

SAFEGUARDING FOCAL POINT TRAINING

Participant Resource Handbook

# 



September 2020

# Table of Contents

Resource 1: Context Mapping 3

Resource 2: Safeguarding Scenarios 6

Resource 3: Safeguarding Definitions 8

Resource 4: IASC Six Core Principles Relating to Sexual Exploitation and Abuse, 2019 13

Resource 5: Role Description 14

Resource 6: Raising Awareness 16

Resource 7: Template Training Agenda 19

Resource 8: Safeguarding Assessment Tool 20

Resource 9: Safeguarding Networks 24

Resource 10: BOND Reporting Case Studies 25

Resource 11: Data Protection and Record Keeping 32

Resource 12: Reporting Web 34

Resource 13: Providing Support 36

Resource 14: Investigations 41

Resource 15: Service Mapping 44

Resource 16: Safeguarding Workplan 45

# Resource 1: Context Mapping

## Part 1: *Risks and Protective Mechanisms*

Complete this table with information about local safeguarding/protection risks and the protective mechanisms that exist nationally and locally.

|  |  |
| --- | --- |
| **Local safeguarding/protection risks** | |
| What kinds of abuse or exploitation exist in local communities? Consider local practices such as:   * Early marriage * Child labor * Corporal punishment * Female genital mutilation * Initiation ceremonies |  |
| Who is most at risk? |  |
| **Protective mechanisms** | |
| Are there any national laws that protect specific groups? [e.g. children, women, and persons with disabilities] |  |
| What does national law consider a criminal offense? [e.g. what is the law on rape, sexual or physical assault, neglect, cruelty, age of consent, etc.] |  |
| Has the country ratified any key UN Conventions that protect specific groups? [e.g. CRC, CEDAW] |  |
| Who plays an important role in protection in communities? [e.g. of children, women, persons with disabilities] |  |

## Part 2: *Policy Summary*

Complete this table with information about the policies that exist in your organization in relation to safeguarding. If the organization does not have a specific safeguarding policy, consider other relevant policies that may cover different aspects, including staff harassment and bullying, child protection, data protection, media guidelines, etc.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **POLICY NAME** | **WHAT DOES THE POLICY COVER?** | **WHO “OWNS” THE POLICY?** | **WHERE IS THE POLICY LOCATED?** | **[ADDITIONAL] WHAT INTERNATIONAL STANDARDS DOES THE POLICY REFER TO?** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

# Resource 2: Safeguarding Scenarios

Reflect on each scenario and consider:

* + - What is the type of harm raised in this scenario?
    - Who might be at risk from this type of harm?
    - What can be done?
    - [Additional optional question: Which policies/procedures do you need to follow?]

|  |  |
| --- | --- |
| **SCENARIO** | **NOTES** |
| 1. A consultant has been asked to evaluate a program. He has visited several project sites over the last few weeks. You hear that he was recently questioned by police about possession of abusive images of children. |  |
| 1. The program manager of a water project shared with you that on a visit to the project in a community, an older woman told her she was worried about using the community water point. There are a group of men that gather near the water point. |  |
| 1. A male member of staff is going on leave to get married. You congratulate him. Afterwards, it becomes clear that the bride is 14 years old. |  |
| 1. Your organization has started working in a new camp, which has just begun cash for work schemes. A colleague tells you there are rumors that committee members are asking for favors from camp residents to be put on the list. There have been no official complaints. |  |
| 1. A program manager of a livelihoods program for persons with disabilities tells you that on a project visit, he heard that one of the program participants had to leave the village. Members of the community had apparently seen a story published by your organization’s annual report in which the program participant described discrimination by the community where they lived. |  |
| 1. You are in a meeting with several staff when a colleague is contradicted multiple times by the senior manager. The manager also makes a negative comment about your colleague’s work on a donor report in front of everyone. |  |
| 1. An office volunteer confides that a colleague can be very physical with her – he often pats her hand or touches her back. He once brushed past her to get to the printer and she is sure he did it deliberately. |  |

# Resource 3: Safeguarding Definitions

**Abuse[[1]](#footnote-1)** - the wrong or improper use or treatment of something or someone causing harm, damage, offense, or distress to them. There are several forms of abuse (such as physical abuse, verbal abuse, sexual abuse, emotional abuse, etc.), any or all of which may be perpetrated as a result of deliberate intent, negligence, or ignorance.

**Bullying[[2]](#footnote-2)** - repeated inappropriate behavior, direct or indirect, whether verbal, physical, or otherwise, conducted by one or more persons against another or others, at the place of work and/or in the course of employment, which could reasonably be regarded as undermining an individual’s right to dignity at work.

An isolated incident of the behavior described in this definition may be an affront to dignity at work, but, as a once-off incident, it is not considered to be bullying. The exercise of legitimate management rights or of legitimate employee rights or responsibilities is not bullying. Interpersonal differences and conflicts may arise in the workplace for a variety of reasons, including the implementation of legitimate management directives.

A pattern of any of the following behaviors may be examples of types of bullying:

* verbal abuse or insults;
* being treated less favorably than colleagues;
* intrusion – pestering, spying, or stalking;
* menacing behavior;
* intimidation;
* excessive monitoring of work;
* humiliation;
* withholding work-related information;
* repeatedly manipulating a person’s job content and targets;
* blamed for things that are beyond a person’s control;
* manipulation of the victim’s reputation by rumor, gossip, or ridicule;
* preventing the victim from speaking by making loud voiced criticisms or obscenities;
* constant undermining, mockery, or criticism that focuses on a personal characteristic;
* exclusion or victimization;
* aggressive behavior toward others, including unreasonable anger or shouting;
* abuse or threats of abuse;
* persistently manipulating the nature of the work or the ability of the victim to perform the work - e.g. by overloading, setting objectives with impossible deadlines, deliberately withholding work information, or setting meaningless or unachievable tasks;
* repeated criticism of work without balancing this with positive feedback where possible, or without offering potential solutions;
* criticizing an individual in front of others.

**Child[[3]](#footnote-3)** - anyone under the age of 18 years in accordance with the UN Convention on the Rights of the Child irrespective of national law or custom regarding the age of consent or majority.

**Exploitation[[4]](#footnote-4)** -using a position of authority, influence, or control over resources, to pressure, force, coerce, or manipulate someone to do something against their will or interest and well-being. This includes threatening to withhold project assistance, threatening to make false claims about a person in public, or any other negative repercussions in the workplace or community.

Examples of exploitation include, but are not limited to:

* Offering special benefits to beneficiaries or other program participants in exchange for expressed, implied, or demanded favors (including sexual favors) or benefits, either to the staff member or to a third party;
* Threats or implications that an individual’s refusal or unwillingness to submit to demands will affect the person’s entitlement to project assistance and support, or terms and conditions of employment;
* Children’s involvement in heavy, dangerous, and/or extended long hours or forced labor; and
* Selling, buying, transporting children, women, or men by means of coercion or deception for economic or other gain.

