EAST ACTION ORGANIZATION – SAFEGUARDING POLICY



EAO Safeguarding and PSEA Policy Manual

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EAO Safeguarding and PSEA Policy Manual

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East Action Organization (EAO)

Safeguarding and Protection from Sexual Exploitation and Abuse (PSEA) Policy Manual

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EAO Safeguarding and PSEA Policy Manual

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1. Purpose and Scope

This Safeguarding and Protection from Sexual Exploitation and Abuse (PSEA) Policy Manual establishes East Action Organization's official standards, commitments, procedures, and responsibilities for preventing harm, protecting people from abuse, exploitation, neglect,

harassment, discrimination, and unsafe practices, and ensuring that all safeguarding concerns are reported, managed, referred, investigated, and responded to in a timely, confidential, survivor-centered, child-sensitive, disability-inclusive, and accountable manner.

This unified Safeguarding and PSEA Policy Manual brings together East Action Organization's core commitments, procedures, and standards for preventing harm, protecting children and vulnerable adults, preventing sexual exploitation, abuse and harassment, ensuring safe conduct, and responding to safeguarding concerns in a confidential, survivor-centered, and accountable manner.

The purpose of this policy is to ensure that EAO creates and maintains a safe organizational environment for all people who come into contact with its work, including children, women, girls, boys, persons with disabilities, older persons, refugees, internally displaced persons, host communities, survivors of violence, marginalized groups, staff, volunteers, partners, and community members. The policy is designed to prevent safeguarding risks before they occur, strengthen awareness and accountability, guide staff and representatives on acceptable and unacceptable conduct, and ensure that any incident or concern is handled with seriousness, fairness, confidentiality, and respect for the dignity and rights of affected persons.

This policy confirms EAO's zero-tolerance position toward sexual exploitation and abuse, sexual harassment, child abuse, abuse of vulnerable adults, discrimination, bullying, intimidation, retaliation, neglect, misuse of power, fraud linked to beneficiary access, transactional sex, exploitation of aid recipients, unsafe recruitment, unsafe communication, and any conduct that causes or may cause harm to individuals or communities. Zero tolerance means that EAO will not ignore, excuse, cover up, minimize, or tolerate any form of safeguarding misconduct. All concerns must be reported and addressed through appropriate procedures.

The scope of this policy applies to all EAO board members, senior management, staff, volunteers, interns, consultants, contractors, suppliers, service providers, visitors, partner organizations, consortium members, community mobilizers, temporary workers, enumerators, trainers, drivers, representatives, and any person acting on behalf of or in association with EAO. It applies regardless of position, contract type, seniority, location, nationality, gender, age, disability status, or employment status.

This policy applies during all EAO operations, including humanitarian response, development programming, community outreach, trainings, workshops, field visits, distributions, assessments, monitoring and evaluation activities, research, data collection, case referral, communication work, photography, videography, storytelling, digital engagement, partnership activities, procurement, transport, office-based work, remote work, travel, accommodation, and any official or unofficial setting where a person's conduct may affect EAO's beneficiaries, communities, staff, partners, or reputation.

This policy also applies to conduct outside working hours when such conduct is connected to EAO's work, affects the safety or dignity of beneficiaries, staff, partners, or community members, involves misuse of organizational authority or resources, creates safeguarding risk,

damages trust in EAO, or violates the standards expected from anyone representing the organization.

The policy covers the prevention, identification, reporting, referral, response, investigation, documentation, learning, and continuous improvement of safeguarding and PSEA matters. It includes protection from sexual exploitation and abuse, child safeguarding, protection of vulnerable adults, disability inclusion, anti-harassment, anti-bullying, anti-discrimination, safe recruitment, code of conduct, safeguarding risk assessment, complaints and feedback, whistleblowing, confidential reporting, survivor-centered referral pathways, case management, disciplinary action, data protection, safe communication, and safeguarding in partnerships and supplier relationships.

EAO recognizes that safeguarding is not only a policy requirement but a core organizational duty of care. Therefore, all EAO personnel and representatives are required to understand this policy, sign the relevant code of conduct and acknowledgement forms, attend safeguarding and PSEA awareness sessions, report concerns immediately, cooperate with safeguarding procedures, protect confidential information, avoid retaliation against reporters, and uphold the highest standards of ethical behavior.

The policy is guided by the principles of do no harm, survivor-centered response, best interests of the child, non-discrimination, dignity, respect, confidentiality, accountability, inclusion, accessibility, informed consent, participation, transparency, fairness, and protection from retaliation. EAO will make reasonable efforts to ensure that safeguarding information and reporting channels are accessible to children, persons with disabilities, women and girls, marginalized groups, and communities with different language, literacy, cultural, and communication needs.

This policy is mandatory and must be implemented across all EAO departments, projects, offices, field sites, partnerships, and consortium arrangements. Any violation of this policy may result in disciplinary action, termination of employment or contract, removal from EAO activities, referral to relevant authorities where legally required, and other corrective measures based on the seriousness of the case and applicable laws, donor requirements, partnership agreements, and organizational procedures.

This policy shall be reviewed periodically and updated when necessary to reflect changes in law, donor requirements, humanitarian standards, organizational learning, partnership obligations, and safeguarding best practices. All staff, volunteers, partners, and representatives are responsible for ensuring that EAO remains a safe, accountable, inclusive, and trusted organization for the communities it serves.

2. Policy Statement and Zero-Tolerance Commitment

East Action Organization (EAO) is fully committed to creating and maintaining a safe, respectful, inclusive, accountable, and protective environment for all people who come into contact with its work. EAO recognizes safeguarding as a fundamental organizational duty, a

leadership responsibility, a donor compliance requirement, and a core principle of ethical humanitarian and development programming.

EAO is committed to preventing, identifying, reporting, responding to, and learning from all forms of harm, abuse, exploitation, neglect, harassment, discrimination, violence, intimidation, retaliation, and misuse of power in its programs, offices, field operations, partnerships, consortiums, supply chains, community engagement, communications, and institutional relationships.

EAO adopts a strict zero-tolerance approach to Sexual Exploitation and Abuse (SEA), sexual harassment, child abuse, abuse of vulnerable adults, exploitation of persons with disabilities, discrimination, bullying, intimidation, retaliation, and any form of misconduct that compromises the safety, dignity, rights, wellbeing, participation, or trust of individuals and communities. Zero tolerance means that EAO will not accept, ignore, excuse, conceal, minimize, delay, or protect any person involved in safeguarding misconduct.

EAO's zero-tolerance commitment applies to all board members, senior management, staff, volunteers, interns, consultants, contractors, suppliers, partners, consortium members, visitors, community representatives, service providers, temporary workers, data collectors, trainers, drivers, vendors, sub-grantees, and any person acting for or on behalf of EAO. No person is exempt from this policy because of seniority, role, authority, professional status, relationship, partnership position, length of service, social influence, political connection, clan identity, or personal relationship with any staff member or leader.

EAO affirms that all people have the right to live and participate in programs free from violence, exploitation, abuse, harassment, neglect, discrimination, coercion, and fear. This includes children, women, girls, boys, persons with disabilities, older persons, refugees, internally displaced persons, returnees, host communities, survivors of violence, minority groups, marginalized communities, people with limited literacy, people affected by crisis, and all community members reached through EAO's work.

