

# In case of sexual assault during employment

03 May 2023

## Key points

- For Victim-survivors
  - Your safety and security are your first priority
  - Disclosing to a trusted person in your office will help us to put the appropriate support in place for you
  - You may need medical care and a PEP kit, including emergency contraception
  - Connect with the Victim Care Officer
- For managers and colleagues
  - Be compassionate, non-judgmental and respectful
  - Maintain confidentiality
  - Ensure access to medical care and PEP kit, including emergency contraception where needed
  - Follow the principles outlined in UNHCR's Policy on a Victim Centred Approach
  - Connect with the Victim Care Officer

## 1. Overview

A higher risk of violence, including sexual violence, exists in emergency responses. During emergency deployment, it is important everyone involved is familiar with and understands the principles of a victim centered approach in prevention and response to an incident of sexual assault of a colleague. Sexual assault comes under the UN definition of sexual harassment, for which there is a separate broader entry in this emergency handbook on others forms of sexual harassment. This entry relates specifically to UNHCR's response to sexual assault.

A sexual assault is any sexual act that happens without consent. It is a serious incident that can have a profound impact on an individual. Victim-survivors should know they are not alone and that the organization is here to support them in a way that takes their needs into consideration and puts them at the center of our response.

Managers and colleagues must be aware of how to respond appropriately and sensitively, in a manner consistent with UNHCR's Victim Centred Approach policy, if a member of our personnel experiences sexual assault. The initial response i.e., the way in which managers and other colleagues handle an incident is critical to reducing the risk of Post Traumatic Stress Disorder (PTSD), secondary victimization or other harmful outcomes for a victim-survivor's wellbeing.

Although managers and colleagues play a critical role, they are not alone in organizing or managing the response. It is important to connect with the [Victim Care Officer](#) as soon as possible for further guidance.

The below advice provides practical guidance in the circumstances of sexual assault in emergency deployment. The advice is differentiated depending on whether you are a victim-survivor of a sexual assault or a manager/colleague supporting someone following a sexual assault.

## 2. Main guidance

The recommendations are separated into two categories:

- For victims-survivors of sexual assault
- For managers or a colleague of a member of personnel who has experienced sexual assault

Please select the heading that best meets your need.

### A) I am a victim-survivor of sexual assault

Emergency deployments can be challenging environments. We find ourselves outside of our comfort zone, familiar context and environment, away from family, friends and familiar colleagues. In such an environment like this, it isn't easy to know where to turn for support when you find yourself in a crisis or a difficult situation.

If you experience sexual assault:

1. Get yourself to a place of safety.

Your physical wellbeing is paramount. For support to ensure your physical safety and security you can contact your local Field Security Advisor, who will observe confidentiality, or use the Electronic Travel Advisory (ETA) App on your phone. Managers, colleagues and friends can also support you. You should contact the person you are comfortable with.

2. Disclose your experience

You may find it difficult to share your experience with anyone else. It is your experience to choose to disclose or not to disclose. However, sharing what happened to you with a trusted person within UNHCR will allow us to respond in an appropriate way to support you and to aid your recovery.

### 3. Medical Care

You may need medical treatment. The Security colleagues or your manager will be able to locate the Post-Exposure Prophylaxis (PEP) kit in your office which you can take with you to the Medical clinic in case they do not have one available. Ask the doctor to collect forensic evidence as you may need this later.

Post Exposure Preventive (PEP) Treatment is an emergency medical response for individuals exposed to the HIV virus. PEP Treatment consists of medication, laboratory tests and counselling as well as emergency contraception. PEP Treatment must be initiated within hours of possible HIV exposure and must continue for a period of approximately four weeks. For information about the efficacy of the treatment and associated risks please contact [UNHCR's Medical Service](#).

### 4. Contact the Victim Care Officer

The [Victim Care Officer](#) provides psychosocial support, guidance and will coordinate with colleagues in order to ensure that the varied support you need - from physical safety concerns, to psychological wellbeing, to protection from retaliation to justice and resolution as well as your return to work are adequately met.

UNHCR has a [Victim Centred Approach Policy](#), which outlines the approach the organization should take when responding to Sexual Misconduct. The policy was designed in consultation with victim-survivors and based on published research to ensure we respond in a way that is appropriate. We want to support you in a manner that works for you. The following outlines how the principles of our Victim Centred Approach policy will be applied in cases of sexual assault.

