

PRSEAH accountability framework for Member States in the context of joint government and WHO operations



Seventy-eighth World Health Assembly, Geneva, Switzerland, 19 May - 27 May 2025. A group photo at the High-level segment at the World Health Assembly in Geneva, Switzerland, on 20 May 2025. © WHO / Pierre Albouy

WHO and ministries of health work closely in the delivery of health in development and humanitarian settings. Sexual misconduct by their respective workforces exposes populations and the workforces themselves to the risk of sexual exploitation, abuse and harassment.

Over the past three years the Secretariat has been building institutional capacity to safeguard against the risk of sexual misconduct. The need for similar capacities in ministries of health, which are the ultimate duty bearers for the protection of populations, is increasingly evident.

In keeping with the recommendation of the Programme, Budget and Administration Committee to the Seventy-Seventh World Health Assembly for the Secretariat to continue to formulate options for ensuring Member State accountability for safeguarding joint government and WHO operations against sexual misconduct¹, the Secretariat has developed a proposed PRSEAH accountability framework for Member States² which was noted by WHO's governing bodies both during the 156th session of the WHO Executive Board and the Seventy-Eight World Health Assembly³, as outlined below.

- a. The framework's primary aim is to "do no harm" through sexual misconduct by WHO and ministry of health workforces involved in joint operations.

1 Report of the Programme, Budget and Administration Committee of the Executive Board EB154/4

2 Management and governance matters - Prevention of sexual exploitation, abuse and harassment EB156/28

3 See the summary records of the third meeting of Committee B (document WHA78/2025/REC/3 [forthcoming 2025])



- b. It is intended to be a minimum starting point to establish and further develop core capacities in ministries of health, drawing on and supported, as relevant, by WHO and health sector partners.
- c. It is aligned with the new clause on protection from sexual exploitation and abuse being integrated into the United Nations Sustainable Development Cooperation Framework and with the Common Approach to Protection from Sexual Exploitation, Abuse and Harassment⁴, which WHO supports, but goes deeper into implementing safeguarding in a practical manner in the health sector. WHO's proposal addresses the critical issue of sexual harassment of WHO's own and other workforces, which is not currently included in the above-mentioned clause.
- d. It is non-binding, voluntary, can be easily contextualized to the realities and constraints in each country and can evolve based on lessons learned.



Seventy-eighth World Health Assembly, Geneva, Switzerland, 19 May - 27 May 2025. The opening Plenary of the 78th World Health Assembly at the Palais des Nations in Geneva, Switzerland, on 19 May 2025. Address by WHO Director-General Dr Tedros Adhanom Ghebreyesus. © WHO / Pierre Albouy

4 https://capseah.safeguardingsupporthub.org/sites/default/files/2024-06/CAPSEAH%20English%2005_24.pdf



The framework has the following three capacity components:

- Policy and standards: A written and agreed policy/statement for the prevention and response to sexual misconduct by own workforce and implementing partners, distinct from, or complementary to, the existing policies related to the broader issue of gender or gender-based violence; and/or a code of conduct; minimum standards for PRSEAH.
- Workforce training: Training on policies and standards for personnel and implementing partners, special training prior to health emergency response and targeted training for specialist functions, such as investigations and victim/survivor support and skills for managers.
- Incident management: Safe and accessible reporting mechanisms and communication to at-risk populations and workforce, the provision of victim-/survivor-centred support and services, and investigation, disciplinary or legal measures upon substantiation of allegations.

Ensuring stronger Member State engagement in joint WHO and ministry of health operations, programmes and collaborations using a simple yet agreed framework for building safeguarding capacity should significantly increase protection for people and address some of the current gaps identified in PRSEAH work, not just by WHO but by all stakeholders. At WHO's Annual Stakeholder Review Conference in 2023, Member State engagement was highlighted as a top priority for progressing PRSEAH⁵. This need has been reiterated across the United Nations system and the humanitarian sector and raised by civil society organizations. Initiating this in the health sector provides an opportunity for ministries of health to take the lead in protecting their populations from the terrible and avoidable harm caused by sexual misconduct.

