

Key Messages for Donors on PSEA
Developed by IASC AAP/PSEA Task Team
Members in IASC PSEA-focused Task Team Meeting on 14 May 2018

1. **Encourage reporting whilst upholding the confidentiality of individual cases**
 - a. Donors should encourage reporting and question organisations with zero-reports of cases.
 - b. The confidentiality of individuals is paramount to ensure the protection of whistle-blowers and survivors of SEA.
2. **Support broader and linked AAP activities to ensure affected people are at the heart of any PSEA work**
 - a. AAP actions that focus on developing trust through continuous participation of affected people in designing safer programmes and our feedback and reporting systems on AAP and SEA must be prioritised. Affected people must have information about their rights, what behaviour to expect from aid workers and means by which to feedback and complain. Ensuring such information and communication opportunities are available in the languages affected people understand is an essential component of effective AAP and PSEA.
 - b. Work with PSEA/AAP actors to develop measures that collectively improve victim/survivor assistance and protection.
3. **Advance access to justice for survivors of SEA**
 - a. The UN SG underscores the need for troop-contributing countries to have national investigators deployed with troops or on standby to avoid delays. Donors should seek to fill such gaps also for investigations and prosecution of humanitarian and development aid workers operating outside their own country in order to prevent impunity for SEA that results from lack of extra-territorial laws or enforcement of such laws.
 - b. Donors should support setting up a permanent, independent SEA claims body, equipped with technical expertise, investigative and adjudicative powers, and the capacity to receive claims directly from complainants in host countries.
 - c. Support and funding from donors is key to improve collection and preservation of forensic/medical evidence of SEA that is acceptable in court. An initiative by Médecins du Monde Switzerland and the University of Geneva where the health and legal sectors in Benin, Cameroon and Haiti cooperate, could be emulated in peacekeeping and humanitarian settings. This initiative hands over the legally valid forensic evidence to the survivors, to be used when they so wish.
4. **Prioritise funding (a) field level AAP/PSEA actions and (b) research initiatives to increase our collective evidence-base**
 - a. Field-initiatives that aim to prevent and protect affected people from SEA (and other breaches of accountability) are given sufficient and continued funding.
 - b. Provide funds for research projects that improve our evidence-base on PSEA; including the importance of linking it to the wider accountability agenda.
5. **Shift reporting requirements from quantitative to qualitative**
 - a. Reporting requirements need to change away from: number of cases; number of complaints mechanisms etc. to a more in-depth and qualitative review of the quality of our AAP/PSEA systems and how they prevent/protect affected people from SEA and other breaches of accountability.
 - b. Donors should hold organisations to account if they fail to deliver on core AAP/PSEA commitments.
6. **Strengthen HCT leadership around PSEA**
 - a. Donors should advocate for AAP/PSEA standing agenda items in HCT meetings; to develop key messages for communities and keep tabs on: SEA risk factors; affected people's engagement in the humanitarian response and confidence in providing feedback and reporting; how the /feedback/complaints systems are working and how the humanitarian response subsequently needs to be adapted. In addition, donors should engage with PSEA Networks and HCTs to be better informed of collective activities.
 - b. Donors should support initiatives that aim to mainstream AAP and PSEA into the HPC.
7. **Prioritise continuity of the IASC AAP/PSEA Task Team to deliver results**
 - a. Donors should advocate for the prioritisation of the IASC AAP/PSEA Task Team and encourage continuity beyond the current life-span (due to end December 2018) to encourage planning and delivery of greater collective results.
 - b. Donors should consider providing additional resources to the Task Team to allow outreach at the regional levels and initiate research activities.
 - c. Donors should advocate for decision-making around the future/continuity of the Task Team to be timely.

Underpinning all of the above, is a request for **commonalities** across the donors in terms of: common reporting requirements, common definitions (of PSEA, AAP etc.) and common standards. In addition, **sustainability** is key. Continuity/multi-year funding should be prioritised and reach out and support when needed to civil-society organisations (e.g. those that are often first responders and those providing legal aid etc.) should be provided when possible.