

Safeguarding (or SEAH) risk assessment and management tool in emergencies

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Every civil society organisation (CSO), especially while operating in an emergency context under changing dynamics, faces a broad range of risks of Sexual Exploitation, Abuse and Sexual Harassment (SEAH) and other harms and abuses. A risk assessment should be reviewed routinely throughout your emergency programme cycle. It is central to the way every CSO prevents and responds to SEAH. RSH has developed this risk management guide to help you identify and manage the risks of SEAH and other harms and abuses that your CSO may face when operating in an emergency.

This is a tool for organisations working in a humanitarian emergency, such as conflict, natural disaster or a pandemic. If you want to share feedback on your experiences of using this tool, or if you have a query, please email us: info@safeguardingsupporthub.org.

This tool will be useful for:

- Staff with safeguarding responsibilities
- HR staff
- Security and risk staff
- Programme staff working on any programme area / sector
- Managers and directors with oversight of the risk management process

Note: Where “staff” are mentioned, we are referring to all staff and associated staff, including volunteers, representatives, contractors, and media representatives.

Steps in the risk management process:

Throughout emergency programme cycle: Coordination and consultation:

- Integrate safeguarding risk management with wider organisational risk management.
- Consult with all staff on SEAH risk factors and mitigations during regular meetings, small groups or individual meetings. Staff engaging with the affected population may be more aware of specific risks.
- Include input on SEAH risk factors and mitigations from different members of the community that your organisation interacts with (e.g. women, men, persons with disabilities, speakers of marginalised languages) and local stakeholders (e.g. faith leaders). Combine consultations with other programme consultations. Coordinate closely with existing community-based structures (including new and developing ones).

Step 1: Understand the (changing) situation and identify the risks:

- A quick desk review may answer some questions listed below. Staff and community members will be the best positioned to answer other questions.
- At minimum, a rapid risk assessment should be conducted at the beginning of an emergency. A complete risk assessment is needed later, while the action is in progress.

Step 2: Categorise the risks:

- Enter the risks in the risk register. Develop mitigating actions, assign responsibility and make the risk owner aware of their responsibility.
- Consider **likelihood** (the probability of the event occurring) and **impact** (how severe the harm could be for an individual or the organisation). Where you have time constraints, prioritise high risks. Immediately discuss them and ensure mitigations are in place.

1. Note how likely it is that the risk will occur	
Highly likely	3
Likely	2
Not likely	1

2. Note the likely impact for individuals and organisation	
High impact	3
Moderate impact	2
Minor impact	1

3. Calculate the overall risk rating: likelihood x impact	
High	7 to 9
Medium	4 to 6
Low	1 to 3

Step 3: Monitor, review and adapt

- Ask staff and community members (as appropriate): Are the identified risks and their priorities still valid? Do any new risks need to be added? Do high risks need to be escalated? Are all mitigating activities working? Are new mitigating activities necessary?
- When the situation is changing rapidly, monitor often, e.g. 2 days, once a week / month.



Step 4: Report

- Report on progress to senior management once a quarter. Also update staff so they are updated on hotspot locations and specific risks. This may be more often if risks are especially high.

Some key points before you get started!

- Use the list of risks below as a guide. It is not an exhaustive list of risks. Identify risks that are specific to your organisation, time and changing context.
- The risk environment changes drastically, and sometimes rapidly, during emergencies. Integrate risk assessment and management throughout the programme cycle.
- Do not reduce focus on keeping programmes and operations safe during an emergency.
- Stay alert to the background, beliefs about diversity, attitudes and behaviours of staff, their interaction with individuals affected, and circumstances where they have access to sensitive/ confidential personal information. Provision of goods and/or services may create a power imbalance, as staff might have or be perceived as having a level of authority.
- Observe staff interactions, listen to staff and do not dismiss rumours (from staff or community members) without further exploration. Be aware that rumours may be in languages you don't understand. Ask for confidential help in such situations.
- Pay attention to programmes set geographically in isolated work spaces and employees working in small groups who may have fewer opportunities to interact with the main CSO office.
- Observe how active staff and community members are online / in digital settings (e.g. in cash transfer / social protection projects) and consider any associated SEAH risks.

