

HO 1.4: Safe and Dignified Programming Framework




Adapted from Caritas Australia, CRS, CAFOD. *Safe and Dignified Programming Framework*. 2022.




	WHAT THIS MEANS	INDICATORS	RATING			NOTES
			Green	Yellow	Red	
Analysis	All programming is underpinned by an understanding of the protection context throughout the program cycle in order to ensure safety, dignity and meaningful access for people and communities.	1.1	Questions are included in needs assessments and design processes to ensure an understanding of vulnerabilities and to identify barriers to safety, access and dignity for diverse and vulnerable groups. ¹			
		1.2	Protection- and safeguarding-related threats, vulnerabilities and capacities—as well as power dynamics—are analyzed, inform programming and updated regularly throughout the program cycle.			
		1.3	All data collected is disaggregated by sex, age, disability, and, where appropriate, other diversity factors—such as language and ethnicity—and is used to inform programming.			
		1.4	Systems are in place to safeguard personal information collected from communities and keep it confidential.			




¹ “Vulnerable and diverse groups” may refer, for example, to: women, men, girls, boys, youth and older people, as well as people with disabilities and specific minority or ethnic groups without any such distinction (Core Humanitarian Standards (CHS) available at: [The Standard - CHS \(corehumanitarianstandard.org\)](https://www.corehumanitarianstandard.org/)).




	WHAT THIS MEANS	INDICATORS	RATING			NOTES	
			Green	Yellow	Red		
Targeting and diversity of need	The specific needs, vulnerabilities and capacities of communities and individuals are identified, and programming is targeted accordingly, considering the diversity within communities—including those who may be marginalized or disadvantaged.	2.1	Vulnerable and diverse groups are involved in the process of identifying criteria for targeting and selecting program participants.				
		2.2	Programs are designed and adapted in line with local capacities to meet the different needs of diverse and vulnerable groups and to ensure there are no barriers to accessing assistance.				
		2.3	Programs are adapted in response to the protection risk analysis of safety and dignity concerns to minimize unintended negative effects.				
		2.4	Programs are designed to promote responsible interaction with the environment.				




	WHAT THIS MEANS	INDICATORS	RATING			NOTES	
			Green	Yellow	Red		
Information Sharing	Program participants and communities are informed of their rights and entitlements and have access to accurate and timely information.	3.1	Diverse and vulnerable groups understand the role of the organization and its work—including what services are available to them.				
		3.2	Staff share information through a range of communication methods (formats, language and media) that are appropriate to the needs of the community, especially for the most vulnerable and marginalized groups.				
		3.3	Community members receive information sufficient to understand what they can expect in terms of behavior from staff and partners, particularly about preventing sexual exploitation, abuse and harassment.				
		3.4	When collecting communications material (e.g., photos and stories), staff prioritize the safety and dignity of community members, ensuring their full understanding, participation and permission.				

	WHAT THIS MEANS	INDICATORS	RATING			NOTES	
							
Community Engagement	There is active and inclusive community engagement in all stages of the program cycle that builds on and strengthens existing community and state structures, resources and capacities.	4.1	Staff uses participatory techniques to ensure active inclusion and representation of vulnerable and diverse groups.				
		4.2	Ongoing community dialogue and regular meetings are held with people and communities (particularly with those who are most vulnerable) to foster participation in decisions that affect them.				
		4.3	Programs build on the existing capacities of vulnerable and diverse groups.				

	WHAT THIS MEANS	INDICATORS	RATING			NOTES	
							
Feedback and complaint mechanisms	People are able to provide feedback and make complaints in a safe, dignified and confidential manner and receive an appropriate response when they do so.	5.1	Diverse and vulnerable groups are consulted on appropriate, safe, confidential and context-specific channels for feedback and complaints, particularly those of a sensitive nature—including allegations of sexual exploitation and abuse, fraud and corruption.				
		5.2	Diverse and vulnerable groups have access to and are fully aware of how to use complaints and feedback mechanisms; they understand how their complaints and feedback will be managed, as well as when to expect a response.				
		5.3	Staff act on feedback and complaints in a timely, fair and appropriate manner that prioritizes the safety of complainants and those affected at all stages.				
		5.4	Staff understands the management system in place for handling sensitive complaints—including the procedure to ensure access to necessary support for complainants, especially survivors of sexual exploitation and abuse.				
		5.5	Staff refers complaints that do not fall within the organization's scope to a relevant party.				

