

Inter-Agency Risk Assessment (IARA)on Sexual Exploitation and Abuse (IARA SEA) in Sudan

CDF Sudan and Sudan PSEA Network – Strategic Advisory Group (SAG)

Executive Summary

According to SEA Risk Overview (SEARO) Index of 2024, recipients of aid in Sudan are at higher risk of SEA by aid workers. Triggered by the continued conflict and the ever-increasing demand for humanitarian support, Sudan PSEA Network, committed to preventing and responding to SEA, recognizes the urgent need for a comprehensive understanding of the current SEA risk landscape across Sudan as well as for prioritized recommendations for mitigation measures. This country-level Inter-Agency Rapid Assessment (IARA) on SEA is the first in Sudan amid conflict covering 12 states either directly affected by conflict or hosting displaced people.

This study synthesizes secondary data, including inter-agency assessments, response plans, and surveys, to analyze the risks of Sexual Exploitation and Abuse (SEA) within the humanitarian context of Sudan, drawing comparisons with high-risk environments like South Sudan. This rapid but comprehensive assessment involved desk review. It also included key informants' interviews as well as focus group discussions with government and NGOs actors, PSEA Focal Points, frontline staff and displaced communities. The findings, examined through the lens of a standard SEA dimensions framework (Context, Program Operations, Aid Worker Conduct, and Community Factors), reveal a consistently high likelihood of SEA, exacerbated by ongoing emergencies, displacement, and socio-economic vulnerabilities.

While a commitment to PSEA integration and survivor assistance is evident in policy and strategic planning, significant systemic and operational gaps impede effective prevention and response. These include weaknesses in inter-agency coordination, inconsistent SEA risk assessments, inadequate reporting mechanisms, insufficient and inconsistent PSEA training for personnel, and challenges in the consistent implementation of safeguarding measures across program operations. These gaps are collective responsibility of the humanitarian actors such as NGOs, UN agencies and government counterparts.

Issues related to aid worker conduct, such as underreporting and a lack of comprehensive understanding of SEA principles, further compound the risks. Despite community condemnation of SEA, barriers to reporting and a lack of trust in existing channels hinder community-led protection efforts.

However, the study also identifies crucial existing synergies that offer a foundation for strengthening PSEA. Leveraging established GBV and Child Protection referral pathways, the presence of inter-agency PSEA networks, the development of inter-agency SOPs, and the emergence of community-based PSEA initiatives represent key opportunities for building a more robust safeguarding framework.

The analysis of the data involved the identification of most significant SEA risks, which was categorized under the four dimensions of the IARA SEA Frames work: enabling environment, context, operational context and protective environment.

Key Findings: The highest SEA risks are found to be:

Dimension 1: Enabling Environment

- Lack of a clearly defined unified PSEA policy leading to inconsistencies in implementation and comprehensiveness across different government entities and sectors.
- The varied and often non-specific approaches of vetting systems increasing the vulnerability

Dimension 2: Context

 Significant challenges in registration, selection, and distribution processes increasing the risk to SEA within vulnerable groups, i.e., IDPs, refugees, returnees, host communities, who are unaware of aid worker Codes of Conduct and the free provision of assistance. of individuals to abuse by government personnel with undetected histories of SEA.

Dimension 3: Operational Context

- Programs involving direct interaction with beneficiaries, especially during aid distribution and when targeting vulnerable groups, carrying a higher risk of SEA.
- Individuals holding positions of power or authority within aid organizations, government entities, service providers, and influential community members being the primary actors likely to commit SEA.

 The varying levels of understanding of what constitutes SEA among frontline staff leading to a failure to prevent, identify, or report SEA.

Dimension 4: Protective Environment

- Significant gaps in PSEA Focal Points' interagency collaboration, legal knowledge, referral expertise, and overall resources and skills creating risks of ineffective survivor assistance and poor coordination. For instance, inactive PSEA network in some of the states and where it exists, not all representers are keen to attend the meetings.
- Fear and lack of trust in community, e.g., committees, representatives, leaders, and staff reporting channels acting as significant barriers to disclosing SEA incidents.

Prioritized Recommendations

- Develop and enact a comprehensive, unified inclusive national PSEA Policy applicable across all
 government entities and sectors, coupled with the standardization and strengthening of vetting
 procedures for all government personnel, as well as capacitating the Focal Points.
- Streamline and improve the transparency and accessibility of registration, selection, and distribution processes, alongside implementing mandatory, comprehensive, and regularly refreshed PSEA training for all frontline staff.
- Implement robust inclusive PSEA risk assessments for all programs involving direct beneficiary
 interaction and establish clear protocols and Standard Operating Procedures (SOPs) for these
 interactions, coupled with the rigorous vetting and enforcement of clear Codes of Conduct (CoC) for
 all staff and partners, particularly those in positions of authority.
- Provide comprehensive and ongoing capacity-building for PSEA Focal Points focusing on key areas like
 inter-agency collaboration and referral pathways as well as inclusive approaches, e.g., targeting
 persons with disabilities, alongside establishing and promoting safe, confidential, and accessible
 reporting channels for both communities and staff, including robust whistleblower protection.
- Community outreach PSEA awareness activities to increase and encourage reporting.
- Inclusive, safe, confidential, and diversified FAMs for SEA reports especially for vulnerable people.
- Appointment of at least two PSEA Focal Points (one man and one woman) in each community to encourage SEA reporting from both sexes.
- To increase the accountability of vendors and non-NGO figures who deal directly with the community by training them on PSEA and signing PSEA Code of Conduct.

Conclusion

To effectively mitigate SEA risks and ensure accountability in Sudan, a comprehensive and multi-faceted approach is urgently required. This necessitates a concerted effort to address the identified gaps through enhanced leadership and prioritization of PSEA at all levels, improved inter-agency coordination and information sharing, systematic and regular SEA risk assessments integrated into program design, the establishment of safe and accessible reporting channels with robust whistleblower protection, mandatory and ongoing comprehensive PSEA training for all personnel, and the consistent application of survivor-centered approaches in all interventions. Crucially, capitalizing on existing synergies through dedicated strengthening, resourcing, and sustained commitment is paramount to translate policy into tangible protection for the vulnerable populations in Sudan, including those in high-risk areas, especially those who are at higher risk, such as persons with disabilities.

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Inter-Agency Risk Assessment on Sexual Exploitation and Abuse (IARA SEA) in Sudan

1 Situation Background

Sexual exploitation and abuse (SEA) represent a grave protection concern within humanitarian and development contexts globally, and Sudan is no exception. The protracted humanitarian crisis, widespread displacement, and ongoing conflicts in the country have significantly increased vulnerabilities and heightened the risk of SEA for affected populations.

The Sexual Exploitation and Abuse Risk Overview (SEARO) is a Composite Index that brings together indicators on a range of different factors that can influence the risk of SEA. SEARO categorizes countries with ongoing humanitarian response operations according to their level of risk, enabling comparisons of risk between countries and assessing how those risks change over time. According to the recent SEARO Global Index Sudan is ranked as sixth out of 37 countries most at-risk of SEA in humanitarian or aid settings. This means that recipients of aid in Sudan are at higher risk of SEA by aid workers (UNICEF, OCHA and IASC, 2025).

The ongoing conflict, which erupted in April 2023, has triggered one of the world's most severe humanitarian crises, displacing millions and significantly increasing protection risks. In such an unstable environment, where access to services, oversight mechanisms, and safe reporting channels is severely constrained, coordinated and robust PSEA measures are essential to ensure that humanitarian assistance does not cause further harm.

Following the Sudan - Multisector Needs Assessment (MSNA) 2024¹, 40% (Female: 41%; Male 39%) of respondents mentioned were not informed by organizations providing assistance that the assistance is free, and not provided in exchange for anything. Moreover, 52% (Female: 54%; Male 51%) were not aware of any mechanism to provide feedback and make complaints regarding humanitarian assistance or aid workers.

On the one hand, it is worth highlighting South Sudan's experience as best practice in addressing SEA risks within its emergency response, particularly as outlined in its Refugee Response Plan of the year 2024. The country undertakes a proactive approach in a high-risk environment marked by significant pre-existing GBV prevalence. Recognizing the heightened vulnerability created by displacement and disrupted social structures, the response prioritizes mainstreaming PSEA as a critical, cross-cutting element across all sectors. Key strategies include establishing and strengthening inter-agency PSEA Networks for coordinated prevention and response, alongside robust community engagement and awareness campaigns tailored to the local context. Furthermore, Sudan's approach strategically links PSEA response to existing GBV and child protection referral pathways, aiming to leverage and reinforce these established mechanisms to provide essential support to survivors of SEA within the broader protection framework.

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¹ Data collected between June and August 2024, covering 22.6K households across 166 localities.

On the other hand, West Darfur State in Sudan conducted the first Inter-agency SEA Risk Assessment conducted in July 2021. The assessment paints a picture of a high-risk operating environment due to active conflict, displacement, economic instability, and dependence on aid. The assessment identified a perceived low-medium risk by surveyed staff, contrasting with the prevailing vulnerabilities. Key contributing factors to SEA were noted as a lack of awareness of conduct standards, poor monitoring, the absence of reporting mechanisms, impunity, and insufficient PSEA training. Recommendations to mitigate these risks included increasing awareness of zero tolerance, ensuring comprehensive PSEA training, establishing simple reporting and monitoring frameworks with accountability, spreading awareness among affected communities, and establishing a PSEA task force integrated into coordination forums and response plans. The assessment also revealed significant gaps in frontline responders' knowledge and understanding of SEA definitions and core principles.

