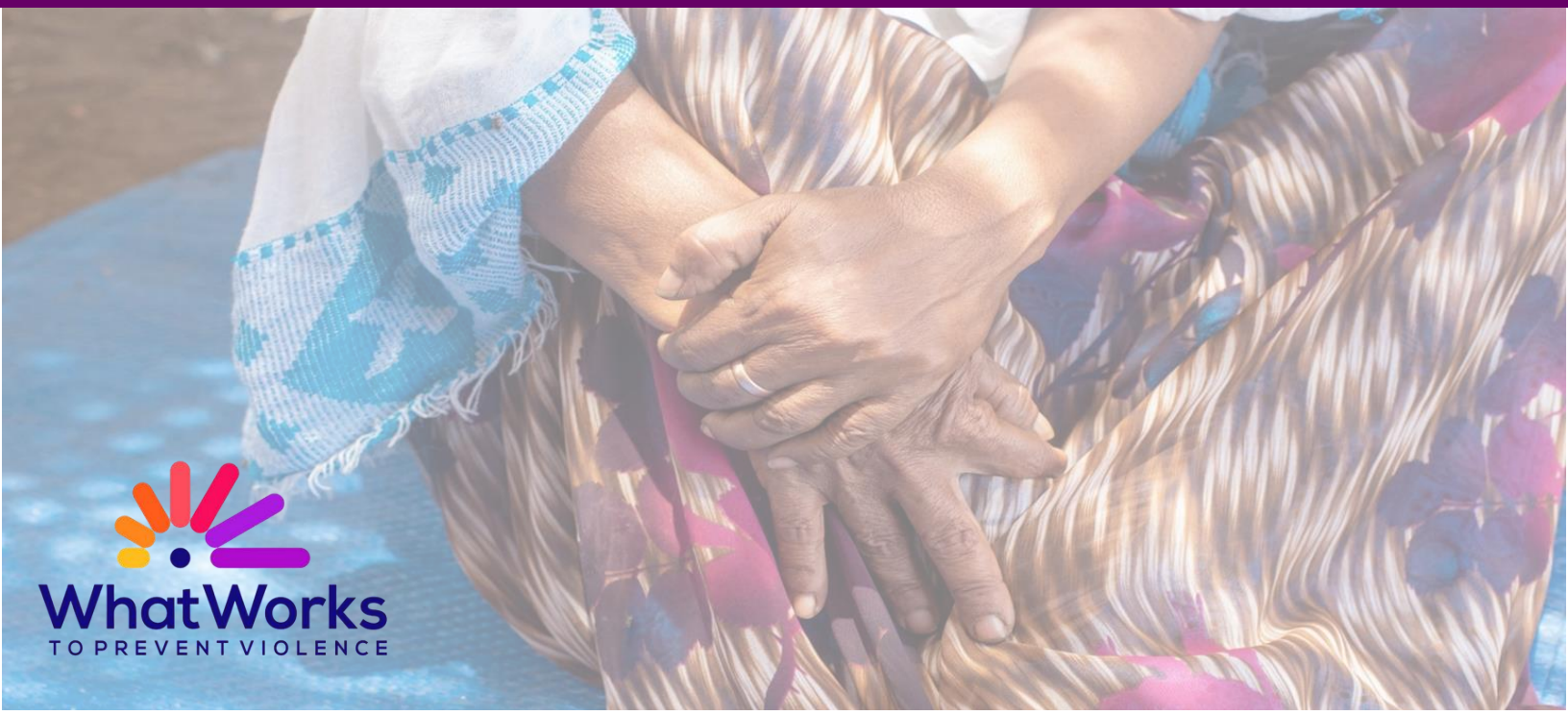

Preventing SEAH in aid operations

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Query: Produce a desk review synthesising the existing approaches for preventing SEAH, identifying their respective resourcing, policy and operational implications.

1. Introduction

Initiatives which support the prevention of sexual exploitation, abuse and harassment (SEAH) in the aid sector are important for five core reasons:

- Prevention can help avoid harm being caused to different individuals as a result of their engagement with the aid sector.
- It can be cost-effective, helping organisations avoid programme changes, litigation, investigation and other related costs.
- It is more effective and efficient for humanitarian programmes and initiatives to embed prevention measures from the outset than include PSEAH measures retrospectively.
- Prevention can avoid reputational damage to individual organisations and the aid industry at large.
- Prevention may help encourage productivity amongst staff (because they are not working in an environment which normalises SEAH).

To date, however, the evidence suggests that PSEAH sector of work has largely focused on reporting mechanisms and response initiatives.

This document offers findings from a five-day literature review of the evidence on the existing approaches to prevent SEAH in the aid sector, and identifies any evidence on their resourcing, policy and operational implications. It should be noted that the content was refined within the scope of the query and that the limited literature available hampered comparative analysis on specific approaches, their implications and the specific resources needed to apply them.

2. Defining SEAH prevention

Prevention is a key element of safeguarding against SEAH in the aid sector. Although definitions vary, most include prevention alongside protection and response (see box below).

Definitions of safeguarding emphasise the importance of preventing SEAH from occurring

"The UK is committed to driving up standards across the aid sector, including within the UK government to ensure that we all take all reasonable steps to: **prevent sexual exploitation and abuse and sexual harassment from occurring;** listen to those who are affected; respond sensitively but robustly when harm or allegations of harm occur; and learn from every case". (UK Strategy on Safeguarding against SEAH within the Aid Sector, 2020)

Safeguarding from sexual exploitation, abuse and harassment (SEAH) means "taking all reasonable steps to **prevent SEAH from occurring**; to protect people, especially vulnerable adults and children, from that harm; and to respond appropriately when harm does occur" (RSH, working definition of safeguarding).

Typically, most of the discourse around 'preventing' SEAH focuses on 'primary prevention' – i.e. stopping SEAH before it starts. The conceptualisation shown in Table 1 below aligns with broader violence prevention, which recognises three types of prevention: primary, secondary and tertiary prevention. All three types of prevention are important for safeguarding against SEAH and often work in combination.