	WHAT THIS MEANS	INDICATORS	RATING			NOTES	
							
Staff conduct²	Staff have appropriate knowledge and organizational support to conduct themselves and their work in a safe and appropriate way.	6.1	Staff have signed and understand the organization's Code of Conduct and relevant safeguarding and protection policies and are aware of their rights and responsibilities. ³				
		6.2	Field staff can be easily identified, and there is an adequate representation of women and other diverse groups.				
		6.3	All staff have clear roles and responsibilities and are supervised.				
		6.4	All aspects of staff well-being are considered, and staff have access to additional support if required.				

	WHAT THIS MEANS	INDICATORS	RATING			NOTES	
							
Mapping and referral	Staff have the necessary knowledge, information and training to support people and communities in accessing existing services.	7.1	Staff regularly map existing protection services and how to contact them.				
		7.2	Staff share information on available services as appropriate.				
		7.3	Staff are trained on when and how to refer cases.				

	WHAT THIS MEANS	INDICATORS	RATING			NOTES	
							
Coordination and advocacy	Staff advocate and work with relevant actors to enhance safety and dignity; avoid duplication; and prevent, mitigate and respond to protection risks.	8.1	Staff coordinates internally across programs to ensure safe and dignified programming is consistently included in all sectoral responses.				
		8.2	Staff collaborate with existing coordination groups and share information on safe and dignified programming practices.				
		8.3	Staff raises unaddressed safety and protection issues and risks with duty bearers, i.e., external stakeholders responsible for protection services.				

² "Staff" are any designated representatives of the organization, including national, international, permanent or short-term employees, as well as volunteers and consultants (CHS [The Standard - CHS \(corehumanitarianstandard.org\)](https://www.corehumanitarianstandard.org/)).

³ E.g., these could include policies on safeguarding, prevention of sexual exploitation and abuse, complaints handling and whistleblowing, etc.

Optional component⁴

	WHAT THIS MEANS			RATING			NOTES
Organizational safeguarding⁵	Safeguarding is recognized as a priority for the organization and is supported in organizational systems.	9.1	The organization undertakes an organization-wide risk assessment to understand the level of risk and highlight any safeguarding gaps, which informs a risk management plan.				
		9.2	There is an organizational whistleblower policy, a Code of Conduct and a Safeguarding Policy—including the IASC Six Core Principles, ⁶ which is known and used by staff.				
		9.3	The organization has clear lines of accountability and defined roles and responsibilities for safeguarding—including at the governance level with a designated focal person; these are known to staff.				
		9.4	The organization practices safe recruitment and induction for all staff, volunteers and contractors.				
		9.5	The organization has a comprehensive complaints mechanism to receive and manage sensitive complaints in a safe and confidential way.				
		9.6	The organization supports complainants—particularly survivors ⁷ of sexual exploitation and abuse—to access safe and relevant services (including medical, legal and psychosocial support).				

⁴ This component is not intended as a comprehensive safeguarding guide. It aims to highlight certain key actions that are important at the organizational level that ensure programming enhances the safety, dignity and meaningful access of people and communities affected by crisis. For further information on safeguarding please see: <https://www.keepingchildrensafe.global/> and <https://psea.interagencystandingcommittee.org/>.

⁵ “Organization” refers to both funding and implementing organizations. Every is responsible for “cascading” safeguarding measures to their partners and/or sub-partners.

⁶ Inter-Agency Standing Committee (IASC). *IASC Six Core Principles Relating to Sexual Exploitation and Abuse, 2019*. 2019.

⁷ “**Complainant**: the person making the complaint, including the alleged victim/ survivor of the sexual exploitation, abuse or harassment, or another person who becomes aware of the wrongdoing. **Survivor or victim**: the person who is, or has been, sexually exploited or abused. The term ‘survivor’ implies strength, resilience and the capacity to survive. The term ‘victim’ has protective implications, as it implies the victim of an injustice which we should seek to redress. Therefore, this resource uses both terms. People who have experienced SEAH may choose different terms to describe their experience.” (CHS Alliance PSEAH Implementation Quick Reference Handbook [PSEAH Implementation Quick Reference Handbook – English | CHS Alliance](#). 2019.

