

TOOL 8

RISK ASSESSMENT AND STRATEGIES FOR SAFE OPERATIONS AND PROGRAMMES ¹



NOTE

This template forms part of the PSEA/SH Project in the Americas region and should be used in coordination with other tools e.g. **Tool 1: Model SOPs for PSEA and complaint handling mechanisms** and **Tool 4: Steps to set-up a community-based complaint mechanism**. This tool is intended to be used as part of the process any service provider undertakes to establish PSEA systems and to be used by PSEA Focal Points and/or other personnel who have specific experience and expertise in protection of vulnerable persons as part of their role.

AREA	QUESTIONS TO CONSIDER FOR RISK ASSESSMENT	POSSIBLE MANAGEMENT STRATEGIES
PROFILE OF CONCERNED POPULATION	<ul style="list-style-type: none"> • What is the demographic profile of the population in the target areas (e.g. sex, age, education level, income level, household size, percentage of female- and child-headed households, marriage age, religion, ethnicity, migration status, etc.)? • What are some of their characteristics that may render them more susceptible to SEA? Which groups are particularly vulnerable?² 	<ul style="list-style-type: none"> • Adapt awareness-raising efforts on SEA and complaint mechanisms to meet specific needs of target concerned populations e.g. high visibility at borders, transit areas • Conduct targeted information campaigns for population groups that are highly susceptible to SEA e.g. LGBTI
PROFILE OF PERSONNEL	<ul style="list-style-type: none"> • Is there an adequate gender balance of personnel involved in provision of services and programming (i.e. at least 50% female), particularly of personnel directly engaging with affected women and children? • Have personnel been sufficiently vetted e.g. background checks, references? • Have personnel received a comprehensive induction on code of conduct, PSEA/SH and complaint mechanisms? 	<ul style="list-style-type: none"> • Re-adjust gender balance of personnel involved in service provision and direct work with concerned populations • Recruit additional female personnel involved in direct service provision and operations • Review HR files of personnel and conduct additional screening for previous misconduct where needed

1. This tool is adapted from UNICEF draft PSEA field toolkit piloted in 2019

2. For a list of at-risk groups, see pages 11-12 of the IASC, **Guidelines for Integrating GBV Interventions in Humanitarian Action**, September 2015. Also note that some individuals may have overlapping vulnerabilities (e.g. adolescent girls, mothers with disabilities).

<p>PROFILE OF PERSONNEL</p>	<ul style="list-style-type: none"> • Are all personnel regularly trained on PSEA/SH and complaint mechanisms? 	<ul style="list-style-type: none"> • Conduct (refresher) training on SEA/SH for all personnel on a regular basis, specifically focused on possible risks associated with the context and programme activities e.g. shelters, mobile population • Include training and capacity building on PSEA/SH for personnel in programme plans and budgets, and ensure personnel receive regular refresher trainings • Ensure that all personnel are informed and updated on PSEA/SH, complaint and referral mechanisms, inter-agency systems for referrals, PSEA focal points' names and contacts.
<p>OPERATIONAL/ PROGRAMME APPROACHES</p>	<ul style="list-style-type: none"> • In what ways could the operation/programme create or exacerbate existing imbalances between personnel and members of the concerned population? • How do personnel communicate, make themselves known, and share information (including on PSEA, complaint mechanisms) to concerned populations and host communities? • Does the operation/programme involve direct interaction between personnel and concerned populations, especially children? • How are personnel providing services (e.g. private/public, working in pairs/alone, gender-mixed)? • Are external visitors allowed to attend operation/programme activities unaccompanied? Who is in charge of making these decisions? 	<ul style="list-style-type: none"> • Have multi-disciplinary teams for assessments and monitoring e.g. include protection and PSEA focal points • Include assessment of language, literacy, communication preferences in needs assessments and monitoring and, based on this provide regular, accessible information (including on the agency, the programme deliverables, PSEA commitments, complaint mechanisms etc.) • Arrange periodic site visits by PSEA focal points or other independent observer, to assess potential risks and review solutions to actual negative effects reported or observed • Regularly assess the locations, timings of services provided to ensure they are safe for people to access, they ensure adequate privacy and create safe spaces for vulnerable groups • While in respect of the context and the need for discretion, protection and privacy for vulnerable populations, consider the visibility requirements of personnel to ensure that they are appropriately identifiable / accessible • Restrict access of external visitors to operations/programme activities, as needed. Ensure that external visitors have received security briefings, signed a Code of Conduct and are accompanied by personnel at all times

<p>OPERATIONAL/ PROGRAMME CONTEXT</p>	<ul style="list-style-type: none"> • Where are services provided (e.g. shelters, safe houses, camps, informal settlement, host community, rural/urban setting, etc.)? What are specific risks associated with the location (e.g. lack of availability of complaints mechanisms or service providers, insecurity, remoteness)? • What is the attitude of concerned populations towards SGBV concerns? How comfortable would they be to raise concerns and make complaints regarding SEA? • Are systems / mechanisms in place and functioning whereby concerned populations are facilitated to raise concerns and submit complaints to service providers in the operational/ programme area? • Are service providers coordinating and working together to ensure that concerned populations are protected from SEA/SH by all personnel operating in the area? 	<ul style="list-style-type: none"> • Create a more secure environment in operation/ programme locations (e.g. install lights, hire appropriate and trained night security guards) • Establish Standard Operating Procedures (SOPs) for community-based complaint mechanisms e.g. for individual service providers and/or jointly with a group of providers covering a specific operational area • Work with concerned populations to design, monitor and adapt feedback and communication channels, and complaints mechanisms to meet their needs • Agree and establish inter-agency complaint referral mechanisms and SOPs • Ensure referral pathways for SGBV, child protection, other services are established and are understood by relevant personnel e.g. field personnel, PSEA FPs • Report transparently (in respect of confidentiality) on statistics of complaints received, investigated, results.
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