#### *Wellbeing and security first*

In order to help you regain your sense of safety we will:

- Help to get you to an immediate safe space
- Help you get medical attention
- Connect you to the appropriate services to meet your immediate needs

This will be done collaboratively with you depending on your expressed needs and preferences. We will ask whether you feel safe currently and if not, where would be a safe space for you?

In an unfamiliar environment, it might be difficult to know where a safe place might be, which is why it is important to connect with Field Security colleagues. Field Security Services can support you in getting to a place of safety and link you to the appropriate support services such as medical support and the [Victim Care Officer](#) for psychosocial support. They will also be aware of the available additional support in your location. If you do not feel comfortable with the local Field Security colleague, for example for reasons relating to gender, you can ask for someone of a different gender to be also present during your interactions. We will consult with you to ensure that the people around you are ones that make you feel safe and secure. If this is not the case then we will try to get you to be with people who make you feel safe and secure.

The [Victim Care Officer](#)- a clinical psychologist- provides specialist psychosocial support to

victim-survivors in all UNHCR locations and is based in Geneva. However, if you would like psychosocial support face to face, and you have a Staff Counsellor available in your location, you may wish to contact them.

### *Assistance and support*

Speaking with the Victim Care Officer is completely confidential.

The Victim Care Officer will

- Offer you confidential psychosocial support, guidance and accompaniment
- Coordinate the response and support offered by UNHCR
- If you agree, support you to get local support (medical or psychosocial) (available support will depend on your location)

### *Non-discrimination*

We will ask what you need so we don't make inappropriate assumptions based on any of on your characteristics e.g., race, skin colour, sexual orientation, gender identity, language.

### *End to end holistic approach*

- We will be mindful of how we engage with you from the first time we learn of your sexual assault.
- The Victim Care Officer will accompany you through administrative process until you both agree the support is no longer needed.

### *Give back a measure of control to the extent possible*

- We will aim not to do things **to** you but rather to do things **with** you.
- We will do our best to share information with you, so you are aware of what is happening.
- We will seek your consent whenever possible before taking actions.
- We will consult with you and bring you into decision-making processes as much as possible and where appropriate.
- We will not overwhelm you. If you don't feel able to make decisions, then a core group of colleagues (Head of Office/Representative, Victim Care Officer, Security, Medical Doctor and Staff Counsellor) might need to make decisions in your best interest.

### *Confidentiality and informed consent*

Maintaining confidentiality is an important part of maintaining trust. It is also vital to help you to regain your sense of trust.

- We will aim not to disclose information without your consent whenever possible.
- We will work to provide services whilst doing our best to maintain confidentiality.
  - In some cases, we can seek advice or guidance without sharing your name and personal information.
  - If there is a need to share information to safeguard your wellbeing or in order to link you with needed services, we will do our best to let you know in advance.

- We will share only needed information and make sure it is proportionate and related to the service being provided i.e not all your personal information, rather only select information will only be shared on a need-to-know basis.
- We will endeavor to get your informed consent before taking actions
- We will not assume to know what is best for you.

### *Information*

#### Information gathering

- We will think carefully about the information we ask you and how we ask it
- We will only ask for necessary information
- We will be mindful of when and how we ask for information
- We will be mindful of whether we are the right person to ask you for this information
- We will ask only the basic amount of information needed to best support you.

#### Information provision

- We will also think carefully about the information we share with you.
- We will do our best to be transparent
- We will be upfront and honest about what we can and cannot do
- We will keep you regularly updated
- In most cases you will be provided with updates about issues that relate to your situation by the Victim Care Officer.

#### *Ask and listen*

- We will only ask questions that are relevant to the immediate situation to provide you with the appropriate support.
- We will listen to you to understand your needs to support you appropriately.
- We will try to establish a safe space so that you are able to ask any questions, request updates or clarification.
- We will be available to listen and to make sure you feel heard.

#### *Due Process*

What happened to you may need to be reported to UNHCR's Inspector General's Office and/ or externally to local authorities.