EAO strictly prohibits the following forms of misconduct:

a. Sexual exploitation, sexual abuse, sexual harassment, and any form of sexual misconduct.

b. Any sexual activity with a child, meaning any person under the age of 18, regardless of local age of majority, consent, perceived maturity, or mistaken belief about age.

c. Exchange of money, employment, goods, services, aid, protection, opportunities, referrals, education support, project benefits, transport, shelter, documents, or assistance for sex, sexual favors, personal benefit, or any exploitative relationship.

d. Abuse, neglect, violence, emotional harm, physical harm, psychological harm, degrading treatment, or unsafe discipline against children or vulnerable adults.

e. Exploitation, exclusion, discrimination, denial of access, harmful treatment, or unsafe communication involving persons with disabilities.

f. Harassment, bullying, intimidation, humiliation, threats, coercion, blackmail, manipulation, or abuse of authority.

g. Discrimination based on gender, age, disability, ethnicity, religion, clan, nationality, social status, displacement status, refugee status, health status, marital status, pregnancy, political opinion, economic status, or any other personal or protected characteristic.

h. Retaliation against any person who reports a safeguarding concern, supports a complainant, provides information, refuses unsafe conduct, participates in an investigation, or raises an ethical concern in good faith.

i. Taking, storing, using, or sharing photos, videos, stories, personal information, case details, disability information, survivor information, child information, or community data without informed consent, proper authorization, dignity, and protection safeguards.

j. Misuse of organizational power, project resources, beneficiary lists, selection processes, transport, accommodation, communication tools, digital platforms, or confidential information for personal, sexual, financial, political, or other improper gain.

k. Any conduct that damages the dignity, safety, rights, trust, protection, privacy, wellbeing, or participation of communities, beneficiaries, staff, partners, or other stakeholders.

EAO also prohibits staff and representatives from using their position, influence, project role, access to resources, or decision-making power to pressure, manipulate, exploit, favor, punish, exclude, or silence any person. All assistance, services, referrals, training opportunities, employment opportunities, and project benefits must be provided fairly, transparently, and without sexual, financial, social, or personal conditions.

EAO requires all personnel and representatives to behave with integrity, respect, professionalism, accountability, impartiality, and cultural sensitivity at all times. All staff and representatives must understand their duty to prevent harm, identify risks, report concerns, protect survivors and complainants, respect confidentiality, cooperate with safeguarding procedures, and uphold the highest standards of ethical conduct.

EAO will ensure that safeguarding and PSEA are integrated into organizational systems, including recruitment, reference checks, onboarding, staff contracts, volunteer agreements, codes of conduct, performance management, partner agreements, supplier contracts, procurement, program design, field implementation, risk assessments, monitoring and evaluation, community feedback systems, communication materials, data protection, and management decision-making.

EAO is committed to safe recruitment and screening practices to reduce the risk of engaging individuals who may pose a safeguarding risk. This includes appropriate reference checks, code of conduct signing, safeguarding orientation, review of conduct expectations, and clear

consequences for violations. Recruitment and appointment decisions must never knowingly place children, vulnerable adults, communities, or staff at risk.

EAO is committed to ensuring that all safeguarding and PSEA concerns are taken seriously and handled through safe, confidential, timely, accessible, impartial, and survivor-centered procedures. Reports may be made by survivors, children, adults, staff, volunteers, partners, community members, witnesses, or any person who becomes aware of a concern.

EAO will maintain accessible and inclusive reporting channels that are suitable for different groups, including women, children, persons with disabilities, refugees, internally displaced persons, host communities, older persons, people with limited literacy, people who speak different languages, and people facing communication barriers. Reporting options may include direct reporting to safeguarding focal persons, supervisors, management, complaint boxes, telephone contact, community feedback structures, written forms, partner reporting channels, or other safe mechanisms approved by EAO.

EAO will prioritize the safety, dignity, wishes, rights, and wellbeing of survivors and affected persons. A survivor-centered approach means that survivors must be treated with respect, believed, listened to, protected from further harm, and supported to make informed decisions about available services and next steps. No survivor or complainant shall be blamed, pressured, exposed, punished, shamed, discriminated against, or forced to participate in any process against their will, except where mandatory legal, child protection, or life-saving obligations apply.

EAO will apply a child-sensitive approach whenever a child is involved. The best interests of the child shall be a primary consideration in all actions, decisions, referrals, reporting, and case management. Child-related cases must be handled with special care, age-appropriate communication, confidentiality, protection from further harm, and involvement of appropriate caregivers or protection actors where safe and necessary.

EAO will apply a disability-inclusive approach in all safeguarding and PSEA actions. Persons with disabilities must have equal access to information, reporting channels, services, referrals, participation, and protection. Communication and response measures should be accessible, respectful, non-discriminatory, and adapted where reasonable to the needs of persons with physical, sensory, intellectual, or psychosocial disabilities.

EAO will ensure that referral pathways are available and updated for medical, psychosocial, legal, protection, safety, child protection, disability-inclusive, shelter, livelihood, and other relevant support services. Referral must be made safely, confidentially, and based on informed consent, except where there is an immediate risk of serious harm or mandatory reporting requirement.

EAO will take appropriate action when safeguarding concerns are reported. This may include immediate risk assessment, safety planning, survivor support, referral services, internal review, safeguarding investigation, disciplinary action, termination of employment or contract, suspension from duties, removal from activities, donor or partner notification where required, and referral to competent authorities where legally necessary and safe to do so.

EAO will ensure that investigations and case management processes are fair, confidential, timely, objective, evidence-based, and respectful of the rights of all parties. Investigations must avoid exposing survivors, complainants, witnesses, or affected persons to retaliation, intimidation, stigma, or further harm. Only authorized persons shall handle safeguarding case information.

EAO will protect whistleblowers, complainants, witnesses, survivors, community members, and staff who report concerns in good faith. Retaliation, threats, intimidation, dismissal, demotion, exclusion, harassment, pressure, or any form of punishment against a person who reports or supports a safeguarding concern is strictly prohibited and may result in disciplinary action.

EAO will maintain confidentiality in all safeguarding and PSEA matters. Information shall be shared only on a strict need-to-know basis and only with authorized persons involved in protection, referral, investigation, management, legal compliance, or donor reporting obligations. Personal data, survivor information, child information, complaint records, and investigation files must be securely stored and protected.

EAO recognizes that safeguarding is not only about responding to incidents but also about prevention, risk reduction, accountability, and continuous improvement. Therefore, EAO will conduct safeguarding risk assessments in programs, train staff and partners, raise awareness among communities, monitor compliance, review lessons learned, strengthen reporting systems, and update procedures as needed.

EAO will ensure that partners, consortium members, contractors, suppliers, and service providers are informed of EAO's safeguarding and PSEA expectations. Where relevant, safeguarding commitments shall be included in partnership agreements, contracts, memoranda of understanding, procurement documents, sub-grant agreements, and supplier arrangements. EAO reserves the right to suspend, review, terminate, or refuse collaboration with any party that fails to meet safeguarding standards.