Table 1. Different types of SEAH prevention

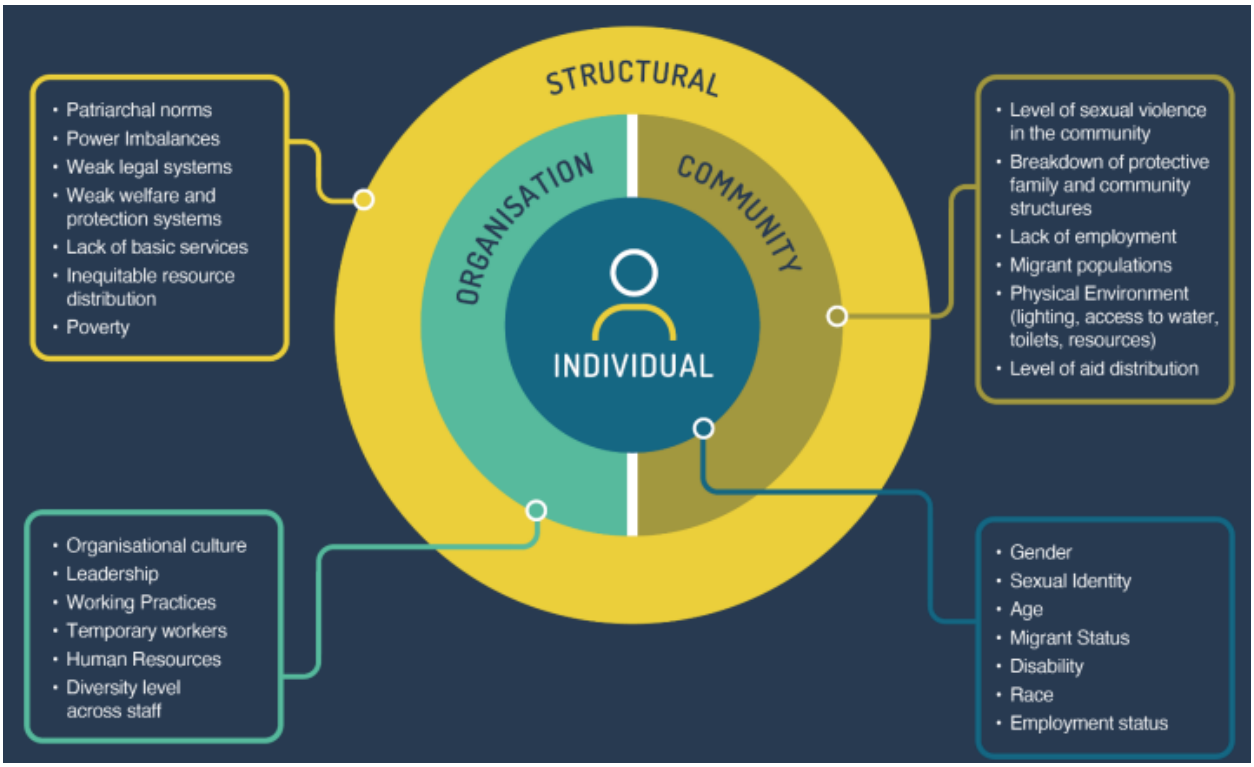
Primary prevention (aligns with prevention and SEAH risk management)	**Secondary prevention** (aligns with SEAH risk management)	**Tertiary prevention** (aligns with SEAH response)
Aims to stop SEAH by aid organisations before it starts by tackling root causes and associated risk factors	Aims to reduce new episodes where SEAH has previously happened and mitigate its effects on individuals	Aims to respond to the immediate needs of victims/survivors
Examples: • Training with time for critical reflection on power and root causes • Proactive performance management for all staff and contract types • Organisational culture change initiatives • Gender equality, disability and social inclusion (GEDSI) analysis informs organisational initiatives and programmes	Examples: • Staff recruitment and coordinated vetting schemes • Initiatives with staff groups who are known to perpetrate SEAH • Focused engagement with high-risk community and staff groups (e.g. adolescent girls, women, people with disabilities, LGBTQ+ people) • Training with a focus on the policies, procedures and reporting • Programme/intervention design to mitigate SEAH risks	Examples: • Hotlines • Reporting channels and awareness raising materials • Psychological support • Timely case handling and investigations • Disciplinary procedures

Source: Adapted from What Works (2023) What is prevention?[1]

A key element of primary prevention approaches involves addressing the multiple, interrelated risk factors and root causes that drive SEAH and other forms of violence that operate across different levels – individual, organisation, community and structural levels. It is commonly recognised across literature on safeguarding and protection from SEAH[2], that power imbalances between individuals caused by harmful gender and social norms, social hierarchies and beliefs are the root cause of SEAH.[3] In humanitarian and emergency settings, change, stress and trauma rise as access to basic goods, services and support becomes scarce. These factors, alongside harmful social norms, social hierarchies and beliefs (which create power imbalances)

increase opportunities for and risks of SEAH in humanitarian and aid settings.[4] It is widely recognised, therefore, that preventing SEAH must involve recognising and tackling power imbalances and the deeply rooted norms, social hierarchies and beliefs which in turn trigger risks of SEAH.

Figure 1. Risk factors and root causes of SEAH



Source: RSH (2021) Root Causes of Sexual Exploitation, Abuse and Sexual Harassment

Despite widespread recognition of the importance of preventing SEAH, there is a growing consensus that investments in primary prevention are insufficient,[5] with most safeguarding investments in the humanitarian-development-peace sector tending to focus on response. Although data is lacking on SEAH investments in prevention vs. response, it reflects a broader pattern of under-investment in VAWG prevention, with overseas development assistance spending on VAWG falling by 13% in the last five years, and VAWG prevention accounting for just 0.19% of overall aid in 2022.[6] This under-investment is despite evidence that large-scale prevention can be delivered at low cost, with modest human resources requirements.[7] In addition, there is a strong case that more investments in the prevention of SEAH could, over time, reduce the need and cost of response, as has been widely evidenced in other fields such as public health or disaster management. No cost studies of how much could be saved by investing in SEAH prevention were identified as part of this review; this is a notable evidence gap.