Taking these two recent regional and national examples into consideration, the Sudan PSEA Network, committed to preventing and responding to SEA, recognizes the urgent need for a comprehensive understanding of the current SEA risk landscape across Sudan as well as prioritized recommendations for mitigation measures. This country-level Inter-Agency Rapid Assessment (IARA) on SEA risk assessment is the first in Sudan amid conflict covering 12 states, both under conflict and displaced people hosting states (Fig. 1). The aim of this assessment is to provide critical data to inform strategic planning, targeted interventions, and effective advocacy to strengthen PSEA safeguards. The primary objective of this assessment is to:

- Identify and analyze specific SEA risks and vulnerabilities across Sudan.
- Map existing PSEA prevention and response mechanisms and identify gaps.
- Inform the development and implementation of appropriate mitigation measures to address identified PSEA gaps.
- Inform the allocation and prioritization of PSEA resources at the national and state levels.
- Provide baseline data for future monitoring and evaluation of PSEA interventions.
- Determine barriers to reporting SEA incidents and develop strategies for their mitigation.

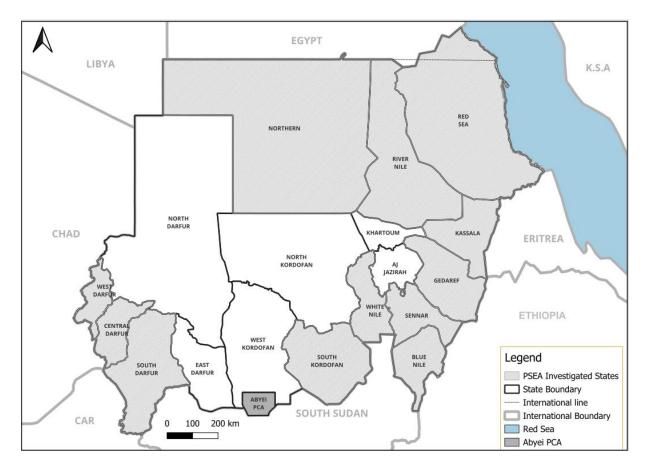


Figure 1 Geographical coverage of SEA risk investigation across Sudan

2 GBV and SEA Risk Mitigation in Sudan

The Sudan Humanitarian Needs and Response Plan (HRP) Executive Summary for 2025 outlines a clear strategy for "Mitigating GBV Risks," employing action plans grounded in IASC guidelines. The core objectives are to ensure safe access to essential services and to bolster both national and communitybased systems dedicated to GBV prevention and care. This strategic direction reflects a recognized need identified through comprehensive assessments, including the Multi-Sector Needs Assessment (MSNA), which likely informs the plan's priorities. Similarly, the Famine Prevention Plan – Sudan underscores the critical roles of the Child Protection Area of Responsibility (CP AoR) and the GBV Area of Responsibility in proactively preventing and mitigating risks of abuse, exploitation, and neglect, explicitly including GBV, particularly in contexts of food insecurity. A key element of this plan involves strengthening existing referral pathways and establishing crucial linkages to services for vulnerable populations, further demonstrating an understanding of the interconnected multi-sectoral needs highlighted by assessments. Moreover, the integration of Multi-Purpose Cash Assistance (MPCA) within the Famine Prevention Plan includes the specific aim to raise awareness about the risks of GBV and SEA, alongside facilitating referrals and connecting individuals with mental health and psychosocial support (MHPSS) services. This integration showcases an effort to embed GBV considerations within broader assistance programs, a strategy likely informed by MSNA findings that reveal the complex vulnerabilities faced by affected populations.

Regarding Survivor Assistance, the Sudan PSEA Network's Inter-Agency Standard Operating Procedures (SOPs) establish a "Human Rights-Based Approach and Victim/Survivor Centered Approach" as

foundational principles. These SOPs emphasize the provision of holistic assistance and unwavering support to survivors of SEA, irrespective of their involvement in any investigation processes. Central to this approach are the principles of safety, security, well-being, non-discrimination, and confidentiality, with specific considerations outlined for child survivors and survivors. Furthermore, the SOPs detail a referral mechanism designed to ensure that survivors receive immediate and appropriate support based on their informed consent, with the prioritization of their safety and confidentiality being paramount. Reinforcing this framework, the Inter-Agency Standard Operating Procedures (SOPs) for Protection from Sexual Exploitation & Abuse in Sudan (Referral Mechanisms, Recording & Processing Complaints, and Victim Assistance) - recently endorsed in December 2024 by the UNCT/HCT - explicitly states that assistance for SEA survivors is channelled through established GBV and Child Protection services and their existing referral pathways, indicating a strategic reliance on these pre-existing structures. The Famine Prevention Plan further underscores the importance of survivor assistance by emphasizing the need to make safe, confidential, and appropriate systems of care, including functional referral pathways for GBV survivors, readily accessible. This plan also highlights the necessity of ensuring that staff engaged in famine response possess the fundamental skills to provide survivors with accurate information on where they can access crucial support, including linkages to safe spaces and mental health and psychosocial support (MHPSS) services.

3 Gaps and Synergies in PSEA Efforts in Sudan Context

Significant *gaps* persist in the PSEA framework within Sudan, such as the lack of a PSEA and PSEA Communication Strategy. The OSCSEA survey in 2024 further underscores these challenges, pointing to a disconnect between mandatory PSEA training upon employment and the insufficient provision of additional, induction, or refresher training for a substantial portion of UN personnel. This survey also revealed a significant number of staff aware of potential SEA incidents who did not report them due to factors such as a lack of knowledge on reporting procedures or a perceived lack of impact. High rates of unreported sexual harassment and abuse of power within the UN system also signal critical internal gaps in safeguarding. Moreover, the West Darfur-specific assessment identified localized gaps including a lack of awareness regarding conduct standards, inadequate follow-up and monitoring of interventions, the absence of reporting mechanisms at the time of the assessment, a climate of impunity due to a lack of action on reported cases, and insufficient relevant PSEA training for staff.

Despite these considerable gaps, there are *existing synergies* that provide a foundation for strengthening PSEA efforts. The established reliance on existing GBV and Child Protection referral pathways for aiding with SEA survivors, as noted in the UNCT/HCT strategy and the Famine Prevention Plan, presents a potential synergy, contingent upon these pathways being adequately resourced and sensitive to the specific needs of SEA survivors. The presence of Inter-agency PSEA Networks, while currently facing coordination leadership gaps, offers a crucial structural framework for collaboration among various actors, as emphasized in the Sudan PSEA Network SOPs. The development of Inter-Agency SOPs for PSEA by the Sudan PSEA Network, even if facing implementation challenges, represents a vital step towards standardization and a key area for enhanced synergy. The articulated commitment to mainstreaming PSEA across key strategic documents like the RRP and the HRP, despite identified gaps in its full integration, indicates a recognized priority and a potential avenue for increased synergy across different sectors of the humanitarian response. Finally, the development of community-based PSEA networks in direct cooperation with communities, as highlighted in the Sudan PSEA Network SOPs, offers a significant synergy for improving communication, building trust, and establishing safe and accessible reporting

mechanisms that are tailored to the specific contexts and needs of affected populations. The utilization of the inter-agency Community Feedback Mechanism (CFM) platform will be useful, as it is widely used.

4 Methodology

4.1 Ethical Guidelines

All steps have been taken to ensure that the methodology of this IARA on SEA in Sudan complies strictly with the ethical guidelines for evaluation established by the United Nations Evaluation Group (UNEG, 2017) as well as those involving children (Anne et al., 2013), to which CDF Sudan and the Sudan PSEA Network adhere. These directives involve in particular: respect for dignity, the principle of non-discrimination, rights, confidentiality and the prevention of prejudice.

4.2 Data Acquirement and Processing

Figure (2) shows the coverage of the collected data from the 12 states of Sudan. The data included interviews with Key Informant (KI) and Focus Group Discussion (FGD). The post entry data control included compilation, cleaning, pre-processing and formatting, in Excel sheet platform.

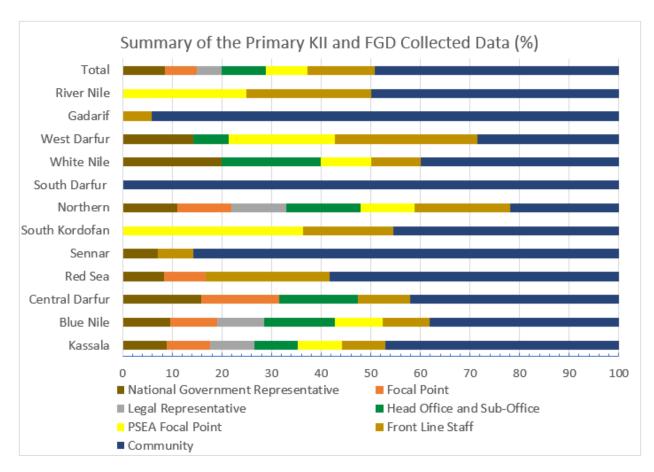


Figure 2 Summary of the collected primary data

4.2.1 Key Informant Interviews (KIIs)

The interviews targeted government actors representing government PSEA Focal Points levels, legal representatives and Heads of Offices and sub-Offices.

4.2.2 Focus Group Discussions (FGDs)

4.2.2.1 Communities

With the aim of identifying the risks and protection needs of communities on SEA, understanding their concerns and improving the way assistance is provided for a safer community, FGDs were held with separated community members' groups of 10 - 12 adults and youth of men and women.

4.2.2.2 Front-line staff groups

With the aim of identifying the risks and protection needs in relation to SEA, for better understanding and improvement of the way assistance is provided, FGDs were held with separated aid/ development workers' groups of 10 - 12 of men and women.