**Harassment[[5]](#footnote-5)** -any form of unwanted behavior relating to personal characteristics such as race, membership of a minority group, sex, gender, religion or lack of religion, color, national or ethnic origin, language, marital status, family status, sexual orientation, age, disability, political conviction, socio-economic background, caste, HIV and AIDS status or other illnesses, physical appearance or lifestyle, which has the purpose or effect of violating a person’s dignity and creating an intimidating, hostile, degrading, humiliating, or offensive environment for the person. Such unwanted conduct may consist of acts, requests, spoken words, gestures, or the production, display, or circulation of written words, pictures, or other material.

Harassment also means less favorable treatment of a person because they have rejected or submitted to the type of conduct described above.

It is important to note that:

* Anyone can be a victim of harassment;
* Harassment may be an isolated incident or repeated actions;
* Harassment can take many forms and may involve written documents and the use of IT including email, text messaging, photographs, or pictures.

Many forms of behavior may constitute harassment, including:

* verbal harassment - jokes, comments, ridicule, or songs;
* written harassment - including faxes, text messages, emails, or notices;
* physical harassment – jostling, shoving, or any form of assault;
* intimidatory harassment – gestures, posturing, or threatening poses;
* visual displays such as posters, emblems, or badges;
* isolation or exclusion from social activities; and
* pressure to behave in a manner that the individual thinks is inappropriate - for example, being required to dress in a manner unsuited to a person's ethnic or religious background.

**Protection[[6]](#footnote-6)** -all activities aimed at obtaining full respect for the rights of the individual in accordance with the letter and the spirit of the relevant bodies of law (i.e. Human Rights law, International Humanitarian Law, refugee law). It encompasses activities that directly prevent or respond to acts of violence, coercion, discrimination, or deliberate deprivation of services and includes activities such as preventing or responding to gender-based violence in the community, registering refugees, or demobilizing child soldiers.

**PSEA (protection from sexual exploitation and abuse)[[7]](#footnote-7)** – the term used by the UN and NGO community to refer to measures taken to protect vulnerable people from sexual exploitation and abuse by their own staff and associated personnel.

**Safeguarding[[8]](#footnote-8)** – the responsibility that organizations have to make sure their staff, operations, and programs do no harm to children and vulnerable adults, and that they do not expose them to the risk of harm and abuse.[[9]](#footnote-9) PSEA and child protection come under this umbrella term. Generally, the term does not include sexual harassment of staff by staff, which is usually covered by an organization’s bullying and harassment policy.

**Sexual abuse[[10]](#footnote-10)** – an actual or threatened physical intrusion of a sexual nature, whether by force or under unequal or coercive conditions.

**Sexual exploitation[[11]](#footnote-11)** – any actual or attempted abuse of a position of vulnerability, differential power, or trust for sexual purposes, including, but not limited to, profiting monetarily, socially, or politically from the sexual exploitation of another.

**Sexual harassment[[12]](#footnote-12)** - any form of unwanted verbal, non-verbal, or physical conduct of a sexual nature. A single incident may constitute sexual harassment. Many forms of behavior can constitute sexual harassment, including:

* physical conduct of a sexual nature: this may include unwanted contact such as unnecessary touching, patting, or pinching or brushing against another employee’s body, assault, or coercive sexual intercourse;
* verbal conduct of a sexual nature: this may include unwelcome sexual advances, propositions or pressure for sexual activity, continued suggestions for social activity outside the workplace after it has been made clear that such suggestions are unwelcome, unwanted or offensive flirtations, suggestive remarks, innuendos or lewd comments;
* non-verbal conduct of a sexual nature: this may include the display of pornographic or sexually suggestive pictures, objects, written materials, emails, text messages, or faxes. It may also include leering, whistling, or making sexually suggestive gestures; and
* sex-based conduct: this may include conduct that denigrates, ridicules, or is intimidating or physically abusive because of a person’s sex, such as derogatory or degrading abuse or insults that are gender related.

**Survivor or victim[[13]](#footnote-13)** – the person who is, or has been, sexually exploited or abused. The term “survivor” implies strength, resilience, and the capacity to survive. Use of the term “victim” is not intended to negate that person’s dignity and agency as an individual.

**Violence[[14]](#footnote-14)** - any form of aggressive behavior that may be physically, sexually, or emotionally abusive. The aggressive behavior may be conducted by an individual or group against another, or others.

# Resource 4:

# IASC Six Core Principles Relating to Sexual Exploitation and Abuse, 2019

1. Sexual exploitation and abuse by humanitarian workers constitute acts of gross misconduct and are therefore grounds for termination of employment.
2. Sexual activity with children (persons under the age of 18) is prohibited regardless of the age of majority or age of consent locally. Mistaken belief regarding the age of a child is not a defense.
3. Exchange of money, employment, goods, or services for sex, including sexual favors or other forms of humiliating, degrading, or exploitative behavior is prohibited. This includes exchange of assistance that is due to beneficiaries.
4. Any sexual relationship between those providing humanitarian assistance and protection and a person benefitting from such humanitarian assistance and protection that involves improper use of rank or position is prohibited. Such relationships undermine the credibility and integrity of humanitarian aid work.
5. Where a humanitarian worker develops concerns or suspicions regarding sexual abuse or exploitation by a fellow worker, whether in the same agency or not, he or she must report such concerns via established agency reporting mechanisms.
6. Humanitarian workers are obliged to create and maintain an environment that prevents sexual exploitation and abuse and promotes the implementation of their code of conduct. Managers at all levels have particular responsibilities to support and develop systems that maintain this environment.

# Resource 5: Role Description

Complete the table by deciding for each task whether SFPs are:

* **“R” = Responsible** 
  + the person(s) who is responsible for implementation and completes the task or process
* **“A” = Accountable**
  + the person who is held accountable if the task or process is not completed. There would usually only be one accountable person.
* **“I” = Informed**
  + a person who is informed once a decision has been made

