

SEAH Risk Assessment Tool

Purpose

This will support you to assess the potential risks of sexual exploitation, abuse and sexual harassment (SEAH) taking place in your organisation and to consider what measures should be in place to mitigate those risks. This guidance note will support you to understand and complete the Risk Assessment Tool available in excel.

Definitions

Sexual exploitation means any actual or attempted action to exploit a position of vulnerability, differential power or trust for sexual purposes. It includes, profiting financially socially or politically from the sexual exploitation of another person.

Sexual abuse means an actual or threatened physical intrusion of a sexual nature, whether by force or under unequal or coercive conditions.

Sexual harassment means unwanted sexual attention and advances (physical, verbal and non-verbal), sexual remarks, jokes, showing pornography, and causing a hostile work environment.

PSEAH is the protection from sexual exploitation, abuse and sexual harassment.

SEAH is that type of harm caused by staff, volunteers or other associates of an organisation¹. Typically, sexual exploitation and abuse is perpetrated by staff against a member of the community and sexual harassment is perpetrated by one staff member against another.

To ensure there is consistency in preventing and responding to SEAH, organisations should conduct an assessment of risks regularly, at least annually. The review process should be participatory and include staff from across the organisation to understand the risks and the role they may play in mitigation measures. However, ultimate responsibility should be with senior management.

¹ Full and part-time staff, volunteers and other members associated with the organisation such as consultants and partners are collectively referred to as “staff” in this document.

Completing the Risk Assessment Tool in excel

The risk assessment tool requires you to consider 8 indicators. For each indicator, you must select the risk rating from a drop down box that most accurately describes the current situation in your organisation. You can choose between “Not at all”, “Partially” and “Fully”. The “Example mitigation measures and evidence table” below will support you rate yourself.

Choose “Not at all” if none of the suggested mitigation measures are in place.

Choose this option if your organisation does not use any of the measures listed in the “Example mitigation measures” table below. For example, there is no Code of Conduct that guides staff on how to behave and it does not mention expectations with regard to SEAH. Your organisation would score zero for this indicator and it means that the risk of SEAH is high.

Choose “Partially” if some of the suggested mitigation measures are in place.

Choose this option if your organisation uses some of the “Example mitigation measures” listed below. For example, there is an effort to recruit more women for a programme that will be targeting women and girls, but an overall gender imbalance still exists. Your organisation would score 1 point and it means that there is minimal risk, but actions are still needed to further mitigate the risks.

Choose “Fully” if all of the suggested mitigation measures are in place.

Choose this option if your organisation uses all of the “Example mitigation measures” listed below. For example, there is a Code of Conduct that clearly addresses the risk of SEAH for children and adults. It has been translated into local languages and all staff have been inducted and signed a declaration form. Your organisation would score 2 points and it means there is a reduced risk of SEAH.

Use the column “Comment on how you meet the indicator and attach evidence” to specify how the organisation is meeting the expectation and provide evidence.

List key documents that support your self-assessment score. For example, a Code of Conduct is in place, or name the templates related to safe recruitment, such as interview questions on safety and background checks.

Use the column “Planned remedial/mitigation measures (if you answered ‘Not at all’ or ‘Partially’)” to indicate the actions that the organisation will take to mitigate the identified.

Use the column “Risk Owner (e.g. Project Manager, HR or MEAL personnel etc.)” to indicate who will be responsible for the measures mentioned in the previous column.

For example, if the organisation has no female staff on a programme that will engage with women and girls, the organisation will need to show deliberate actions to recruit women, and to indicate timelines for completing those actions.

For example, HR manager, senior management, a project manager or MEAL personnel, depending on the risk. Having a designated risk owner ensures that someone is accountable for the risk. It is an important step towards ensuring that mitigations are implemented in a timely manner.

At the end of the assessment, the excel will calculate the overall rating based on the total scores for each indicator.

If your organisation scores 0 – 4, it will receive a High risk rating.

The likelihood of SEAH is high. Your organisation will need to develop an action plan that covers a range of indicators to mitigate the risks.

If your organisation scores 5 – 11, it will receive a Medium risk rating.

The likelihood of SEAH is medium. Your organisation will need to address those risks that not or only partially being mitigated. This may include engaging with senior management to invest in actions like capacity building and policy review as well as monitoring implementation.

If your organisation scores 12 – 16, it will receive a Low risk rating.

Your organisation is safe and there are no imminent SEAH risks. However, this does not mean that no further actions are needed. Your organisation will need to continue improving existing processes and monitoring risks and progress against mitigation measures to prevent any new risks.

Example mitigation measures and evidence table

Indicator	Common risks	Example mitigation measures	Comment on how you meet the indicator and attach evidence
Clear organisational commitment to PSEAH	<p>Your organisation doesn't have a standard approach to identifying, preventing and responding to PSEAH.</p> <p>There is a lack of clarity on how to identify and address PSEAH risks, including staff recruitment, whistleblowing, case management and handling.</p> <p>The organisation does not have a culture that considers gender equality.</p> <p>Your organisation is not clear on appropriate contextualisation of safeguarding standards.</p>	<p>A PSEAH policy², or a combination of policies, is approved by management. The policy states the organisation's commitment to PSEAH and the measures that will realise that commitment.</p> <p>The policy meets relevant standards and reflects local laws.</p> <p>The organisation is skilled in managing tensions that arise from implementing safeguarding standards in local contexts.</p>	<p>A policy that reflects PSEAH risks.</p> <p>The PSEAH policy is signed by new staff.</p> <p>Minutes from induction and refresher session signed.</p>
Safeguarding measures are monitored, and senior management held accountable	<p>Senior management are not clear on their role and responsibility for safeguarding.</p> <p>Senior management does not allocate responsibilities and resourcing for safeguarding.</p>	<p>Safeguarding is a regular agenda item at senior management meetings.</p> <p>There is a safeguarding focal point.</p> <p>An implementation plan for safeguarding exists and is properly funded.</p>	<p>Senior management team agenda and minutes.</p> <p>Safeguarding implementation plan.</p> <p>Safeguarding Focal Point job description.</p>

² PSEAH policy includes guidelines, procedures and processes that ensure consistency in preventing and responding to PSEAH and what structures are in place. See Annex 1 to this report for a checklist of what should be included in a PSEAH policy at a minimum.