Guiding questions for the indicators

The following questions should be used to guide teams on how they rate their activities against the indicators in the framework.

Analysis

All programming is underpinned by an understanding of the protection context throughout the program cycle in order to ensure safety, dignity and meaningful access for people and communities.

1.1 Questions are included in needs assessments and design processes to ensure an understanding of vulnerabilities and to identify barriers to safety, access and dignity for diverse and vulnerable groups.

- Have efforts been made to identify the diverse groups and communities that exist within the program/program area—particularly those who may have increased vulnerability, e.g., people with disabilities, older people and people from marginalized ethnic or religious groups?
- Have relevant teams (e.g., water, sanitation and hygiene [WASH], livelihoods, shelter, etc.) included questions about safety, dignity and barriers to accessing programs in their needs assessments?
- Has data been collected on languages used within the program area and within diverse groups? Has this information been used to inform the translation of needs assessments? Have staff been provided with terminology lists and training on how to manage on-the-spot translation if necessary?
- Are safety, dignity and access issues considered and prioritized in organizational plans, strategies and evaluations? Are they included in other relevant planning and analysis processes?
- Is there consideration of the environment and how any potential program will interact with it and the safety and accessibility of the program?

1.2 Protection- and safeguarding-related threats, vulnerabilities and capacities—as well as power dynamics—are analyzed, inform programming and are updated regularly throughout the program cycle.

- What behaviors and practices are communities and vulnerable groups adopting as a result of increased stress and pressure? (Consider both positive and negative coping strategies.)
- Have existing skills and capacities in the community been identified—including consideration of the environment?
- Who has power in the community, considering gender, age and diversity?
- Do staff compile and regularly update, monitor and mitigate risks to safe, dignified and accessible programming for diverse groups?
- Do staff consider safeguarding risks in their analysis, particularly if working on programs identified as high risk for safeguarding?
- Have staff analyzed specific risks and protection mechanisms for children and adolescents, detailing particular risks and mitigation strategies for girls, boys and at-risk groups of children?
- Has gender analysis been conducted—including an assessment of the risk of gender-based violence?

1.3 All data collected is disaggregated by sex, age, disability, and, where appropriate, other diversity factors—such as language and ethnicity—and is used to inform programming.

- Is data broken down by sex, age and disability based on agreed parameters, e.g., age range for older persons and categories of disabilities?
- Is it safe and appropriate to gather data on vulnerability factors?
- Is disaggregated data used to inform programming, e.g., who to target, what type of assistance to provide, and how to provide it?

1.4 Systems are in place to safeguard personal information collected from communities and keep it confidential.

- Are communities and individuals made aware of what information is being collected and why, and what happens if they do not want data collected or want it deleted?
- Is data collected, stored and managed in a secure way, e.g., locked in filing cabinets or password-encrypted, with identifying information removed where necessary?⁸
- Is data shared only with those who are required to see or use the information?
- Is data subject to a data deletion plan and kept only for as long as necessary?

Targeting and diversity of need

The specific needs, vulnerabilities and capacities of communities and individuals are identified, and programming is targeted accordingly, considering the diversity within communities—including those who may be marginalized or disadvantaged.

2.1 Vulnerable and diverse groups are involved in the process of identifying criteria for targeting and selecting program participants.

- Are programs implemented without discrimination, i.e., impartially and based on need alone?
- Is there documentation showing the decision-making process for identifying who to target/not target and why?
- Have a range of diverse groups meaningfully participated in deciding the selection criteria for targeting?
- Are consistent messages used to explain who has been targeted and why to the community?

2.2 Programs are designed and adapted in line with local capacities to meet the different needs of diverse and vulnerable groups and to ensure there are no barriers to accessing assistance.

- Has the program been designed to meet the different needs of diverse groups to increase their safety, dignity and access to programs?
- Has the program been designed to build on and support community capacities and resources in a culturally meaningful and sustainable way?
- Has the program been designed to address and challenge existing inequalities—considering sex, age and diversity—in the safest way possible?

2.3 Programs are adapted in response to the protection risk analysis of safety and dignity concerns to minimize unintended negative effects.