EAO's leadership, board, senior management, safeguarding focal persons, program teams, operations teams, and all personnel share responsibility for implementing this policy. Leadership has a special responsibility to model safe behavior, create a speak-up culture, allocate resources, respond to concerns seriously, and ensure that safeguarding is treated as an institutional priority.

Failure to comply with this policy may result in disciplinary, contractual, administrative, legal, or corrective action depending on the nature and seriousness of the violation. Measures may include warning, mandatory training, suspension, reassignment, termination, contract cancellation, removal from project activities, recovery of funds, referral to authorities, or reporting to donors and partners in line with applicable rules.

This policy statement confirms EAO's institutional commitment to safeguarding, Protection from Sexual Exploitation and Abuse, safe conduct, accountability to affected populations, disability inclusion, child protection, ethical partnerships, responsible communication, and the protection of every person's dignity, safety, privacy, rights, and wellbeing.

3. Definitions of Key Terms

For the purpose of this Safeguarding and PSEA Policy Manual, the following terms shall have the meanings described below. These definitions are intended to ensure a common understanding among EAO board members, management, staff, volunteers, consultants, partners, contractors, suppliers, community representatives, and all persons acting on behalf of EAO.

Safeguarding

Safeguarding refers to the responsibility of EAO to prevent harm, abuse, exploitation, neglect, harassment, discrimination, and unsafe practices that may affect children, adults, staff, volunteers, partners, communities, and any person who comes into contact with EAO's work. Safeguarding includes prevention, risk reduction, safe recruitment, awareness, reporting, response, referral, investigation, accountability, and continuous improvement.

Protection from Sexual Exploitation and Abuse, PSEA

PSEA refers to all measures taken to prevent, report, respond to, and address sexual exploitation and sexual abuse committed by staff, volunteers, partners, contractors, suppliers, service providers, or any person associated with EAO's work. PSEA focuses especially on preventing abuse of power against beneficiaries, community members, and people receiving assistance or services.

Sexual Exploitation

Sexual exploitation means any actual or attempted abuse of a position of vulnerability, power, trust, dependency, or differential authority for sexual purposes. This includes benefiting financially, socially, politically, professionally, or personally from the sexual exploitation of another person. It includes any situation where access to aid, services, employment, opportunities, referrals, protection, transport, training, or project benefits is linked to sexual demands or sexual favors.

Sexual Abuse

Sexual abuse means any actual or threatened physical intrusion of a sexual nature, whether by force or under unequal, coercive, manipulative, or exploitative conditions. It includes rape, attempted rape, unwanted sexual touching, forced sexual acts, sexual assault, and any sexual act where a person cannot freely give informed consent.

Sexual Harassment

Sexual harassment means any unwelcome sexual advance, request for sexual favor, verbal or physical conduct, gesture, message, joke, comment, image, or behavior of a sexual nature that causes offence, humiliation, fear, discomfort, intimidation, or creates a hostile, degrading, or unsafe environment. Sexual harassment may happen in person, online, by phone, through social

media, during work, during travel, in offices, in field sites, or in any setting connected to EAO's work.

Child

A child means any person below the age of 18 years, regardless of national law, local custom, appearance, marital status, perceived maturity, or consent. Any sexual activity with a child is strictly prohibited.

Child Safeguarding

Child safeguarding means the responsibility of EAO to prevent harm, abuse, exploitation, neglect, violence, unsafe communication, unsafe recruitment, and any harmful practice affecting children who come into contact with EAO staff, representatives, partners, programs, communications, or services.

Child Abuse

Child abuse means any act or failure to act that causes harm or risk of harm to a child. It may include physical abuse, emotional abuse, sexual abuse, neglect, exploitation, child labor, harmful discipline, forced marriage, trafficking, online abuse, or exposing a child to unsafe situations.

Physical Abuse

Physical abuse means the actual or attempted use of physical force that causes, or may cause, injury, pain, fear, suffering, or harm. It includes hitting, beating, shaking, kicking, burning, pushing, slapping, restraining, or using physical punishment or harmful discipline.

Emotional or Psychological Abuse

Emotional or psychological abuse means behavior that harms a person's emotional wellbeing, dignity, confidence, mental health, or sense of safety. It includes humiliation, threats, insults, rejection, isolation, intimidation, manipulation, verbal abuse, controlling behavior, bullying, and repeated criticism.

Neglect

Neglect means failure to provide necessary care, protection, supervision, support, or assistance where there is a duty to do so, resulting in harm or risk of harm. It may include failure to protect children or vulnerable adults from danger, abuse, unsafe environments, lack of access to essential services, or failure to respond to known safeguarding concerns.

Vulnerable Adult

A vulnerable adult means any person aged 18 or above who may be at increased risk of harm, abuse, exploitation, neglect, discrimination, or exclusion because of disability, age, illness,

displacement, poverty, dependency, trauma, crisis, social marginalization, power imbalance, or reliance on services or assistance.

Person with Disability

A person with disability means a person with long-term physical, mental, intellectual, psychosocial, or sensory impairments who may face barriers that hinder full and equal participation in society. EAO recognizes that disability-related safeguarding risks may increase where access, communication, power, mobility, information, and services are not inclusive.

Survivor

A survivor means a person who has experienced harm, abuse, exploitation, harassment, violence, neglect, or other safeguarding misconduct. The term “survivor” is used to recognize the dignity, agency, and rights of the affected person. In some cases, the person may prefer to be called a victim, complainant, or affected person, and their preference should be respected.

Complainant

A complainant means a person who reports a safeguarding concern, complaint, allegation, incident, or suspicion. The complainant may be the survivor, a witness, a staff member, a volunteer, a partner, a family member, a community member, or any other person who becomes aware of a concern.

Subject of Complaint

The subject of complaint means the person alleged to have committed a safeguarding violation, misconduct, abuse, exploitation, harassment, or breach of this policy. The subject of complaint must be treated fairly during any review or investigation, while ensuring the safety, dignity, and protection of survivors, complainants, and witnesses.

Witness

A witness means any person who has seen, heard, received information about, or has relevant knowledge of a safeguarding concern, incident, allegation, or risk.

Consent

Consent means free, informed, voluntary, and clear agreement given by a person who has the capacity to make that decision. Consent must not be obtained through force, pressure, fear, manipulation, deception, threat, abuse of power, dependency, or exchange of benefits. Children cannot legally consent to sexual activity with adults or EAO representatives.

Informed Consent

Informed consent means that a person understands the purpose, risks, benefits, possible consequences, available options, and how their information will be used before agreeing to participate, receive referral, share a story, be photographed, be recorded, or provide information.

Assent

Assent refers to the expressed willingness of a child to participate in an activity, interview, photo, video, service, or referral process, where appropriate to their age and understanding. Assent does not replace the need for consent from a parent or caregiver where required and safe.

Power Imbalance

Power imbalance means a situation where one person has greater authority, influence, control, resources, status, knowledge, decision-making power, or access to benefits than another person. Safeguarding risks increase when staff, partners, or representatives have power over beneficiaries, job applicants, volunteers, children, persons with disabilities, displaced persons, or communities.

Abuse of Power

Abuse of power means using one's position, authority, influence, resources, relationship, knowledge, or organizational role to exploit, control, pressure, punish, exclude, silence, or gain improper benefit from another person.

