



EngenderHealth
for a better life

Protection from Sexual Exploitation and Abuse (PSEA) Policy

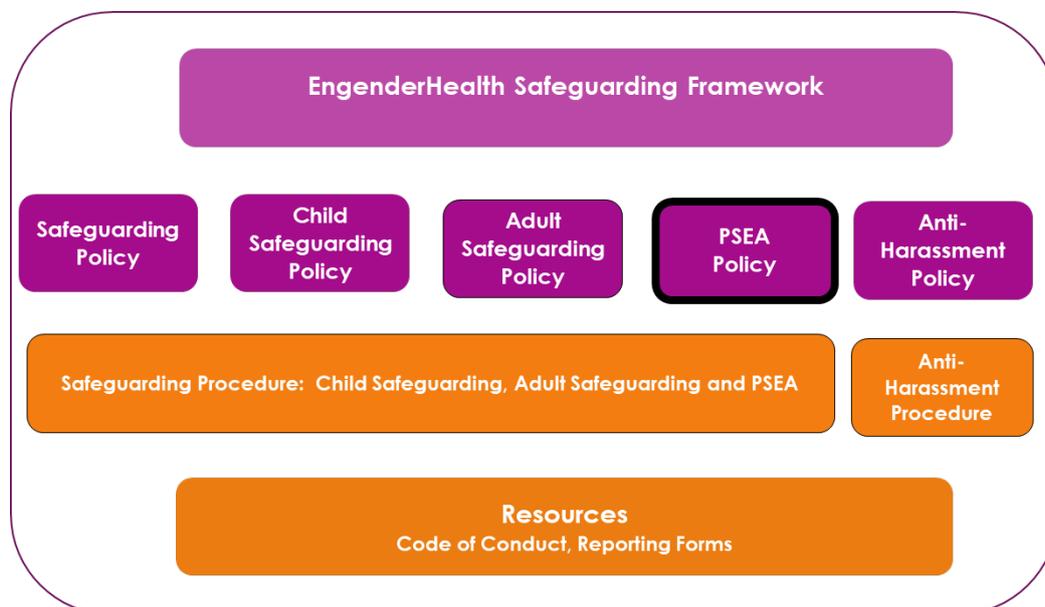
January 2019

Contents

Safeguarding Framework.....	2
Policy Introduction.....	2
Accountability Statement	2
Policy Approach.....	3
Framework Principles.....	3
Policy Implementation.....	4
Policy Map.....	4
Governance.....	4
Responsibilities.....	4
EngenderHealth's Obligations.....	5
Staff Responsibility.....	6
Manager Responsibility.....	6
Safeguarding Committee.....	6
Confidentiality of Complaint.....	6
Whistle-Blowing.....	7
Prohibited Retaliation.....	7
PSEA Commitments.....	8
Consequences.....	9
PSEA Reporting Procedures.....	9
Support for Survivors.....	10
Definitions.....	10
Policy Review.....	13

Safeguarding Framework

This document is part of EngenderHealth's Safeguarding Framework that consists of this policy, procedures and resources.



Policy Introduction

EngenderHealth has a zero tolerance for sexual exploitation and abuse. EngenderHealth will not tolerate its staff, associates, partners or any other representatives associated with the delivery of its work to engage in any form of sexual exploitation or abuse. Vulnerable adults, women and children are particularly at risk of sexual exploitation and abuse. EngenderHealth is committed to protecting all communities that the organisation works with from sexual exploitation and abuse at all times. Please see definitions for a full outline who is included in the community.

The purpose of the PSEA Framework, including the policy, procedures and resources, is to establish an outline of the importance of the framework and clear procedures. The PSEA Framework also affirms EngenderHealth's commitment to the United Nations Secretary General's Bulletin on Special Measures for protection from sexual exploitation and abuse (ST/SGB/2003/13).