|  |  |
| --- | --- |
| **TASK** | **SFP** |
| 1. Map existing community engagement projects in [organization] and work with project leads to insert safeguarding messages and/or gather community input where appropriate. |  |
| 1. Develop a safeguarding training strategy for all staff, interns, consultants, volunteers, and anyone associated with the implementation of programs at all sites. |  |
| 1. Facilitate trainings and refresher trainings on safeguarding. |  |
| 1. Disseminate new policies and materials as they become available. |  |
| 1. Properly receive safeguarding complaints at field level and channel complaints through appropriate reporting mechanism. |  |
| 1. Under the direction of the HQ investigations manager, assist in the planning of and participate in investigations into reported safeguarding complaints. |  |
| 1. Participate in facilitating Safeguarding capacity building activities (local and regional trainings and workshops, etc.) at field level. |  |
| 1. Liaise with Safeguarding focal points from other NGOs, UN agencies in-country, and PSEA/Safeguarding networks where established. |  |
| 1. Ensure country program is aware of and, where appropriate, contributes to collective, inter-agency measures to prevent and address PSEA/safeguarding violations. |  |
| 1. Maintain contact with HQ for information-sharing regarding safeguarding resources and activities at country level. |  |
| 1. Maintain a working knowledge of PEP (Post-Exposure Prophylaxis) guidelines and how to refer to designated PEP services. |  |
| 1. Support the country team to ensure that the safeguarding policies are included in all contractual agreements. |  |
| 1. Under direction of the Country Director and designated HQ Safeguarding focal point, support the development and monitor implementation of a Country Safeguarding work-plan including but not limited to:    * Communication activities (e.g., poster displays)    * Training activities    * Community awareness sessions (focus groups, open discussion forums, etc.)    * Safeguarding audits    * Working with managers to ensure that M&E activities incorporate a specific component to monitor safeguarding implementation measures    * Safeguarding information updates    * Developing and strengthening community-based feedback and response mechanisms    * Apply survivor assistance and referral processes when appropriate, including:      + Providing the survivor with comprehensive information to enable him/her to make an informed choice on the next course of action.      + Facilitating timely referrals both internally and externally as per the needs presented by the survivor, the available resources, and more importantly, with respect to the survivor’s wishes, as described by the organization’s in-country standard operating procedures on provision of survivor assistance. |  |
| 1. Coordinate with the protection actors and other relevant agencies in-country to ensure that an appropriate referral/pathway is developed for use by staff and is in place for survivors of sexual abuse to access medical, counselling, and legal services. |  |

# Resource 6: Raising Awareness

## Part 1: *With Staff*

Complete this table with information about key messages for staff - how they will be shared and where to get updates/support from HQ.

|  |
| --- |
| **Who are the different groups of staff you want to target? [e.g. staff, volunteers, contractors, etc.]** |
|  |
| **What key messages/information do you need to share with them?** |
|  |
| **How will you share these messages with staff? [e.g. training sessions, staff briefings]** |
|  |
| **What useful internal or external resources can you draw on? [including any training materials that have been developed]** |
|  |

## Part 2: *With Communities*

Complete this table with information about the different groups in communities - key messages and how the key messages will be shared.

|  |
| --- |
| **Who are the different groups within communities you want to target? [e.g. women, children, persons with disabilities]** |
|  |
| **What key messages/information do you want to share with communities?** |
|  |
| **How will you share the key messages/information with the community?** |
|  |
| **What useful internal or external resources can you draw on? [e.g. communication strategies, posters, leaflets, or videos]** |
|  |

# Resource 7: Template Training Agenda

Use this template as an aid to develop a training agenda for staff in your organization if one does not already exist.

|  |  |
| --- | --- |
| **Introductions (15 minutes)** | |
| * Overview of the training | * Introduction of trainer and participants * Ground rules for the training (including confidentiality and what to do if participants are affected by these issues) |
| **Session 1: What is safeguarding? (30 minutes)** | |
| * What does safeguarding mean in your organization? | * Definition of safeguarding * Definition of children/vulnerable adults |
| **Session 2: Policies and procedures (30 minutes)** | |
| * What are the key safeguarding policies and procedures in your organization? | * Policy do’s and don’ts * Case studies or scenarios |
| **Session 3: Reporting (30 minutes)** | |
| * How can people make complaints? | * Safeguarding feedback mechanisms (internal and external mechanisms) * Community engagement on safeguarding * What are the barriers to reporting? |
| **Wrap-up (15 minutes)** | |
| * Final points | * Available resources (internal and external) * Questions |

# Resource 8: Safeguarding Assessment Tool[[15]](#footnote-15)

Use this tool to assess whether the safeguarding policies, procedures, and associated mandatory training programs are being understood and implemented at the country level.

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1. **Have all staff signed and been trained on the Code of Conduct and safeguarding policies and procedures?** | | | | | **Issues or other areas that need to be addressed** | | | | | |
| *Have all staff signed the code of conduct? (consider a witness sign as well)?* | | | Y/N | |  | | | | | |
| *Are signed copies of the code of conduct available in the personal files of all staff?* | | | Y/N | |
| *Does the induction process for new staff include training on the safeguarding policy, the Code of Conduct (expected behaviors), and the complaint/reporting procedures?* | | | Y/N | |
| *Do all staff receive an annual refresher on the safeguarding policy, Code of Conduct, and the complaint/reporting procedures?* | | | Y/N | |
| *Is the whistle-blower policy disseminated and understood by all staff?* | | | Y/N | |
| *Are different materials such as posters and desktop calendars available and used to maintain awareness among staff throughout the year?* | | | Y/N | |
| ***What are your proposed actions?*** | | ***Due date*** | | | ***Responsibility*** | | ***Resources required*** | | ***Status*** | |
|  | |  | | |  | |  | |  | |
| 1. **Can the country office demonstrate practices of safe recruitment and performance management?** | | | | | | **Issues or other areas that need to be addressed** | | | | | |
| *Are safeguarding commitments reflected in job advertisements and job descriptions, according to the level of risk of the role?* | | | | Y/N | |  | | | | | |
| *Are screening questions asked during the selection/interview process?* | | | | Y/N | |
| *Are references checked from previous employers (at least 2)?* | | | | Y/N | |
| *Are criminal records checked, where possible?* | | | | Y/N | |
| *Are standards of behavior included in performance reviews?* | | | | Y/N | |
| *Do staff understand the consequences of non-compliance with the code of conduct and safeguarding policies?* | | | | Y/N | |
| ***What are your proposed actions?*** | ***Due date*** | | | | | ***Responsibility*** | | ***Resources required*** | | ***Status*** | |
|  |  | | | | |  | |  | |  | |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1. **How can we share the Code of Conduct with community members?** | | | | | **Issues or other areas that need to be addressed** | | | | | |
| *Is there an existing process for sharing the Code of Conduct with diverse groups in the community (for example women, children, older people, etc.)?* | | | Y/N | |  | | | | | |
| *Has the Code of Conduct been translated into local languages/dialects using terms people commonly use at home by community members?* | | | Y/N | |
| *Are there any context-appropriate communication methods identified for staff and partners to contextualize the Code of Conduct with target audiences?* | | | Y/N | |
| ***What are your proposed actions?*** | | | ***Due date*** | | ***Responsibility*** | | ***Resources required*** | | ***Status*** | |
|  | | |  | |  | |  | |  | |
| 1. **Are guidelines and mechanisms in place for monitoring and external reporting of abuse and exploitation?** | | | **Issues or other areas that need to be addressed** | | | | | |
| *Does the country office/program have an established community feedback and complaints mechanism?* | | Y/N |  | | | | | |
| *Have diverse groups in communities been consulted on the design, implementation, and monitoring of complaints-handling mechanisms?* | | Y/N |
| *Do staff members understand the rationale for the complaints mechanism and the importance of maintaining confidentiality, and are they clear on how to receive and deal with complaints confidently?* | | Y/N |
| *Is there a planned communication approach to inform communities on how they can raise a complaint, including sensitive complaints, and what they can complain about?* | | Y/N |
| *Are different channels (letter, SMS, call, complaints box, etc.) available to ensure different community groups can make complaints to your organization?* | | Y/N |
| *Do the complaints mechanisms and processes consider safety, ease of access, timeliness, and confidentiality, especially in relation to sensitive complaints?* | | Y/N |
| ***What are your proposed actions?*** | ***Due date*** | | ***Responsibility*** | | ***Resources required*** | | ***Status*** | |
|  |  | |  | |  | |  | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 1. **Does the country have a process in place to manage potential safeguarding risks associated with external visitors to field sites?** | | | **Issues or other areas that need to be addressed** | | |
| *Are visitors required to sign a Code of Conduct and receive a briefing on safeguarding from appropriate staff member(s) before interacting with your programs?* | | Y/N |  | | |
| *Are external visitors escorted at all times while interacting with people taking part in your organization’s programs?* | | Y/N |
| *Is there a practice to clearly explain the purpose of a visit by an external person to people taking part in your organization’s programs?* | | Y/N |
| ***What are your proposed actions?*** | ***Due date*** | | ***Responsibility*** | ***Resources required*** | ***Status*** |
|  |  | |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 1. **Do staff address risks identified in programs?** | | | **Issues or other areas that need to be addressed** | | |
| *Do staff identify and address risks, including safeguarding risks, in programs?* | | Y/N |  | | |
| *Do program plans include activities to build awareness of safeguarding?* | | Y/N |
| *Do budgets include funds for capacity building, communications, and project adaptations linked to safeguarding/PSEA?* | | Y/N |
| ***What are your proposed actions?*** | ***Due date*** | | ***Responsibility*** | ***Resources required*** | ***Status*** |
|  |  | |  |  |  |

