



Programme Participants Safeguarding and Protection Policy

Background:

Health Poverty Action is aware that the goods and services provided through our relief and development programmes can create a power differential between those who are employed by Health Poverty Action and the programme participants. We acknowledge that there is potential for this power imbalance to be exploited by Health Poverty Action employees to acquire bribes, payments, gifts, services, and/or sexual favours. The Health Poverty Programme Participants Safeguarding and Protection Policy (PPSPP) has been developed to ensure the maximum protection of programme participants from exploitation and to clarify the responsibilities of Health Poverty Action staff, volunteers, interns and visitors to the projects and the standards of behaviour expected of them. “Participants” include beneficiaries of our projects and other community members where we work, as well as HPA staff, volunteers, interns, local partner project staff, contractors, visitors, government partners, and other project stakeholders.

Abuse of power can lead to many forms of exploitation and inappropriate and unacceptable behaviour, such as:

- Bullying
- Verbal, physical or sexual harassment
- Rape
- Exploitation
- Intimidation
- Victimisation
- Racial or ethnic discrimination or harassment
- Behaviour that shows a lack of respect for the dignity of others
- Behaving in an obviously culturally insensitive manner
- Attempt to commit fraud, blackmail or to accept or solicit a bribe

Health Poverty Action recognises that all adults and children have equal rights to protection from abuse and exploitation. All Health Poverty Action programme participants therefore have the same right to absolute freedom from exploitation as any other human being. Such rights are prescribed in, among other documents, the Universal Declaration of Human Rights, the UN Convention on the Rights of the Child (UNCRC), the UN Convention for the Elimination of all Forms of Discrimination against Women (CEDAW), and in the national laws of most of the countries in which we work.

Health Poverty Action acknowledges that certain groups, such as children, women, and those with mental illness or physical disability, are most at risk of abuse, harassment, sexual violence, rape, bullying, and extortion.

Health Poverty Action condemns exploitation and inappropriate behaviour, and is committed to taking action for the protection of programme participants, as is reflected in this policy. Whilst primary aim of this policy is to protect community based participants/ beneficiaries, this protection policy is also designed to protect staff, the organisation, and its partners. The policy applies to all Health Poverty Action, staff, volunteers, interns and visitors to the projects. When we work through partners, they also have a responsibility to meet the Programme Participant Code of Conduct.

Please note that Health Poverty Action has a separate policy with guidelines on representing beneficiaries in words and imagery (photos, case studies, videos, etc.) with their identity and dignity preserved. The PPSPP should also be taken in conjunction with Health Poverty Action's Code of Conduct and the Whistleblowing Policy.

DEFINITIONS

Child: An individual below the age of 18 years, unless the laws of a particular country set the legal age for adulthood younger. (Taken from the 1989 UN Convention on the Rights of the Child; 18 years old is the legal age for adulthood in all Health Poverty Action countries, with the exception of Rwanda of 21 years)

Visitor: Any individual who visits Health Poverty Action's overseas programme and comes into contact with Health Poverty Action participants. This includes journalists, consultants, donors, friends, family members of staff, etc.

Bullying: Repeated inappropriate behaviour, whether verbal or physical, conducted by one or more persons against another or others, which could reasonably be regarded as undermining the individual's right to dignity. Examples include manipulation of the person's reputation by gossip or ridicule; social exclusion or isolation; threats abuse; etc.

Harassment: Any act or conduct including verbal and written if the conduct is unwelcome to the recipient and could reasonably be regarded as offensive, humiliating, or intimidating. Examples include: ridicule; shoving or assault; etc.

Sexual harassment: Is an act of physical intimacy; request for sexual favours; verbal or written communication or gesture that could reasonably be regarded as sexually offensive, humiliating, or intimidating.

Participants: "Participants" include beneficiaries of our projects and other community members where we work, as well as HPA and local partner project staff, government partners, and other project stakeholders.

Rape: An act of non-consensual sexual intercourse. This includes Statutory Rape, which is sexual intercourse with a person under the legal age of consent, even if the person agrees to the act.

Exploitation: Is using one's position of authority, influence or control over resources, to pressure, force or manipulate someone to do something against their will. This includes for example threatening to withhold project assistance from a beneficiary, threatening to make false claims about a person in public, or any other negative repercussions in the work place or community.

Violence: Includes incidents where a person is abused, threatened or assaulted in circumstances related to their work, involving an explicit or implicit challenge to their safety, health and well being.

Intimidation or victimisation: Retaliation against a person making a complaint or assisting in an investigation against another person.