4.2.2.3 Cluster and working groups of PSEA Focal Points

Surveys with PSEA Focal Points from the Children Development Foundation.

4.3 SEA Risk Analysis

The analysis of the SEA risk was conducted following the framework of IARA on SEA Risk. Table (1) shows the four dimensions of the framework and the corresponding analysis aspects. The primary data source for the analysis is shown as well.

Table 1 Data sources applied for the analysis following the IARA risk framework

Dimension	Description	Data Source
(1) Enabling Environment	Laws, policies, government institutions, and community knowledge and attitudes related to gender, GBV, and SEA.	KII with government actors FGD Guide for Communities
(2) Context	Factors within the affected communities that increase vulnerability to SEA and attitudes and behaviors of aid and development workers that could contribute to SEA risks.	FGD Guide for PSEA Focal Points FGD Guide for Frontline Staff FGD Guide for Communities
(3) Operational Context	Aspects of the humanitarian response, including the presence and practices of response institutions (senior leadership, organizational culture, HR practices, partnerships) and response modalities (collective frameworks, programming).	KII with Heads of Office/Sub-Office FGD Guide for Frontline Staff FGD Guide for PSEA Focal Points FGD Guide for Communities
(4) Preventive Environment	The capacity and resources in place to prevent and respond to SEA, including coordination structures, PSEA Focal Points, survivor assistance mechanisms, reporting channels, awareness-raising efforts, and accountability measures.	KII for Heads of Office/Sub-Office FGD Guide for PSEA Focal Points FGD Guide for Communities FGD Guide for Frontline Staff

5 Key Findings of Sudan Situation within SEA High-Risk Dimensions

5.1 Dimension One: Enabling Environment

A) Laws, policies, government institutions knowledge

a) Rule of law and status of implementation of PSEA-related laws and policies:

PSEA Policy:

- Several responses explicitly state the existence of government policies, regulations, or efforts aimed at protection and addressing sexual exploitation and abuse. This indicates that PSEArelated issues are being addressed at some level within the government framework. For instance, within the harassment law, action is taken against the perpetrator, however, assistance for the survivor is provided only for the children.
- The identified key messages strongly align with core PSEA principles, including prevention (against violence, zero tolerance), protection (child rights, survivor protection), accountability (reporting, no harassment), and awareness/training. The inclusion of "Code of Conduct" and "Fundamental principles of humanitarian action" further supports this.
- A significant portion of the responding government entities (~ 73%) work within humanitarian and protection-related fields. This suggests a strong potential understanding of and engagement with PSEA principles.
- The clear statement of the absence of a specific PSEA policy suggests that PSEA might be addressed within broader legal frameworks (criminal code, child abuse laws) or sector-specific regulations.
- The diverse scope of work suggests that the formalization and implementation of PSEA might vary across different government entities. Overall, there is a general understanding of key aspects of PSEA among the government actors who responded with a definition. However, the depth and breadth of understanding vary. The instances of "do not know" or very limited definitions highlight the need for continued awareness-raising and capacity building to ensure a consistent and thorough understanding of PSEA across all relevant government entities.

Risk:

 Lack of a clearly defined unified inclusive PSEA policy could lead to inconsistencies in implementation and comprehensiveness across different government entities and sectors. The reconciliation and government impunity for some high-ranking positions exacerbate the risk of saving the perpetrators from sanctions and the continuation of SEA risk. Not holding the perpetrator accountable may lead in sever instances to community-based retaliation.

Recommendation

While mechanisms for sanctioning perpetrators exist, the analysis underscores the need for:

- clear and consistently applied PSEA-specific policies that outline sanctions.
- ensuring that legal frameworks are effectively utilized and that perpetrators face appropriate criminal penalties.
- addressing and preventing harmful informal consequences like community-based retaliation.
- a consistent approach that prioritizes the rights and safety of survivors and holds perpetrators accountable.

Vetting System:

- A portion of government entities report having some form of vetting in place, such as requesting
 police reports or conducting security checks. However, the comprehensiveness and specific
 focus on SEA history of these mechanisms vary.
- A substantial number of entities indicate either no current vetting system or a lack of a system specifically designed to identify prior SEA offenses.
- Some entities are in the process of establishing SEA vetting mechanisms, indicating a growing awareness of the importance of this issue.

Risk:

- The varied and often non-specific approaches – non- standardized and non-comprehensive - of vetting systems increase the vulnerability of individuals, particularly those already at risk of SEA, to abuse by government personnel who may have a history of SEA that was not detected during the hiring process.

Recommendation

There is need for a standardized PSEA policy and vetting procedures across all government entities.

Code of Conduct for government staff:

- There is no uniform requirement across government entities for agents in direct contact with beneficiaries to sign a CoC.
- Even where a requirement exists, actual signing rates can be low, raising concerns about awareness and accountability.
- How PSEA is addressed in the CoC is often implicit, referring broadly to laws, regulations, or consequences of misconduct rather than explicitly outlining PSEA principles and expected behaviors.
- While PSEA is being addressed in the department's CoC through formal rules and alignment with legal frameworks, the awareness of this CoC among staff is highly variable, with concerningly low levels in some areas.
- The inclusion of PSEA in the government department CoC appears to be inconsistent and facing challenges. While there is a clear understanding of the need to explicitly include PSEA with clear definitions, policies, and responsibilities, there are also indications of potential lack of penalties in some COCs, difficulties in implementing COCs and reliance on existing laws and regulations, which may not always be sufficiently specific to PSEA.

Risk:

- The lack of a consistent requirement for a signed CoC, coupled with potentially ambiguous or unenforced PSEA provisions within government staff, creates a significant risk of insufficient safeguarding measures for beneficiaries.
- Weakness in integrated PSEA into the CoC hinders effective prevention and addressment of SEA within government departments.

Recommendation

There is need for the PSEA Inter-agency Network to engage and support government entities on prioritizing PSEA aspects in their policies since the government workers are hugely involved in service provision and interactions with the communities.

b) Government's structures, systems, and practices

PSEA training

- While a slight majority of responses indicate a requirement for PSEA training, this requirement is not universal across all *government entities*. This suggests a lack of a standardized, governmentwide policy on PSEA training.
- Even when training is mandated or provided, the actual percentage of government staff trained varies widely. This reveals a serious inconsistency in implementation and a potential failure to prioritize PSEA training consistently.
- There is a segment of *Focal Points* with some foundational knowledge of PSEA principles, legal frameworks, prevention, and response mechanisms, gained through training. Some even possess the skills to train others. However, a significant portion of them lack basic PSEA training, hindering their ability to effectively address SEA.
- Even among those who have received training, *Focal Points* identified needs for more in-depth knowledge, advanced skills, and specific areas like coordination and reporting.
- While there might be efforts to build capacity within the *legal sector* on SEA, it is not yet universal among this group.
- Potential additional capacity needs for *legal representatives* in areas such as deeper cultural
 understanding, advanced legal expertise and application, specialized PSEA knowledge, enhanced
 training delivery skills, and practical case management.

Risk:

- The combination of a lack of universal training requirements and the existence of entities with very low or zero training rates creates a high-risk scenario. It increases the vulnerability of beneficiaries to SEA and leaves *government agents* ill-equipped to handle PSEA-related situations.
- Lack of a standardized, government-wide policy on PSEA training.
- Need for more focused expertise in PSEA through special training, underscores the low capacity of the *legal representatives* to effectively handle SEA cases.
- Weak coordination and reporting skills of *Focal Points* threaten the reporting and investigating processes.

Recommendation

There is a strong need for:

- o a clear, mandatory government-wide policy on PSEA training.
- increased resources and support for PSEA training initiatives.
- o systematic tracking and monitoring of training coverage.
- o targeted interventions to address the gaps in training identified in this data.

Reporting Mechanism

Channels

- Multiple channels are available for reporting SEA allegations involving government agents, though the awareness and accessibility of these channels varies. These channels include: internal administrative structures, law enforcement agencies, the formal legal system, specialized government units, UN agencies, hotlines, complaints boxes and emails (with potential limitations in confidentiality and follow-up).
- Several channels available for reporting SEA allegations involving government agents are
 identified by the *Focal Points*. These include formal legal, internal administrative pathways
 within government institutions, specialized units, and external/support mechanisms like
 hotlines, compliant box, telephone.
- According to the *legal representatives*, SEA cases reach the project officer through a variety of
 channels, including direct reporting from survivors, formal reporting systems, information
 shared through families and community networks, referrals from other entities like police and
 service providers, and ongoing reporting until the abuse ceases.

Clarity

- While some government officials appear to be clear on the reporting process for SEA allegations, there are significant concerns about a lack of consistent understanding.
- While some government officials report that the process is "Very clear," a larger number indicate that it is "Not clear" for various reasons, including cultural factors, process issues, and a general lack of transparency.

Risk

- Serious concern about the lack of clarity and consistency in how SEA allegations are reported within *government agencies*.
- The variability in understanding poses a risk to the effective reporting and handling of SEA cases.

Key steps of the process once SEA cases are received:

- 1. Immediate Response: Receiving the report and providing initial support and care to the survivor, including medical and psychosocial assistance, after taking consent from the survivor
- 2. Risk Assessment: Evaluating the immediate and potential risks to the survivor and others.
- 3. Documentation: Recording the details of the reported case.
- 4. Referral: Transferring the case to the appropriate authorities, which may include the police, Public Prosecution Office, child and family protection units, or legal aid services.
- 5. Investigation: Conducting inquiries into the allegations, potentially involving interviews with parties involved.
- 6. Legal Action: Involving law enforcement to potentially arrest the assailant and pursuing legal proceedings through the prosecution.
- 7. Follow-up and Accountability: Ensuring that action is taken on the report and that accountability is pursued, particularly through the legal system.
- 8. Internal Escalation: Informing relevant supervisors or internal bodies.