# Resource 9: Safeguarding Networks

Complete the table with information about:

|  |
| --- |
| **What resources exist in-country on safeguarding (e.g. national level PSEA networks, inter-agency PSEA coordinators, other agency SFPs, and local safeguarding actors such as government bodies or child rights organizations)?** |
|  |
| **What information would be useful to ask of other actors?** |
|  |
| **Who is best placed to provide information on referral mechanisms in place?** |
|  |
| **What information can you share with external actors when talking about safeguarding in your organization? Is there anything you cannot share publicly?** |
|  |

# Resource 10: BOND Reporting Case Studies[[16]](#footnote-16)

Read through your allocated case study and answer the following questions:

1. What are the key issues with the reporting process highlighted in this case study?
2. What reporting pathway would have been used if this situation had arisen in your organization? Would it have led to a different outcome to the one in the case study?
3. What recommendations would you make to improve the reporting process in this case study?

### CASE STUDY 1: WORKPLACE HARASSMENT

Ann is a caseworker with a small UK-based charity (NGO) that helps refugees access public aid. In addition to Ann, the staff includes Adam, another caseworker; Jenny, the administrative assistant/bookkeeper; and Philip, the supervisor. Everyone reports to Philip who, in turn, presents monthly reports to the Board of Trustees. The staff work long hours together in a small office, so they get to know each other well and start to share information about their personal lives.

Some of the reasons Ann decided to work for this charity are the friendly and informal working environment and the care everyone shows toward one another. When her cat is run over by a car, she feels comforted by her colleague, Adam, when he puts his arm around her shoulder. Slowly, however, it seems that Adam is finding excuses to make physical contact with her: leaning over her shoulder to see case files on her computer screen, putting his hand on her back when he passes her in the coffee room, or touching her arm when she discusses cases with him.

One day Ann asks Jenny if she ever has similar experiences with Adam. Jenny shrugs and responds that he is a bit “handsy” and a bit “touchy feely.” One evening, Adam and Ann are the last two in the office. They are standing together and chatting when he suddenly leans in and tries to kiss her. Ann decides this is too much. She asks for a meeting with Philip and tells him her concerns.

According to the organizational human resources grievance policy, Philip is supposed to inform the board of any incidents of this nature. Instead, Philip speaks to Adam at a football match and asks him to avoid Ann because she is “a bit hyper-sensitive.” Adam stops talking to Ann and makes a point of never being alone with her. Ann quits a few months later and takes a job in a larger NGO.

### CASE STUDY 2: SEXUAL EXPLOITATION AND ABUSE

Amadi is a 35-year-old staff member for a small community-based organization (CBO) providing basic services. He spends much of his time in remote villages distributing items such as food, clothing, and medical supplies. A British INGO funds his program activities and covers his salary. The INGO values Amadi and his CBO as they have direct contact with the community, speak the local language, and are familiar with the local terrain and customs. Amadi gets along very well with the international staff of the INGO. The INGO staff enjoy his company when they go to the field with him and do not judge his behavior when he stays out late.

One day, a couple from a distant village comes to the INGO’s field office with their 16-year-old daughter, Nala, who is six months pregnant. The father talks to Sarah, who supervises the activities on which Amadi and his CBO are working. He tells Sarah that Amadi raped Nala when visiting their village. Nala’s father demands that Amadi take responsibility for his actions. Nala had initially kept her pregnancy – and its cause – a secret from her parents, but she revealed the details to her local priest during confession. The priest advised her to tell her parents and told the parents to report the incident to the INGO.

The INGO makes safeguarding a priority:

• Their safeguarding policy is posted in prominent locations in English and local languages.

• The local language policy is shared with all partners, who have to sign a Memorandum of Understanding (MoU) that mentions safeguarding and the Code of Conduct.

• All staff and partners receive regular refresher trainings on its implementation.

In accordance with the policy, the Head of Office, Sarah, presents the situation to both the Head of the CBO and to the country director who emails the INGO’s UK-based head of safeguarding. At the same time, Sarah suspends funding to the CBO for the activities managed by Amadi. A fact-finding process is initiated.

The fact-finding process supports Nala’s claims and reveals that she was betrothed to a man in her village who no longer wants to marry her. The community generally addresses such issues themselves. The parents want Amadi to marry Nala, provide for her, erase her stigma, and support the unborn child.

The INGO advise the CBO to terminate Amadi’s employment and encourages the family to pursue formal legal action. The CBO ends Amadi’s contract – they want to maintain their funding relationship with the INGO. However, local law enforcement chooses not to pursue the matter. Amadi and Nala are married shortly before the baby is born. Staff at the INGO and Head Office are frustrated at the outcome of the case.

### CASE STUDY 3: SAFEGUARDING VIOLATIONS AND THEIR IMPACT ON COMMUNITY RELATIONS

James is a 41-year-old American consultant managing a large and successful education and advocacy project for a private consultancy firm called Pivotal. Pivotal won a competitive bid for funding from a British donor. Project benchmarks are consistently being met and exceeded, and the donor is thrilled. Future funding is not only possible, but likely. Co-workers generally attribute the success of Pivotal’s education project to James’s ability to relate to and motivate the youth in the community. There are rumors about James being “very social” with community members, but none of the staff thinks about this too much.