This policy ensures that all EngenderHealth staff, associates, and partners are aware of their role and responsibilities in keeping communities and stakeholders safe from any form of sexual exploitation or abuse. The policy clarifies definitions and responsibilities regarding prohibited behaviour and the associated PSEA procedures outline the reporting and investigation processes.

Accountability Statement

EngenderHealth takes this policy very seriously, and the mandate prohibiting any form of sexual exploitation and abuse comes from EngenderHealth's Executive Team (ET) and Board of Directors.

The PSEA policy applies to all EngenderHealth staff, associates, and partners who must comply with its requirements and understand the sanctions that may be applied for breaches of the policy. Where required by law or local practices, EngenderHealth or Country Offices may enhance the standards as set out in this policy. This commitment will be evidenced through signing the policy and the Code of Conduct. Training in this policy is mandatory for all EngenderHealth staff, associates, and partners.

The Board of EngenderHealth is ultimately accountable for this policy. The CEO, ET and directors of EngenderHealth are responsible for its implementation. It is the responsibility of all representatives of EngenderHealth to raise any concerns regarding sexual exploitation and abuse. EngenderHealth takes all concerns and complaints seriously and will initiate a comprehensive investigation of complaints that are in violation of this policy and take disciplinary and possibly legal action as warranted.

Policy Approach

This policy details how EngenderHealth achieves its obligations and applies to all staff, associates and partners regardless of their location.

Framework Principles

This policy and the entire Safeguarding Framework are guided by the following principles:



Safeguarding

EngenderHealth is committed to all community members as outlined in the definitions as having the right to safeguarding and protection from sexual exploitation and abuse irrespective of ability, ethnicity, faith, gender, sexuality, and culture. A key principle within this is that all processes are survivor led. EngenderHealth commits to survivors leading the complaint process where it is possible and appropriate to do so.



Shared Responsibility

For the PSEA policies and practices to be effective in reducing the risks to beneficiaries and communities, all at EngenderHealth must share the responsibility for implementation and improvement. As such, a failure at one level of the organization constitutes a failure at all levels of the organization.



Effective Communication

EngenderHealth effectively communicates with all staff, associates, and partners in simple and accessible language to create a positive and accessible culture where responsibilities for PSEA are clear.



Continuous Improvement

EngenderHealth provides assessment, reflection and feedback mechanisms to inform the organisation of any improvements that can be made to policies and practices.

These mechanisms include quarterly incident reviews, regular safeguarding audits, as well as regular policy review and refresher training.



Dignity and Respect

EngenderHealth creates a work environment where the principles of dignity and respect for all staff, associates, and partners, in all locations are at the heart of what the organisation does. Included in this are the principles of being non-judgemental when hearing the concerns and complaints of survivors of sexual exploitation and abuse.



Zero Tolerance

EngenderHealth has zero tolerance for any forms of sexual exploitation and abuse.



Confidential

EngenderHealth is committed to confidentiality and information will not be shared outside of the Safeguarding Committee unless it is absolutely necessary, and the safety of the person involved is a concern.

Policy Implementation

Policy Map

This policy will guide EngenderHealth staff through the definitions of sexual exploitation and abuse as well as governance and responsibilities. The associated procedures and resources will provide information on how to report any complaints, the format of the reporting, and how these complaints will be managed.

Governance

The Chief Executive Officer (CEO), together with the Board of Directors, has ultimate responsibility for this policy and the PSEA Framework and its proper management, using a systematic approach. As such, the CEO and the Board of Directors will receive a summary of any reported sexual exploitation and abuse incidents and follow-up measures taken at each Executive Team meeting and Board meeting, respectively.

Responsibilities

EngenderHealth is committed to following through on the following measures in order to ensure that the organisation is observing its PSEA commitments:



These commitments are fully outlined in the Safeguarding Policy.