- Do staff routinely review and adapt programs in response to findings from ongoing protection/safeguarding analyses, regular program monitoring and accountability mechanisms?
- Does program monitoring include questions about whether the program is being delivered safely?
- Does program monitoring ensure that the most vulnerable people are accessing the services they need?
- Do program lessons learned inform future work?

2.4 Programs are designed to promote responsible interaction with the environment.

- Has the program been designed with the different ways diverse groups interact with the environment in mind?
- Has the program been designed to ensure it does not contribute to the long- or short-term degradation of natural resources?
- Are there clear strategies to assess, reduce and minimize negative impacts?

⁸ See for example: [The OCHA Data Responsibility Guidelines – The Centre for Humanitarian Data \(humdata.org\)](https://www.humdata.org/).

Information sharing

Program participants and communities are informed of their rights and entitlements and have access to accurate and timely information.

3.1 Diverse and vulnerable groups understand the role of the organization and its work, including what services are available to them.

- Is accurate information about the organization and program shared with communities? Examples include: Who is the organization? What is the program? Who is targeted? What services would be provided and how long would it last? How can communities influence the program and provide feedback? How will the organization use and store data collected?
- What methods does the organization use to ensure the community—especially diverse groups—correctly understand the information being given?

3.2 Staff share information through a range of communication methods (formats, language and media) that are appropriate to the needs of the community, especially for the most vulnerable and marginalized groups.

- Have diverse groups within a community been asked what information they need, how they would like to receive it and in what languages?
- Is the information shared in culturally appropriate ways, in different formats, (e.g., visual, face-to-face, aural), so that it meets the needs of the community—especially the most vulnerable and marginalized groups?
- Has the information been developed so it can be easily understood by children?
- Are communications with the community and services provided using languages and terms that people commonly use at home?

3.3 Community members receive information sufficient to understand what they can expect in terms of behavior from staff and partners—particularly about preventing sexual exploitation, abuse and harassment.

- Do communities receive information on what is appropriate staff behavior and what is inappropriate staff behavior?
- Do diverse groups (including children) know how to safely report/complain about inappropriate behavior?

3.4 When collecting communications material (e.g., photos and stories), staff prioritize the safety and dignity of community members, ensuring their full understanding, participation and permission.

- Is there a process for obtaining and documenting informed consent from people for photographs and interviews that includes understanding how the information will be used, who it will be shared with, where it will be visible, how it will be stored and when it will be deleted?
- Do staff obtaining stories have sufficient training and support to conduct interviews and take photographs in a sensitive way that protects the safety and dignity of interviewees?
- Do stories about children and vulnerable adults protect their identities either by changing or not revealing personal information?

Community engagement

There is active and inclusive community engagement in all stages of the program cycle that builds on and strengthens existing community and state structures, resources and capacities.

4.1 Staff uses participatory techniques to ensure active inclusion and representation of vulnerable and diverse groups.

- Do staff use a range of techniques (e.g., mapping, calendars, problem trees, etc.) to capture the views of those with specific needs and at most risk of being excluded (e.g., children, people with disabilities, older people and people who cannot read or write, etc.)?
- Are the communication methods and behaviors used appropriate to culture and context? For example, should meetings be held in separate groups for men and women and led by male or female staff?

4.2 Ongoing community dialogue and regular meetings are held with people and communities (particularly with those who are most vulnerable) to foster participation in decisions that affect them.

- Are regular meetings and focus groups held with diverse groups throughout the program cycle?
- Are the most vulnerable and marginalized groups included in decision-making processes?
- Are diverse groups able to give feedback to the organization individually as well as collectively?

4.3 Programs build on the existing capacities of vulnerable and diverse groups.

- Are programs designed to build on local skills, resources (e.g., physical, financial, environmental, etc.) and structures (e.g., women's groups, local government, youth groups, church groups, etc.) in communities?
- Have staff identified important cultural practices and traditions that programming could build on or should acknowledge as potentially positive or harmful to programming outcomes, e.g., celebrations or rituals?

Feedback and complaint mechanisms

People are able to provide feedback and make complaints in a safe, dignified and confidential manner and receive an appropriate response when they do so.

5.1 Diverse and vulnerable groups are consulted on appropriate, safe, confidential and context-specific channels for feedback and complaints, particularly those of a sensitive nature—including allegations of sexual exploitation and abuse, fraud and corruption.