Exploitation

Exploitation means taking unfair advantage of another person's vulnerability, dependency, trust, poverty, displacement, disability, lack of information, or need for assistance for personal, financial, sexual, social, political, or organizational gain.

Harassment

Harassment means unwanted behavior that violates a person's dignity or creates an intimidating, hostile, degrading, humiliating, or offensive environment. Harassment may be verbal, physical, psychological, sexual, digital, written, or visual.

Bullying

Bullying means repeated or serious behavior intended to intimidate, humiliate, undermine, threaten, isolate, control, or harm another person. It may include shouting, insults, exclusion, spreading rumors, misuse of authority, unfair criticism, public humiliation, or online intimidation.

Discrimination

Discrimination means unfair, unequal, exclusionary, or harmful treatment of a person or group based on identity, status, personal characteristics, or perceived difference. This may include discrimination based on gender, age, disability, ethnicity, religion, clan, nationality, displacement status, refugee status, health status, marital status, pregnancy, economic status, or any other protected or personal characteristic.

Retaliation

Retaliation means any negative action, threat, punishment, harassment, intimidation, demotion, dismissal, exclusion, discrimination, pressure, or disadvantage against a person because they reported a concern, supported a complainant, refused unsafe conduct, participated in an investigation, or raised an ethical issue in good faith.

Whistleblowing

Whistleblowing means reporting serious wrongdoing, misconduct, abuse, exploitation, fraud, corruption, unsafe practice, policy violation, or other serious concern within or connected to EAO's work. Whistleblowing may involve staff, volunteers, partners, contractors, suppliers, management, or any person linked to EAO.

Confidentiality

Confidentiality means protecting personal, sensitive, and safeguarding-related information from unauthorized access, sharing, disclosure, or misuse. Safeguarding information must only be shared with authorized persons on a strict need-to-know basis for protection, referral, investigation, management, legal, or donor compliance purposes.

Need-to-Know Basis

Need-to-know basis means that information is shared only with persons who require it to protect the survivor, manage risk, provide referral support, conduct an investigation, make a decision, comply with the law, or meet donor and partner obligations.

Survivor-Centered Approach

A survivor-centered approach means placing the survivor's safety, dignity, rights, wishes, needs, privacy, and wellbeing at the center of all actions and decisions. It requires respect, non-blaming attitudes, informed consent, confidentiality, protection from further harm, and access to appropriate support services.

Child-Sensitive Approach

A child-sensitive approach means ensuring that all actions involving children prioritize the best interests of the child, safety, confidentiality, age-appropriate communication, non-discrimination, participation, protection from further harm, and appropriate involvement of caregivers or child protection actors where safe and necessary.

Disability-Inclusive Approach

A disability-inclusive approach means ensuring that persons with disabilities have equal access to information, reporting channels, protection, services, referrals, participation, and justice. It requires reasonable accommodation, accessible communication, dignity, respect, and removal of barriers that increase safeguarding risks.

Do No Harm

Do no harm means that EAO must avoid actions, decisions, communications, programs, referrals, or investigations that may increase risk, expose people to danger, worsen trauma, create stigma, violate privacy, or cause further harm to individuals or communities.

Safeguarding Risk

Safeguarding risk means any situation, activity, behavior, environment, relationship, or decision that may expose a person or group to harm, abuse, exploitation, neglect, harassment, discrimination, unsafe communication, or misuse of power.

Safeguarding Incident

A safeguarding incident means any actual, suspected, alleged, or attempted act of harm, abuse, exploitation, harassment, neglect, discrimination, retaliation, or policy breach involving EAO personnel, representatives, partners, contractors, suppliers, programs, resources, or activities.

Safeguarding Concern

A safeguarding concern means any worry, suspicion, observation, allegation, report, or information indicating that a person may have been harmed, may be at risk of harm, or that this policy may have been breached.

Complaint and Feedback Mechanism

A complaint and feedback mechanism means a safe, accessible, confidential, and responsive system through which individuals and communities can raise concerns, complaints, feedback, suggestions, or reports about EAO’s work, conduct, services, staff, partners, or safeguarding matters.

Referral Pathway

A referral pathway means a clear list or process for connecting survivors or affected persons to appropriate services, such as medical care, psychosocial support, legal assistance, child protection, safety services, disability support, shelter, protection actors, or other specialized support.

Case Management

Case management means the structured process of receiving, assessing, documenting, referring, following up, and closing safeguarding cases in a safe, confidential, survivor-centered, and accountable manner.

Investigation

Investigation means a formal, fair, confidential, objective, and evidence-based process to establish facts about a reported safeguarding concern or policy violation. Investigations must be conducted only by authorized and competent persons.

Disciplinary Action

Disciplinary action means corrective or punitive measures taken when a person violates this policy, the code of conduct, employment rules, partnership obligations, or safeguarding standards. Measures may include warning, training, suspension, reassignment, termination, contract cancellation, removal from activities, referral to authorities, or other appropriate action.

Safe Recruitment

Safe recruitment means recruitment procedures designed to prevent unsuitable individuals from gaining access to children, vulnerable adults, communities, staff, or project participants. It may include reference checks, identity verification, safeguarding questions, code of conduct signing, screening, induction, and probation monitoring.

Safe Communication

Safe communication means the ethical, respectful, dignified, and consent-based collection, use, storage, and sharing of photos, videos, stories, messages, interviews, case studies, social media content, and personal information, especially involving children, survivors, persons with disabilities, and vulnerable communities.

Partner

A partner means any organization, institution, consortium member, sub-grantee, community-based organization, government body, private actor, service provider, or other entity working with EAO through formal or informal collaboration.

Contractor or Supplier

A contractor or supplier means any individual, company, vendor, consultant, service provider, transporter, construction provider, material supplier, or other third party providing goods, works, or services to EAO.

EAO Representative

An EAO representative means any person who represents, works for, speaks on behalf of, acts for, or is associated with EAO, whether paid or unpaid, formal or informal, temporary or permanent.

Mandatory Reporting

Mandatory reporting means reporting that must be made because of legal requirements, child protection obligations, donor rules, partnership agreements, serious risk of harm, or organizational procedures. Mandatory reporting must be handled carefully, safely, and in line with confidentiality and survivor-centered principles.

Good Faith Report

A good faith report means a concern or complaint made honestly, even if it is later not proven. EAO protects people who report in good faith from retaliation, punishment, or discrimination.

False or Malicious Report

A false or malicious report means a complaint knowingly made with false information and with the intention to harm another person. EAO will not punish good faith reports, but knowingly false or malicious reporting may lead to disciplinary action.

These definitions shall guide the interpretation and implementation of this policy. Where a term is not defined in this section, EAO shall interpret it in line with applicable Ethiopian law, donor requirements, humanitarian standards, child protection principles, disability inclusion standards, survivor-centered practice, and the overall purpose of safeguarding and PSEA.

4. Safeguarding Principles

East Action Organization (EAO) shall apply the following safeguarding principles across all organizational systems, programs, operations, partnerships, communications, field activities, and community engagement. These principles guide how EAO prevents harm, reduces risk, protects people, responds to concerns, promotes accountability, and ensures that all safeguarding and PSEA matters are handled in a safe, confidential, survivor-centered, child-sensitive, disability-inclusive, and professional manner.