EngenderHealth's Obligations

EngenderHealth believes that all people have a right to live their lives free from sexual exploitation and abuse and will not tolerate its staff, associate, or partners engaging in any sort of behaviour that puts beneficiaries or communities at risk. To that end, EngenderHealth commits to:

1. Creating a safe culture for both those it serves and those who work for and represent the organisation.
2. Following through on any complaints and concerns in a timely manner through its Safeguarding Committee and taking each complaint seriously.
3. Sensitising staff, associates, and partners, around how to make a complaint.
4. Ensuring zero tolerance towards sexual exploitation and abuse.
5. Building a culture of dignity, honor and respect where all those who work with and are served by EngenderHealth feel empowered to report complaints.
6. Educating staff, associates, and partners that sexual exploitation and abuse constitute gross misconduct and are grounds for termination of employment and possibly legal action.
7. Providing information on how to report complaints and the investigation procedure.
8. Ensuring that all staff, associates, and partners have access to the PSEA policy and procedures as well as all other related safeguarding policies.

9. Providing training to all staff, associates, and partners on PSEA.

Staff Responsibility

All staff, associates, and partners are required to adhere to this policy at all times and are obliged to report any suspicions of sexual exploitation and abuse of others. All staff, associates, and partners are required to sign the associated Code of Conduct and an acknowledgement of having read and understood the policy.

Manager Responsibility

All Managers and Directors hold overall accountability for this Policy and its Implementation. Managers also have a responsibility to support and develop systems that maintain an environment where all parties involved with EngenderHealth understand how to behave, how to raise complaints and concerns, and what action will be taken.

Safeguarding Committee

A Safeguarding Committee has been established at the HQ level as well as in each field location. The Safeguarding Committee is comprised of 5 members:

1. One woman in a Senior Management Role
3. Three members will be from across different departments in the country program.
4. A fifth member who is an external expert in harassment, sexual exploitation or abuse.

All Safeguarding Committees will ensure that there is diversity and equal gender representation on the committee.

The Safeguarding Committee will be responsible for informing and training all staff in safeguarding, PSEA and harassment policies and procedures. They will also be responsible for receiving and investigating any safeguarding complaints, including PSEA.

The Safeguarding Committees will be trained in all of the Safeguarding policies as well as reporting and investigations. The Safeguarding Committee will also be provided with specialised psychological first aid training so that they are able to offer appropriate support as required.

Confidentiality of Complaint

EngenderHealth will protect the confidentiality of sexual exploitation and abuse allegations to the greatest extent possible in order to protect the integrity of the investigation and prevent embarrassment, further discrimination or harassment, or retaliation.

Confidential or sensitive information obtained by any staff member during the course of an investigation shall not be disclosed to others unless required by law. Concerns of individuals regarding confidentiality of information provided by them will be handled as sensitively as possible, and information shall not unnecessarily be disclosed to others.

EngenderHealth cannot guarantee, however, complete confidentiality, because the organisation cannot conduct an effective investigation without revealing certain information to the alleged perpetrator and potential witnesses. EngenderHealth will share information about allegations of sexual exploitation, abuse and harassment only with those who need to know about it. Records relating to sexual exploitation, abuse and harassment complaints will also be kept confidential on the same basis.

Whistle-Blowing

As referred to in EngenderHealth's whistle-blowing policy, all disclosures will be treated in confidence. EngenderHealth maintains a third-party secure reporting system through EthicsPoint to ensure that all staff, partners, and vendors have recourse in the event of possible misconduct. Reports may be submitted anonymously for investigation via www.ethicspoint.com or by calling the US hotline at 1-866-739-4117 or the country number found at the same webpage.

Prohibited Retaliation

EngenderHealth maintains a zero-tolerance policy for retaliation against anyone for reporting sexual exploitation or abuse, assisting in making a complaint, or participating in an investigation.

Any staff, associate, or partner who makes a good-faith complaint of sexual exploitation or abuse, assists, testifies, or participates in any investigation or proceeding or who reasonably opposes such conduct in the workplace will not be adversely affected in the terms and conditions of his or her employment and will not be discriminated against or discharged for engaging in such activity.