	Safeguarding measures are not included in organisational reviews or monitoring processes.	Existing organisational reviews and monitoring processes include progress with implementing safeguarding measures.	
Clear expectations on staff, volunteers and associates on professional and personal conduct	Many employees don't recognise that PSEAH is their responsibility. Staff do not understand that their conduct must meet expectations in both their professional and personal life.	A Code of Conduct ³ for all staff that defines appropriate behaviour and identifies consequences for breaches. A Code of Conduct is translated into appropriate local languages.	A Code of Conduct that reflects PSEAH risks. A copy of the Code of Conduct signed by staff. The Code of Conduct in local languages.
All staff, volunteers and associates are recruited safely	Recruitment processes are weak and allow candidates with a previous record of SEAH violations to join the organisation.	Screening processes for potential staff are in place, such as background checks, references and interviews. Probation periods are used to ensure newly hired staff meet the expected behaviour regarding SEAH.	Screening guidelines for staff. Police clearance certificates for staff.
Effective and appropriate training and awareness on PSEAH is conducted	Staff are not aware of their safeguarding responsibilities.	Safeguarding induction training is delivered to new staff and board members. Regular meetings are used to continuously raise awareness on safeguarding. Refresher trainings are conducted annually.	Minutes of regular awareness raising sessions and trainings. Posters in local languages in places where all staff can see.

³ The Code of Conduct highlights acceptable and unacceptable behaviour and consequences of violation. This has a component that demands that staff, volunteers and associates (partners, visitors, donors) agree to commit in signing to the requirements of the Code of Conduct.

<p>Programmes are designed, implemented and monitored to ensure they are safe</p>	<p>Programmes are poorly designed and/or underfunded, which exacerbates the risk of SEAH.</p> <p>There are no clear standard operating procedures for particularly risky activities like cash programming, distribution activities or interaction with adolescents.</p> <p>Programme risk registers do not exist or do not include safeguarding.</p> <p>Partners and service providers delivering programmes do not have the necessary safeguards in place.</p> <p>No clear processes in place to monitor the safety of programmes.</p>	<p>Regular context analyses to inform programme design and implementation.</p> <p>An adequate gender balance (e.g. 50:50) for staff involved in the provision of services and programme, particularly for programmes directly engaging women and children.</p> <p>Robust programme management processes which encourage programme participants to assess and mitigate the risks of SEAH.</p> <p>Standard operating procedures for high-risk activities such as distributions, cash, children and adolescent programmes.</p> <p>SEAH risks and mitigation actions are included in the programme risk register.</p> <p>Safeguarding measures in all aspects of partnership and contracting.</p> <p>Indicators for monitoring the safety of programmes.</p>	<p>Risk register.</p> <p>Risk framework or guidance document used by the organisation to determine risks.</p>
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<p>Staff, programme participants and others are confident and knowledgeable to report concerns</p>	<p>Staff don't report concerns. Programme participants don't report concerns.</p>	<p>A formal complaints mechanism is designed with programme participants. A speak up and/or whistleblowing policy is introduced. Clear and confidential mechanisms are in place. Regular communications for staff and programme participants on reporting channels available.</p>	<p>The referral pathway (how cases are handled) when they are reported. Whistleblowing policy shared with staff. Emails or phone numbers for reporting shared and pinned in locations that everyone can safely access.</p>
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<p>Allegations and concerns are responded to effectively using a survivor-centred approach</p>	<p>Lack of capable staff with necessary skills and training in case management and investigation.</p> <p>Poor handling of cases has increased risks and affected the wellbeing of survivors.</p>	<p>A procedure for responding to concerns and allegations, including a system to record, investigate and monitor the outcome of safeguarding issues, while ensuring survivor-centred approach.</p> <p>Map local services and support for safe referrals.</p> <p>Appropriate staff are trained on case management and investigations or there is access to external support.</p> <p>An investigation committee is led by a trained investigator and guided by terms of reference and a plan.</p>	<p>Examples of cases that have been handled, excluding all personal details.</p>
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Annex 1: Checklist for a PSEAH Policy:

- Include a definition of what it covers, e.g. PSEAH
- Explain who is covered by the policy (scope)
- State the organisation's zero tolerance policy for staff, volunteers, partners and contractors committing harm, exploitation or abuse
- Outline the responsibilities of the organisation
- Outline the responsibilities of staff
- Refer to protection of whistleblowers (for anyone who discloses malpractice)
- Do the policies together cover all the vulnerable people that staff and programmes are likely to come into contact with? e.g. children, at risk adults, adolescent girl and women beneficiaries of assistance etc., as well as covering the harm to the organisation's own staff, volunteers and associates

Clearly state what conduct is prohibited. Include as a minimum:

- Sexual activity with a child under 18 years
- Sexual exploitation or abuse of a child or at-risk adult
- Physical, emotional or psychological abuse, or neglect of a child or at-risk adult
- Exchanging money, employment, goods or services for sexual activity
- Engaging in any sexual relationships with beneficiaries of assistance
- Engaging with sex workers
- Include additional guidelines on behaviour with children, such as not travelling alone with a child in a car or not spending a night with children and adult beneficiaries