Upon receiving a complaint, the typical process involves:

- Initial Assessment and Response: Acknowledging the complaint and potentially providing immediate support.
- 2. Medical Attention: Arranging for a medical check and healthcare if needed.
- 3. Reporting and Referral: Transferring the complaint to the appropriate legal authorities, such as the police or Public Prosecution, and potentially other competent bodies or service providers.
- 4. Investigation: Conducting an inquiry into the allegations, which may involve interviewing the parties involved.
- 5. Action Against Perpetrator: In some cases, immediate arrest of the alleged perpetrator may occur.

Risk:

- Complaints being filed away due to job risk in some instances indicate a significant systemic failure in upholding PSEA principles in all situations.

Survivor Assistance

• The protections offered include maintaining confidentiality, providing health care and psychosocial support, ensuring physical safety through security measures and safe places, offering legal support, and facilitating rehabilitation.

Accountability

- The consequences and sanctions that perpetrators of SEA face within the *government entities* vary and range from dismissal from employment to severe legal penalties, and in one alarming instance, the risk of community-based retaliation.
- According to *legal representatives*, perpetrators can face a range of consequences, including imprisonment, criminal penalties determined by law, administrative sanctions, dismissal or suspension from work, and deterrent penalties.

Risk

- Reliance on broader criminal laws and the mention of "minimum punishments" and "revenge against the survivor's tribe" suggest that the specific application and severity of sanctions for SEA might not be consistently strict across all contexts, that might increase the potential for harmful informal consequences outside the formal justice system.
- c) Government commitment to PSEA and PSEA knowledge among government staff

SEA Risk Mitigation Measures

• For **government entities**, a range of measures are in place to mitigate SEA risks during activity implementation, with awareness raising and training being common strategies. However, there is a clear recognition of the need for strengthening these measures. The suggestions emphasize the importance of more comprehensive training, robust reporting mechanisms, stricter penalties, expanded awareness efforts, and strong leadership commitment.

 The mitigating SEA risks systems in place are weak in addressing the underlying power dynamics and vulnerabilities that contribute to SEA due to their potential for inadequate implementation, lack of enforcement, superficiality.

Risk

Weak SEA risk mitigation during activity implementation encourages SEA cases increment.

Recommendation

PSEA network and humanitarian actors on the ground in collaboration with government entities to strengthen the practice of conducting safety audits/rapid assessment using the inter-agency tools, to identify the risks and enhance risk mitigation measures in the projects

Community attitudes and knowledge related to SEA



- The community overwhelmingly demonstrates the strong consensus within the community that these types of exchanges for assistance are unacceptable. Over 90%, 100% and 98% of the community think personal communication, romantic relationship and marriage of a minor, respectively, in exchange for assistance is wrong.
- The community is concerned about SEA and acknowledges its potential risks within the aid context. While many respondents claim not to have directly heard of SEA incidents, the strong ethical condemnation of related scenarios indicates a clear understanding of what constitutes SEA and its wrongness.
- The actors potentially involved are diverse, ranging from aid workers to local leaders and community members. The favors requested range from explicit SEA scenarios to financial incentives, highlighting a broader concern about exploitation and abuse of power within the aid system.
- It is crucial to recognize the distinction between reported instances and ethical stances. While
 reports of explicit SEA may be limited, the community's strong condemnation of related
 scenarios and the identification of various potential actors underscore the importance of
 preventative measures and accountability mechanisms to address the risk of SEA in aid
 distribution.

barriers to community reporting

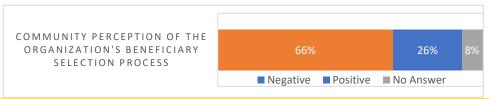
• Communities face substantial barriers to reporting SEA, primarily stemming from a deep-seated fear of retaliation and a lack of trust in authorities and organizations to handle reports safely

and effectively. This is compounded by a lack of awareness regarding reporting channels and procedures, the significant stigma and shame associated with SEA, a prevailing belief that reporting will be useless, a lack of perceived responsibility to report, and limited access to safe and confidential reporting mechanisms, all of which contribute to making the act of reporting a high-risk endeavour for potential reporters.

Risk:

High-risk factors for communities reporting SEA incidents are deeply rooted in concerns about safety, trust, knowledge of the system, and potential negative repercussions

5.2 Dimension Two: Context (Community Vulnerabilities and Aid Workers' Attitudes and Behaviors)



A) Community Vulnerability

- The community is largely uninformed about the code of conduct that aid workers should adhere to.
- The organization's communication regarding the beneficiary selection process appears to be inadequate for a significant portion of the population surveyed. While some communication channels exist, they are not reaching a substantial number of beneficiaries. There is a strong perception of a lack of transparency in how selections are made.
- Over 66% of responses indicate a negative perception of the organization's beneficiary selection
 process, while only about 26% express a positive perception. The overwhelming negative view is
 recurrently related to a lack of fairness, unclear criteria, transparency, and the exclusion of
 many who are perceived to be in need. The involvement of committees is a double-edged
 sword, seen as positive by some, for community representation but negative by others due to
 potential for bias or manipulation.

Risk:

- The significant challenges in the registration, selection, and distribution processes are the main barriers to accessing assistance. They increase the risk to SEA within vulnerable groups (children, girls, women, people with disability, elderly) who need assistance and are ignorant about the aid worker CoC as well as the free provision of assistance.

B) Aid and development workers' attitude and behaviors



• While the quantitative data on CoC awareness (83%) is encouraging on the surface, the qualitative analysis of the *frontline* staff's understanding of SEA behaviours poses a critical layer of caution. The variability in recognizing SEA strongly suggests that awareness of the CoC does not automatically translate to a deep understanding of its principles or the capacity for consistent application in real-world scenarios. The segment of staff unaware of the CoC (17%) altogether further amplifies these risks.

• Existence of risky behaviours among *frontline* staff that create substantial SEA risks. These behaviors involve the exploitation of power dynamics, the establishment of inappropriate relationships, the seeking of favors, and a failure to report misconduct.

Risk

- The varying levels of understanding of what constitutes SEA among *frontline staff* pose significant risks to beneficiaries. Without a clear and consistent grasp of prohibited behaviors and the standards outlined in the CoC, staff may fail to prevent, identify, or report SEA, potentially leading to harm, under-reporting, and an erosion of trust in the humanitarian mission.
- The highest SEA risks observed by PSEA Focal Points are: acts of sexual violence (rape); exploitation of vulnerable individuals (beneficiaries, children, women, people with disabilities) perpetrated by those in positions of power, including aid workers; the role of lack of awareness and accountability in enabling SEA; the risks inherent in aid distribution processes; and the impact of unequal relationships and a general lack of respect for rights.

5.3 Dimension Three: Operational Context

5.3.1 Response institutions:

A) Senior leadership:

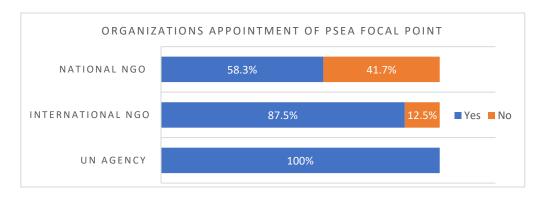
a) knowledge of PSEA responsibilities:

- The *Heads of Office/Agency* demonstrate a foundational awareness of their key PSEA responsibilities. However, the risks lie in the potential for varying depths of understanding, gaps in consistent and effective implementation, a focus on structures rather than outcomes, insufficient mainstreaming, unclear accountability mechanisms, and a less explicit emphasis on a survivor-centered approach in their leadership
- The Heads of Sub-Office reveals a concerning lack of consistent practice in sharing anonymized SEA allegation data with the RC/HC. This poses significant risks to national-level coordination, understanding the SEA landscape, risk analysis, strategic planning, accountability, and overall effectiveness of PSEA efforts in the country.

b) commitment to PSEA



Nearly half of the organizations report discussing PSEA regularly with staff indicating a positive
awareness of the importance of ongoing communication on this issue. However, the 26.1% that
communicate "Sometimes" suggests that PSEA is not consistently prioritized in all internal
communications. A combined 26.1% of organizations features rarely or never PSEA
communication with staff.



41.7% and 12.5% of National NGO and International NGOs senior staff, respectively, report that their organization has not appointed a PSEA Focal Point. In contrast, UN Agencies show full adoption of having a PSEA Focal Point among the respondents.

Risk

- Lack of consistent and frequent **communicatio**n indicates a potential lack of prioritization of PSEA by **senior leadership** in internal messaging. This poses significant risks to staff awareness, reporting, organizational culture, and overall PSEA effectiveness.
- Lack of basic PSEA infrastructure (not having a PSEA Focal point) significantly risks the lack of accountability, inconsistent implementation, inadequate support, potential for impunity, and hindered external coordination.

Recommendation:

- Organizations infrequently communicate about PSEA need to prioritize integrating PSEA messages into their regular internal communications to ensure it remains a key priority for all staff. The nearly one-quarter of organizations that rarely or never discuss PSEA need to urgently address this critical gap. The Inter-agency PSEA Network could utilize the platform to sensitize organizations' senior management on their PSEA accountability
- Addressing the fundamental gap in PSEA infrastructure requires urgent attention. This foundational requirement is crucial for establishing a basic level of PSEA capacity within these organizations. As NGOs do not have resources to assign a Focal Point, it would be more supportive to have PSEA Focal Point provided with resources. Alternatively, senior staff to be assigned with additional tasks and/or update of the ToR with resources being provided.