Retaliation not only affects the recipient, but also can spread rapidly throughout EngenderHealth. It destroys faith in EngenderHealth's leadership and can damage employee morale.

Complaints of retaliation will be promptly investigated. If retaliation is substantiated, appropriate disciplinary action, including possible dismissal, will be taken.

Examples of retaliation:

Some examples of retaliation include but are not limited to the following:

- Termination, demotion, disadvantageous transfers or assignments, refusals to promote, threats, reprimands, or negative evaluations.
- Co-worker hostility or retaliatory harassment, which includes intimidation, gossip, rumors, insults, or otherwise offensive conduct that would subject a person to ridicule or humiliation.
- Any action or combination of actions that is reasonably likely to materially and adversely affect an employee's job performance or opportunity for advancement.

PSEA Commitments

All EngenderHealth staff, associates, and partners are expected to conduct themselves in accordance with the PSEA policy. Following are the core commitments relating to sexual exploitation and abuse that all staff, associates, and partners are expected to follow. The following behaviours are prohibited:

Sexual Activity with Children and Vulnerable Adults

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 in the age of the child is not a defence.

Sexual activity with vulnerable adults, as outlined in the definitions, is also prohibited.

Child Marriage

Any staff, associates, or partners who engage in child marriage (marriage to anyone under the age of 18) will be in violation of the PSEA policy. As per the definition of child marriage, anyone under the age of 18 is not able to give or withhold consent and is considered a form of sexual violence. Any staff married to a child under the age of 18 as per the custom or law of their country, before the EngenderHealth PSEA policy came into force will not be subject to disciplinary action. EngenderHealth, however, prohibits any such relationship from occurring once the PSEA policy came into effect.

Sexual Activity with EngenderHealth Beneficiaries

Sexual activity with any beneficiary is prohibited due to inherently unequal power imbalances. An EngenderHealth beneficiary is defined as anyone who receives services or support from EngenderHealth or an EngenderHealth partner.

Grooming and/or Coercion

Any grooming and/or coercion of a child or vulnerable adult for the purposes of obtaining sex is prohibited.

Sexual Exploitation

Any form of sexual exploitation is prohibited including:

- **Buying Sex**
Exchange of money, material assistance, employment, goods or services for sex, including sexual favours or other forms of humiliating, degrading or exploitive behaviour is prohibited.

- **Profiting from Sexual Exploitation**
Any monetary, social or political gain from sexual exploitation is prohibited.

Sexual Harassment

Any act of sexual harassment including unwelcome sexual advances or requests for sexual favours is prohibited both under the PSEA policy and the Anti-Harassment policy.

Sexual Violence

Any acts of sexual violence as outlined in the definitions in prohibited. This includes, but is not limited to, sexual violence including intercourse, sexual touching, and threats of sexual violence.

Physical/Emotional Abuse

As outlined in both the Child Safeguarding and the Adult Safeguarding policies, any physical or emotional abuse is prohibited.

This list may be expanded at any time and details will be communicated with staff, associates and partners through the Safeguarding Committee. Additional prohibited behaviours related to abuse can be found in the Child Safeguarding and Adult Safeguarding policies.

Consequences

Any staff, associate, or partner who is in violation of the PSEA policy will face disciplinary procedures, which may result in disciplinary action, termination of employment or contract and/or referral to the appropriate law enforcement agency or legal authority.

Communication and Training

It is EngenderHealth's responsibility to ensure that all staff, associates and partners are aware and fully compliant with the PSEA policy. In order to take the steps to prevent any forms of sexual exploitation or abuse, EngenderHealth will ensure that:

1. Training is provided for all staff who has a specific responsibility for implementing this Policy and associated Procedure or who may be involved in dealing with complaints, which arise.
2. Awareness raising training is provided to all staff, associates, and partners on PSEA. The training will equip staff, associates, and partners to develop awareness as well as an understanding of when and how to report any concerns.
3. Proactive steps are taken to communicate the zero-tolerance message.
4. All staff is informed of and trained in the policy and procedure.
5. All staff is aware of the definitions under this policy.
6. All staff is aware of reporting procedures.
7. All staff has signed and acknowledged that they have read and understood the policy.