4.1 Do No Harm

EAO shall ensure that all programs, services, decisions, referrals, communications, investigations, and organizational actions are designed and implemented in a way that does not cause harm, increase risk, expose people to danger, deepen trauma, create stigma, violate privacy, or undermine dignity.

All EAO board members, management, staff, volunteers, partners, contractors, suppliers, and representatives must consider the possible safeguarding risks of their actions before engaging

with children, vulnerable adults, persons with disabilities, women, girls, refugees, internally displaced persons, host communities, survivors, and other community members.

4.2 Zero Tolerance for Abuse, Exploitation, and Misconduct

EAO maintains zero tolerance for sexual exploitation and abuse, sexual harassment, child abuse, abuse of vulnerable adults, discrimination, bullying, harassment, intimidation, retaliation, neglect, misuse of power, unsafe conduct, and any form of safeguarding misconduct.

Zero tolerance means that all concerns must be taken seriously, reported through approved channels, assessed promptly, and responded to in line with this policy, EAO's Code of Conduct, donor requirements, partnership obligations, and applicable laws. EAO shall not ignore, conceal, minimize, excuse, or protect any person involved in safeguarding misconduct.

4.3 Survivor-Centered Approach

EAO shall place the safety, dignity, rights, wishes, privacy, and wellbeing of survivors and affected persons at the center of all safeguarding responses. Survivors shall be treated with respect, compassion, confidentiality, and without blame, judgment, pressure, or discrimination.

EAO shall support survivors to make informed decisions about available services, referrals, reporting options, and next steps. No survivor shall be forced, exposed, punished, shamed, pressured, or required to participate in any process against their will, except where mandatory legal, child protection, or life-saving obligations apply.

4.4 Best Interests of the Child

In all matters involving children, the best interests of the child shall be a primary consideration. EAO shall ensure that children are protected from abuse, exploitation, neglect, violence, unsafe communication, harmful practices, discrimination, and any action that may place them at risk.

Child-related safeguarding concerns must be handled with special care, age-appropriate communication, confidentiality, sensitivity, and involvement of appropriate caregivers, child protection actors, or authorities where safe, necessary, and legally required.

4.5 Respect for Dignity and Human Rights

EAO recognizes the inherent dignity, rights, and worth of every person. All individuals shall be treated with respect regardless of gender, age, disability, ethnicity, religion, clan, nationality, displacement status, refugee status, health status, marital status, pregnancy, economic status, education level, social background, or any other personal characteristic.

All EAO personnel and representatives must protect the dignity of beneficiaries, staff, volunteers, partners, and community members in their words, actions, decisions, communications, and use of organizational authority.

4.6 Non-Discrimination and Inclusion

EAO shall ensure that safeguarding systems are inclusive, accessible, fair, and non-discriminatory. No person shall be excluded from protection, assistance, reporting channels, referral services, participation, or justice because of identity, disability, age, gender, social status, displacement status, language, literacy level, or other personal circumstances.

EAO shall pay particular attention to groups who may face increased safeguarding risks, including children, women and girls, persons with disabilities, older persons, refugees, internally displaced persons, survivors of violence, marginalized groups, and people with limited access to information or services.

4.7 Disability Inclusion and Accessibility

EAO shall ensure that safeguarding information, reporting channels, referral pathways, communication materials, training, and response procedures are accessible to persons with disabilities. Reasonable accommodation shall be provided where needed to support equal access, dignity, confidentiality, participation, and protection.

EAO recognizes that persons with disabilities may face specific risks related to dependency, communication barriers, mobility barriers, stigma, exclusion, abuse of power, denial of services, or lack of accessible reporting systems. These risks must be considered in program design, staff conduct, community engagement, and incident response.

4.8 Accountability

EAO shall be accountable to affected populations, beneficiaries, staff, partners, donors, communities, and relevant authorities for implementing this policy and maintaining safe systems. Accountability includes prevention, awareness, reporting, response, investigation, corrective action, documentation, learning, and policy improvement.

All personnel and representatives have a duty to report safeguarding concerns, cooperate with procedures, respect confidentiality, and uphold EAO's safeguarding standards. Managers and leaders have an additional responsibility to create a safe culture, respond to concerns seriously, and ensure that safeguarding responsibilities are implemented.

4.9 Confidentiality and Privacy

EAO shall protect the confidentiality and privacy of survivors, complainants, witnesses, children, staff, community members, and subjects of complaint. Safeguarding information shall only be shared on a strict need-to-know basis with authorized persons for protection, referral, investigation, legal, donor, or management purposes.

Unauthorized sharing of safeguarding information, survivor details, child information, complaint records, photos, videos, case files, or investigation materials is strictly prohibited and may result in disciplinary action.

4.10 Informed Consent

EAO shall seek informed consent before collecting, using, sharing, referring, photographing, recording, interviewing, or publishing personal information, stories, images, videos, or case details. Consent must be voluntary, informed, specific, and free from pressure, manipulation, fear, coercion, deception, or exchange of benefits.

For children, consent must be obtained from a parent or caregiver where required and safe, and the child's assent should also be sought according to the child's age, maturity, and understanding. Consent must never be used to justify unsafe, abusive, exploitative, or harmful conduct.

4.11 Participation and Community Engagement

EAO shall involve communities, beneficiaries, children, youth, women, persons with disabilities, older persons, and marginalized groups in strengthening safeguarding awareness, safe reporting, feedback systems, and risk reduction measures.

Community members should be informed about their rights, expected conduct of EAO staff and representatives, available reporting channels, complaint procedures, and services that are provided free from exploitation, abuse, discrimination, favoritism, or personal conditions.

4.12 Safe Reporting and Right to Speak Up

EAO shall create a safe environment where staff, volunteers, partners, beneficiaries, and community members can report safeguarding concerns without fear of retaliation, shame, intimidation, discrimination, stigma, or punishment.

Reporting channels shall be accessible, confidential, child-sensitive, disability-inclusive, gender-sensitive, and responsive to different literacy, language, cultural, and communication needs. All reports made in good faith shall be protected.

4.13 Protection from Retaliation

EAO strictly prohibits retaliation against any person who reports a safeguarding concern, supports a complainant, refuses unsafe conduct, provides information, participates in an investigation, or raises an ethical issue in good faith.

Retaliation may include threats, intimidation, dismissal, demotion, exclusion, harassment, pressure, discrimination, denial of opportunities, or any negative action linked to reporting. Any act of retaliation shall be treated as a serious breach of this policy.

4.14 Impartiality, Fairness, and Due Process

EAO shall handle safeguarding concerns in a fair, objective, confidential, timely, and evidence-based manner. Survivors and complainants must be protected and supported, while subjects of complaint shall also be treated fairly during review or investigation.

Investigations and decisions must be free from bias, favoritism, discrimination, conflict of interest, personal relationships, clan influence, political pressure, organizational pressure, or misuse of authority.

4.15 Timely and Appropriate Response

EAO shall respond to safeguarding concerns promptly and appropriately according to the level of risk, urgency, and needs of the affected person. Immediate safety, medical, psychosocial, child protection, legal, shelter, disability-inclusive, or other referral needs shall be prioritized.

Delays, silence, informal settlement, pressure to withdraw complaints, forced mediation, or attempts to cover up safeguarding concerns are not acceptable.