3. SEAH prevention approaches

There is no consensus within the safeguarding sector on the categorisation of SEAH prevention approaches. Examples of attempts to identify SEAH prevention approaches include:

- **Common Approach to Protection from SEAH (CAPSEAH)**: the prevention category includes embedding PSEAH measures across organisations, risk management, vetting schemes and recruitment processes, as well as efforts to tackle gender equality and other power imbalances.
- **Safeguarding Resource and Support Hub (RSH):** RSH proposes various prevention measures including an organisational capacity assessment, staff training, safe recruitment processes, leader responsibilities, risk management, and measures for safe programmes.
- **Country PSEA Networks** also categorise certain measures within the prevention category on their global dashboard, this includes training numbers and SEA risk management.

Conversely, other organisations do not include specific prevention approaches but rather embed them within a wider approach. For example, the IASC global PSEA strategy for 2022 to 2026 suggests that there are elements of prevention and response across the three core strategy commitments: (1) Victim/survivor approach; (2) Lasting change in culture, behaviour and attitudes; and (3) Prioritization of PSEA in high-risk contexts. The CHS PSEAH Implementation Handbook takes a similar approach, aiming to embed prevention and response across all proposed PSEAH measures.

From the literature reviewed, only one organisation defines SEAH prevention. The PSEAH-actor, the Global Women's Institute's Empowered Aid, explained what they mean by SEA[1] prevention: they "seek to develop humanitarian aid distribution models that reduce power disparities and give those most affected by abuse—refugee women and girls—a sustained voice in how aid is delivered."[8] Their materials further explain that they aim to prevent SEA by mitigating its risks.[9]

Based on a rapid review of the evidence, the following prevention approaches have been identified within aid operations, which are often used in combination. These different types of approaches are summarised briefly in Table 2 and expanded on later throughout this section. It is important to note that because the quality and focus of SEAH prevention approaches vary, this categorisation is an initial suggestion only. In Section 4, these categories are mapped onto a spectrum of change, showing the transformative growth and potential of different approaches.

[1] Empowered Aid uses the term sexual exploitation and abuse (SEA). For the purposes of this paper SEA will be used only when that specific terminology was used in the literature.

Table 2. Different types of SEAH prevention

Prevention types	Approaches
Primary prevention	**Leadership and organisational culture** including work around changing staff values, increasing workplace diversity and other measures to tackle gender equality and other power imbalances within the sector that can drive SEAH.
	Community outreach and awareness-raising, ranging from simple measures to raise awareness about SEAH and reporting mechanisms to longer-term work to address power imbalances and risk factors. This could include Empowered Aid's work to conduct participatory action research to understand how the distribution of humanitarian aid increases SEA risks within affected populations and how to reduce those risks. It also includes engaging with women's rights organisations and broader civil society.
	Training including staff training, mentoring and coaching, which include opportunities to critically reflect and practice skills and perspectives relating to power imbalances and the root causes of SEAH.
Secondary prevention	**Risk management processes** including the identification of internal and external SEAH risks, mitigation of the risks and monitoring of the mitigation activities. Secondary prevention largely includes the short-term risks related to a specific location or programme that can be mitigated relatively quickly. (Long-term risks relating to organisational structure, root causes and power imbalances and are not considered secondary).
	Recruitment vetting and referencing schemes and performance assessment procedures aligned with internal accountability frameworks and consequences.
	Training including staff training, mentoring and coaching, which include learning the rules, one-off trainings, socialising of the code of conduct and sharing expected behaviour.
Tertiary prevention	**Reporting, referral, support and investigation mechanisms** – also known as tertiary prevention

There is a general recognition of the need to use a combination of prevention approaches which aim to address immediate, short-term SEAH risks alongside longer-term individual behaviour and structural culture-related initiatives. SEAH risk management, in particular, is cross-cutting and key to SEAH prevention, but the degree of overlap and separate definitions of the two are not clearly detailed. Structural change, behaviour change, gender equality and social inclusion are increasingly referred to in strategies, guidance and other materials related to SEAH prevention.[10] Evidence of progress across the sector to date has mainly focused on short-term measures, including SEAH risk identification and management. Empowered Aid, for example, focuses on building evidence and guidance for organisations to deliver SEAH risk mitigation well

(defined across the board as an essential PSEAH prevention measure). Risk management efforts and other prevention measures go some way to identifying to individual and structural change needs. There is a growing literature which outlines how change within organisations occurs,[11] contributing to the sector's rising understanding of how power imbalances within and between organisations can be tackled. However, there is little practical evidence on whether this guidance is applicable across different settings and organisations, whether it does actually address power imbalances, how to resource it and how to encourage sustainable support from leadership to deliver.

There are also useful lessons from the prevention of gender-based violence (GBV), which could be adapted to organisations working on PSEAH. Most evidence of joint work and engagement between GBV and PSEAH sectors in humanitarian settings relates to SEAH response (as opposed to prevention), highlighting the importance of using existing GBV (and child protection) services, referral pathways and response mechanisms to support victims/survivors of SEAH. Empowered Aid provides one valuable example of a SEAH prevention initiative embedding GBV skills, expertise and experience into SEAH risk mitigation and subsequent prevention. Further, PSEAH guidance typically notes that transformative and structural change requires thinking beyond individuals to communities and whole organisations. While a holistic approach is widely promoted, questions are posed as to whether this is sufficient and if it would also be useful to hone measures in on potential perpetrators in addition to organisational and community-wide approaches.

