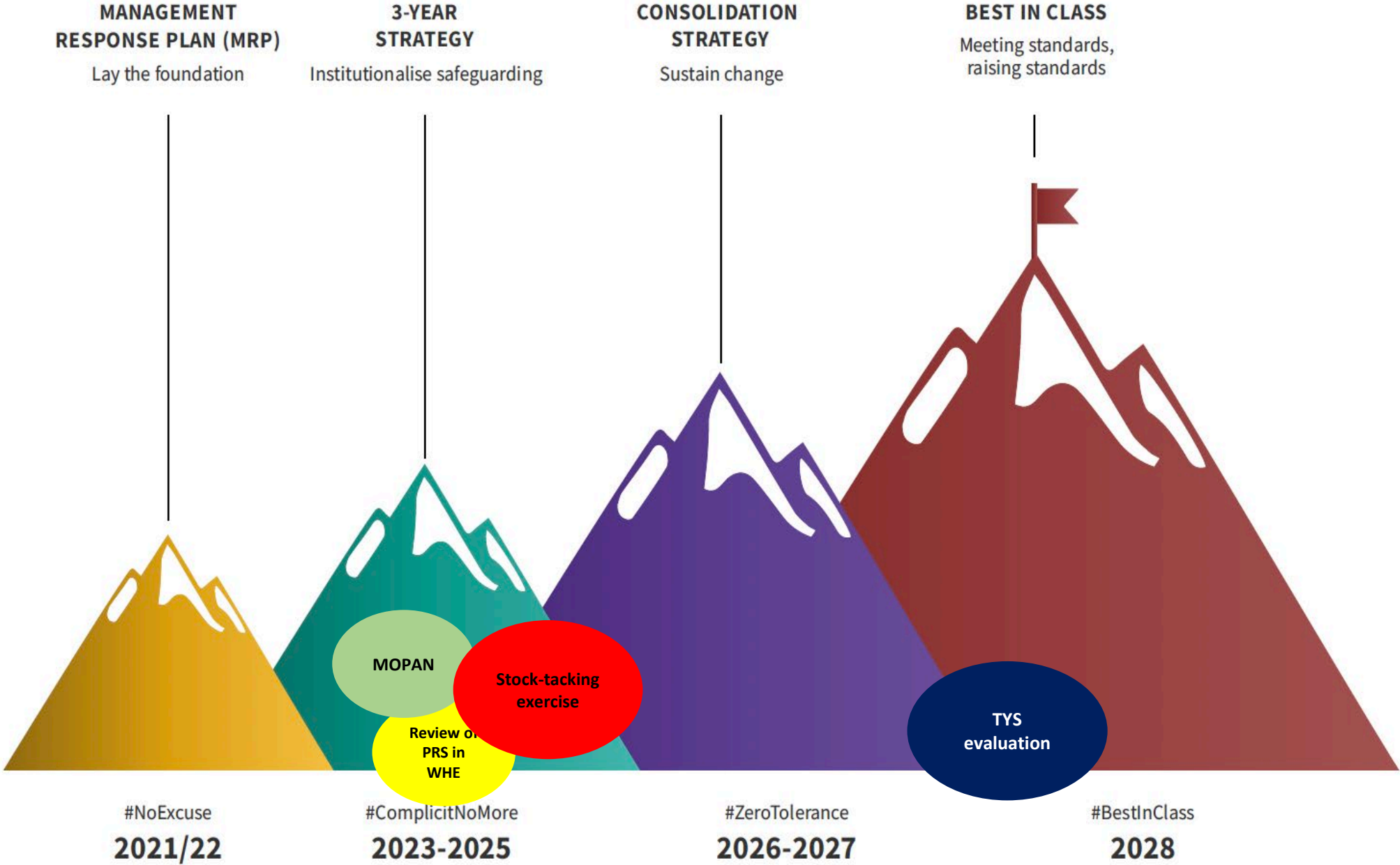
- **Three-year Strategy Progress Tracking**



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Assessing progress



Key progress in the past quarter



1. Victim and survivor-centred approach

- 1.New Victim and Survivor Support Officer hired, coordinating with UN system
- 2.Focus on making the SM Incident management system more victim and survivor-centred as a priority
3. Data collection form 400+ FPs globally initiated on challenges of applying a VSCA

2. Policies, procedures

- 1.New set of SoPs under development to further institutionalize PRS
- 2.Revised SM Risk assessment tool for countries , and new tool for ROs, HQ and outposted office
- 3.Systematic review being commissioned to further inform policy review and strategy development Post-2025

3. Safeguarding operations

- 1.PRS in graded emergencies – continues but with limited human and financial resources
- 2.Progress in assessing and capacitating implementing partners in X/15 priority countries (82%)
- 3.WR clinics started in EMRO, EURO

Other updates

Internal

1. Review of PRSEAH in health emergencies underway
2. “Stocktaking” exercise initiated
3. Tools developed for new annual Management letter from RDs, HWCO to DG on delivery of PRS accountabilities
4. Tool for assessing and managing SEAHG risk in HQ, ROs and outposted offices being finalized

External

1. UN JIU review of PSEA in 27 UN agencies underway
2. WHO Co-leading UN workstream on improving training at country level (For RC/HC; Agency Heads; IASC coordinators, Agency FPs)
3. WHO contribution to IASC Coordinators’ training
4. Benchmarking against OECD-DAC standards

*Announcement: 2nd Annual PRS Stakeholder Review Conference **3-4 December**, Geneva*