1. External environment

#	Area of risk	Guiding questions to risk identification
1.1	<p>Patterns of harm and abuse targeting different groups within the affected population.</p> <p>This may include abuse due to a person's age, gender, language, race, disability, nationality, sexual orientation, or a combination of characteristics such as gender plus age.</p>	<ul style="list-style-type: none"> * Is abuse or exploitation of certain groups normalised locally? E.g. child marriage, gender-based violence, corporal punishment, discrimination or abuse based on disability, race or nationality etc. * Is the age of consent to have sex with children lower than 18? * Is there cultural tolerance of exchange of money/gifts for sex between adults? * Are there particular groups of either children or adults who are more exposed to/at risk of harm? * What are common attitudes towards violence against, exploitation and abuse of women, elderlies, children, certain ethnic groups and LGBTQI groups in the areas in which you work? * Is it likely that CSO staff may share these norms, find them acceptable and act on them? * Is it likely that CSO staff may fail to act when they witness abuse? * Are people who speak up and report about SEAH listened to and taken seriously? * How much of the affected population is active online and in digital settings? Is abuse and exploitation online common amongst the affected population?
1.2	<p>Humanitarian context</p> <p>During emergencies, access to basic needs is often limited¹ and/or restricted². Risks relating</p>	<ul style="list-style-type: none"> * Have there been influxes of and/or changes in the aid organisations responding and the different actors engaging with people who have been affected by the disaster or crisis? * Are there many self-identified volunteers? * What is the likelihood of staff taking advantage of the situation and committing SEAH?

¹ Due to damaged civilian infrastructure, socio-economic vulnerabilities, damage/loss of identification documents, limited humanitarian access

² Due to deliberate deprivation including of certain groups, restricted humanitarian access, discriminatory curfews, ongoing military operations, territorial shifts

	<p>to SEAH and other harms and abuses (and to protection issues more generally) are often heightened.</p> <p>For persons with disabilities, unaccompanied and separated children, internally displaced people (IDPs), refugees, etc. the risk of abuse is heightened due in part to stigma, isolation, discrimination, lack of support.</p>	<ul style="list-style-type: none"> * Are basic services absent, insufficient or not functioning well? Could this lead to certain people being exploited and / or exchanging sexual acts for services, including food, goods, cash, shelter or security? * Is there a high proportion of the affected population living in poverty or unemployed? * Is access to basic needs or employment restricted to certain groups of the affected community? If any, who are the marginalised groups? * Are there high numbers of children or adults in need of protection or support? * Is there existing hate speech or discrimination shared on social media or other platforms targeting specific groups within the affected population? Who are they? * Are women and children spending more time online or engaging on platforms as a result of the emergency? Does this increase the risks of online grooming or trafficking? * What language(s) do the affected people speak? Can you verify this with data?
1.3	<p>Governance and law enforcement³</p> <p>Where there is poor local governance and weak law enforcement, policing or judiciary, cases of SEAH and other harms and abuses are more likely to occur due to lack of preventive measures, but less likely to be reported and responded to.</p>	<ul style="list-style-type: none"> * Have / how have governance and law enforcement been affected by the emergency situation? * What is the status of the rule of law? * Is the judiciary independent and responsive to any type of sexual abuse reported? * Does judiciary have the resources and infrastructure necessary to respond to reports of SEAH?

³ Basic desk review findings should be there prior to conducting the risk assessment

1.4	<p>Social and child protection systems</p> <p>Where there are weak social or child protection systems, it is less likely that local authorities can be relied upon to respond to SEAH and other harms and abuses.</p>	<ul style="list-style-type: none"> * What social nets, care and support exist for adults and children? Do they cover all community groups? (Note this may change and develop over time) * What community-based protection systems and mechanisms are in place and are these working effectively for all people? Do they also consider ways to discuss and understand digital risks, where relevant?
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2. Programmes

#	Area of risk	Guiding questions to risk identification
2.1	<p>Programme design</p> <p>Where there are no participatory risk assessments, the programme is less likely to deliver on aims and objectives safely.</p>	<ul style="list-style-type: none"> * Are programmes being designed without risk assessments? * Are risk assessments only informed by staff? If so, which category of staff (e.g. those in the office, those working with the community etc.)? Are they informed by different people in the community affected by the emergency, including those with specific needs, as well as local stakeholders, such as local gender-based violence organisations? * Have all potential costs for SEAH prevention and response activities been budgeted? * Did you note in the proposal that the SEAH measures may need to be adapted over time to make sure they are working?
2.2	<p>Programme implementation</p> <p>Where programmes are being delivered by staff who do not understand that different groups experience harm and abuse differently and may need different forms of programme</p>	<ul style="list-style-type: none"> * Have all the emergency staff been trained on basics of Safeguarding/SEAH in a language they understand well? * Are the staff aware of SEAH risks in the emergency context, including an understanding of the power they have over the affected population? * Where appropriate/safe, does your CSO have a clear visibility policy, so the affected community can recognise staff?

