

Prevention of Sexual Abuse, Exploitation and Harassment (PSEAH) Policy

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|------------------------|--------------------------------|
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| Version No.: | 1.0 |
| Policy Contact: | brent.kirwan@destinyrescue.org |
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1. Preamble

- 1.1. Destiny Rescue Limited (DRL) as an organisation whose primary objective is to protect and rescue exploited persons, sees first hand the trauma and damage sexual abuse, expoitation and harrassment (SEAH) causes and implements this policy to safegaurd against SEAH in its workplace.
- 1.2. DRL does not take lightly the delicate nature of the work and the risks associated with the activities that it carries out, and as such has developed this policy to stay vigilant and place the safety of its staff and those it works with in the highest regard.

2. Purpose

- 2.1. DRL acknowledges the landscape in which it works is often high risk, especially where children and sexually exploited persons are involved. DRL recognises that these situations create a power dynamics between its staff and its beneficiaries. DRL also acknowledges that SEAH can occur between staff members at all levels of management as well.
- 2.2. DRL takes a victim/survivor centred approach to managing SEAH incidents and will take all reasonable steps to protect and comply with the wishes of a victim/survivor, including protecting the identities of victims when requested.



2.3. DRL would like to impress on staff the shared responsibility of protecting its staff and those it works with. It is everyone's job to prevent and report incidents of SEAH, failure to report will lead to disciplinary action.

3. Scope

- 3.1. This policy applies to all volunteers, staff and the governing body of DRL
- 3.2. DRL also extends the expectations of policy to its project partners, including their staff members

4. Definitions

- 4.1. **Beneficiaries:** Any person adult or child that DRL offers or intends to offer support. This includes persons whom DRL and its staff interact with before they are rescued or help and support is offered regardless of age. This may also include the family, friends or close relations of a beneficiary.
- 4.2. **Complainant:** any person who makes a complaint regarding any SEAH incident.
- 4.3. Sexual exploitation: Any actual or attempted abuse of a position of vulnerability, differential power, or trust for sexual purposes. It includes profiting monetarily, socially, or politically from sexual exploitation of another. (Source: the UN Secretary General's Bulletin on protection from sexual exploitation and abuse.)
- 4.4. **Sexual abuse:** The actual or threatened physical intrusion of a sexual nature, whether by force or under unequal or coercive conditions. (Source: the UN Secretary General's Bulletin on protection from sexual exploitation and abuse.)
- 4.5. **Sexual harassment:** Unwanted physical, verbal or non-verbal conduct of a sexual nature that can include indecent remarks or sexual demands.

5. Policy Statement

- 5.1. DRL takes a zero tolerance of inaction approach to managing incidents of SEAH.
- 5.2. The risk of SEAH is high in the work that DRL implements and as such DRL expects its partners and staff to conduct themselves in accordance with this policy and DRL's code of conduct regardless of their position or role. It is the responsibility of all staff to protect against SEAH in the workplace.



- 5.3. Staff and volunteers are strictly prohibited from engaging in any sort of sexual expoitation, sexual abuse and sexual harrassment of any other staff member, volunteer or beneficariy.
- 5.4. It is the responsibility of all staff, volunteers to report any suspected or alleged case of SEAH perpetration by any person included in the scope of this policy.
- 5.5. When assessing incidents of SEAH staff are required to maintain strict confidentiality and put the needs and wishes of the victim/survivor first.
- 5.6. All staff and volunteers must support and maintain an organisational culture that creates a safe environment and encourages the reporting of suspected or alleged incidents and putting victims/survivors first.
- 5.7. DRL expects each project and partner to implement mechanisms for raising complaints that suit their unique context and needs.
- 5.8. Recruitment screenings will include police checks and referee checks regarding any SEAH misconduct of potential staff and volunteers.
- 5.9. Failure to comply with the requirements and principles of this policy will be grounds for disciplinary action, which may be considered gross misconduct and result in the termination of your employment with DRL, Funding Nation or Partner.
 - 5.9.1. Where criminal activity has occurred DRL, the Funding Nation, Project Nation or Partner will report the activity to the relevant authorities where safe to do so and in accordance with the wishes of the victim/survivors. Partners and Funding nations must understand their unique legal reporting obligations.
- 5.10. Reports or allegations of SEAH must be reported to the DRL board for review.Where possible these reports will de-identify the victim/survivor.