B) Organizational culture and practice

a) availability of Code of Conduct



- 83.3% of *frontline staff* report awareness of the Humanitarian Workers' Code of Conduct. This seemingly high percentage offers a degree of optimism, suggesting that the CoC has likely been introduced or discussed within the organization. However, the 16.7% of staff who explicitly stated they are not aware of the CoC represent a direct and significant vulnerability. They lack the foundational knowledge of the expected standards of behavior and the prohibitions against SEA.
- The qualitative data suggests that some staff might hold differing ethical baselines or have blind spots regarding certain behaviors. Even if they are aware of the CoC in theory, their individual understanding of what constitutes a violation in practice might be mistaken or incomplete.

Risk

- The disconnect between awareness and understanding significantly increases the risk of inconsistent application of the CoC's standards on the ground.

Recommendation:

- Organizations must go beyond simply disseminating the CoC and invest in comprehensive training, ongoing reinforcement, and robust monitoring mechanisms to ensure that staff truly understand, internalize, and consistently apply the CoC's standards to effectively prevent SEA.
- As some organizations already have CoC for staff who are not used to be included in CoC and training, e.g., casual workers, FSP workers, etc., this practise need to be widespread to include all organization.

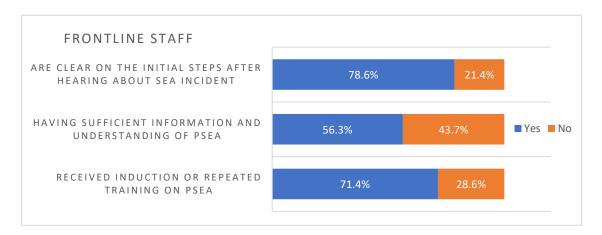
b) knowledge of organizational PSEA standards of conduct

- The analysis of behavior response of *frontline staff* shows a range of positive behaviors, including respect, honesty, avoiding exploitation, maintaining confidentiality and non-discrimination. This suggests an understanding of some core ethical principles. While "avoid sexual abuse and harassment" and "avoid flexible behavior to avoid sexual harassment and exploitation" are mentioned, there is a lack of detailed understanding of the spectrum of SEA beyond these explicit forms in many responses. The nuances of power imbalances leading to exploitation might be missed by some. In addition, there is less emphasis on proactive measures staff should take to prevent SEA beyond general ethical conduct. A significant gap is the explicitly mention of reporting by only one respondent, as reporting is crucial for accountability and survivor support.
- PSEA Focal Points generally understand their core roles, but significant gaps exist in their clarity
 and required skills for effective PSEA implementation. Key areas needing more clarity include
 inter-agency collaboration (reporting, follow-up, survivor support, joint investigations),
 navigating legal frameworks and procedures (national laws, investigation steps, engaging
 authorities, legal/social aspects of laws), understanding referral pathways, internal PSEA
 mechanisms (reporting/response), protecting reporters, managing cases (confidentiality),
 knowledge of psychosocial support, and their advocacy role.

Risk

- The risk is that a limited grasp of what fully constitutes SEA and how to actively prevent it will lead to inadequate preventative measures and unsafe programming. Furthermore, the insufficient highlighting of the mandatory duty to report suspected SEA by *frontline* staff may result in underreporting and a failure to address potential harm. Finally, unclear behavioral guidelines risk inconsistent interpretation and application, weakening the overall effectiveness of PSEA efforts in shaping staff conduct.
- The lack of confidence in existing referral systems and the significant gaps in resources, knowledge, and skills by *Focal Points* create substantial risks of ineffective survivor assistance, poor coordination, inadequate legal responses, and ultimately, a failure to create a safe and supportive environment for those affected by SEA.

c) PSEA training:



• Approximately 71.4% of the responding *frontline* staff indicated they have received induction or repeated training on PSEA. However, a significant 28.6% reported not receiving such training. On the other hand, around 56.3% of the respondents suggest sufficient information and understanding of PSEA, while 43.7% indicate a lack thereof. 78.6% of the staff seem clear on the initial steps after hearing about an incident. However, a notable 21.4% express a lack of clarity. Approximately 78.6% indicate they know how to refer survivors, while 21.4% express a lack of clarity or insufficient information.

Risk

Despite a majority of responding *frontline* staff indicating they have received PSEA training and generally know what to do and how to refer, the significant minority who report a lack of sufficient information and clarity in responding and referring highlights critical risks. These gaps in knowledge and understanding can directly impede effective PSEA prevention and response, potentially leading to harm for beneficiaries and undermining the organization's safeguarding efforts.

5.3.2 Response modalities: Programing: identification of program/ project risk

a) Types of programming/activities presenting increased risks of SEA

- The Focal Points identify programs involving direct interaction with beneficiaries, especially
 during the distribution of aid and when targeting vulnerable groups like children and women, as
 carrying a higher risk of SEA. The context of labor and registration processes are also highlighted
 as potential areas of concern.
- The *frontline* staff identify programs where the highest risk of SEA appears to be happening or is indicated as a concern: food/cash distribution, shelter programs, registration processes, programs targeting vulnerable individuals/households, livelihood and work programs and general service provision.

b) Types of actors presenting increased risks of SEA

- The **Focal Points** identify the primarily actors more likely to commit SEA as those holding positions of power or authority, including staff at all levels, managers, authorities, service providers, and potentially even community members in positions of influence.
- The frontline staff identify the actors more likely to commit SEA as the staff/aid workers, those
 in positions of power and authority, exploiters within the community and government
 officials/workers

c) Actions taken by organizations to mitigate SEA risks in projects/programs

 Organizations are undertaking various activities to mitigate SEA risks, primarily focusing on awareness, training, establishing codes of conduct, and setting up reporting mechanisms.
 However, there are identified gaps, particularly in ensuring clarity of processes, providing specific training on referrals, addressing fears related to reporting, and fully mainstreaming PSEA into all aspects of programming.

Recommendation

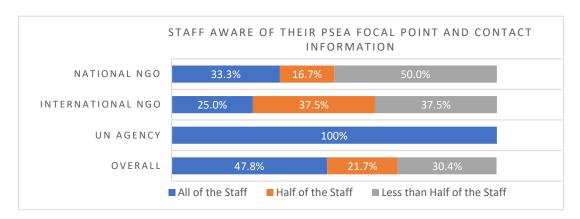
Representations from the different authorities, e.g., government, M&E and community leaders, to be present during the activities in of all programs especially in high-risk areas, to assure accountability.

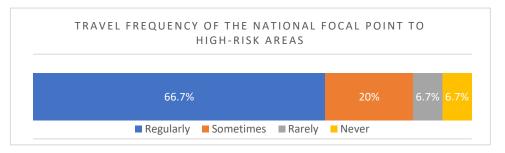
5.4 Dimension Four: Protective Environment

5.4.1 Capacities and resources

A) PSEA Focal Point capacity:

a) Consistency in PSEA Focal Point appointments within organizations





- The data strongly indicates that the majority of both International and National NGOs do not have dedicated PSEA Focal Points at the sub-national (provincial) level. This represents a significant gap in localized PSEA capacity. However, all responding UN Agencies report having sub-national PSEA Focal Points, suggesting a more decentralized structure within the UN system.
- While a majority of organizations with sub-national PSEA Focal Points indicate regular travel by their national counterparts, a significant 20% report only "Sometimes" travel, and a concerning 13.4% report "Rarely" or "Never." This percentage breakdown underscores the potential for inconsistent and, in some cases, severely lacking direct PSEA support and oversight from the national level to field operations, even in organizations that have established a decentralized PSEA structure. Addressing the reasons behind the "Sometimes," "Rarely," and "Never" responses is critical for ensuring adequate PSEA capacity and support at the field level.

Risk:

Risks linked to the absence of sub-national PSEA Focal Points: weakened field-level PSEA capacity, delayed or inadequate response in provinces, overburdening of national PSEA Focal Points, limited field-level ownership, and challenges in monitoring and mitigation at field level.

 Risks linked to the location of sub-national Focal Points: significant gaps in PSEA coverage leading to potential for inequity (uneven distribution of PSEA resources and support across different field locations).

Recommendation

- Establish and promote safe, confidential, and accessible reporting channels for both communities and staff, ensuring multiple options and clear procedures.
- Implement robust whistleblower protection policies to encourage staff reporting without fear of retaliation.
- Conduct awareness campaigns to build trust in reporting systems and address fears of negative consequences.
- Provide comprehensive training to all staff, especially frontline personnel, on receiving disclosures in a survivor-centered, inclusive disability and supportive manner.
- Strengthen investigation capacity within organizations and across the sector, ensuring timely, impartial, inclusive and survivor-sensitive investigations.
- Establish clear and transparent disciplinary procedures for SEA offenses, ensuring consistent application of sanctions.
- Implement survivor-centered approaches to accountability, ensuring survivors are informed and involved in the process where appropriate and safe.
- Promote transparency in accountability efforts to build trust and demonstrate commitment to PSEA.

b) PSEA Focal Points' technical capacity to perform the role.