4.16 Prevention and Risk Reduction

EAO shall treat safeguarding as a preventive responsibility, not only a response mechanism. Safeguarding risks must be identified and reduced during program design, recruitment, field implementation, community engagement, transport, distribution, data collection, communication, monitoring, procurement, partnerships, and service delivery.

All projects and activities should consider possible risks of abuse, exploitation, exclusion, harassment, discrimination, unsafe communication, misuse of resources, or power imbalance.

4.17 Safe Recruitment and Responsible Staffing

EAO shall apply safe recruitment and screening measures to reduce the risk of engaging individuals who may pose harm to children, vulnerable adults, communities, staff, or partners. This may include reference checks, identity verification, safeguarding questions, code of conduct signing, induction, supervision, and performance monitoring.

All staff and representatives must understand that employment, volunteering, consultancy, partnership, or service provision with EAO is conditional on compliance with safeguarding and PSEA standards.

4.18 Responsible Use of Power and Resources

EAO personnel and representatives must never misuse their position, authority, influence, project resources, beneficiary lists, selection processes, information, transport, accommodation, communication tools, digital platforms, or access to services for sexual, financial, social, political, or personal gain.

All assistance, services, referrals, employment opportunities, training opportunities, and project benefits must be provided fairly, transparently, and without any demand for sex, money, favors, loyalty, personal service, private benefit, or political support.

4.19 Safe Communication and Digital Protection

EAO shall ensure that all photos, videos, stories, interviews, publications, social media posts, case studies, digital content, and communications protect dignity, privacy, informed consent, and safety.

Children, survivors, persons with disabilities, refugees, internally displaced persons, and vulnerable community members must never be portrayed in a way that exposes them to shame, stigma, exploitation, identification, discrimination, retaliation, or further harm.

4.20 Partnership and Shared Responsibility

EAO shall ensure that partners, consortium members, contractors, suppliers, service providers, sub-grantees, consultants, and other third parties understand and comply with safeguarding and PSEA expectations. Safeguarding commitments should be included in partnership agreements, contracts, memoranda of understanding, procurement documents, supplier agreements, and sub-grant arrangements where relevant.

EAO may suspend, review, terminate, or refuse collaboration with any partner, contractor, supplier, or representative who fails to meet safeguarding standards or creates serious safeguarding risk.

4.21 Learning and Continuous Improvement

EAO shall regularly review safeguarding risks, incidents, feedback, lessons learned, training needs, reporting systems, referral pathways, and implementation gaps. The organization shall use learning to improve policies, procedures, awareness, accountability, and program quality.

Safeguarding improvement is a continuous responsibility shared by EAO leadership, staff, volunteers, partners, and communities.

4.22 Compliance with Law, Donor Standards, and Organizational Rules

EAO shall implement safeguarding and PSEA measures in line with applicable Ethiopian laws, donor requirements, partnership agreements, humanitarian standards, child protection principles, disability inclusion standards, survivor-centered practice, and EAO’s internal policies.

Where standards differ, EAO shall apply the higher protection standard, provided it does not violate applicable law or place survivors, children, staff, or communities at increased risk.

4.23 Mandatory Reporting and Duty to Act

EAO requires all board members, management, staff, volunteers, interns, consultants, contractors, partners, suppliers, and representatives to report any safeguarding concern, suspicion, allegation, disclosure, incident, or risk as soon as they become aware of it.

No staff member or representative shall ignore, delay, hide, informally settle, or personally investigate a safeguarding concern without following the approved reporting and response procedures. Failure to report a known safeguarding concern may be treated as a serious breach of this policy.

4.24 Victim and Witness Protection

EAO shall take appropriate measures to protect survivors, complainants, witnesses, children, staff, volunteers, community members, and any person involved in a safeguarding case from intimidation, retaliation, pressure, stigma, exposure, or further harm.

Protection measures may include confidentiality controls, safe referral, temporary separation from the subject of complaint, adjustment of duties, safe communication, risk monitoring, and other reasonable steps based on the situation.

4.25 Conflict of Interest Management

EAO shall ensure that safeguarding reports, referrals, investigations, disciplinary decisions, and case management processes are free from conflict of interest.

Any person who has a personal, family, professional, financial, clan, political, supervisory, or other relationship with the survivor, complainant, witness, or subject of complaint must declare the conflict and shall not lead or influence the case process unless formally authorized under safe and transparent arrangements.

4.26 Accountability to Affected Populations

EAO shall ensure that communities and affected populations are informed about their rights, EAO's expected staff conduct, free access to services, prohibited behaviors, complaint channels, and how safeguarding concerns can be reported safely and confidentially.

EAO shall promote community trust by ensuring that assistance is provided fairly, respectfully, transparently, and without exploitation, abuse, discrimination, favoritism, or personal conditions.

4.27 Gender Sensitivity and Protection from Gender-Based Violence

EAO recognizes that women, girls, boys, men, persons with disabilities, displaced persons, and marginalized groups may experience safeguarding risks differently. EAO shall apply gender-sensitive and age-sensitive approaches in prevention, reporting, response, referral, investigation, and communication.

EAO shall ensure that safeguarding actions do not increase the risk of gender-based violence, stigma, family conflict, community retaliation, exclusion, or further harm.

4.28 Cultural Sensitivity without Compromising Protection

EAO shall respect local culture, religion, community norms, and social structures while maintaining clear safeguarding standards. Cultural practices, social status, family pressure, community mediation, religious authority, clan influence, or local custom shall never be used to justify abuse, exploitation, harassment, discrimination, child abuse, forced settlement, retaliation, or silence.

Where local practices conflict with safeguarding standards, EAO shall prioritize safety, dignity, human rights, child protection, survivor-centered response, and applicable legal obligations.

4.29 Safe Access to Assistance and Services

EAO shall ensure that all humanitarian and development assistance, services, referrals, training, employment opportunities, distributions, and project benefits are provided safely, fairly, and without exploitation, abuse, harassment, discrimination, or personal demands.

No person shall be required to provide sex, money, labor, loyalty, political support, private service, personal favors, or any benefit in exchange for EAO assistance or services.

4.30 Proportionality and Risk-Based Safeguarding

EAO shall apply safeguarding measures based on the level of risk, vulnerability, context, activity type, and potential harm. Higher-risk activities, such as work involving children, persons with disabilities, survivors, refugees, internally displaced persons, cash or aid distribution, home visits, transport, case referrals, overnight travel, data collection, or media documentation, shall require stronger safeguarding controls.

Safeguarding risk management shall be practical, proportionate, preventive, and regularly updated.

4.31 Documentation and Record Keeping

EAO shall ensure that safeguarding reports, decisions, referrals, investigation records, consent forms, risk assessments, training records, and case files are documented accurately, securely, confidentially, and only by authorized persons.

Records shall be stored in a way that protects survivors, complainants, witnesses, children, staff, and communities from exposure, misuse, stigma, retaliation, or unauthorized disclosure.

4.32 Management Responsibility and Leadership Accountability

EAO leadership, board members, senior management, managers, and safeguarding focal persons have a special responsibility to model appropriate conduct, enforce this policy, allocate resources, support reporting systems, respond to concerns, and create a safe organizational culture.