The donor’s project manager, Kate, is upset when, on a monitoring visit to the project, a local community leader files an official report against James. The community leader tells Kate that James invites young people from the community to the staff guesthouse and serves them alcohol. The community leader believes James is encouraging the youth – boys in particular – to reject the community’s cultural values.

Pivotal has a Code of Conduct and a Safeguarding Policy that all staff and consultants, including James, must sign before employment. These include guidance on behavior and the practical steps to be taken to protect children. The policy does specify that the consumption of alcohol in the workplace is prohibited and all staff must work in pairs when dealing with children. The policy covers steps to be taken to inform clients or donors of any safeguarding concerns or incidents. After some initial informal fact-finding, Kate becomes convinced that James has not only violated the Code of Conduct but has also sexually abused some of the boys at the parties.

Kate speaks to the director of Pivotal and requests that Pivotal initiates internal disciplinary action against James. Pivotal does not lodge a report with national legal authorities, as national laws prohibiting same-sex relationships would place the survivors at risk. Kate immediately advises her head of office in London, and a note is placed in Pivotal’s human resource files that James is not to be hired again. The director of Pivotal then comes out on a field visit to hold a series of carefully worded community meetings to acknowledge what occurred. In addition, Pivotal finances medical treatment and enables access to mental health and psychosocial support activities for the boys to help them overcome the abuse.

### CASE STUDY 4: CULTURAL SENSITIVITIES

Ras is a 28-year-old program officer for a British NGO in his home country of Iraq. He has a wife and four children, and the family is respected in the community. A permanent contract with an international NGO – like the one he has – is highly sought after. Ras harbors a secret, however. He is gay. Though Ras has sometimes imagined a relationship with another man, he has never acted on this out of fear of the potential ramifications.

Ras’s struggle remains private until Gaspard, an older French man, comes in as the new country director. One afternoon at the end of the workday, Gaspard approaches Ras and gently probes him about his orientation. Accustomed to living an open lifestyle in Europe, Gaspard feels frustrated at the need to hide his sexuality. He tells Ras their working together is fate and urges Ras to start a sexual relationship with him. Ras is flattered that Gaspard would choose to have a relationship with him and is impressed by Gaspard’s apparent acceptance of his own sexuality. Ras also feels uncomfortable refusing his supervisor. Eventually, he is seduced by Gaspard’s advances.

Within weeks, however, Ras’s fear of exposure and his personal uncertainty about his relationship with Gaspard creates a change in his behavior. He is nervous and less outgoing at work. Lisa, an expatriate colleague, notices that Ras has become unenthusiastic about work and seems easily distracted and startled. When she asks if something is wrong, he reveals the relationship. A colleague from the Human Resources department in London, John, is on a field visit and is staying in the same guesthouse as Lisa. Lisa finds him kind and approachable, so she sets up a meeting between Ras and John.

After hearing the story, John recommends that Ras “keep his private life private” for the “wellbeing of everyone involved.” John does not raise the issue with Gaspard – he knows that the London office is trying to ensure greater diversity in the workplace and fears there may be a negative reaction if Gaspard feels attacked because of his sexuality. Lisa feels as though she has betrayed Ras’s confidence and is upset that he was advised not to say anything.

### CASE STUDY 5: VAGUE SUSPICIONS

Elise is a 40-year-old child protection worker with a large INGO. She has been in the field in one capacity or another for nearly 20 years and has “seen it all.” Last week, she attended a three-day in-country inter-agency child protection strategic planning meeting. One of the new colleagues was a 30-year-old Argentinian named Mateo. He had been working for a small INGO as national staff for several years and now is working internationally in West Africa. This was his first inter-agency meeting.

On the first day of the meeting, Elise and Mateo were in the same discussion group for a couple of activities. That night as she returned to her room, Elise thought about Mateo. He seemed to be the ideal child protection worker: he listened to the opinion of others, shared his own ideas respectfully, and had a thorough understanding of safeguarding and protection principles. Why, then, did she feel as if something were “off” with him?

Elise’s feeling of unease grew throughout the meeting. Was it something about the way he looked at female colleagues? His jokes? He was paying lots of attention to younger female colleagues. Some might say he was just being charming. Was she jealous? Perhaps it was a cultural difference; she had never met an Argentinian before.

Then Elise overheard two colleagues talking outside the meeting room. One said: “He won’t leave me alone. He keeps asking me out, and I have told him no again and again. And I don’t like that his room is on the same floor as mine. I don’t know what to do?” The other replied: “You’re single, aren’t you? He’s good looking and charming - you should go for it.” Elise felt convinced they must be talking about Mateo.

Normally Elise would have asked a colleague for their opinion of him, but she didn’t know anyone in Mateo’s organization. When she was back in her office later in the week, Elise decided she should talk to the inter-agency Protection from Sexual Exploitation and Abuse (PSEA) focal point, but she was not sure who that was.

Instead, she spoke with her manager, expecting him to refer her to the inter-agency PSEA focal point. Her manager listened patiently, but when she was finished, he told Elise that he thought she was being overly sensitive and was likely picking up on harmless cultural differences. He also said that it was not appropriate to smear a new colleague’s reputation: reports should contain something concrete. Elise was taken aback, but she relied on her manager’s judgment and said nothing more.

### CASE STUDY 6: SILENT SURVIVORS

Ajij is a 25-year-old Indonesian national who volunteers in a child friendly space (CFS) in Sulawesi. He lost much of his family - including a younger brother, nieces, and nephews - in the 2018 tsunami. At the CFS, he has become particularly close with Kadek, a deaf six-year-old whose parents have died. With his family, Kadek had used a local sign language dialect, but nobody at the CFS knows the language. Ajij has learned a few basic signs, but most of his communication with Kadek happens through football and art. Kadek is energetic and enthusiastic. After he scores, he waves his hands in the air and opens his mouth as if cheering. His artwork is full of playful animals, vibrant colors, and bold brush strokes.

A couple of months ago, the INGO sent a new worker, Danelle, to oversee the CFS because she had a background in early childhood development and special education. Shortly after she arrived, Ajij noticed that Kadek seemed more contained than usual. He still played football with Ajij and seemed happy to see him, but his cheering was more subdued. His artwork began featuring darker colors and carefully-drawn boxes.

At first Ajij was concerned that Kadek was suffering from an illness. Then he began noticing a pattern. On the days when Danelle was not in the CFS, Kadek would seem more like his old self; when she was around, he was more reserved. Ajij felt confused. When he tried to get Kadek to tell him what was wrong, all the child would do is sign, “don’t like.” From his training, Ajij knew he should report a suspicion. But to whom should he report? He couldn’t go to the manager, because his concerns were about her. After deliberating, he decided to go to his organization’s child safeguarding focal point.