PSEA Reporting Procedures

The associated procedures document outlines how to report any incidents of sexual exploitation or abuse.

Failure to Report

The Code of Conduct as well as the InterAgency Standing Committee (IASC)¹ Core Principles on PSEA state that it is the duty and the responsibility of all staff, associates,

¹ <https://interagencystandingcommittee.org/>

and partners to report any PSEA concerns. Failure to report may lead to disciplinary action.

Support for Survivors

Support will be offered to survivors regardless of the outcome of any investigations. This support can include specialist psychosocial counselling and/or access to other specialist support as needed.

Definitions

Child and vulnerable adults

A child is any individual under the age of 18, irrespective of local country definitions of when a child reaches adulthood.²

Vulnerable adults are defined as:

- Those aged over 18 years and who identify themselves as unable to take care of themselves/ protect themselves from harm or exploitation; or
- Who, due to their gender, mental or physical health, disability, ethnicity, religious identity, sexual orientation, economic or social status, or as a result of disasters and conflicts, are deemed to be at risk.

Physical Abuse

Physical abuse occurs when a person purposefully injures or threatens to injure a child or vulnerable adult. This may take the form of slapping, punching, shaking, kicking, burning, shoving or grabbing. The injury may take the form of bruises, cuts, burns or fractures.

Child Emotional Abuse

Emotional abuse is inappropriate verbal or symbolic acts toward a child or a pattern of failure over time to provide a child with adequate non-physical nurture and emotional availability. Such acts have a high probability of damaging a child's self-esteem or social competence.³

Neglect

Neglect is the failure to provide a child or vulnerable adult with the conditions that are culturally accepted as being essential for their physical and emotional development and well-being.

Vulnerable Adult Abuse

A Vulnerable Adult is defined as someone "who is or may be in need of community care services by reason of mental or other disability, age or illness; and who is or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation". Vulnerable Adult Abuse can take many forms

² Definition of child from the InterAgency Standing Committee (IASC) Guidelines to implement Minimum Operating Standards for Protection from Sexual Exploitation and Abuse by UN and non-UN Personnel, March 2013.

³ CARE International PSEA Policy 2017

including: physical, sexual, psychological, financial/ material, discriminatory, domestic abuse and self-neglect.⁴

Sexual Abuse

The term "sexual abuse" means the actual or threatened physical intrusion of a sexual nature, whether by force or under unequal or coercive conditions.⁵

Child Sexual Abuse

Child sexual abuse is the involvement of a child in sexual activity that s/he does not fully comprehend, give informed consent to, or for which s/he is not developmentally prepared and cannot give consent, or that violates the laws or social taboos of society. It is evidenced by an activity between a child and an adult or another child who by age or development is in a relationship of responsibility, trust or power, the activity being intended to gratify or satisfy the needs of the other person. It may include, but is not limited to, the inducement or coercion of a child to engage in any unlawful sexual activity, the exploitative use of a child in prostitution or other lawful sexual practices or the exploitative use of pornographic performances and materials.⁶

Grooming

Grooming is behavior that an offender uses to procure sexual activity from a child. It can include building trust with children and/or their carers to gain access to children to sexually abuse them.

Online Grooming

Grooming may be in person as above, or online where the groomer sends electronic messages with the goal of engaging the child in sexual activity.