## **B) If you are a manager or a colleague of a member of personnel who has experienced sexual assault**

Emergency deployments can be challenging and we often find ourselves relying on our colleagues more as we are outside of our comfort zone. Managers and colleagues can both play an important role during a crisis or difficult situation. If you witness a sexual assault or if someone discloses an experience of sexual assault to you, then be mindful of the principles of

the

[Victim Centred Approach Policy](#). The policy was designed in consultation with victim-survivors and is based on published research on what victim-survivors view as positive and negative experiences following a disclosure.

As a manager or colleague in an emergency context, an individual has either come to you directly to disclose a sexual assault or you may have been made aware of an incident of sexual assault. In both circumstances please:

1. use the principles outlined below to provide appropriate support
2. contact the [Victim Care Officer](#) for specific guidance in the situation

If the victim-survivor has disclosed to you, remember they chose to do so because

- They need support
- They trust you
- They feel safe with you
- They had no one else to turn to

It is important that the actions you take (or don't take) live up to and helps to maintain that trust. Above all be kind, respectful and considerate. The first experience of disclosure for a victim-survivor should be a positive one, as it will likely impact the next decisions the victim-survivor/survivor makes. Some of the harmful actions that victim-survivors/survivors encounter are from people who are trying to help but take thoughtless or harmful actions. This can often stem from an anxiety to show that you care or are taking the situation seriously. However, you can best demonstrate care by showing empathy and listening to the victim-survivor. The best way to maintain the trust of a victim-survivor-survivor is to be honest and transparent with them. Let them know if you need to speak to someone for their safety or to get them the right support. You do not need to have all the answers. Reach out to the [Victim Care Officer](#) who can guide you in your response.

If the victim-survivor has not disclosed the incident directly to you, remember

- you do not need to speak with the victim-survivor directly
- follow the lead of the victim-survivor

It is OK for their main contact to be someone else that the victim-survivor is comfortable with, as long as you are helping to ensure that the affected colleague(s) is receiving the necessary support.

The following outlines actions which managers and colleagues can take in line with the Victim-survivor Centred Approach Policy

Wellbeing and security first

Consider the victim-survivor/survivors physical and psychological safety.

- Are they in a safe space? If not, where would be a safe space and what is the safest way to

get them there?

- Do they have access to medical attention as well as a PEP kit and emergency contraception?
- Do they have access to psychosocial support?
- Are they surrounded by people that make them feel safe and secure? If not, who might make them feel safe and secure and how can you get them to be with these people?

When considering physical and psychological safety, be transparent and collaborative with the victim-survivor. Let them know what is happening and ask them for their input. Don't assume you know best.

#### Assistance and support

The [Victim Care Officer](#) provides psychosocial support, advice, guidance and accompaniment to individuals who have had an experience of sexual assault. Let the victim-survivor know about this dedicated resource and connect them to the Victim Care Officer. If they do not consent, contact the Victim Care Officer yourself (without disclosing the identity of the victim-survivor for guidance on how you can provide assistance and support to the victim-survivor).

- Connect the victim-survivor to the Victim Care Officer if they agree
- Connect the victim-survivor to local medical support if they agree
- Let the victim-survivor know that additional psychosocial support can be sought through your local or regional Staff Counsellor

#### Non-discrimination

Don't make assumptions or judgements based on victim-survivor's characteristics e.g. race, skin colour, sexual orientation, gender identity, language, religion, political or other opinion, national or social origin, property, birth, health or other status.

- Do your best to accommodate the needs of the individual before you. The best way to do that is to ask what they need so that you don't make inappropriate assumptions.

#### End to end holistic approach

As one of the first responders, your initial encounter will help with the victim-survivor's recovery. Follow the principles of [psychological first aid \(PFA\)](#), The Pocket Guide found on pages 53/54 of the document gives a quick summary. Connect the victim-survivor with the Victim Care Officer so that all other necessary services (medical, administrative, psychosocial, judicial) are coordinated on behalf of the victim-survivor.

#### Give back a measure of control to the extent possible

This means we don't want to do things **to** the victim-survivor but rather we want to do things **with** them. Do your best to share information with the victim-survivor so they are aware of what is happening. Seek their consent whenever possible before taking actions. Let them be part of the decision-making process as much as possible.