The evidence reiterates that effective PSEAH within organisations is a change process that takes time and that organisations are at different stages, changing at different paces. For example, the RSH Measurement Guide suggests that "change will happen because of a combination of efforts across a number of areas of work".[12] Efforts relating to PSEAH standards, policies, practice and practical resources (for SEAH prevention and response) have risen since the UK 2018 Safeguarding Summit, this is evidenced, amongst others, by the websites and materials on the Inter-Agency Standing Committee (IASC) PSEA Group, Core Humanitarian Standard (CHS) and Safeguarding Resource and Support Hub. There is some suggestion that the PSEAH due diligence and response focus since 2018 is a foundation for more 'transformative' preventive change.[13] Other evidence does indicate that, for many organisations, applying SEAH measures is (still) deemed "a marker of success in itself, with less emphasis placed on evidence documenting that those measures are achieving change".[14] Largely, however, evidence on the effectiveness of specific PSEAH prevention measures and the effectiveness of different combinations of measures is scant.

The review identified references to intersectionality and the importance of understanding that different people face different risks of SEAH.[15] Literature in this area focused largely on identifying and mitigating risks of SEAH faced by groups of people with different characteristics. **The evidence available did not identify the degree to which the risk mitigation focus is truly preventive for and considers specific at-risk groups.**

Identifying evidence of effectiveness related to specific approaches is challenging. The SEAH prevention approaches detailed in this section were all identified in the literature as having some connection to SEAH prevention. Due to the different interpretations of SEAH prevention, a short summary of all prevention approaches has been included.

3.1 Leadership and organisational culture

Leadership: The literature was clear that visible and accountable leadership, proactive leadership support for and promotion of PSEAH measures, and the inclusion of PSEAH in a leader's performance management procedures are key for effective prevention (RSH, 2020). WHO's current three-year strategy recognises that "when leaders are transparent and open to scrutiny, organisational culture begins to shift".[16] In addition to reiterating the positive influence of leaders, the literature identified the importance of trustee and board-level expertise and accountability for effective PSEAH.[17] In addition, several guidance documents include techniques, training and tactics to engage leaders and tips for staff to encourage their leaders to invest more in PSEAH. No evidence of the effectiveness of these different initiatives was identified.

Organisational culture: The literature highlighted the importance of having an organisational culture where power imbalances are minimal and which celebrates diversity and inclusion, encourages the disruption and reporting of SEAH and listens to vitcims/survivors for SEAH prevention. Various guidance and initiatives relating to changing organisational culture to prevent SEAH were reviewed.[18] There is recognition within the materials that organisational change takes time and that a range of formal and informal factors contribute to organisational change. For example, the RSH Measurement Brief (2023) identified an organisational culture change process, where: 1) PSEAH prevention measures are implemented on their own or as a one-off, 2) A combination of measures focus on change in awareness and knowledge, 3) There are further changes in attitudes and behaviours, which 4) eventually lead to a change in culture. This change process was developed based on an adapted version of the Gender-At-Work framework and findings from the organisational culture mentoring process in Nigeria.[19]

Whilst having a framework in place for organisational culture change is useful, there is little evidence of its effectiveness in terms of SEAH prevention (perhaps as organisational change takes time and these resources are relatively new). The literature reviewed questions whether a blanket approach to knowledge, attitudes, behaviour change and organisational culture is sufficient alone for effective organisational change and SEAH prevention. The CHS Harmonised Reporting Scheme data provides initial information about who alleged perpetrators of SEAH are in aid operations: primarily men, an alarmingly high proportion of international staff, a high proportion of senior managers and a high percentage of national staff (75%).[20] It is also likely that within these groups perpetration will occur for different reasons (as people are different and their situations change). There is a gap in evidence on initiatives which target specific

groups who are at risk of perpetrating SEAH, for example, initiatives that aim to disrupt people from establishing relationship/s with a victim/survivor and/or disrupt perpetrators from moving along the continuum of harm to more, or more egregious, violations. This point is also noted in the performance review section below, it would also be relevant in the risk management section but was not included there.

Diversity in the workplace: While some interpretations of prevention listed above do not include diversity, a number of sources highlighted promoting diversity among both leadership and staff as an effective approach to addressing SEAH.[21] For example, there is some evidence that a greater balance of gender and racial composition can lead to lower levels of sexual harassment in the workplace,[22] and Empowered Aid[23] found that mixed teams, and in particular the presence of female staff at household and community-level aid deliveries, is important to encourage complaints and / or raise awareness on how to report an incident, signalling that reports are being read, acted on and that SEAH is not accepted. The focus, the literature suggests, should be on reducing power imbalances in workplaces and moving away from men-dominated organisational structures. Literature from PSEA initiatives within the peacekeeping sector reiterates this, suggesting that the mere presence of more female peacekeepers could reduce SEAH.[24] The WHO's current three-year strategy on prevention and response to SEAH (PRSEAH) reiterates that progress towards an organisational culture which prevents SEAH requires a focus on individual behaviour as well as structural issues like gender parity, diversity, equity and inclusion across the organisation.[25] Similarly, SIDA iterates the importance of values-based leadership and gender equality to avoid spreading harmful behaviours across and beyond the organisation.[26]