- PSEA Focal Points generally understand their core roles, but significant gaps exist in their clarity
 and required skills for effective PSEA implementation. Key areas needing more clarity include
 inter-agency collaboration (reporting, follow-up, survivor support, joint investigations),
 navigating legal frameworks and procedures (national laws, investigation steps, engaging
 authorities, legal/social aspects of laws), understanding referral pathways, internal PSEA
 mechanisms (reporting/response), protecting reporters, managing cases (confidentiality),
 knowledge of psychosocial support, and their advocacy role.
- Focal Points require enhanced knowledge of legal/justice systems, social aspects of laws, available services, PSEA policies, national laws, and inclusive PSEA practice. They also need improved skills in case management, communication (general and PSEA messaging), complaint handling, referral pathways, training others, internal/external coordination, reporter protection/risk management, advocacy, and follow-up/monitoring.

Risk:

- While the general clarity of PSEA Focal Points on the basic role is positive, the identified gaps in inter-agency collaboration, legal knowledge, referral expertise, and other critical areas pose significant risks to the effectiveness of PSEA efforts.
- PSEA *Focal Points* lack of confidence in existing referral systems and the significant gaps in resources, knowledge, and skills create substantial risks of ineffective survivor assistance, poor

coordination, inadequate legal responses, and ultimately, a failure to create a safe and supportive environment for those affected by SEA.

5.4.2 Mechanism and accountability

A) Community Reporting:

a) safe, accessible, and appropriate reporting channels

While some community members are willing to report to various entities and are aware of
potential reporting channels (organization, police, leaders, human rights, UN, etc.), there are
also expressions of uncertainty about who to report to and a desire for more information on
available channels.

Risk

- The fear and lack of trust expressed by some community members indicate concerns about the safety and effectiveness of these channels and emerges as significant barriers to reporting.
- If individuals do not know how to report, who to report to, or what the process entails, reporting becomes a high-risk endeavor simply due to the unknown. Uncertainty breeds fear and inaction.

b) barriers to community reporting

Communities face substantial barriers to reporting SEA, primarily stemming from a deep-seated fear of retaliation and a lack of trust in authorities and organizations to handle reports safely and effectively. This is compounded by a lack of awareness regarding reporting channels and procedures, the significant stigma and shame associated with SEA, a prevailing belief that reporting will be useless, a lack of perceived responsibility to report, and limited access to safe and confidential reporting mechanisms, all of which contribute to making the act of reporting a high-risk endeavour for potential reporters.

Risk:

- High-risk factors for communities reporting SEA incidents are deeply rooted in concerns about safety, trust, knowledge of the system, and potential negative repercussions.

B) Staff Reporting:

a) awareness of where and how to report among staff members

 A combined 78.3% of organizations of head office/ sub office believe that "All" or "Most" of their staff are aware of mandatory reporting obligations, however, 21.7% of organizations still indicate that "Less than half" of their staff are fully aware, representing a continued risk.

Risk

- The risks are underreporting by organization staff, lack of accountability, and potential legal/ethical implications.

b) reporting barriers for staff

• The PSEA *Focal Points* highlight that fear of reprisal, lack of trust in the system, ineffective or difficult reporting mechanisms, and a lack of clear procedures and follow-up are significant barriers to staff reporting SEA.

Risk

 Lack of reporting prevents timely intervention, hinders accountability for perpetrators, and erodes the overall integrity and effectiveness of the organization's safeguarding measures, ultimately increasing the vulnerability of affected populations.

c) knowledge of how to safely handle SEA disclosures

• Frontline staff's ability to effectively handle PSEA disclosures is significantly threatened by a lack of clear procedures, insufficient knowledge of referral pathways, uncertainty about accountability, and limited skills in managing sensitive situations and providing initial support. These gaps risk inconsistent responses, delayed access to crucial services for survivors, eroded trust in the system, potential mishandling of disclosures causing further harm, and an incomplete understanding of survivors' long-term needs. Additionally, insufficient knowledge of national laws can lead to non-compliance, while a lack of specialized communication and emotional management skills risks ineffective and potentially harmful interactions, as well as staff burnout. Addressing these interconnected capacity weaknesses is vital for a survivor-centered and effective PSEA response.

Risk

While demonstrating some awareness of basic PSEA principles, *frontline* staff feel inadequately equipped to handle disclosures effectively. The consistent demand for more training and information across multiple areas points to significant capacity gaps that pose substantial risks to survivors and organizations. Risks related to survivors are: safety, physical and mental health, well-being, justice, breach in confidentiality, retaliation and stigmatisation, while those related to organisations are: lack of accountability, reputational risks, lack of trust, safety of staff, etc.

C) Inter-agency SEA Referral Procedures:

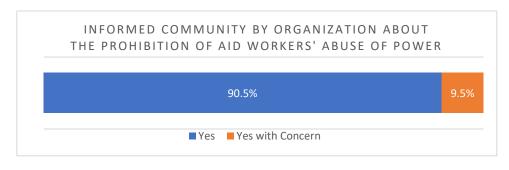
- a) availability of up-to-date inter-agency SEA referral procedures and their implementation by organizations
- The comfort level of PSEA Focal Points in referring cases to other organizations is significantly
 impacted by a lack of unified procedures, fear of obstruction and repercussions, insufficient
 inter-agency coordination, and inadequate training.

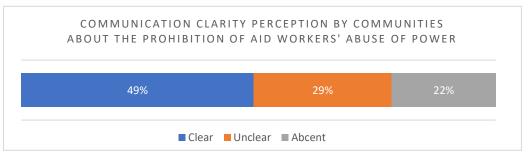
Risk

Ineffective PSEA response and accountability across the humanitarian sector.

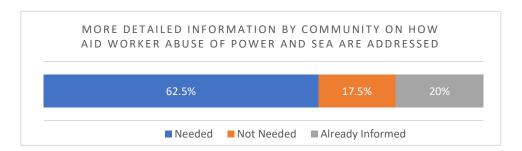
D) Community Awareness Raising

a) inclusion of PSEA awareness raising activities in programs





- Approximately 90.5% of the responses indicate that the community has been informed by
 organizations about the prohibition of aid workers' abuse of power. The remaining 9.5% of the
 responses indicate they were informed, but mentioning continued instances of abuse or being
 informed about a related but different topic.
- While almost half of the respondents found the communication clear, a significant portion experienced a lack of clarity or even a complete absence of communication on this sensitive issue.



62.5% of the community explicitly stated they want more information on how aid worker abuse
of power and SEA are addressed, particularly focusing on accountability, rights, protection, and
prevention.

Risk

- Inconsistent communication regarding PSEA principles and reporting mechanisms across the community hinders effective prevention and response. The lack of uniform clarity and

effectiveness in communication, potentially due to the sensitive nature of the topic and inconsistencies in information sharing and reception, risks leaving segments of the community uninformed or confused about what constitutes SEA and how to report it. This uneven understanding can lead to underreporting, delayed action, and a reduced ability for the community to protect themselves and hold perpetrators accountable.

b) communities' knowledge of aid and development workers' standards of conduct

 The repeated "I don't know" and similar statements directly indicate that the information about the expected behavior of aid workers has not reached a vast majority of the surveyed population. However. some community members do have expectations about how aid workers should behave

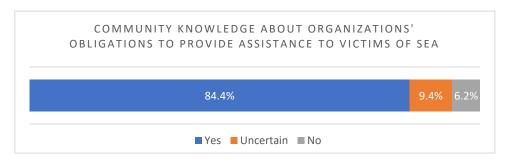
Risk

The universal lack of awareness and explicit knowledge of a formal CoC for aid workers among the community, both in general and specifically SEA related to, creates a significant risk of increased vulnerability to SEA, as individuals may fail to recognize or report inappropriate behaviour. This lack of awareness also hinders community-led accountability of aid workers, erodes trust between aid organizations and the community, and impedes reporting, ultimately undermining efforts to prevent and address sexual exploitation and abuse.

c) Communities' willingness to engage in efforts to combat SEA and recommendations for how to make these more effective.

• The data reveals a significant willingness within the community to report PSEA incidents, driven by a sense of justice and a desire to protect others and prevent future occurrences. However, this willingness is often contingent on assurances of safety and trust in the reporting mechanisms and the entities receiving the reports. Therefore, while the willingness to report exists, building effective reporting mechanisms requires a strong focus on ensuring the safety of reporters, fostering trust in the system and the receiving entities, and clearly communicating information about available channels and procedures.

d) communities' awareness of right to survivor assistance services



• Approximately 84.4% of the responses indicate that the community does have knowledge about organizations' obligations to provide assistance to survivors of SEA. Only a small percentage

- expressed uncertainty (9.4%) or a lack of knowledge (6.2%). This suggests a strong general awareness within the community about what organizations are expected to do in these situations.
- Survivors face significant difficulties accessing medical and psychological support due to fear of retaliation, stigma, and a lack of trust in organizations and reporting systems. Insufficient awareness of available services, coupled with a lack of safe and confidential reporting mechanisms, further deters help-seeking. Distrust in the organization's handling of sensitive information and fear of negative consequences for reporting also act as major barriers.
 Additionally, inaccessible or culturally inappropriate services, lack of consistent follow-up care, bureaucratic hurdles, insufficient trained personnel, and resistant community or norms to the importance of psychological support for SEA survivors.

Risk

Based on the community's knowledge of organizations' obligations and the difficulties in accessing support, the key risks linked to awareness of this right could be summarized as:

- Heightened frustration and disillusionment if expectations are unmet.
- Erosion of trust in organizations due to perceived hypocrisy.
- Increased vulnerability of survivors who come forward but cannot access support.
- Potential for self-blame and further psychological distress.
- Awareness campaigns are becoming unsuccessful if not matched by real change.