The focal point was visibly uncomfortable about Ajij’s report, but she assured him she would look into the matter. The focal point contacted Kadek’s aunt who was caring for him. They brought in a sign language translator to translate for Kadek. Then they interviewed Danelle and engaged in fact-finding. They determined that Danelle had been physically punishing Kadek when he would not do as she was telling him to or when she felt his behavior toward others was inappropriate. As set out in the organization’s Human Resources Manual, disciplinary action was taken.

### CASE STUDY 7: ASKING FOR FAVORS

Tsitsi is a recently widowed 25-year-old with three small children. When her husband was alive, she rarely worried about meeting the family’s basic needs. Although they were refugees, her husband had regular work. They were not wealthy, but they never went hungry. Now, however, she finds herself struggling to provide enough food for her children.

Her neighbor told her a local INGO would give her food even if she had no money. When Tsitsi replied: “Is it free?”, her friend replied: “Yes, yes, it is free. And if the men like you, they will even give you a little extra, and that does not cost you any money either.”

The next distribution day, Tsitsi joined her friend in the queue.

The queue was very long, so Tsitsi had time to watch those around her. Two men were in charge of distributions. One was an international staff member, and one was a fellow refugee. From time to time, the international staff member would spend more time with a woman, take her aside, speak to her for a few moments, take her phone number, and give her additional supplies.

When Tsitsi arrived at the front of the line, the international staff member leaned forwarded and whispered in her ear: “You look worried and hungry. I can give you extra help if you need it. Write your phone number and address on this piece of paper, and I can come by to see you later.” Tsitsi felt uncomfortable but didn’t know what else to do. She agreed.

Later that night, the man came to her house after her children were in bed. He knocked and knocked at the door. Given his visit was after dark, Tsitsi felt this was inappropriate. She did not think he was just bringing her more goods. She suspected that he probably intended something else. Tsitsi felt angry and frightened. She did not like the man or what he wanted in exchange for this “extra help.” She asked her friend the following day who confirmed that this man would give more food and help to women who would have sex with him.

Near her tent was a complaints box. She wrote a note saying what had happened and asked for immediate help. No one ever contacted her about the report. She felt scared to return for further assistance from the INGO.

# Resource 11: Data Protection and Record Keeping

Consider each stage of the “Closing the Loop” diagram below. For each stage, identify risks to confidentiality and data protection and measures to mitigate these.

|  |  |  |
| --- | --- | --- |
| **STAGE OF CLOSING THE LOOP** | **RISKS** | **MEASURES TO ENSURE CONFIDENTIALITY AND DATA PROTECTION** |
| Receiving the complaint | *[For example, if the person receiving the complaint shares details of the case with other colleagues.]* | *[For example, ensure clear protocol for who receives/logs complaints and only sharing information on a strict “need to know” basis.]* |
| Processing the complaint |  |  |
| Review and investigation |  |  |
| Response and action |  |  |
| Resolution |  |  |
| Appeal |  |  |
| Tracking and recording complaints |  |  |

# Resource 12: Reporting Web

## Online

## Face-to-face

|  |  |
| --- | --- |
| Girl | Community leader |
| Kiosk volunteer | WASH Manager |
| Shelter Manager | Head of Office |
| Safeguarding Focal Point (SFP) | HR Advisor |
| Admin Assistant | Office volunteer |
| Driver | WASH Field Officer |
| Father |  |

# Resource 13: Providing Support

## Part 1: *Do’s and Don’ts*

The role and responsibilities of SFPs regarding the receipt of safeguarding disclosures may vary according to the organization’s policies and resources, as well as their own substantive roles. This resource is for SFPs who are expected to simply report concerns; it provides basic information on how to respond in the event someone does disclose a safeguarding concern to them. SFPs who have a formal role in receiving disclosures directly, are involved in investigations, or are expected to refer/accompany survivors to specialized services, should receive additional in-depth training.

General points for how to respond[[17]](#footnote-17)

React calmly and give the person your full attention.

Reassure them that they were right to tell but do not promise conﬁdentiality. It is very important that you make clear that you are obliged to follow your organization’s safeguarding (or other appropriate) policy and explain the possible outcomes that might result from information being given to you. If the situation involves an incident of sexual exploitation or abuse, you are obliged to report this through your safeguarding reporting channel. [If it relates to sexual harassment, you should check the relevant policy in your organization.]

Take what they say seriously, even if it involves someone you feel sure would not harm anyone. We know from experience that we must listen to what we are told even if it is diﬃcult to believe.

Try to get a clear understanding of what they are saying, but do not ask leading questions.

Ensure the safety of the person. Provide information about appropriate services for support and assistance, including medical services. Ask the survivor for permission before connecting them to any of these services.

Record any information provided to you by the survivor, including if they refuse support, and confidentially report it as soon as possible using the organization’s reporting system.

|  |  |  |  |
| --- | --- | --- | --- |
| THINGS TO SAY OR DO[[18]](#footnote-18) | | THINGS NOT TO SAY OR DO | |
| **Show you are an active listener:**   * mirror back what they tell you, such as by saying, “It sounds like you are saying ….” * clarify what they are telling you by repeating it to make sure you have understood correctly * validate how they feel, such as by saying, “It is expected that you would feel that way” or “I can understand that you would feel that way” * empathize with them, such as by saying, “I’m sorry this happened to you. It is not okay that this has happened to you.” * reinforce the message that they do not need to feel ashamed or embarrassed * invite them to say more if they want to summarize what they have said | **Use body language to create a safe space:**   * sit square with the person facing them * do not put anything between you and the person, including a desk * lean in toward the person. This helps them know you are interested in what they are saying. * maintain eye contact at all times (unless considered culturally inappropriate) * stay in a relaxed sitting position | **Do NOT:**   * investigate * use leading questions such as “then what happened?” * blame the person for what happened * overwhelm them with questions * make judgements about what they did or did not do or how they are feeling * tell them what to do or assume you know what they need * pressure them into doing anything or talking about things they are not ready to face | **Do NOT offer false reassurances, such as:**   * “It’s going to be ok” * “Justice will be done.”   **Do NOT make inappropriate comments, such as:**   * “I know how you feel” * “Something similar happened to me” * “I think you need to …” * “You’re lucky it wasn’t worse” * “Why didn’t you fight back?” * “Why don’t you report it to the police?” * “Why did you encourage [the perpetrator]?” |

Part 2: *Scenarios[[19]](#footnote-19)*

Consider the scenario you have been assigned and answer:

* + - What Dos and Don’ts for responding to disclosures are highlighted in this scenario?
    - How could the person(s) receiving the disclosure have responded differently?

**Scenario 1**

**YOU ARE:** A 17-year old female refugee

**YOUR SITUATION:**

* You left your country behind following violent conflict.
* You managed to get onto a livelihoods project, but the NGO project officer in charge tried to kiss you.
* Since then, you have refused his sexual advances a few times, each of them getting harder to manage and he is growing impatient.
* You fear that on your next encounter, he will force himself on you.