6. Reports of SEAH

- 6.1. All reports of SEAH are to be taken seriously and managed in accordance with the following procedures.
 - 6.1.1. DRL understands the below procedures may need to be adjusted to fit your context, where this is the case please reach out to your DRL contact for approval of the changes.
- 6.2. Where a case of sexual abuse, exploitation, abuse or harrassment has been reported, a victim/survivor centred approach must be taken.
 - 6.2.1. Listen to the complainant and observe their demeanour and behaviour closely.
 - 6.2.2. Demonstrate sincere interest and appropriate concern in the information relayed by the complainant.



- 6.2.3. Avoid questioning or investigating the complainant inappropriately or prompting their answers.
- 6.2.4. Tell the complainant that you need to notify a trustworthy and relevant staff member who can help the report. Do *not* tell the complainant that you will keep the matter a secret.
- 6.2.5. Record all details of the matter in a Critical Incident Report Form (Appendix C). The report must be clear and accurate, detailing and recording the date, time, conversation, relevant observations, who was involved in the incident, how the incident occurred, who the complainant has told about the reported SEAH instance, and what they told these individuals. Do *not* add personal opinions to the report. The staff member who wrote the report must certify the report with his or her name, signature and date.
- 6.2.6. Whenever relevant and possible, collect any additional information regarding the matter, such as photos of lacerations or statements from any witnesses. You must keep the wellbeing and needs of the complaint as a priority at all time.
- 6.2.7. The reporting staff member must notify the International HR Director and the CEO as soon as possible. If the complainant is at risk, the staff member must contact the CEO immediately who will determine case by case what steps should be taken to further protect the complainant. Subject to the complainants wishes, staff may contact the relevant government authorities. A report needs to be completed detailing which authorities the case was reported to and the officer responsible for the case.
- 6.2.8. Staff must protect the complainant immediately and ensure that the same incident will not happen again, always following a victim/survivor centred approach.
- 6.3. If the accused is a staff member, they must be suspended from their job temporarily pending the results of an investigation. The accused will not be considered a perpetrator unless and until he or she has been proven guilty. If the accused is found to be innocent of the allegations, they will be able to recommence work again. However, in circumstances where abuse or misconduct by a staff member is proven beyond a reasonable doubt, the staff member will be subject to disciplinary action or terminated immediately.
- 6.4. If an investigation is being conducted into the actions of a staff member, where it is safe to do so, that person must be given a written notice of the reasons for his or her suspension from duties and will be advised of the results of the investigation as soon as it becomes available. During the course of the investigation, the staff member is not permitted to consult with other Destiny Rescue staff or children or to be on Destiny Rescue premises unless approved by the CEO. In the event that an allegation made against a staff member is proven to be untrue, appropriate steps must be taken to follow up with the person who made the accusation, and disciplinary action may be taken if the person knowingly made a false report.



- 6.5. If it has been determined beyond reasonable doubt that a visitor has breached the policy or law, Destiny Rescue will take appropriate legal action in accordance with the law and regulations of that country.
- 6.6. The facts concerning the matter or allegation will remain confidential. The reporting staff member is required to send the report to the CEO and International HR Director.
- 6.7. In certain circumstances, a committee may be formed to deal with the matter, the committee may need to seek professional assistance from an external organisation. In that case, the committee will need to report confidential information to that organisation. However, any staff member or visitor who unnecessarily reports a matter to an outside organisation without approval will be open to disciplinary action.
- 6.8. If the matter is of a criminal nature, Destiny Rescue will assess the situation and following the wishes of the victim/survivor, may progress through all necessary steps as directed by law, a lawyer or a relevant organisation. If the matter has been forwarded to an outside organisation, a Destiny rescue representative will cooperate with the organisation through all the necessary steps and information.
- 6.9. If a complainant does not feel comfortable speaking with any specific staff, they may request to speak with the CEO who will report the incident to the International HR Director. If the accused is the CEO, the reporting staff member must report immediately to the International HR Director.
- 6.10. Destiny Rescue has a zero tolerance policy of reporting SEAH, staff who do not pass on allegations or do anything to dissuade a complainant reporting behaviour may be found negligent and will be subjected to disciplinary measures or termination.
- 6.11. All allegations must be dealt with in accordance with the wishes of the victim/survivor.
- 6.12. Once a report has been submitted, a temporary PSEAH Investigative Committee, to be composed of at least three individuals, should be formed. The CEO (or a staff member the CEO appoints), International HR Director, and staff who have sufficient knowledge of the relevant legislation (e.g. a Lawyer) are to be core members of the committee. Other relevant and suitable staff may be added to the committee if deemed appropriate and acceptable to the majority. The Investigative Committee will then meet to discuss the matter as described in the report. The PSEAH Investigative Committee is to be available for matters arising and is to hold a meeting immediately upon receiving a report. If one of the committee members becomes the accused, he or she may no longer serve on the committee. In this case, a new committee member will be found as soon as possible.
- 6.13. An investigation will take place, and all parties involved in the matter will be interviewed about the matter by committee members. The committee will meet again to consider a suitable outcome for the case.
- 6.14. If any staff member is found to be in breach of the policy and/or the law, the committee will decide whether or not that person will be subject to termination or re-commencement. The staff in breach of the policy will be informed of the

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outcome in writing. Staff contracts are to include a provision for action against any staff members deemed unacceptable to continue work with beneficiaries.