E) Accountability

a) organizations' investigation capacity

• PSEA Focal Points generally understand their core roles, but significant gaps exist in their clarity and required skills for effective PSEA implementation. Key areas needing more clarity include inter-agency collaboration (reporting, follow-up, survivor support, joint investigations), navigating legal frameworks and procedures (national laws, investigation steps, engaging authorities, legal/social aspects of laws), understanding referral pathways, internal PSEA mechanisms (reporting/response), protecting reporters, managing cases (confidentiality), knowledge of psychosocial support, and their advocacy role.

Risk

- The significant gaps in clarity and required skills among PSEA *Focal Points* severely undermine the effective implementation of PSEA measures. It risks inconsistent and inadequate responses to SEA, that can lead to mishandled cases, failure to provide necessary support to survivors, compromised investigations, and an overall weakened PSEA framework within the organization and its interactions with partners and communities.

6 SEA Risk Recommended Mitigation Actions

Based on the risks identified, the following (5) urgent mitigation actions are recommended for the following actors:

Risk	Recommended Mitigation Action	Key Actors
Lack of a Unified, Inclusive and Comprehensive PSEA Policy The absence of a clear, unified national PSEA policy and inconsistent vetting procedures within government institutions significantly elevates the risk of SEA by personnel, failing to adequately protect vulnerable individuals. This is exacerbated by the weak integration of PSEA into codes of conduct and the lack of standardized training, hindering effective prevention and response mechanisms across departments. Furthermore, insufficient SEA risk mitigation during activities, combined with potentially lenient legal sanctions and the threat of harmful informal consequences, creates a permissive environment for abuse and undermines accountability. This fragmented and potentially lenient framework weakens the	 Develop and enact a comprehensive, unified and inclusive national PSEA Policy applicable across all government entities and sectors. (Addresses the foundational lack of a framework) Standardize and strengthen vetting procedures for all government personnel, incorporating thorough background checks for SEA-related offenses. (Crucial for preventing perpetrators from entering the system) Review and strengthen legal frameworks to ensure consistent and strict sanctions for SEA offenses, clearly defined and enforced across all jurisdictions. (Essential for accountability and deterrence) 	 Government and Legal: Ministry of Justice, Legislative Bodies (Parliament), Relevant Ministries (Social Welfare, Interior, Education, Health), Judiciary, Law Enforcement Agencies. Coordination and Oversight: National PSEA Task Force/Coordination Body. Support and Advocacy: UN Agencies (UNICEF, UNHCR, UNFPA), International NGOs, Civil Society Organizations (CSOs).
state's capacity to safeguard against SEA. Factors Contributing to Inappropriate	1 Dayslan and implement inclusive comprehensive	Implementing Organizations: LIN
Relationships (Aid/Development Workers) The varying understanding of SEA among	and standardized PSEA training for all frontline staff, ensuring a clear and consistent understanding of SEA, prohibited behaviors, and	 Implementing Organizations: UN Agencies (OCHA, UNHCR, UNICEF, WFP, FAO, WHO, IOM, UNFPA), International and National NGOs.
frontline staff, coupled with a lack of clarity on prohibited behaviors and the code of conduct, creates a significant risk of	the code of conduct. (Addresses the knowledge gap among those directly interacting with communities)	 Government and Coordination: Government Ministries and Agencies involved in aid

Risk	Recommended Mitigation Action	Key Actors
unprevented, unidentified, and unreported SEA, leading to harm, underreporting, and eroded trust. This is compounded by the high observed risks of direct sexual violence, exploitation of vulnerable individuals by aid workers in positions of power, the enabling role of a lack of awareness and accountability, inherent risks in aid distribution, and the impact of unequal relationships and a general lack of respect for rights, all contributing to an environment where inappropriate relationships can thrive.	 Establish clear and accessible reporting mechanisms for suspected SEA incidents, ensuring confidentiality and protection for reporters. (Essential for enabling reporting when incidents occur) Strengthen accountability mechanisms for SEA offenses committed by aid workers, ensuring thorough investigations and appropriate sanctions. (Crucial for deterring abuse and building trust) 	coordination and regulation (e.g., HAC), PSEA Coordination Structures. Support and Capacity Building: Donor Organizations, Training Institutions, Staff Associations.
Community-Level Factors Reinforcing/Perpetuating SEA Despite a strong community consensus condemning exchanges for assistance as SEA and acknowledging its risks within the aid context, the diversity of potential actors involved – including aid workers, local leaders, and community members – and the range of favors requested, extending beyond explicit SEA to financial incentives, highlights a broader risk of exploitation and abuse of power within the aid system. While reported incidents of explicit SEA may be low, this underlying vulnerability and the potential for various actors to exploit power dynamics necessitates robust preventative	 Conduct community-based awareness campaigns to reinforce understanding of SEA, rights, and reporting mechanisms, targeting diverse community members and local leaders. (Long-term effort to shift norms and empower communities) Establish accessible and trusted community-based reporting channels. (Empowering communities to report safely) Engage local leaders and community influencers as PSEA champions. With a critical mass of the community in need, religious and traditional leaders are favorable to the promotion and protection of women's, children's and persons with disabilities rights and protection from GBV, including SEA. They are the ones who lead the people and can drive change at the community 	 Community and Local Structures: Community Leaders and Elders, Local Authorities, Religious Leaders, Women's Groups and Youth Groups, Local CSOs. Support and Facilitation: UN Agencies (UNICEF, UNHCR, UNFPA, UN Women), International and National NGOs. Outreach and Communication: Media and Communication Outlets.

Risk	Recommended Mitigation Action	Key Actors
measures and accountability mechanisms to safeguard against SEA in aid distribution.	level. (Leveraging existing social structures for positive change).	
Increased Vulnerability due to Aid Access Challenges and Lack of Awareness Significant challenges in registration, selection, and distribution processes create major barriers to accessing assistance, thereby increasing the risk of SEA for vulnerable groups (children, girls, women, people with disabilities, elderly). This risk is compounded by their lack of awareness regarding aid worker Codes of Conduct and the principle of free aid provision, making them susceptible to exploitation.	 Streamline and improve the transparency and accessibility of registration, selection, and distribution processes. This reduces opportunities for exploitation by those controlling access. Conduct targeted and accessible information campaigns for vulnerable groups on their rights to free assistance, the expected behavior of aid workers (CoC), and available reporting mechanisms. Use diverse communication methods tailored to their needs and literacy levels. Strengthen monitoring and feedback mechanisms within the aid distribution process, involving community representatives to identify and address potential risks and instances of exploitation. Ensure tool/measures can also assess/mitigate risks of SEA against aid providers - including community workers and volunteers engaged in delivering aid - perpetuated by the affected population. 	 Aid Coordination and Management: UN Agencies (OCHA, relevant sector leads like OCHA, UNHCR, UNICEF, WFP, FAO, WHO, IOM, UNFPA), Government Agencies (HAC and relevant state-level counterparts), Donor Organizations. Protection and Community Engagement: Protection Clusters/Working Groups, Community-Based Organizations (CBOs), Women's Groups, Disability Inclusion Groups, NGOs with community outreach capacity. Information and Communication: Communication for Development (C4D) specialists, Media outlets (radio, community channels), NGOs with communication expertise.
Frontline Staff's Varying Understanding of SEA and Inappropriate Behaviors The varying levels of understanding of what constitutes SEA among frontline staff pose significant risks to beneficiaries. Without a clear and consistent grasp of prohibited behaviors and the standards outlined in the	 Implement mandatory, comprehensive, inclusive and regularly refreshed PSEA training for all frontline staff. This training should include clear definitions of SEA, specific examples of prohibited behaviors, the importance of the CoC, reporting obligations, and survivor-centered approaches. Develop and disseminate clear, accessible, and context-specific Codes of Conduct for all aid 	 Implementing Organizations: UN Agencies, International and National NGOs. Training and Capacity Building: PSEA Specialists, Training Providers, HR Departments within organizations.

Risk	Recommended Mitigation Action	Key Actors
CoC, staff may fail to prevent, identify, or report SEA, potentially leading to harm, under-reporting, and an erosion of trust in the humanitarian mission.	workers, with regular reinforcement and accountability mechanisms for violations. 3. Establish mentorship and supervision systems to support frontline staff in understanding and applying PSEA principles in their daily interactions, including how to support vulnerable population or population that are more at-risk e.g women and children with disabilities.	 Management and Oversight: Senior Management within organizations, PSEA Focal Points, Compliance Units.
High-Risk Behaviors and Enabling Factors The highest SEA risks observed include direct acts of sexual violence (rape), exploitation of vulnerable individuals by aid workers in positions of power, the enabling role of a lack of awareness and accountability, inherent risks in aid distribution processes, and the impact of unequal relationships and a general lack of respect for rights. These factors create a dangerous environment where SEA is more likely to occur and go unaddressed.	 Strengthen accountability mechanisms at all levels for SEA offenses, ensuring prompt and thorough investigations and appropriate sanctions for perpetrators, regardless of their position. Implement and strictly enforce measures to mitigate risks within aid distribution processes, such as ensuring transparency, involving community members in oversight, and providing safe and accessible distribution points. Promote a culture of respect for rights and gender equality through ongoing awareness campaigns and training for both aid workers and community members, addressing power imbalances and harmful social norms. 	Investigation Units within organizations, Legal Advisors, Law Enforcement Agencies (where applicable and safe), Ombudspersons. Operational Management: Logistics and Distribution Teams, Program Managers, Security Personnel.
Programs Programs involving direct interaction with beneficiaries, particularly during aid distribution, targeting vulnerable groups (children, women, individuals with	 Develop and implement detailed, context-specific PSEA risk mitigation protocols for each high-risk program activity, including clear guidelines for staff conduct, beneficiary interaction, and safe inclusive service delivery. Increase the presence of female staff and Community Focal Points in direct interaction roles 	 Program Operations: Sector Leads, Field Coordinators, Distribution Teams, Registration Personnel, Camp Management. Protection and Gender: Protection Officers, Gender Advisors, Community Engagement Teams.