Managers shall not discourage reporting, protect offenders, delay action, blame survivors, silence complainants, or prioritize organizational reputation over the safety and dignity of affected persons.

4.33 Coordination with Relevant Protection Actors

EAO shall coordinate where appropriate with relevant protection, child protection, GBV, disability inclusion, health, legal, psychosocial, humanitarian, government, and community-based actors to ensure safe referral, response, and support for survivors and affected persons.

Coordination shall respect confidentiality, informed consent, data protection, survivor safety, and the best interests of the child.

4.34 Minimum Standard of Conduct

EAO shall ensure that all personnel and representatives maintain professional boundaries, avoid exploitative relationships, respect community members, use appropriate language, avoid favoritism, and never engage in conduct that may create fear, dependency, shame, humiliation, or unsafe power dynamics.

Staff and representatives must remember that safeguarding standards apply both during official working hours and outside working hours when their conduct is connected to EAO, affects community trust, or creates risk to beneficiaries, staff, partners, or the organization.

4.35 Safeguarding as a Shared Organizational Culture

EAO shall promote safeguarding as part of its organizational culture, not only as a written policy. Every person associated with EAO has a role in creating a safe, respectful, accountable, and protective environment.

EAO shall encourage open communication, respectful challenge, ethical leadership, active listening, and responsible action so that safeguarding is practiced daily in offices, field sites, communities, partnerships, and all organizational activities.

4.36 Application of the Higher Protection Standard

Where there is uncertainty, EAO shall choose the action that provides the highest reasonable level of protection for children, survivors, persons with disabilities, vulnerable adults, staff, and communities.

When different standards, donor rules, partner requirements, or internal procedures apply, EAO shall follow the standard that provides stronger safeguarding protection, provided it is lawful, safe, and does not place any person at further risk.

5. Protection of Children and Vulnerable Adults

East Action Organization (EAO) is committed to protecting all children and vulnerable adults who come into contact with its programs, services, staff, volunteers, partners, contractors, suppliers, visitors, and representatives. EAO recognizes that children and vulnerable adults may face increased risks of abuse, exploitation, neglect, discrimination, violence, exclusion, unsafe communication, harmful practices, and misuse of power, especially in humanitarian, development, displacement, poverty, disability, health, education, livelihood, protection, and community-based settings.

This section establishes EAO's standards for preventing, identifying, reporting, responding to, and reducing risks of harm against children and vulnerable adults. It applies across all EAO offices, field sites, programs, community activities, distributions, trainings, assessments, home visits, referrals, research, data collection, communications, partnerships, consortiums, procurement activities, transport arrangements, and digital platforms.

5.1 Definition of Children and Vulnerable Adults

For the purpose of this policy, a child is any person below the age of 18 years, regardless of national law, local custom, marital status, perceived maturity, physical appearance, social role, or consent.

A vulnerable adult is any person aged 18 years or above who may be at increased risk of harm, abuse, exploitation, neglect, discrimination, or exclusion because of disability, age, illness, displacement, poverty, dependency, trauma, crisis, social marginalization, gender-based violence, limited literacy, limited access to services, or reliance on assistance.

EAO recognizes that vulnerability is not fixed. A person may become vulnerable because of a specific situation, crisis, relationship, service dependency, power imbalance, disability, protection risk, or lack of safe support.

5.2 EAO's Duty of Care

EAO has a duty of care to ensure that its work does not expose children and vulnerable adults to harm. This duty applies to all staff and representatives, regardless of their position or contract type.

EAO shall take reasonable steps to prevent harm before it occurs, reduce safeguarding risks, provide safe reporting channels, respond promptly to concerns, and ensure that children and vulnerable adults are treated with dignity, respect, inclusion, and protection.

EAO's duty of care includes safe recruitment, staff training, code of conduct enforcement, risk assessment, supervision, community awareness, safe communication, safe referral, confidentiality, and appropriate disciplinary action when standards are violated.

5.3 Best Interests of the Child

In all decisions and actions affecting children, the best interests of the child shall be a primary consideration. This means that the child's safety, dignity, wellbeing, protection, privacy, development, participation, and long-term welfare must guide EAO's actions.

EAO shall ensure that child-related safeguarding concerns are handled with special care, age-appropriate communication, confidentiality, sensitivity, and respect for the child's views according to their age and maturity.

Where safe and appropriate, parents, caregivers, child protection actors, or competent authorities may be involved. However, EAO shall not involve any person if doing so may place the child at further risk, expose the child to retaliation, or compromise confidentiality.

5.4 Protection from Child Abuse

EAO strictly prohibits all forms of child abuse. Child abuse may include physical abuse, sexual abuse, emotional or psychological abuse, neglect, exploitation, child labor, harmful discipline, online abuse, unsafe communication, trafficking, forced marriage, harmful traditional practices, or exposing a child to dangerous or degrading situations.

EAO staff, volunteers, partners, contractors, suppliers, and representatives must never hit, physically punish, humiliate, threaten, sexually exploit, emotionally harm, neglect, use degrading language, expose, manipulate, or take advantage of any child.

Any sexual activity with a child is strictly prohibited, regardless of consent, local practice, perceived age, or mistaken belief about the child's age.

5.5 Protection from Abuse of Vulnerable Adults

EAO strictly prohibits all forms of abuse, exploitation, neglect, discrimination, harassment, coercion, humiliation, violence, intimidation, or misuse of power against vulnerable adults.

Vulnerable adults must be treated as rights-holders with dignity, agency, and decision-making capacity. Staff and representatives must not assume that a vulnerable adult is unable to make decisions simply because of age, disability, illness, poverty, displacement, trauma, or dependency.

EAO shall support vulnerable adults to access information, express their views, give informed consent, report concerns safely, and receive services without exploitation, discrimination, or pressure.

5.6 Prevention of Sexual Exploitation and Abuse Against Children and Vulnerable Adults

EAO maintains zero tolerance for sexual exploitation and abuse involving children and vulnerable adults. Staff and representatives must never use their position, authority, resources, project role, transport, referral power, beneficiary selection role, or access to services to seek sex, sexual favors, relationships, personal benefit, or control over any child or vulnerable adult.

It is strictly prohibited to exchange money, aid, employment, training opportunities, protection, documents, services, transport, shelter, school support, medical support, food, cash assistance, referrals, or any project benefit for sex, sexual favors, companionship, silence, loyalty, or personal advantage.

Children and vulnerable adults must never be made to feel that EAO assistance depends on personal relationships, private contact, gifts, silence, obedience, or favors.

5.7 Safe Interaction with Children and Vulnerable Adults

EAO personnel and representatives must maintain professional boundaries at all times when interacting with children and vulnerable adults. Interactions must be respectful, transparent, appropriate, and connected to legitimate program purposes.

Staff and representatives shall not spend unnecessary time alone with a child or vulnerable adult in private spaces. Where one-to-one interaction is necessary for protection, health, counselling, referral, assessment, or case management purposes, it must take place in a safe, visible, professional, and culturally appropriate setting, with proper consent and safeguards.

Staff and representatives must avoid favoritism, secret communication, inappropriate gifts, private visits, unnecessary physical contact, personal relationships, emotional dependency, or conduct that may create confusion, fear, shame, pressure, exploitation, or unsafe power dynamics.