- Are diverse groups in the community consulted on the choice of complaint channels and the implementation and monitoring of feedback and complaint mechanisms?
- Are there multiple culturally appropriate ways for diverse groups to provide feedback, e.g., help desk, hotline, WhatsApp, home visits?
- Are there appropriate channels for the community and staff to make sensitive and, if necessary, anonymous complaints? Are there child-friendly channels?
- Is there monitoring in place to allow the feedback and complaints systems to be adapted if necessary?

5.2 Diverse and vulnerable groups have access to, and are fully aware of how to use complaint and feedback mechanisms; they understand how their complaints and feedback will be managed, as well as when to expect a response.

- Are specific complaint-handling mechanisms in place to receive and respond to complaints, especially sensitive complaints related to safeguarding?
- Is there clear information about what types of complaints the organization can and cannot act on, e.g., non-sensitive complaints related to other agencies?
- Are communities using feedback systems? If not, why?

- Can speakers of marginalized languages give feedback in these languages? Do they have information on feedback systems in their language?
- Have people and communities—including diverse groups—been made fully aware of:
 - Their right to feedback and how to lodge feedback and complaints.
 - The expected behavior of staff and volunteers.
 - Organizational commitments to protection from sexual exploitation, abuse and harassment.
 - The limitations of what the organization can do.
- Can people contact the organization directly with complaints without going through a partner?

5.3 Staff act on feedback and complaints in a timely, fair and appropriate manner that prioritizes the safety of complainants and those affected at all stages.

- Do people and communities receive timely acknowledgment, action and updates (anonymized if necessary) on the resolution or management of complaints?
- Are feedback and complaints welcomed and accepted by staff members and taken seriously?
- Does the feedback system include obtaining informed consent and responding to complaints either directly to the complainant or by visibly working in the community to resolve the issue?
- Is there a backup mechanism for reporting complaints in case the initial channel does not result in adequate action?
- Is there an established and functioning investigation process for feedback/complaints received?
- Are programs adapted in response to feedback and complaints received, and is feedback regularly reviewed to inform learning and improve quality?
- Do those who handle sensitive and non-sensitive complaints know their obligations for reporting to donors and/or government and statutory bodies?

5.4 Staff understands the management system in place for handling sensitive complaints—including the procedure to ensure access to necessary support for complainants, especially survivors of sexual exploitation and abuse.

- Do staff understand the complaints-handling policy and know how to report sensitive complaints?
- Are complaints registered systematically, acted upon and reported in line with best practice/policy?
- Is there a key person assigned to manage complaints? Have they been trained appropriately?
- Do staff have access to and understand guidance on the provision of assistance to survivors?
- Is there a system and process in place to securely store and manage sensitive information, e.g., document encryption, locked filing cabinets, data protection policy, etc.?

5.5 Staff refers complaints that do not fall within the organization’s scope to a relevant party.

- Do staff know how to refer complaints that do not fall within the scope of their organization to a relevant party?

Staff conduct

Staff and partners have appropriate knowledge and organizational support to conduct themselves and their work in a safe and appropriate way.⁹

6.1 Staff have signed and understand the organization’s Code of Conduct and relevant safeguarding/protection policies and are aware of their rights and responsibilities.

- Have staff received a translated (if necessary) copy of relevant policies and received training and refreshers on their practical application?
- Do staff understand what is acceptable behavior, particularly in relation to the prevention of sexual exploitation, abuse and harassment?
- Have staff received orientation on local etiquette and taboos so they understand culturally appropriate behavior?
- Are there safe and confidential ways to receive and respond to complaints about staff behavior that are understood and used by staff when necessary, e.g., a whistleblowing policy?
- Are staff meaningfully engaging with the Code of Conduct (and/or other relevant policies and international standards) and practically applying them, e.g., signing them, attending trainings/orientations and discussing them in one-to-one management meetings?

6.2 Field staff can be easily identified, and there is adequate representation of women and other diverse groups.

- Do staff working with communities represent diverse groups—including women, people living with disabilities, different ethnic and religious groups?
- Where safe and appropriate, are staff clearly identified as working for the organization, e.g., wearing identification (ID) badges or branded T-shirts?