At the same time, it is important to not overwhelm the victim-survivor. If they are not in a state to make sound decisions then the Victim Care Officer can consult with a core group of colleagues (Head of Office/Representative, Victim Care Officer, Security, Medical Doctor and Staff Counselor) who may need to make collective decisions in the best interest of the victim-survivor.

### Confidentiality and informed consent

Maintaining confidentiality is an important part of maintaining trust. Do not disclose information without the victim-survivor's consent whenever possible. If you need to share information for their wellbeing or in order to link them with needed services let the victim-survivor know in advance.

Remember you can often seek advice or guidance without sharing the name and personal information about the victim-survivor.

When you share information, only share what is needed by that person. Not everyone needs to know all the details of the incident. If someone has a specific role to play in responding to the incident, they just need to know enough information to provide their particular service. If you are unsure about the level of information to share, you can ask them what information they need to know.

Get informed consent from the victim-survivor before taking actions. Don't assume you know what is best for them. If there are certain actions you must take, then inform the victim-survivor of these actions and the reasons you need to take such actions.

### Information

#### Information gathering

- Think carefully about the information you are asking of the victim-survivor and how you are asking it.
  - Is it necessary?
  - Is this the right time to ask it?
  - Are you the right person to ask it?
- Only ask the basic amount of information you need to best support them.

#### Information provision

- Think about the information you share with the victim-survivor.
  - Be transparent
  - Be honest about what you can and cannot do
  - Keep them regularly updated

It is important to provide the victim-survivor with updates about issues that relate to their situation. In most cases, this will be carried out by the Victim Care Officer. However, if the victim-survivor asks you for information, please update them if you are able to do so.

### Ask and listen

Only ask questions that are relevant to the immediate situation. Ask the victim-survivor as little as possible such as: Where shall I take you to feel more safe? Are you injured? (to arrange medical care) what do you need? Is there anyone you want to call or inform?

Try to listen to the victim-survivor carefully. Avoid interrupting them or filling silences with questions or comments.

#### Due Process

- Do not investigate or try to establish the facts.
- What happened may need to be reported to UNHCR's Inspector General's Office and/or externally to local authorities. Contact the Victim Care Officer for advice.

### **Sexual Assault- Checklist for Managers**

- Get the victim-survivor to a place of safety
- Ensure confidentiality
- Ask the victim-survivor as little as possible. Only ask what is necessary to address the immediate situation e.g where shall I take you to feel more safe? Are you injured (to arrange medical care or provide PEP kit and emergency contraception) what do you need? Is there anyone you want to call or inform?
- Connect with security colleagues for advice.
- Connect victim-survivor to the Victim Care Officer.
- Contact the Victim Care Officer yourself for further guidance.

## **3. Policies, Guidelines and Useful Links**

The main document that guides our response to sexual assault in an emergency setting is the [Policy on a Victim-Centred Approach in UNHCR's response to Sexual Misconduct](#). We follow the principle of Do No Harm.

Psychological Fist Aid (PFA) principle are also helpful in supporting someone following a traumatic incident. You can have a look at [Psychological Fist Aid: Guide for Field Works](#) for further tips on PFA. It is a document that was produced by WHO but endorsed by UNHCR. The Pocket Guide found on pages 53/54 of the document give a quick summary

## Annexes

[Sexual Assault - Checklist for Managers](#)

[WHO, Psychological First Aid](#)

[Psychological First Aid Checklist](#)

## 4. Links

[Protection from sexual exploitation and abuse, and sexual harassment](#)

## 5. Main contacts

For safety and security concerns contact your local **Field Security Service**

UNHCR Field Safety Section (FSS), Division of Emergency, Security and Supply (DESS). At: [HQFS00@unhcr.org](mailto:HQFS00@unhcr.org)

For medical advice contact the **Medical Service** 24/7 MEDICAL SECTION EMERGENCY CONTACT: +41227397399

For psychosocial support, advice and guidance about a sexual assault, please contact the **Victim Care Officer**:

Dr Zuhura Mahamed

[mahamed@unhcr.org](mailto:mahamed@unhcr.org); Mobile +41 79 337 7940

To report a sexual assault to UNHCR's Investigation Service, please contact: **Inspector General's Office**: [inspector@unhcr.org](mailto:inspector@unhcr.org)