Risk	Recommended Mitigation Action	Key Actors
disabilities), and within labor and registration processes, are at high risk of SEA. Frontline staff corroborate this across food/cash distribution, shelter, registration, vulnerable household targeting, livelihoods, and general service provision, highlighting the inherent power imbalances and potential for exploitation in these contexts.	 and at distribution sites to enhance safety and provide accessible reporting channels. 3. Establish transparent, accessible and accountable beneficiary feedback mechanisms to identify and address concerns related to staff behavior and potential exploitation. 4. Any cash distribution to include awareness campaign for the community ahead of the distribution process. That means inclusion of PSEA in all programs. 	 Monitoring and Accountability: M&E Teams, Internal Auditors, Beneficiary Feedback Units.
Individuals holding positions of power or authority within aid organizations, government entities, service providers, and influential community members are the most likely perpetrators of SEA. Their ability to exploit their status and access to resources poses a significant threat to beneficiaries and undermines the integrity of aid efforts.	 Implement and rigorously enforce robust vetting and background checks for all staff, partners, and individuals in positions of authority. Establish clear power of authority protocols and training on ethical conduct and professional boundaries for all personnel. Ensure confidential and accessible reporting channels are available for allegations against individuals in power, with clear investigation and disciplinary procedures. 	 Organizational Leadership and Management: Senior Management, Heads of Agencies, Program Managers. Accountability and Oversight: HR Departments, Legal/Compliance Units, Investigation Teams, Ombudspersons. Government and Regulatory Bodies: Relevant Ministries, Oversight Agencies.

Risk	Recommended Mitigation Action	Key Actors
Gaps in Organizational PSEA Implementation Inconsistent and infrequent internal communication on PSEA indicates a lack of leadership prioritization, jeopardizing staff awareness, reporting, and organizational culture. The absence of basic PSEA infrastructure, like dedicated Focal Points, hinders accountability and implementation. Furthermore, unclear processes, insufficient referral training, unaddressed reporting fears, and inadequate mainstreaming of PSEA into programming create significant vulnerabilities.	 Develop and implement a comprehensive PSEA communication strategy with regular messaging from senior leadership to all staff. Ensure the establishment of adequately resourced and trained PSEA Focal Points with clear mandates and authority across all operational areas. Develop and disseminate clear, accessible, and survivor-centered PSEA reporting and response procedures, including safe referral pathways. Integrate inclusive PSEA indicators and considerations into all stages of the project cycle, from design to monitoring and evaluation. 	 Organizational Leadership: Senior Management, Heads of Agencies. PSEA Structure and Capacity: PSEA Focal Points, PSEA Units/Advisors, Training Departments. Program and Support Functions: All departments (Programs, Logistics, HR, Finance, Communications). Coordination Bodies: PSEA Networks, relevant UN Clusters.
Weak PSEA Coordination and Focal Point Capacity Despite a general understanding of basic roles, significant gaps in PSEA Focal Points' inter-agency collaboration, legal knowledge, referral expertise, confidence in referral systems, and overall resources and skills create substantial risks of ineffective survivor assistance, poor coordination, inadequate legal responses, and a failure to establish a safe and supportive environment for SEA survivors.	 Provide comprehensive and ongoing capacity-building for PSEA Focal Points focusing on interagency collaboration, legal frameworks, referral pathways, survivor support standards, and coordination skills as well as capacity building on inclusive PSEA practices ensuring that those who are most vulnerable or at risk are not excluded Establish clear inter-agency PSEA coordination mechanisms with defined roles, responsibilities, and information-sharing protocols. Develop and resource a comprehensive referral directory and system for SEA survivors, ensuring access to medical, psychosocial, legal, and other essential services. 	 PSEA Coordination Structures: National and sub-national PSEA Task Forces/Networks. PSEA Focal Points: Across UN agencies, NGOs, and government entities. Service Providers: Health facilities, mental health services, legal aid organizations, women's protection centers. UN Agencies: Leading coordination efforts (e.g., UNHCR, UNICEF, UNFPA).

Risk	Recommended Mitigation Action	Key Actors
Inadequate Survivor Assistance and Eroding Trust Discrepancies between community awareness of organizational obligations to support SEA survivors and the difficulties in accessing that support can lead to heightened frustration, eroded trust in organizations, increased vulnerability of survivors who come forward without receiving help, potential self-blame and psychological distress, and the failure of awareness campaigns to achieve meaningful change.	 Strengthen the capacity of organizations to provide inclusive, accessible and quality survivor support services (medical, psychosocial, legal, safety). Ensure clear and transparent communication with communities about available support services, eligibility criteria, and how to access them. Establish feedback mechanisms from survivors to continuously improve the relevance and effectiveness of support services. 	 Service Provision Organizations: Health actors, mental health professionals, legal aid providers, specialized protection NGOs. Community Engagement Teams: Organizations responsible for outreach and communication. Protection Clusters/Working Groups: Focused on survivor support. Donor Organizations: Funding for survivor assistance programs.
Barriers to Community and Staff Reporting Community: Fear and lack of trust in reporting channels, coupled with concerns about safety, knowledge of the system, and potential negative repercussions, represent significant barriers to community reporting of SEA incidents. Staff: Underreporting by organization staff, stemming from fear of reprisal, lack of trust, ineffective reporting mechanisms, and unclear procedures, prevents timely intervention, hinders accountability, and erodes safeguarding integrity, increasing vulnerability. Frontline staff's lack of	 Establish and promote safe, confidential, and accessible reporting channels for both communities and staff, ensuring multiple options and clear procedures. Implement robust whistleblower protection policies to encourage staff reporting without fear of retaliation. Conduct awareness campaigns to build trust in reporting systems and address fears of negative consequences. Provide comprehensive training to all staff, especially frontline personnel, on receiving disclosures in a survivor-centered and supportive manner. 	 Reporting Mechanism Operators: Dedicated hotlines, reporting platforms, Community Focal Points. Protection and Legal Units: Responsible for ensuring safety and confidentiality. Management and HR:

Risk	Recommended Mitigation Action	Key Actors
confidence and skills in handling disclosures further compounds this risk.		
Weak Accountability Mechanisms Significant gaps in clarity and required skills among PSEA Focal Points severely undermine the effective implementation of PSEA measures, risking inconsistent and inadequate responses to SEA. This can lead to mishandled cases, failure to provide necessary survivor support, compromised investigations, and an overall weakened PSEA framework and interactions with partners and communities. Coordination among parties The coordination process between the various concerned parties represents a major challenge if some employees are chosen who play a vital role and at the same time are known for their blatant exploitation of power through their positions, through which many of their legitimate rights may be deprived, leading to their exposure to sexual exploitation to meet their necessary and inevitable needs to ensure the continuation	 Strengthen investigation capacity within organizations and across the sector, ensuring timely, impartial, and survivor-sensitive investigations. Establish clear and transparent disciplinary procedures for SEA offenses, ensuring consistent application of sanctions. Implement victim-centered approaches to accountability, ensuring survivors are informed and involved in the process where appropriate and safe. Promote transparency in accountability efforts to build trust and demonstrate commitment to PSEA Establishing conditions and standards for filling vital positions directly related to relief, primarily integrity. Raising awareness among local communities about their rights, especially communities at risk of SEA. Implementing relevant laws regarding the abuse of power. 	 Investigation Units: Internal and potentially external investigators. Legal Advisors: Providing guidance on legal frameworks and due process. Senior Management: Responsible for enforcing disciplinary measures. Survivor Support Services: Ensuring survivor needs are prioritized throughout accountability processes. Develop sound coordination plans. Activating local laws and linking them to interagency laws. Activate strict penalties for partners.
of their lives.		

7 Conclusion

Drawing upon the SEA dimensions framework, this study reveals that the **Context** of ongoing emergencies and socio-economic vulnerabilities in Sudan, particularly exemplified by the high-risk environment of Darfur and mirroring challenges in Sudan, significantly elevates the likelihood of SEA. While a commitment to PSEA integration is evident within **Program Operations** and strategic planning, substantial gaps in coordination, risk assessment, and mainstreaming indicate weaknesses in translating policy into practice. Issues related to **Aid Worker Conduct** are highlighted by insufficient training, a lack of awareness of conduct standards, and underreporting, pointing to potential failures in prevention and accountability. Finally, while **Community Factors** indicate a condemnation of SEA, barriers to reporting and a lack of trust in existing mechanisms hinder community-led protection efforts.

Despite these challenges across all dimensions, existing synergies within GBV/CP pathways, PSEA networks, and community-based initiatives offer potential leverage points. Ultimately, an effective PSEA strategy for Sudan requires a comprehensive approach that addresses vulnerabilities within the context, strengthens safeguarding within program operations, ensures robust accountability for aid worker conduct, defines mechanism to capture whether SEA incidents occur during the delivery of humanitarian services (e.g., at health/nutrition facilities, during distribution activities, etc.) or in other contexts and empowers communities to report and seek support. Bridging the identified gaps through enhanced coordination, targeted capacity building, recognized contexts of SEA incidents, reinforced continuous monitoring and evaluation to adapt strategies as needed, and consistent implementation, while capitalizing on existing synergies, is crucial to fostering a protective environment for all affected populations.

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9 Annexes

- KII Government Actors Report
- KII Head Office and Sub-Office Report
- FGD Communities Report
- FGD Frontline Staff Report
- FGD PSEA Focal Points Group Report