6.3 All staff have clear roles and responsibilities and are supervised.

- Do all staff and partners understand their organization’s mandate, their own roles and responsibilities and the limitations of their roles?
- Is this information available to staff in writing—including in job descriptions and terms of reference?
- Is supervision provided to staff on a regular basis?
- Do all staff understand the consequences of breaches of the organizational Code of Conduct and policies?

6.4 All aspects of staff well-being are considered, and staff have access to additional support if required.

- Is the organizational environment conducive to staff well-being and adequately resourced, e.g., suitable living conditions, working hours and opportunities for leisure and relaxation?
- Is there a person responsible for staff care within the organization who proactively engages with and is available to staff members?
- Are procedures in place to ensure that staff well-being is monitored and addressed at regular intervals, e.g., within appraisal formats, one-to-one meetings, other staff meetings, etc.?
- Do staff have access to mental health services if necessary, e.g., mentors or therapists?

⁹ This includes all volunteers and contractors.

Mapping and referral

Staff have the necessary knowledge, information and training to support people and communities in accessing existing services.

7.1 Staff regularly map existing protection services and how to contact them.

- Has contact been made with the nearest duty bearer (i.e., the agency responsible for protection services) for information on functioning and safe services? Does this information align with the latest context analysis/protection risks analysis?
- Is information on available sectoral services recorded, regularly updated and shared among staff in user-friendly and accessible ways, e.g., gender-based violence, mental health, psychosocial and child protection referral mapping? Are staff feeding into these resources?
- Do referral processes comply with local criminal and protection laws where any offences are committed?

7.2 Staff share information on available services as appropriate.

- Have staff shared information on available services? With whom?
- Have staff shared information on gaps in services? With whom?

7.3 Staff are trained on when and how to refer cases.

- If there are documented referral procedures issued by the protection cluster, are staff and partners using them to make referrals?
- Do staff understand their roles and responsibilities in relation to referring people to more specialized services, e.g., survivors of sexual exploitation or abuse and those at-risk of gender-based violence, etc.?
- Do staff know how to manage and mitigate risks associated with reporting and referrals in response to protection incidents?
- Do staff know how to respond in a sensitive and supportive manner if community members inform them of sensitive issues—including protection or safeguarding incidents? Are their actions guided by respect for survivors' choices, wishes, rights and dignity?

Coordination and advocacy

Staff advocate and work with relevant actors to enhance safety and dignity; avoid duplication; and prevent, mitigate and respond to protection risks.

8.1 Staff coordinate internally across programs to ensure safe and dignified programming is consistently included in all sectoral responses.

- Is there a way to share experience and learning about safety, dignity and inclusion within the organization?
- Have humanitarian programs been informed by and built upon existing development work?

8.2 Staff collaborate with existing coordination groups and share information on safe and dignified programming practices.

- Do staff share their experiences and lessons with other organizations or coordinating bodies?

8.3 Staff raise unaddressed safety and protection issues and risks with duty bearers, i.e., external stakeholders responsible for protection services.

- Drawing on community and local partner perspectives—and where safe to do so—do staff raise issues such as unsafe service provision, excluded groups, gender-based violence or forced relocations with responsible actors (e.g., local government, protection cluster, United Nations High Commissioner for Refugees [UNHCR], etc.)?
- Have staff checked any current sensitivities around advocacy—such as organizational risks or threats to staff if certain issues are raised?

Organizational safeguarding

Safeguarding is recognized as a priority for the organization and is supported in organizational systems.

9.1 The organization undertakes an organization-wide risk assessment to understand the level of risk and highlight any safeguarding gaps, which informs a risk management plan.

- Has the organization considered the context in which it works? For instance, is it located in a place where abuse and exploitation are common or where laws and authorities are weak in response to abuse?
- Has the organization considered the level of direct contact with children and vulnerable adults by staff from departments such as funding, information and communication technology (ICT) and programs, as well as staff from partners? Has the potential impact and risks of such contact been considered?
- Has the organization considered its internal structure, leadership commitments, power dynamics, approach to gender equality/equity, culture and other organizational processes and how they may influence the protection of staff, communities, children and vulnerable adults?
- Does the organization review, revise and document safeguarding risks and preventative measures regularly?
- Is the organization communicating and consulting on risks and preventative measures with governments, other protection actors, peer organizations and donors?
- Does the organization use learning from programs to inform future work?