Health Poverty Action's policy:

Health Poverty Action has a zero tolerance approach to abuse. We take a threefold approach to participant protection (detailed further below):

- 1 Awareness – educating all staff, volunteers, interns and visitors to the projects on the Code of Conduct
- 2 Deterrence – making public, particularly in recruiting staff and volunteers, Health Poverty Action's procedures and reference checks put in place to prevent incidents
- 3 Openness and Reporting – developing a culture where staff can be open about concerns, and a procedure whereby staff and volunteers can report concerns

Awareness:

- 1 Senior Managers (regional/Country Directors, or the highest ranked staff member where such does not exist) should review this policy and ensure that it is appropriate given the local context and in terms of language used, and edit and adapt them as appropriate (with central Health Poverty Action approval), sharing with others.
- 2 Managers should distribute copies of the Health Poverty Action PPSPP Code of Conduct (below) to staff in the relevant languages, including local languages as appropriate, and read these to illiterate employees. A copy should be included in appointment and induction material for new staff. .
- 3 All staff, visitors, and volunteers must have a copy of the PPSPP Code of Conduct.
- 4 All new staff inductions must include briefings on the PPSPP.
- 5 Managers should raise these participant protection issues with staff, informing them that they will be expected to read through this Code of Conduct and sign an agreement to follow it.
- 6 Managers' implementation of the policy will be included in their performance appraisal.
- 7 All staff must be made aware that they must adhere to the PPSPP Code of Conduct, and that they are responsible for reporting any concerns to their line manager and/or Head of Programmes in London if they feel that there are any staff members not complying.
- 8 Country staff are responsible for ensuring that participants are aware that Health Poverty Action have standards of behaviour and that they know how to make complaints.
- 9 All partners will receive a copy of Health Poverty Action's PPSPP Code of Conduct. It is the responsibility of Health Poverty Action country staff to induct local partner organisations in Health Poverty Action's PPSPP.
- 10 MoU with partners will include PPSPP language to ensure that partners adhere to the PPSPP Code of Conduct.
- 11 Health Poverty Action staff who are responsible for developing project budgets to institutional donors should attempt to include a budget line for PPSPP training

for staff/local partners/in-country offices/MoH staff where possible and where relevant, either as external training or internal training (perhaps as a contribution to conference, etc.)

- 12 Monitoring adherence to the policy will be included in internal audit processes and tools issued by central Health Poverty Action.

Deterrence:

- 1 All staff at Health Poverty Action must sign the attached Participant Protection Declaration to abide by the Health Poverty Action PPSPP Code of Conduct (both Code and form included below).
- 2 Every workplace will display the PPSPP Code of Conduct and every member of staff will have contact details for reporting.
- 3 All jobs advertised will be with a job description and person specification that will state that Health Poverty Action has a PPSPP Code of Conduct that the successful candidate will be expected to comply with it if the role will require significant interaction with participants. The following wording could be used, *“Health Poverty Action recognises that all adults and children have equal rights to protection from abuse and exploitation. Health Poverty Action condemns exploitation and inappropriate behaviour, and is committed to taking action for the protection of programme participants. We believe in the right person for the job regardless of where you come from and how you identify yourself.”*
- 4 When recruiting new staff, interns, and volunteers, the application form should include the following passage if the role will require significant interaction with participants: *“Health Poverty Action recognises that all adults and children have equal rights to protection from abuse and exploitation. Health Poverty Action condemns exploitation and inappropriate behaviour, and is committed to the protection of programme participants as is reflected in our selection process. Your referees will be asked to comment on your suitability in relation to this.”*
- 5 When seeking references, the following question should be included if the role will require significant interaction with participants: *“Health Poverty Action recognises that all adults and children have equal rights to protection from abuse and exploitation. Health Poverty Action condemns exploitation and inappropriate behaviour, and is committed to the protection of programme participants as is reflected in our selection process. Have you any concern about this person in relation to this?”*
- 6 If the role will require significant interaction with participants, the successful candidate will be required to provide proof of identity (passport, driver’s licence) and to sign a Participant Protection Declaration that they have never been convicted or investigated unlawful acts involving the abuse or ill treatment and that they are committed to the policy.
- 7 New employees, interns, and volunteers who will be regularly and frequently in contact with participants, where possible and affordable, will be expected to obtain a police check from their country of origin.
- 8 All new staff are required to sign the Participant Protection Declaration before finalisation of contract.