3.2 Human Resources: vetting schemes and performance management

Safe recruitment procedures: Safe recruitment schemes aim to ensure that sufficient vetting procedures are in place so that potential perpetrators cannot be employed within aid organisations, and across the aid system, thereby contributing to SEAH prevention in aid operations. There are a range of safe recruitment schemes in place, including the International child protection certificate (ICPC), Project Soteria, UK based Disclosure and Barring Service (DBS), the Misconduct Disclosure Scheme (MDS), UN Clear Check System and Non-UK National Criminal Records checks.[27] There is insufficient public evidence for a comparative analysis of the effectiveness of the different schemes from a preventive perspective. Information largely speaks to one scheme in isolation, for example, between 2019 and 2023 the MDS helped to detect 385 applications with negative or absent misconduct data.[28] There is limited evidence on the degree of the mutual dependence and coordination of the schemes, i.e. the gaps they cover when combined. However key messages from the available literature suggest that despite the range of schemes, there is not full coverage across the aid industry (across organisations and positions within) and risks remain, particularly relating to different organisations re-hiring perpetrators, navigating multiple jurisdictions, limited use of national criminal records, overburden on HR systems and staff, delays to vetting procedures in humanitarian emergencies and the limits to

references themselves being truly valid on their day of submission only (Interpol, 2024). Moreover, the review process identified that the success of such schemes requires proactive engagement across aid actors, as well as increased reporting and the skills and willingness to respond robustly to reports made.[29] Coordination of agencies to strengthen UN Clear Check procedures, and therefore their outcomes, was identified as one possible route for strengthening SEAH prevention. It was clearly stated: "when we have people who are named and shamed and still getting employment in the aid sector, there is something wrong".[30] Overall, the review highlights a gap in evidence on the explicit connection between vetting schemes and SEAH prevention and notes the importance of organisational buy-in, awareness, knowledge and subsequent actions to achieve coordinated success.

Performance reviews: The review suggested that some organisations include PSEAH behaviour, tasks and expectations in leader performance assessments. Building on this, some organisations list accountabilities for all staff across different levels alongside the consequences of not fulfilling their key accountabilities. The WHO Accountability Framework[31] is one example. This approach aims to build on general, all-staff training and awareness raising to individualise specific responsibilities. However, detail on the applicability and use of accountability frameworks and performance assessments which reflect PSEAH prevention progress was not identified (again, perhaps because many of these initiatives are relatively new). It will be valuable to monitor the progress of such initiatives as a prevention tool over time. As part of these procedures, it may be valuable to consider staff who are at higher risk of perpetrating in such initiatives, such as those who have short contracts and others as identified in the CHS harmonised data.

3.3 Staff training and learning

PSEAH staff training is common and is included in all the prevention interpretations listed above. However the evidence still suggests that monitoring often focuses on outputs (e.g. numbers of staff trained) rather than outcomes. The evidence outlines core elements of effective training on SEAH, some of which are included (to varying degrees) in different PSEAH training guidance. Core components for effective PSEAH training include: tailored to the context, series of trainings (not one-off), focus on behaviour change rather than just trying to influence attitudes on SEAH, highlight accountabilities and responsibilities of all, align training alongside wider a PSEAH strategy and organisational change, to last a minimum of one day preferably two, compulsory for all staff (including security guards and drivers), to include follow up support, run by trainers with expertise, include follow up support, focus on why PSEAH related roles exist, and include participation by leadership.[32]

Mentoring and coaching efforts are increasingly used to complement training and support staff delivering specific SEAH tasks. The evidence reviewed suggests that these efforts have largely focused on organisation's specific practical policy and procedure gaps, such as policy development, reporting mechanism application or incident management.[33] The literature

reviewed did not identify explicit prevention-related evidence as a result of mentoring or coaching efforts.

3.4 Reporting mechanisms and community outreach

Reporting mechanisms: Reporting mechanisms are not often described as a SEAH prevention mechanism, however, in line with the tables above, there is evidence to suggest that their existence may act as a signal that "SEAH is not tolerated and perpetrators will be held to account".[34] Analysis of the successes and challenges of various reporting mechanisms has not been expanded in more detail in this review as there is extensive, separate discussion across the PSEAH sector on reporting mechanisms. One related point to note is that the evidence does suggest that barriers to reporting are widely understood but rarely addressed,[35] although the Empowered Aid participatory action research and advice go some way to overcoming those challenges.

Community outreach and awareness raising: Community outreach and awareness raising is defined by some as a SEAH prevention measure. It is assumed that an increase in awareness amongst affected communities on key SEAH messages, such as appropriate staff behaviour and what and how to report, will empower victims/survivors to know their rights, reject SEAH advances and report or encourage others to report. Also, outreach may indicate to perpetrators that their actions will be reported (thereby, potentially, reducing their courage to perpetrate). Evidence on the success of community outreach in changing behaviours is limited, and as noted by the Center for Utilising Behavioural Insights for Children (CUBIC) "simply providing good information isn't always enough to encourage positive behavior change".[36]

Empowered Aid identified the value of comprehensive awareness raising and the importance of ensuring that a cross-section of the population, including women, girls, people with disabilities and people with low literacy levels, are considered in SEAH awareness raising materials. Building on this, there is evidence that actors working on SEAH have aspirations to move beyond awareness raising within communities to identifying and encouraging the drivers that encourage reporting.[37]

Lessons from a VAWG prevention programme (What Works to Prevent VAWG) note the need to go beyond information, education and awareness raising to community activism, mobilisation and subsequently collective behaviour change. The findings show that when designed well and delivered intensely to a high proportion of a community, community activism interventions can prevent violence against women and girls.[38] It also observed that change occurs in successive stages and that people, who may be at different stages and who may even go back a stage, need to be supported to progress to the next stage for their behaviour to change. The stages include: "pre-contemplation (not thinking of it yet), contemplation (thinking of it), preparation (taking steps), action (attempting to practice the new behaviour), and maintenance (or relapse)".[39] What Works evidence identifies eight key lessons on preventing VAWG, all of which can be adapted to organisations and PSEAH measures:

- Detailed, context-specific interventions with a theory of change that considers multiple drivers of violence, culture and local dynamics
- Work across communities, with women and men
- Consider gender and social empowerment theories and see behaviour change as a collective as opposed to individual change process
- Use participatory, group-based approaches centred on empowerment
- Guidance and materials for those delivering the work are well-designed and user-friendly
- Integrate support for survivors
- Use a large number of community activists and extend interventions / sessions / workshops over 40 to 50 hours
- Comprehensive selection followed by ongoing training and support of staff.