- 6.15. A final report of the investigation detailing the findings and the actions taken will be recorded in writing and submitted to the CEO. A copy of the report shall be filed with the DRL and made available to the Board. Destiny Rescue reserves the right to refer the allegation to external stakeholders, if necessary. Where possible the victim/survivor's information will be anonymised on any report.
- 6.16. The staff member may appeal the outcome by forwarding the matter for review by the Board. If the staff member is unhappy with the decision of the Board, he or she may forward the matter for review to the International Director of Destiny Rescue. If the staff member is unhappy with the decision reached by the International HR Director, they may take the matter to the International Board of Destiny Rescue.
- 6.17. See Appendix B for a flow chart outlining the above process.

7. Working with Partners

- 7.1. Much of the work that DRL carries out is done alongside valuable partners in our project nations. Due to the varied locations and nature of it's partners work, DRL acknowledges this policy must be viewed through the lens of the unique contexts, cultures and needs of each project.
- 7.2. DRL is committed to working with and supporting partners to implement this policy, ensuring partners understand the needs and requirements of this policy and the steps they must take to comply.
- 7.3. Partners are required to carry out a PSEAH risk assessment of their operations on a regular basis and must do so before commencing work with Destiny Rescue.
- 7.4. DRL will include questions regarding PSEAH in the regular reporting and monitoring of partners to assess their compliance with this policy.

8. Risk Assessments

8.1. All entities in scope of this policy are required to carry out a risk assessment of their operations and activities against SEAH risk.

9. Related Policies, Procedures, Forms, Guidelines, and Other

Resources

- 9.1. <u>CPP</u>
- 9.2. <u>Whistleblower</u>
- 9.3. <u>Complaints</u>
- 9.4. Code of Conduct
- 10. Appendix A

Critical Incident Form



CRITICAL INCIDENT REPORT

-A critical incident is defined as "any actual or alleged event/ situation that creates a significant risk of substantial or serious harm to the physical/ mental health, safety, or well-being of an individual".

-Please note that this is to be filled out by the staff member(s) who were witness to/ or involved in the incident.

-Please fill Critical Incident Report form out within 24 hours.

| Staff First & Last Name: | | Job Position: | | |
|---|---|-------------------|--|--|
| | | | | |
| E-mail: | | Date of Incident: | | |
| | | | | |
| Description of Incident: | | | | |
| Project Name: (e.g. Chiang Rai, Phnom Penh) | | Time of Incident: | | |
| Location: | □Residential Property □Outside Residential Property (e.g. car, church) □Other: | | | |
| Key Persons Involved: | | | | |
| Staff involved: | | | | |
| Police Notification: | □ None □Police notified, complaint filed □Police notified, no complaint filed | | | |
| Incident Specifics: | Harmed Others: Simple Assault Aggravated Assault Fight Extortion Sexual Misconduct Criminal Threat Threat, Bullying Gang related Property Damage Other: | | | |
| Objects Used: | □ Firearm □Knife, Razor, Scissors □Pin, Sharp pen or pencil □Chain, Club, Brass Knuckles □Spray □Other: | | | |
| Substance Offense and Type: | □Suspected use but not confirmed □Suspected use confirmed □Possession □Distribution Substance: | | | |
| Please provide a factual and accurate account of what transpired in the incident: | | | | |



| What actions were taken or needed: | |
|--|--|
| Staff Signature and Date | |
| Supervisor Signature and Date | |
| International HR Director Signature and Date (If Applicable) | |

11. Appendix B

11.1. PSEAH Investigation Process Flow Chart

12. Policy Review

- 12.1. This document may be changed from time to time in line with current best practice and other requirements, and to ensure that business needs are met. You will be consulted and advised of any changes as far in advance as possible of the change being made.
- 12.2. At minimum, this policy will be reviewed annually.

13. Further Assistance

13.1. For further assistance or clarification on this policy, please contact brent.kirwan@destinyrescue.org.

| Version: | Author: | Revision Date: | Description of Change: | Approved by: |
|----------|--------------------|----------------|------------------------|--------------|
| 1.0 | Brent Dykes-Kirwan | 02/12/2020 | Approval | Fiona Berkin |