	intervention, there is a risk of SEAH and other harms and abuses.	<ul style="list-style-type: none"> * Do staff come from diverse groups? Are males and females available to conduct field activities? * Do programmes consider how different groups of children and adults can better participate or engage in activities? (e.g. Consider if and how you include persons with disabilities, older people, children and young girls and boys, socially isolated individuals, female-headed households, ethnic or linguistic minorities and stigmatised groups (for example, socially excluded groups, people living with HIV, LGBTQI people). * Have awareness raising activities or materials on safeguarding been developed and distributed (in the right language and accessible format) to the affected population? * Does the awareness raising to affected population clarify the conduct to expect from staff?
2.3	Programme monitoring If the organisation does not monitor if programmes are being delivered safely, there is a risk of SEAH.	<ul style="list-style-type: none"> * Are there clear indicators for monitoring harm and abuse that might be caused by the response? * Are monitoring questions, asked about the safe delivery of the programme, designed to detect concerns (e.g. unintended marginalisation of certain groups)? * Do staff conducting the monitoring exercises know how to safely identify concerns and to respond appropriately?
2.4	Community based complaints mechanisms (CBCM) Where programme participants and community are not involved in the design of the CBCM, they are less likely to make use of it. The mechanism may not be safe or meet the specific needs of vulnerable groups in the community such	<ul style="list-style-type: none"> * Has the CBCM been jointly designed with communities to enable safe access for different groups? * Especially during the emergency, does the CSO respond in a timely manner to SEAH allegations? * Are there multiple channels for communities to complain, meeting the needs of especially vulnerable people in the community (e.g. dedicated phone line, complaints boxes, verbal communication)? * Are the reporting channels based on existing communications tools that the community already uses?

<p>as children, women, persons with disabilities, etc. Where organisations do not have a clear process on how to respond to a SEAH report and what the steps are, it is less likely that staff will respond appropriately and objectively.</p>	<ul style="list-style-type: none"> * Is there a case handling process in place for the emergency setting(s)? (Click here for more) * Are all emergency staff aware of what to do if they receive a disclosure or a report? * Do you have systems to receive and manage feedback in multiple languages? * Do you have a system to ensure that any translation of reports is kept confidential? * If you receive a report about a staff member from another organisation, do you know how to share information on SEAH reports with other organisations in a safe and confidential way? * Is there a mapping of essential, existing and trusted services, legislation and formal authorities that can be used to support or refer a survivor to where necessary? Does this consider what languages services are offered in? (Click here for a mapping tool)
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3. Partnerships

#	Area of risk	Guiding questions to risk identification
3.1	<p>Partnership There can be risks of SEAH and other harms and abuses in many situations, including where: (1) you are working with implementing partners in situations where oversight and due diligence is reduced, such as during emergencies,</p>	<ul style="list-style-type: none"> * Does the partnership agreement process ensure safeguarding / SEAH Due Diligence for external partners? * Has your CSO adjusted their procedures to allow fast tracking for the partner Due Diligence process in emergencies, particularly in instances of remote implementation? * Have you put in place a system to complete comprehensive Due Diligence in due course? * Do partners have their own policies/code of conduct? Are they relevant to the context and meet global safeguarding and PSEAH standards? (Click here for more). * Have partners been assessed for their staff's capacity to implement safeguarding? * Have you outlined clearly how your organisation will support the partners to strengthen their capacity on safeguarding / PSEAH?

<p>(2) partners are (relatively) new to safeguarding / SEAH, (3) SEAH / safeguarding policy, procedures and training are not tailored to the partner and emergency setting (some terms, points may be contrary to their values), (4) partners have to expand quickly due to an emergency, and (5) partners do not feel comfortable asking about SEAH because they think their funding or other resources will be cut.</p>	<ul style="list-style-type: none"> * Have you made it clear to your partner that they should adapt community reporting procedures in line with risk and community input? * Are there clear plans and funding to train partners on safeguarding before the start activities in the specific emergency? * Are your safeguarding/PSEAH contractual requirements resourced and do they understand the context appropriately? * Does your partner feel comfortable reaching out to you to ask for advice on SEAH-related cases, or do they feel anxious that their funding will be cut if they report SEAH cases to you?
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4. Communications and safe information management

#	Area of risk	Guiding questions to risk identification
4.1	<p>Communication Where communication materials do not maintain safety, dignity and privacy of programme participants and community, there are risks of</p>	<ul style="list-style-type: none"> * Are there contextually relevant guidelines on obtaining informed consent in emergencies and safely publishing images and stories, (e.g. in ways that do not reinforce negative stereotypes, which detail not using the full name and other identifying information)? * Has the CSO obtained informed consent in a language understood by people being featured, fully understanding how their information will be used?