3.5 SEAH risk management

Risk management is categorised as a SEAH prevention measure by some, including CAPSEAH, and is deemed central to SEAH prevention and response measures by others. Risk management is a process in which an organisation identifies, assesses and prioritises **internal organisational and external risks** and then implements actions and measures to mitigate those risks and control their likelihood and/or impact. The risks and their mitigations are monitored and updated over time, enabling organisations to make informed decisions, allocate resources and adapt as risks and external environments change.

Consultation and co-creation, particularly with women and girls for external and programme-related risks, was identified as a crucial part of effective risk management and PSEA[2] prevention.[40] Evidence from Empowered Aid confirms that a suite of complementary tools can be used to ask in detail what restricts men's and women's movement and what affects their perceived risk of safety when accessing aid, without directly asking about SEA (and thereby avoiding risks of re-traumatisation). Consultations also detail preferred information awareness methods and logistical specifics relating to distributions, such as the risks related to crowd control, communications, staff conduct, physical layout, timing, staffing dignity, safety auditors and latrines.[41] The completed tools then inform action; SEA mitigation measures and aid delivery modalities can be adapted based on the findings. Further (forthcoming) guidance from Empowered Aid details how facilitators can work with women and girls in one-day workshops, and with other community members in two-hour group discussions, to identify and mitigate risks of SEA.[42] Empowered Aid has evidence that these approaches are effective in reducing and managing the likelihood and impact of SEAH risks.[43] The Empowered Aid evidence, tools and guidance have filled a necessary gap, advising on why and how to effectively centre the voices of women and girls in effective risk management and PSEA prevention. As the Empowered Aid resources are relatively new, the extent

[2] Empowered Aid uses the acronym PSEA over PSEAH so when summarising content from Empowered Aid, PSEA and SEA are used.

to which they are used and women, girls and other at-risk groups are meaningfully consulted as programmes and PSEAH measures are designed and delivered is not clear.

Lastly, the risk materials reviewed were largely based on a Western-led risk management agenda. Whilst consultations and co-creation with a cross-section of communities are consistently identified as central to effective risk management, sustainable engagement and focus on building long-term relationships with women's rights organisations (WROs), LGBTQI+ organisations and organisations for people with disabilities (OPDs) were not consistently emphasised in the guidance and advice on risk management. The evidence does suggest that people who are more vulnerable in society (women, people with disabilities, LGBTQI+ people) are at higher risk of SEAH[44] and therefore engagement with representatives of these groups, as well as individuals themselves, may be valuable and necessary for long-term support and advice which based within existing, local structures.

Internal organisational risks are also often included in risk management, this can include risks relating to programme delivery, partnerships, communications and information management, human resources, governance and culture.[45] The links between many of these internal risks and prevention are covered in other sections of the review.

3.6 Investigations and disciplinary measures

Investigations: Whilst the value of learning from the GBV sector has been noted above, the literature also highlights the important distinction between the two areas of work, specifically that **SEAH is caused by people who have been mandated to serve an aid organisation** and therefore "the organisation is accountable for the actions of the perpetrator".[46] Workplace administrative investigations are the primary means through which this accountability is upheld. If investigations are delivered well, they can prevent SEAH by case learning leading to organisational system strengthening, by mitigating SEAH risks and by holding perpetrators to account.[47] Investigations can also contribute to the recovery of victims and survivors, and pressure to provide reparations and compensation from investigation outcomes may in turn encourage stronger prevention structures. Investigations training and guidance for those delivering administrative investigations are available. However, it is acknowledged that the capacities and skills to deliver investigations well and in a contextually appropriate way are inadequate across the aid sector.[48] From the literature reviewed, there is no evidence of investigations contributing to SEAH prevention. Furthermore, there is a general lack of guidance and advice relating to redress, compensation and reparations procedures across the aid sector, let alone evidence of its contribution to SEAH prevention. Whilst the materials reviewed highlighted this gap in evidence there is also increasing indication of the prevention potential of investigations, including redress and compensation.

Disciplinary measures: Due to aid organisation's accountability for the SEAH caused, discipline in proportion with the harm caused is deemed a central tenet of that accountability. Lessons from the Oxfam GB Haiti case suggest that allowing the perpetrator to resign rather than face

disciplinary action was one way in which the case was mishandled.[49] The evidence suggests that organisations across the aid sector often take different approaches to discipline; CHS advises that "disciplinary outcomes for perpetrators should be consistent, and anonymised data on cases [should be] shared in the public domain, so organisations can be held to account".[50] Also, some literature suggests that it may be valuable to focus less on punitive measures and more on restorative support for victims/survivors.[51] That said, no evidence was identified which outlines whether discipline and punishment are a deterrent for perpetrating SEAH and a deterrent for retaliation against both whistleblowers and victims or survivors who report.

4. Developing a SEAH transformative continuum

It is possible to conceive of prevention approaches along a SEAH transformative continuum, where organisations or interventions move along a spectrum away from a sensitive approach and towards efforts to actively safeguard against SEAH. The table below explores the different SEAH prevention approaches discussed above and what more 'transformative' approaches could look like under each approach. It draws on some of the emerging evidence from the PSEAH field, as well as wider GBV prevention.

The transformative continuum aims to support a discussion of how the sector can more actively prevent SEAH and what the process towards the transformative level could look like. It acknowledges that preventing SEAH is a journey, and rather than attempting to introduce all prevention approaches at once, it can be helpful to begin by getting the basics in place (PSEAH-sensitive) and then start work towards building capacity (PSEAH-strategic) with the potential to ultimately take a more ambitious (PSEAH-transformative) approach to address SEAH and its root causes in the sector more broadly, depending on resources and capacity. The table should be considered as a starting point for discussion and further adaptation.