Coercion

Coercion covers a whole spectrum of degrees of force. Apart from physical force, it may involve psychological intimidation, blackmail or other threats. For instance, threats of being dismissed from a job or of not obtaining a job that is sought. It may also occur when a person is unable to give consent. For example, while drunk, drugged, asleep or mentally incapable of understanding the situation.⁷

Sexual Exploitation

The term "sexual exploitation" means 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.⁸

Modern Slavery

Slavery is a situation where a person exercises (perceived) power of ownership over another person. Related terms include forced labour, which covers work or services

⁴ Department of Health and Social Care No Secrets: guidance on protecting vulnerable adults in care

⁵ 1 Secretary-General's Bulletin: Special Measures for Protection from Sexual Exploitation and Sexual Abuse (2003)

⁶ United Nations Secretary General's Bulletin: Special measures for protection from sexual exploitation and sexual abuse (ST/SGB/2003/13).

⁷ World Health Organization World Report on Violence and Health (2002)

⁸ Ibid.

that people are not doing voluntarily but under threat of punishment; human trafficking, which involves deceptive recruitment and coercion; and bonded labour, which is demanded in repayment of a debt or loan. Modern slavery encompasses a spectrum of labour exploitation, ranging from the mistreatment of vulnerable workers to human trafficking to child labour and forced sexual exploitation.⁹

Sexual Violence

Sexual violence is¹⁰:

- Any sexual act or attempt to obtain a sexual act
- Unwanted sexual comments or advances or acts to traffic that are directed against a person's sexuality using coercion by anyone, regardless of their relationship to the victim, in any setting, including at home and at work.

Three types of sexual violence are commonly distinguished: sexual violence involving intercourse (i.e. rape), contact sexual violence (i.e. unwanted touching, but excluding intercourse) and noncontact sexual violence (i.e. threatened sexual violence, exhibitionism and verbal sexual harassment). While coerced sex may result in sexual gratification for the perpetrator, its underlying purpose is to express power and dominance over the other person.¹¹

Child Marriage

The custom of marrying young children, particularly girls, is a form of sexual violence as children are unable to give or withhold consent.

Sexual Harassment

Sexual harassment includes 'unwelcome sexual advances, requests for sexual favors, and other conduct that creates a coercive, hostile, intimidating, or offensive work environment'.¹² The harassment of a sexual nature may be directed to a person of the same or opposite sex.

The key elements are that the behaviour is **uninvited**, **unreciprocated** and **unwelcome** and causes the person involved to feel threatened, humiliated or embarrassed. The behaviour may also be determined to be sexual violence and harassment if:

- Submission to such conduct is explicitly or implicitly made a term or condition of employment.
- Submission to or rejection of this conduct is used as a basis for an employment decision affecting the staff.
- Such conduct has the purpose or effect of substantially interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment.

Please refer to EngenderHealth's Anti-Harassment policy & procedure for more information.

⁹ Oxfam PSEA Policy 2018

¹⁰ World Health Organization definition 2012

¹¹ World Health Organization Global Status Report on Violence Prevention (2014)

¹² SEXUAL HARASSMENT IN THE HUMANITARIAN CONTEXT Dr. Linda Wagener, Senior Consulting Psychologist, Headington Institute April 25, 2012

Communities

The communities that EngenderHealth works with includes, but isn't limited to, health service providers at facilities, outreach facilities, frontline health workers, any other service providers, women, men, girls, boys, people with special needs, vulnerable adults and marginalised groups.

EngenderHealth staff refers to individuals who receive a regular salary for work in any part of EngenderHealth Inc., including all Country Offices, Field Offices, Headquarters and any other location where EngenderHealth operates.

EngenderHealth associates refers to a range of paid and non-paid individuals who have committed to work with or support EngenderHealth. It includes volunteers, interns, and consultants and contractors.

EngenderHealth managers refers to EngenderHealth staff who have responsibility for line managing or supervising the work of EngenderHealth staff or EngenderHealth associates.

EngenderHealth partners refers to staff and/or representatives of partner organizations and local governments when operating in partnership agreement with EngenderHealth.

Policy Review

To meet with sector best practice, EngenderHealth agrees to review this policy and the entire PSEA Framework every two years, as a minimum. It is the responsibility of the Chief of Governance and Operations to complete this review, in collaboration with any key internal stakeholders or external third-party providers.