**YOUR TESTIMONY:**

* You decide to go to the NGO office to report his behavior before it gets any worse.
* Since you don’t have an appointment, the person in reception tells you to come back when you do.
* When you mention that you have a delicate matter to report, the person in reception insists that you tell him what the matter is for him to help you.
* Hesitant because there are other people in the waiting area, you trust him with your story. He asks why you didn’t report it sooner but takes your information. He says he will let the right person know about it, and that you should wait for further instructions.

**Scenario 2**

**YOU ARE:** A 20-year old girl living in a refugee camp with your mother and two sisters

**YOUR SITUATION:**

* You have received support from an international NGO.
* After a long period of hesitation, you decide to talk with the NGO representative about your mother.
* She has started going out with a local staff member who is sometimes violent with her. Your mother endures it because she says that the staff member promised to help your family.
* You really don’t want your mother to know you are here talking about her, which makes you sound anxious. You even stutter when talking and start having second thoughts about being here.

**YOUR TESTIMONY**

* You talk to a clerk in the NGO office.
* He hardly looks at you and continues to work on his computer.
* He nods his head on every other occasion to acknowledge your story, but he barely speaks a word.
* He doesn’t ask any questions and says that he will talk to this national officer to ask him to stop seeing your mother.
* He tells you not to worry and sends you home.

**Scenario 3**

**YOU ARE:** a young woman from a community where an NGO is implementing a cash voucher project

**YOUR SITUATION:**

* You have decided to report that you have been offered more money in exchange for sex from an international staff member working with the organization.

**YOUR TESTIMONY**

* You make a private appointment with the SFP from the NGO.
* When you arrive for the meeting, you are surprised to see the SFP has brought two male colleagues from the NGO with her.
* You start to doubt yourself and wonder if reporting the issue is going to do more damage than good. You were expecting to tell your story to one female staff, not to two male strangers.
* You decide to go ahead and disclose the situation.
* The three NGO staff are outraged when they hear your story and tell you not to worry - the perpetrator will be fired right away.

**Scenario 4**

**YOU ARE:** a 12-year old boy without a family

**YOUR SITUATION:**

* You were taken in by an NGO worker who needed someone to look after her house.
* Since you started working at her house, you have not been back to school. You work very long hours. She asked you for your ID card and has not given it back. When you complained you wanted to go back to school, she threatened to stop you from leaving the house altogether.
* You are cleaning her car when you see an NGO worker walking past. She is wearing a colorful t-shirt with the same logo as the woman you work for.

**YOUR TESTIMONY**

* You approach the NGO worker and briefly tell her what has happened.
* She immediately asks for more details and wants to know what happened.
* She tells you that you should go with her to the police. When you tell her that you don’t feel comfortable doing this, she insists you go with her instead to the NGO office to report the situation.

**Scenario 5**

**YOU ARE:** a young shelter officer

**YOUR SITUATION:**

* You are managed by an older colleague who always singles you out for compliments in front of other staff. He has sent you several private Facebook messages and last week put his arm around you in the office.
* You decide to talk to a colleague on your team about it.

**YOUR TESTIMONY**

* You are on a field trip with your colleague when you raise the issue.
* She is surprised you are worried about it and shares that the rest of the team thought you were trying to get his attention so your contract would be renewed.
* Before you can answer, she says she will talk to the manager for you and let him know you feel uncomfortable with the behavior.
* You arrive at the project site and do not have a chance to talk about it with the colleague again.

# Resource 14: Investigations

## Part 1: *Key Investigation Principles*

This is a summary of key investigations principles. For more detailed definitions, see: CHS, *Guidelines for investigations* <https://www.chsalliance.org/get-support/resource/guidelines-for-investigations/>

* **Confidentiality:** Confidentiality is an ethical principle that restricts access to and dissemination of information.
* **Health and Welfare:** The health needs of survivors are paramount, including medical care, psychosocial support, counseling, etc. This may also be provided to the subject of the complaint as part of procedural fairness.
* **Safety:** In some situations, complainants, subjects of complaints, witnesses, and investigators may fear reprisals, including physical attacks. It is essential that a plan is developed and reviewed throughout the investigation for how best to keep everyone safe.
* **Legality:** Investigations should be initiated, conducted, and reported in accordance with all applicable rules, regulations, and guidelines, including due respect for the rights and privacy of those involved.
* **Professionalism:** Staff undertaking investigations must have adequate skills, training, and knowledge. The methodology and techniques used in the investigation must be appropriate for the objectives and circumstances of each investigation.
* **Thoroughness:** Investigations must be conducted in a diligent, complete, and focused manner to ensure that relevant evidence is obtained to establish or not establish the allegation(s).
* **Independence:** Investigations must be conducted in a fair and equitable fashion. Evidence must be gathered and reported in an unbiased and independent manner to determine the validity of an allegation. Investigators must be free from any influence that could impair their judgment.
* **Planning and reviewing:** Investigations must be planned, systematic, and completed as soon as possible. Investigation reports and conclusions must be supported by adequate, accurate records and documentation.
* **Respect (for all concerned):** Investigators must be seen to be respectful of all parties to an investigation. An investigation is into an allegation, not a person.
* **Timeliness:** Subject to the resources available, investigations must be conducted and reported in a timely manner.
* **Working in partnership:** In some cases, organizations may receive complaints against staff working for a different agency. Organizations must have a policy on how they will deal with such complaints.

Part 2: *Definitions of Key Terms –   
Face-to-Face*

Match the key terms and their definitions by drawing lines between them.

|  |  |  |
| --- | --- | --- |
| Complainant |  | Information gathered during an investigation that proves or disproves an allegation. |
| Allegation |  | An internal administrative procedure, in which an organization attempts to establish whether there has been a breach of SEA policy by a staff member or members. |
| Witness |  | This term can be used interchangeably with victim. “Victim” is a term often used in the legal and medical sectors, but this term is generally preferred in the psychological and social support sectors because it implies resiliency. C |
| Evidence |  | The person making the complaint, including the alleged survivor of the sexual exploitation and abuse, or another person who becomes aware of the wrongdoing. |
| Report |  | An assertion of facts that one intends to prove at trial or during an internal investigation procedure. |
| Investigation |  | A person who gives evidence in an investigation, including the survivor, the complainant, or the subject of the complaint. |
| Survivor |  | The person alleged to have perpetrated the misconduct in the complaint. |
| Subject of the complaint |  | Where an individual(s) reports a concern regarding safeguarding. |