Table 3. PSEAH – approaches along the Transformative Continuum

	PSEAH – approaches along the Transformative Continuum		
	PSEAH-sensitive	**Strengthening**	**Transformative**
Resourcing implications	**Initial efforts – getting the basics in place**	**Further action – building capacity and strengthening response**	**Greatest ambition – more 'maximalist' approach**
	PSEAH prevention measures on their own.	*A combination of measures which focus on:* *Individual change in awareness and knowledge, and* *Organisational structural change.*	*A combination of measures which focus on:* *Individual changes in attitudes and behaviours,* *Individual victim/survivor support,* *Comprehensive organisational structural change, and* *Organisational culture change at all levels.*
Leadership and organisational culture	Leaders are aware of PSEAH and ad hoc / uncoordinated measures aimed to prevent SEAH are in place. No board involvement or involvement of Board who lack expertise, awareness or appreciation of PSEAH. Diverse staff (not leadership); balance of gender, racial and other composition across staff. Most staff understand their safeguarding responsibilities in line with organisational policies. Budget statements and limited or no budget.	Values-based leadership, where leaders are aware of and show visible commitment to aligned PSEAH prevention measures. Routine management of senior leaders on their approach to SEAH prevention. Investment in ad hoc prevention measures.	Values-based leadership, where leaders are aware of PSEAH and show public accountability to PSEAH, gender equality, disability and social inclusion policy commitments and coordinated prevention measures. Leaders share learning on PSEAH prevention with others in the sector. Clear accountability mechanisms where senior leaders are assessed on their efforts to prevent SEAH and follow-up on action (e.g. individual performance indicators for senior leaders and/or indicators in annual reports). Board-level PSEAH expertise and accountability on PSEAH.

			Diverse and inclusive leadership and staff. There is a balance of gender, racial and other composition across the organisation. Most staff understand their PSEAH responsibilities in line with the core organisational purpose. Staff have the right mindset and values to make victims/survivors s feel heard, supported and confident. Evidence of investments in coordinated prevention efforts.
Human Resources: Vetting schemes and recruitment processes and performance management	Vetting procedures that align with national legislation are used and acted on in all settings. Staff with access to communities and at-risk groups are prioritised for vetting. PSEAH actions are included in leaders' performance assessment procedures.	Vetting procedures that align with national legislation are used and acted on in all settings and for all staff. Coordinated vetting schemes are used to close gaps for proven perpetrators to move between aid organisations, e.g. Clear check, Misconduct Disclosure Scheme (MDS). Accountability framework with detailed consequences clear for all staff, including leaders. Managers have the confidence, resources and support to ensure that specific PSEAH actions in all staff performance assessment procedures are applied.	Vetting procedures that align with national legislation are used and acted on in all settings and for all staff. Coordinated vetting schemes are used to close gaps for proven perpetrators to move between aid organisations, e.g. Clear check, Misconduct Disclosure Scheme (MDS). Aid industry actors recognise the value and importance of organisational buy-in, awareness, knowledge and subsequent actions to achieve coordinated success of vetting schemes. Accountability framework with detailed consequences clear for all staff, including leaders. Managers have the confidence, resources and support to ensure that specific PSEAH actions

			in all staff performance assessment procedures are applied.
Staff training and learning, including mentoring and coaching	Example of core training characteristics: Attendance monitored; one-off training, one-off e-learning /online platform training; focus on prohibited behaviours, policies and procedures; generic content, not adapted to context.	Example of core training characteristics: Outcomes and impact monitored; adapted to context; series of learning sessions or follow-ups with initial training to last one to two days; focus on staff awareness and knowledge; framed as part of commitment to wider organisation change; compulsory for all staff, including security guards, police and drivers; includes participation by management and leadership; is run by trainers with expertise on SEAH, inequality and discrimination.	Example of core training characteristics: Focus on behaviour change, attitudes and perceptions; focus on wider traditions and cultural influences; consideration of root causes; availability of technical guidance and tools in correct language. 40 to 50 hours of participatory workshops for community-based activism initiatives. (No estimates on timing for staff training and learning were found).
SEAH risk management	Risk management focuses on programmes or specific areas only, not organisation-wide. Few or one-off consultations on SEAH risks and the mitigations held with staff and at-risk groups.	Organisation-wide risk management (combining internal and external risks). Identify risk factors in consultation with diverse staff and at-risk groups; focus on risks and vulnerabilities, not barriers and causes of violence; mitigations inform programme design and safety measures; a range of tools used to corroborate risks.	Organisation-wide risk management (combining internal and external risks). Alignment with contextual gender equality, disability and social inclusion (GEDSI) analysis; identify risk factors in consultation with diverse staff and at-risk groups; the voices of victims/survivors s, both collectively and individually, are safely elevated to inform risk management procedures; consultations focus on barriers and causes of violence as well as barriers to reporting; mitigations relating to barriers and causes of harm inform programme design and safety measures as well as internal systems and structures; a range of tools are used to corroborate and monitor risks.
Reporting mechanisms and community	Examples of core elements of reporting mechanisms:	Examples of core elements of reporting mechanisms:	Examples of core elements of reporting mechanisms:

awareness raising and outreach	Reporting mechanisms are in place but reports are rarely received, if ever.	Perceived as safe and accessible; include anonymous option; developed with consultation; quick response and high response rate and follow up; make use of existing safe spaces; use existing community-based structures and actors which are not implicated in the abuse (external = better); no bias or perceptions of bias; inclusive (men, women, girls, boys + +); no fear of retaliation; complaint desks / in person options and trained staff to receive complaints. Designed to emphasise raising awareness and challenging attitudes; clearly communicate to ensure individuals feel knowledgeable and mandated to act; combining community sensitisation with approaches which offer support based on the needs of victims/survivors s; materials adapted to community and literacy levels.	PSEAH-strengthening content. Plus Identify and address barriers to reporting with standalone flexible funding. Core components: Structure and ToC of engagement (power analysis, critical reflection, empowerment, designed to address multiple drivers of violence); Group engagement within the community rather than just individuals; Participatory methods in engagement enabling reflection on gender relations; Manuals and materials developed to support implementation by all actors; Previous piloting and refinement; Support to victims/survivors s included; Minimum of 18 month activities; Large workforce and careful selection of workforce form community; Long workforce training (1-2 weeks) plus and ongoing support to personnel.
Investigations and disciplinary measures	The policy states that disciplinary action in proportion to the harm caused will be taken when policy or COC are contravened. This is applied in all cases of proven SEAH.	The policy states that disciplinary action in proportion to the harm caused will be taken when policy or COC are contravened. This is applied and, where appropriate communicated, in all cases of proven SEAH. Diverse investigation teams also include GBV or Child Protection technical expertise.	The policy states that disciplinary action in proportion to the harm caused will be taken when policy or COC are contravened. This is applied and, where appropriate communicated, in all cases of proven SEAH. Consider whether an investigation is necessary, or whether there are other, less resource-intense, ways in which the SEAH case can be resolved that do not risk re-traumatising the victim/survivor.

		Case outcomes (no confidential data) are shared with the appropriate coordinated vetting schemes. Victim/survivor-focused principles and safe and appropriate investigation protocols used. Victim/survivor provides informed consent. If the victim/survivor does not consent, other options for resolving the case are considered. Investigation report demonstrates that the conclusions were reached on a factual basis.	General approach is less on punitive and more on restorative support for victim/survivors. Diverse investigation teams also include GBV or Child Protection technical expertise. Case outcomes (no confidential data) are shared with the appropriate coordinated vetting schemes. Victim/survivor-focused principles and safe and appropriate investigation protocols used. Victim/survivor provides informed consent. If the victim/survivor does not consent, other options for resolving the case are considered. Investigation report demonstrates that the conclusions were reached on a factual basis. Compensation and redress is led by the victim/survivor's wishes. Financial compensation for SEAH is considered as standard. Disciplinary outcomes for perpetrators are consistent across aid organisations, and anonymised data on cases shared in the public domain.

5. Implications (resourcing, operational, policy)

The resourcing implications of these different SEAH approaches along the transformative continuum are not well-documented and will likely vary by organisation size and focus, how intensive the delivery is, how long an intervention has been running, and the operational context. There is very limited evidence on resourcing implications for safeguarding against SEAH (and specifically prevention), but based on the emerging evidence from the related field of VAWG prevention,[52] factors that are likely to affect resourcing and operational implications include:

- Long-established interventions tend to have lower costs, as it can take time to adapt and refine programming aimed at preventing violence (often around 2 years). Typical start-up activities that need to be costed for primary prevention interventions include formative research, curriculum development and adaptation, and training of trainers/staff.
- Some populations are more expensive to reach, and resourcing implications need to be traded off with equity considerations. For example, it may be easier to reach refugees in a camp setting than those living in a host population.
- Interventions which address the root causes of SEAH and produce sustained behaviour change over many years could intuitively be more cost-effective, especially those with adolescents or children, due to links between childhood experiences of violence and future perpetration and victimisation.
- Economies of scope may occur if approaches are built onto existing interventions (e.g. training on SEAH prevention is included within existing staff training/induction)
- Economies of scale could be achieved and more effective for some approaches (e.g. a sector-wide vetting scheme).

It is important to note that these lessons from VAWG prevention focus on interventions within communities, whereas SEAH prevention covers both communities and aid staff and their organisations. Adapting these lessons to specific PSEAH objectives and organisation-wide prevention measures will be key to success.

Some more specific considerations on which types of prevention approaches have evidence of cost-effectiveness include:

- Interventions are more likely to be cost-effective at preventing women's exposure to violence, rather than men's perpetration.[53]
- One-to-one psychological support for victims/survivors s (tertiary prevention) is likely to be less cost-effective, although still impactful and important, than primary prevention interventions in low-resource settings. For example, a comparison of the What Works to Prevent VAWG projects found that provider costs per participant ranged from $3.95 for a community intervention in Ghana to $1,324 for one-on-one counselling in Zambia.[54]

Operational implications for design and implication need careful consideration.

- **Design:**
  - High-quality contextual research/assessments are important to understand the risk factors and root causes of SEAH within a particular context. This is particularly important when it comes to understanding the specific norms and attitudes driving SEAH in that context.[55]
  - For primary prevention, it is important to address multiple drivers/risk factors of SEAH.
  - Group-based participatory learning methods should be age-appropriate and use engaging methods[56] – this is particularly important when aiming to prevent SEAH with children and adolescents.
  - Approaches that encourage opportunities for critical reflection and building skills are more likely to lead to long-term behaviour change[57] around SEAH, for example, as part of leadership and organisational change approaches, performance review procedures or staff training and mentoring.
  - It is important that prevention approaches are inclusive of people most at risk of SEAH – e.g. national staff, people with disabilities, children/adolescent girls, etc.
  - Investment in meaningful and quality, survivor-centred response mechanisms is an essential element of effective and ethical prevention of SEAH. It is likely that more people will start reporting SEAH during prevention activities, and embedding support for victims/survivors s in primary prevention helps send a strong message that violence is not acceptable and support is available.
- **Implementation**
  - Significant duration (at least 2-3 years) and intensity, rather than one-off training, to be effective in preventing violence.[58]
  - Include activities aimed at shifting harmful social norms.
  - Carefully selected, trained and supported volunteers/staff to roll out the PSEAH programme who have gender-equitable attitudes and non-violent behaviours.[59]

However, it is important to note that limited evidence exists on the effectiveness of different approaches for preventing SEAH. Reviews of the evidence point out the challenge in assessing effectiveness due to the lack of a standardised approach and no evidence tracking change in SEAH over time. Evaluations are scarce, in part because efforts to address SEAH are rarely project-based but are more commonly integrated into longer-term processes of organisational change. The sensitive nature of the data and reputational concerns may also deter organisations from sharing evidence publicly.[60]

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