9.2 There is an organizational whistleblower policy, a Code of Conduct and a Safeguarding Policy (including the IASC Six Core Principles) which is known and used by staff.

- Does the safeguarding policy include or make reference to a Code of Conduct document that clearly addresses expected behaviors and consequences of any breach?
- Does the policy meet the minimum standards outlined in the Inter-Agency Standing Committee's Six Core Principles Relating to Sexual Exploitation and Abuse,¹⁰ including:
 - Statement of zero tolerance for any form of exploitation or abuse by staff
 - Definition of a child/vulnerable adult
 - Definitions of abuse
 - Specific requirements and expected behaviors for working with children/vulnerable adults
 - Duty of staff to report suspicions or allegations
 - Procedures for staff to report suspicions and allegations of abuse
 - Consequences of failing to report abuse
- Is there an outline of in-country reporting requirements—including to organizational leadership?
- Are safeguarding policies and practices reviewed at regular intervals and formally evaluated every 3 years? Do written reports exist on progress on safeguarding implementation?
- Are safeguarding policies publicly available and easily accessible to staff?

9.3 The organization has clear lines of accountability and defined roles and responsibilities for safeguarding—including at the governance level—with a designated focal person; these are known to staff.

- Does the safeguarding focal person have clearly defined responsibilities? Have they received relevant training?
- Are there documented different pathways (including a confidential route) for staff to contact a focal person?
- Are there documented accountability mechanisms—including Boards of Trustees or other committees—holding the organization's executive body to account for safeguarding?

¹⁰ IASC. [IASC Six Core Principles Relating to Sexual Exploitation and Abuse, 2019](#). 2019.

9.4 The organization practices safe recruitment and induction for all staff, volunteers and contractors.

- Are roles assessed for their level of safeguarding risk?
- Are safeguarding responsibilities reflected in job adverts and job descriptions (for relevant roles)?
- Are screening questions asked during the selection/interview processes?
- Are (at least two, if possible) references requested from previous employers or others with knowledge of the candidate's experience and suitability?
- Does the organization have a defined protocol for responding to requests for job references about former staff in cases of gross misconduct allegations or termination?
- Is there police vetting (as appropriate) of candidates?
- Is safeguarding included in induction training for new staff and in regular refresher training for existing staff?
- Are training records stored systematically by the organization?
- Does the organization make use of probationary periods of employment to ensure suitability once in post?
- Are there clear policies on the consequences of breaching the safeguarding policy and/or Code of Conduct?
- Do supervision and performance appraisals include adherence to the safeguarding and related policies?

9.5 The organization has a comprehensive complaints mechanism to receive and manage sensitive complaints in a safe and confidential way.

- Does the organization have an agreed and functioning policy and system to receive, manage and investigate complaints in a confidential, timely and appropriate manner that prioritizes the safety of the complainant and those affected at all stages?
- Does the organization have a culture that ensures complaints are taken seriously and acted upon in a timely way?
- Do disciplinary and whistleblowing processes address procedural fairness, privacy for those involved and appropriate levels of transparency about cases, e.g., with local law enforcement, donors and potential employees?
- Does the organization have access to trained staff with the skills and capacity to undertake investigations of sensitive complaints within the organization or via alternative external expertise?
- Is gender considered in the selection of staff conducting investigations, particularly when interviewing witnesses?
- Does the organization's complaint mechanism clearly articulate reporting requirements and procedures to donors, police and other statutory bodies?

9.6 The organization supports complainants—particularly survivors of sexual exploitation and abuse—to access safe and relevant services (including medical, legal and psychosocial support).

- Has the organization developed referral pathways and defined procedures for a safe and dignified referral process for immediate support to the survivor?
- Are the needs, wishes, well-being and safety of the survivor/complainant prioritized in the decision-making process in a non-directive and non-judgmental way?
- Is access to medical and psychosocial support provided to staff through an employee assistance program or equivalent, and support provided on their return to work?
- Are community members supported to access local medical and psychosocial services?
- Is immediate material care provided to survivors and support given to help them understand how to pursue claims (including legal claims) against alleged perpetrators?