Reporting:

- 1 If you have a concern about a Health Poverty Action staff member, report your concern to your line manager and/or the relevant Head of Programmes in London, and fill in an incident form (see below). If reporting direct to the Head of Programmes only, please make it clear that the line manager has not been informed. The reporting of suspected or actual abuse is a professional obligation. Failure to report information can lead to disciplinary action or dismissal.
- 2 The Manager and/or Head of Programmes will discuss the concern and agree further action: Does the concern need reporting to statutory authorities? How should the concern be investigated? Decide further response. Considerations should include local culture and traditions, the laws of the state, the best interest of the victim, prevention of re-offence, and our own organisational values and the expectations we have of our staff.
- 3 Every complaint should be investigated fully and appropriately. If a serious investigation is required, a panel and/or an independent investigator could be useful.
- 4 Protecting the rights of the victims, and also those of potential future victims, should take precedence over a desire to protect our organisational reputation. Our organisational response should be driven by integrity, and the desire to do the right thing.
- 5 Serious abuses where a law has been broken (particularly rape and assault) must be reported to the local authorities unless there are exceptional circumstances in favour of not doing so. A decision not to report serious abuses must be approved by the relevant Head of Programme.
- 6 If the alleged incident involves a Health Poverty Action employee, that individual will be suspended or removed from the area where the incident took place until the facts are conclusive beyond a reasonable doubt. The decision to suspend must be taken by the Manager and is not open to challenge. The investigation process will be confidential and information limited only to those who need to know.
- 7 Managers will need to establish the specifics of their country systems to investigate possible abuses and dealing with them. This may first require them to map out what legal, social, and PPSPP protection resources are available in country. They are required to discuss these systems with their relevant Head of Programmes.
- 8 Health Poverty Action will provide assistance to any participant involved in our projects that has been involved in an incident through direct and culturally appropriate support or referrals to relevant agencies.
- 9 If an alleged incident involves a staff member from Health Poverty Action's implementing partner, the Health Poverty Action Country Director is responsible for reporting the incident to the organisation's senior management. The local partner must report back on how they are investigating and following up the incident. It will be Health Poverty Action's responsibility to monitor this.

- 10 If a complaint is made by a Health Poverty Staff member against another staff member, the Health Poverty Action Grievance procedure may also be used in addition to the above actions.
- 11 Details of reported / alleged PPSPP incidents should be kept in safe / secure storage by the Manager or in HR files as appropriate.

Communication and confidentiality of information

HPA will control confidential and inappropriate information (written and verbal) regarding children and vulnerable adults and will ensure that personal data of programme participants are kept confidential and shared only in case of necessity. The data collected by HPA will be mainly used for project implementation and /or monitoring activities and evaluation surveys (for both treatment and control groups). Below an indicative list of the data usually collected:

- Name;
- Age;
- Gender;
- Nationality;
- Address;
- Contact details (i.e. phone number; email address);
- Special category, only if necessary (i.e. sexual orientation; health condition; religion; ethnic origin).

All email correspondence, internal and external, containing personal data should be processed on a need-to-know basis. Recipients of email correspondence should be carefully selected to avoid unnecessary dissemination of personal data. Within HPA, the above data will be accessible only to those staff members that would process the data, while, in all the other cases, the above data will be omitted from documents and emails in order to protect the privacy of the participants and avoid the risk of loss of data or data breach. The above data might be shared with third parties (i.e. donors; fund managers; external evaluation consultants) but only if strictly necessary. HPA is aware of the requirement to ensure personal data are protected against accidental loss or disclosure, destruction and abuse. Where HPA shares participants' data with third parties, we provide written instructions to them to ensure that the data is held securely and in line with GDPR requirements. Third parties must implement appropriate technical and organisational measures to ensure the security of the data provided by HPA.

In line with protection principles, programme participants' data are kept for as long as they are needed for, usually up to six years after the end of the project the data were collected for.

HPA will provide guidance on confidentiality and information-sharing to the member of the staff as part of their induction training.

HPA will prevent the presentation of degrading images relating to programme participants by developing and enforcing a set of communication guidelines to safeguard and respect children which representatives will abide by including:

- 1 Guidelines for appropriate use of information technology (such as email, digital cameras, websites, internet) to make sure that programme participants are not put in danger and exposed to abuse and exploitation.
- 2 Guidelines on appropriate photos of programme participants – i.e. that they should be fully clothed, not sexualised in any way, and empowered rather than vulnerable where possible
- 3 Guidelines for vetting external photographers (e.g. references, character references, police checks)
- 4 Letting programme participants give their own accounts as much as possible rather than others speaking on their behalf, and highlighting the ability of people to take responsibility and action for themselves.
- 5 Portraying an accurate and balanced picture of programme participants, with an emphasis on dignity and with as much reference as possible to their social, cultural and economic environment, and avoidance of sensationalist text and images, and degrading and inaccurate representations.
- 6 Not revealing any personal and physical information to identify the location of a programme participant that could put them at risk. In particular, to change the name and location of programme participants in all images used.
- 7 Always asking permission of programme participants before taking their photos or a video.
- 8 Get their parent/guardian's consent (in case of children) and make everyone aware what, where and how the images will be used for