## Part 3: *Key Steps of an Investigation*

|  |  |  |
| --- | --- | --- |
| **ORDER 1-9** | **KEY STEPS OF AN INVESTIGATION** | **NOTES** |
| 1 | Receive an allegation | Contains basic information about who the complainant is and what they allege (what happened, who did it, when, where, etc.). |
| 2 | Make management decision on how to proceed | Depending on whether there is enough information to take the complaint forward. In some cases, criminal offenses may be alleged, in which case the organization will need to decide whether it will refer the case and, if so, whether it continues with an internal investigation. |
| 3 | Appoint investigation team | This will generally comprise an investigation manager (develop TORs, liaise with stakeholders, make key decisions about investigation, etc.) and investigator(s) (assess risks, gather evidence, prepare recommendations, etc.). |
| 4 | Plan the investigation and under-take a risk assessment | Identifying if the complainant or anyone else is at immediate risk and, if needed, referring people at risk to specialist services (such as medical, psychosocial, or legal). |
| 5 | Gather and study background material and documentary evidence | This includes any relevant information stored in physical or electronic form, including documents, emails, photographs, etc. |
| 6 | Update investigations plan and draft interview questions | The gathering of evidence may require a change in the investigation plan such as interviewing an additional witness. |
| 7 | Interview witnesses | This is a critical step and includes interviews with the complainant or survivor (first interview), as well as the subject of the complaint (last interview). Careful consideration is needed when determining if interviews with children and vulnerable witness are required. If conducted, specific measures should be put in place. |
| 8 | Write investigation report and management outcome report | Contains the conclusions of the investigation about whether a breach of contract has occurred, based on the available evidence. |
| 9 | Conclude the investigation and submit report to management for appropriate follow-up | These should be shared on a “need-to-know” basis or to organizations with the legal authority to request them. The next steps taken would generally not be shared with the investigators for confidentiality reasons. |

# Resource 15: Service Mapping[[20]](#footnote-20)

Complete the table below with as much information as possible and consider:

* What steps can you take to update the list below? [Refer to Session 3 in Module 2 about working with safeguarding networks]
* How often should you update it?
* Who should this information be shared with?
* What can you do if the services that survivors are referred to are unsafe?

Providing information to survivors on their rights and options regarding available services is an important element of responding to safeguarding concerns. In some cases, survivors may show signs they need immediate referral to specialist services, including if they are a survivor of sexual violence, in which case you should inform them about available medical facilities and stress the importance of receiving prompt emergency care (ideally within a few hours but up to 24 hours; for example, PEP kits need to be administered within 72 hours after the incident). Ask the survivor for permission before connecting them to any of these services; if s/he says no, you must respect this choice unless there is an immediate threat to their life, they are at risk of harming others or themselves, or they are unable to care for themselves or keep themselves safe. Ideally, organizations should have compiled information on the following services and understand the referral process to:

|  |  |  |  |
| --- | --- | --- | --- |
| **Service** | **Organization** | **Contact point** | **Opening hours** |
| Medical services |  |  |  |
| Mental health and psychosocial support |  |  |  |
| Safe refuge |  |  |  |
| Legal services |  |  |  |
| Social services |  |  |  |
| Child protection services |  |  |  |
| Other |  |  |  |

# Resource 16: Safeguarding Workplan

Complete the following table, noting down any additional support you would like to build for your own personal learning and any strategies you can use to support safeguarding in your office/organization.

|  |  |  |
| --- | --- | --- |
|  | PERSONAL | ORGANIZATION / OFFICE |
| What more do I need to know about this topic?  What support would I like to achieve this? | What needs to change in the organization/office to improve our safeguarding approach?  How can I support this to happen? |
| Module 1 – Awareness  [Recognizing harm, contextualizing safeguarding, SFP roles and responsibilities] |  |  |
| Module 2 – Prevention  [Raising awareness with staff and/or communities, safeguarding assessments, working with others] |  |  |
| Module 3 – Reporting  [community-based feedback and response mechanisms, reporting safeguarding concerns, barriers to reporting] |  |  |
| Module 4 – Responding  [Person-centered approaches, addressing immediate needs, investigations] |  |  |

***Notes on challenges/mitigating strategies:***

1. Concern, *Annex 1, Terminology for the Concern Code of Conduct and associated policy documents*, March 2018 [↑](#footnote-ref-1)
2. Concern, *Annex 1, Terminology for the Concern Code of Conduct and associated policy documents*, March 2018 [↑](#footnote-ref-2)
3. Concern, *Annex 1, Terminology for the Concern Code of Conduct and associated policy documents*, March 2018 [↑](#footnote-ref-3)
4. Concern, *Annex 1, Terminology for the Concern Code of Conduct and associated policy documents*, March 2018 [↑](#footnote-ref-4)
5. Concern, *Annex 1, Terminology for the Concern Code of Conduct and associated policy documents*, March 2018 [↑](#footnote-ref-5)
6. IASC IDP Protection Policy 1999. The definition was originally adopted by a 1999 Workshop of the International Committee of the Red Cross (ICRC) on Protection. [↑](#footnote-ref-6)
7. CHS Alliance PSEA Quick Implementation Handbook [↑](#footnote-ref-7)
8. CHS Alliance PSEA Quick Implementation Handbook [↑](#footnote-ref-8)
9. Adapted from Keeping Children Safe *www.keepingchildrensafe.org.uk* [↑](#footnote-ref-9)
10. CHS Alliance PSEA Quick Implementation Handbook [↑](#footnote-ref-10)
11. CHS Alliance PSEA Quick Implementation Handbook [↑](#footnote-ref-11)
12. Concern, *Annexe 1, Terminology for the Concern Code of Conduct and associated policy documents*, March 2018 [↑](#footnote-ref-12)
13. CHS Alliance PSEA Quick Implementation Handbook [↑](#footnote-ref-13)
14. Concern, *Annex 1, Terminology for the Concern Code of Conduct and associated policy documents*, March 2018 [↑](#footnote-ref-14)
15. This is an extract from the IMC *Protection Risk Assessment Tool.* [↑](#footnote-ref-15)
16. These case studies are directly from BOND, Safeguarding report-handling mechanism case studies, 2019 available: https://www.bond.org.uk/sites/default/files/safeguarding\_reporting\_case\_studies.pdf [↑](#footnote-ref-16)
17. Adapted from KCS, *Understanding Child Safeguarding* (2018) <https://www.keepingchildrensafe.global/wp/wp-content/uploads/2020/02/KCS-Understanding-Child-Safeguarding-200218.pdf> [↑](#footnote-ref-17)
18. Adapted from GISF, *Managing Sexual Violence against Aid Workers: prevention, preparedness, response and aftercare* (2019) <https://gisf.ngo/resource/managing-sexual-violence-against-aid-workers/> and GBV AOR, *How to Support a survivor of gender-based violence when there is no GBV actor in your area* [*https://gbvguidelines.org/en/pocketguide/*](https://gbvguidelines.org/en/pocketguide/) [↑](#footnote-ref-18)
19. Adapted from IASC, *Learning Package on Protection from Sexual Misconduct for UN partner organizations* <https://interagencystandingcommittee.org/iasc-learning-package-protection-sexual-misconduct-un-partner-organizations> [↑](#footnote-ref-19)
20. Adapted from GISF, *Managing Sexual Violence against Aid Workers: prevention, preparedness, response and aftercare* (2019) <https://gisf.ngo/resource/managing-sexual-violence-against-aid-workers/> [↑](#footnote-ref-20)