	SEAH and other harms and abuses.	<ul style="list-style-type: none"> * Are images explicit or do they show abuse in a way that could bring back memories of abuse or a harmful situation? * Is the language and terminology used locally appropriate and relevant? * Will the use of a particular terminology cause tensions in the emergency context?
4.2	<p>Safe management of information and data protection</p> <p>Where systems are not in place to protect information shared by staff and community members, this might expose them to risks of SEAH and other harms and abuses.</p>	<ul style="list-style-type: none"> * Is information on staff and communities held on password or in a locked folder and in protected databases? Is there restricted access to these databases? * Is the sharing of information on staff and communities subject to data protection regulations? * Do all staff understand confidentiality and its importance for SEAH? * Is there an individual database for reports and complaints which is password, or otherwise, protected? * Is access to this database restricted to named individuals who hold particular responsibility for safeguarding and complaints/reports?

5. Human resources

#	Area of risk	Guiding questions to risk identification
5.1	<p>Recruitment</p> <p>There may be risks of SEAH and other harms and abuses: (1) where there are no reference checks for new candidates and questions during interviews to assess</p>	<ul style="list-style-type: none"> * Are two or more references which also consider personal behaviour and approach to SEAH taken for successful candidates, including volunteers? (Note: a reference does not have to be written, it can be verbal or community-led) * Is a police record check, or locally relevant alternative, completed? * Are questions asked during interview on understanding what safeguarding is/means as a staff member and on suitability to work with children and communities? * Do all staff receive an orientation / induction on safeguarding and SEAH?

	knowledge and commitment to PSEAH / safeguarding, and (2) where staff do not understand organisation's code of conduct and safeguarding / SEAH policy	<ul style="list-style-type: none"> * Do all staff sign a code of conduct and sign / commit to the relevant organisational policies on Safeguarding? * Do you have a code of conduct or summary version in language(s) understood by all staff. * Does staff training include safeguarding and SEAH?
5.2	Fast Track Procedures During rapid emergencies which require a quick response, organisations may take short cuts, e.g. not conducting background checks, or not doing adequate risk assessments. Taking these short cuts may undermine the safety of the programme.	<ul style="list-style-type: none"> * Does your organisation have the diversity considerations mainstreamed in their hiring policy⁴? * Does your organisation have Fast Track Policy and Procedures for recruitment and procurement in emergencies, maintaining rapid background checks and SEAH considerations? * Are there many individuals (“good Samaritans”) helping with the situation and do they know about SEAH?
5.3	Reporting Where safe and confidential systems for staff to report against SEAH are not in place or not well known by all staff, this might expose them and the community to risk of retaliation	<ul style="list-style-type: none"> * Is there a system in place for all staff to report suspicious or confirmed misconduct/wrongdoing? * Do all staff know that there is a reporting system in place, and how to access/use it to report misconduct? * Do they feel safe using it and trust passing on rumours of SEAH and other harms and abuses to their line manager or someone within their organisation? * Do all staff know how to safely receive a disclosure/report and respond appropriately?

⁴ When the work place, or the sector in general, does not mirror the diverse reality of the field or focus on hiring individuals of certain groups or backgrounds, then there might be increased chances for exploiting certain group(s) of the community with less opportunities to report on the witnessed incidents.

against SEAH and other harms and abuses.	<ul style="list-style-type: none"> * Do all staff know what confidentiality is and why it's important? * Do all staff know the disciplinary measures in case of proven misconduct?
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6. Governance, culture and leadership

#	Area of risk	Guiding questions to risk identification
6.1	<p>Culture and Leadership</p> <p>There may be risks of SEAH and other harms and abuses:</p> <p>(1) where there is no dedicated safeguarding focal person with a job description outlining expectations; (2) where there is no risk register reviewed regularly by management or the risk register does not include safeguarding; (3) where departmental heads are not responsible for integrating safeguarding into their area of responsibility; and (4) where leadership do not act swiftly or in a transparent or accountable way following reports or suspicions of abuse,</p>	<ul style="list-style-type: none"> * Is there a trained safeguarding focal point in the organisation? * Do all staff know who the safeguarding focal points are and how to contact them? * Is safeguarding included in the organisational risk register? * Do departmental heads understand their own and their team's role on safeguarding? * Is there any monitoring tool, checklist etc. they use to ensure that their team is implementing safeguarding? * Does leadership act swiftly and in a transparent way following reports or suspicions of abuse? * Is staff wellbeing considered by leadership? * Do all staff feel safe to contribute and challenge without fear of humiliation, repercussions or other?
6.2	<p>Reporting / Investigation</p> <p>There may be risks of SEAH and other harms and abuses:</p>	<ul style="list-style-type: none"> * Is there a process/routine in place to govern the reporting and investigation processes? * Is there a clear case handling response process with responsibilities? * Does the organisation know if and when it may be more appropriate to call for external investigators?

<p>(1) where documented policy / process does not contain guidelines on what to do if a report falls outside the scope of the organisation;</p> <p>(2) where the organisation is unable to manage complaints safely, e.g the organisation does not have the skills to undertake investigations or know where to access support externally</p>	
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