Storage and Use of Data

- 1 All electronic data about programme participants will be stored in password-protected files
- 2 All paper records about programme participants will be stored in locked filing cabinets and identifying details removed from the records as far as possible
- 3 The Senior Management Team is responsible for ensuring that data protection induction and training takes place for all HPA staff and that records are kept in line with the UK Data Protection Act 1998 as well as relevant national legislation.

Health Poverty Action's Code of Conduct:

Health Poverty Action's behavioural Code of Conduct must be adhered to by all Health Poverty Action staff, interns, volunteers, journalists, and partner staff.

Please refer to Health Poverty Action's Code of Conduct and read it carefully before signing the Participant Protection Declaration below.

Appendix 1

HEALTH POVERTY ACTION

PARTICIPANT PROTECTION DECLARATION

(Staff, volunteers, consultants, partners, trustees, interns and visitors to projects)

I, the undersigned,

Name:

Health Poverty Action job title and location:

hereby declare that:

- 1 I have never been disciplined for misconduct in relation to participants. ("Participants" include beneficiaries of our projects and other community members where we work, as well as fellow staff members, local partner project staff, government partners, and other project stakeholders). I have never been convicted or subject to any investigation for unlawful acts involving the abuse or ill treatment of participants. I am aware that if I fail to declare any such incidents now, this will later result in disciplinary action, which may include immediate dismissal without notice or benefits such as pension, regardless of labour laws governing the contract.
- 2 I have read and understood the standards and guidelines outlined in Health Poverty Action's Safeguarding Programme Participant Protection Policy. I agree with the principles contained therein and accept the importance of adhering to participant protection policies and practice while working with Health Poverty Action.
- 3 I undertake to draw to the attention of my managers any behaviour or suspicion of sexual exploitation, ill treatment or abuse of participants (including bullying, verbal, physical or sexual harassment, rape, exploitation, intimidation, victimisation, racial or ethnic discrimination or harassment, behaviour that shows a lack of respect for the dignity of other, behaving in an obviously culturally insensitive manner, attempt to commit fraud, blackmail, or accept or solicit a bribe) within Health Poverty Action programmes, or in other situations that may be brought to my notice. I am aware that failure to declare any such knowledge will result in disciplinary action, which may include immediate dismissal without notice or benefits.
- 4 I have been informed that in the event of my being suspected of inappropriate or abusive behaviour in relation to participants, Health Poverty Action reserves the right to take protective measures, including provisional suspension from duties, disciplinary action, which may include immediate dismissal without notice or benefits.

- 5 I have been informed that, in the event of confirmed evidence of my involvement in incidents jeopardising the protection of participants, Health Poverty Action will take appropriate administrative and/or legal measures both in the country where the incident is alleged to have taken place and in my country of domicile, in addition to professional disciplinary action, which may include immediate dismissal without notice or benefits.

- 6 I have been informed that, in the event of termination of contract on the grounds of an incident that is against the Participant Protection Code of Conduct, Health Poverty Action reserves the right to inform other agencies who apply for references of the reason for the termination of contract.

Signed

Date

Appendix 2

HEALTH POVERTY ACTION PPSPP INCIDENT REPORT FORM

If you have knowledge of an incident that has occurred that is against the Participant Protection Code of Conduct, or that a participant's safety might be in danger, please complete this form to the best of your knowledge as promptly as possible. The rest of the information can be filled out later. Please note for confidentiality reasons, the report should be written and signed solely by you. It will be held in a secure location and will be treated in the strictest confidence.

Your name

Your job title

Your e-mail address and/or telephone number

Name of alleged perpetrator

Name of participant(s)/victim(s) against whom the incident occurred

Gender of participant

MALE / FEMALE

Age of participant (only complete for adult if age is related to his/her vulnerability)

Address of participant

Guardians / carers of participant (if a child)

Date, time of alleged incident

Location of alleged incident

Please describe the nature of the allegation below (and on a separate page if required). Try to answer the following questions:

Was the abuse observed, suspected or divulged to you by another party?

What was/is the participant's physical and emotional state?

Has the participant said anything to you, and how did you respond?

Were there any other people involved?

What response have you taken, if any, to the alleged incident?

Which other parties, if any, are also aware of the alleged incident?

Details of other staff members and community members who can verify the incident