5.8 Safe Physical Contact

Physical contact with children and vulnerable adults must be appropriate, respectful, culturally sensitive, necessary, and non-exploitative. Physical contact must never be sexual, humiliating, aggressive, punitive, secretive, or forced.

Staff and representatives must avoid unnecessary physical contact. Where physical contact is necessary to provide assistance, first aid, mobility support, protection, or comfort, it must be done respectfully, with consent where possible, and in a manner that protects dignity and safety.

Any physical punishment, harmful restraint, forced handling, or degrading treatment is strictly prohibited.

5.9 Safe Communication and Digital Contact

EAO personnel and representatives must communicate with children and vulnerable adults in a professional, respectful, transparent, and safeguarding-sensitive manner. Communication must be related to legitimate program purposes and must not create dependency, secrecy, manipulation, fear, or exploitation.

Private communication with children through personal phones, social media, messaging applications, or unofficial platforms should be avoided unless formally authorized for program purposes and supported by safeguarding measures.

Staff and representatives must not send, request, receive, store, or share inappropriate messages, images, videos, personal information, sexual content, degrading language, threats, insults, or private communication that may place children or vulnerable adults at risk.

5.10 Safe Photos, Videos, Stories, and Case Documentation

EAO shall ensure that photos, videos, stories, interviews, case studies, testimonials, and personal data involving children and vulnerable adults are collected and used safely, respectfully, and only with informed consent.

For children, consent must be obtained from a parent or caregiver where safe and required, and the child's assent should also be sought according to age and understanding.

Photos, videos, and stories must not expose children or vulnerable adults to stigma, shame, retaliation, identification, exploitation, discrimination, or further harm. EAO shall avoid publishing names, exact locations, case details, disability details, survivor details, or sensitive information that may identify or endanger a child or vulnerable adult.

5.11 Safe Recruitment and Screening

EAO shall apply safe recruitment practices for any position involving contact with children, vulnerable adults, communities, or sensitive information. This may include reference checks, identity verification, safeguarding interview questions, review of employment history, code of conduct signing, safeguarding orientation, probation monitoring, and supervision.

No person shall be recruited, contracted, deployed, or allowed to represent EAO if there is credible information indicating that they may pose a safeguarding risk to children, vulnerable adults, staff, partners, or communities.

All staff, volunteers, interns, consultants, contractors, and representatives must understand that working with EAO is conditional on compliance with safeguarding and PSEA standards.

5.12 Risk Assessment in Programs Involving Children and Vulnerable Adults

EAO shall identify and manage safeguarding risks in all programs involving children and vulnerable adults. Risk assessment should be conducted during project design, beneficiary selection, field visits, distributions, trainings, home visits, school-based activities, health

services, protection referrals, livelihood activities, disability inclusion work, community mobilization, monitoring, evaluation, research, and communication activities.

Higher-risk activities shall require stronger safeguards. These may include child participation activities, case referrals, cash or aid distribution, transport support, home-based services, overnight travel, data collection, photography, psychosocial support, disability services, GBV-related activities, and activities involving unaccompanied or separated children.

Risk assessment must consider location, staff conduct, community power dynamics, gender risks, disability access, transport safety, privacy, data protection, reporting channels, referral options, and emergency response.

5.13 Safe Program Design and Implementation

EAO shall design and implement programs in a way that reduces safeguarding risks and promotes safe participation. Children and vulnerable adults should be able to participate without fear, exploitation, discrimination, stigma, or unsafe exposure.

Program activities must be organized in safe locations, at appropriate times, with adequate supervision, accessible facilities, safe transport arrangements where needed, gender-sensitive measures, disability-inclusive communication, and clear reporting options.

Staff and representatives must ensure that selection of beneficiaries, access to services, referrals, and project benefits are fair, transparent, documented, and free from favoritism, discrimination, exploitation, or personal conditions.

5.14 Safe Transport, Travel, and Field Movement

When EAO provides or arranges transport for children or vulnerable adults, safety and dignity must be prioritized. Transport arrangements must be authorized, documented where required, and appropriate for the person’s age, gender, disability, protection needs, and context.

EAO staff and representatives should avoid transporting a child alone unless there is an emergency or approved protection-related reason. Where transport is necessary, safeguards should include supervisor approval, caregiver consent where applicable, safe routing, appropriate accompaniment, and documentation.

Transport must never be used as an opportunity for exploitation, harassment, private contact, intimidation, or abuse.

5.15 Safe Access to Assistance and Services

EAO shall ensure that children and vulnerable adults have safe, fair, and dignified access to assistance and services. No child or vulnerable adult shall be required to provide sex, money, labor, loyalty, political support, private service, personal favors, gifts, silence, or any benefit in exchange for EAO assistance.

Services must be delivered without discrimination, favoritism, humiliation, coercion, or exclusion. Staff and representatives must clearly communicate that EAO assistance is free from sexual, financial, social, or personal conditions.

5.16 Participation, Voice, and Informed Choice

EAO shall respect the right of children and vulnerable adults to be heard, to participate safely, and to express concerns, needs, preferences, and feedback. Participation must be voluntary, informed, age-appropriate, disability-inclusive, and free from pressure or manipulation.

Children and vulnerable adults should receive information in formats and languages they can understand. EAO shall make reasonable efforts to adapt communication for persons with disabilities, people with limited literacy, older persons, and people facing language or communication barriers.

5.17 Reporting Concerns Involving Children and Vulnerable Adults

All EAO personnel and representatives have a duty to report any concern, suspicion, allegation, disclosure, or incident involving harm or risk of harm to a child or vulnerable adult.

Reports must be made through approved EAO reporting channels as soon as possible. Staff and representatives must not ignore, delay, conceal, investigate informally, mediate privately, or attempt to resolve safeguarding concerns outside the approved procedure.

Concerns involving immediate danger, sexual abuse, severe harm, child protection risk, or serious exploitation must be treated as urgent and escalated without delay.

5.18 Response to Safeguarding Concerns

EAO shall respond to concerns involving children and vulnerable adults in a timely, safe, confidential, child-sensitive, survivor-centered, disability-inclusive, and risk-informed manner.

Immediate response may include safety planning, medical referral, psychosocial support, child protection referral, legal support, disability-inclusive support, temporary separation from the alleged perpetrator, management action, and other steps necessary to prevent further harm.

The safety and dignity of the affected person shall take priority over organizational reputation, personal relationships, community pressure, or informal settlement.

5.19 Referral Pathways and Support Services

EAO shall maintain and update referral pathways for services relevant to children and vulnerable adults. These may include child protection, GBV response, medical care, psychosocial support, legal assistance, police or justice services where appropriate, disability support, shelter, family tracing, case management, protection actors, and community-based support systems.

Referral must be made safely, confidentially, and with informed consent, except where there is an immediate risk of serious harm, mandatory reporting obligation, or child protection requirement.

EAO shall not promise services that it cannot provide. Staff must explain available options honestly and support affected persons to access appropriate services where possible.

5.20 Confidentiality and Data Protection

Information about children and vulnerable adults must be handled with strict confidentiality. Personal data, case files, photos, videos, consent forms, disability information, medical information, survivor information, family details, and complaint records must be securely stored and accessed only by authorized persons.

Information must only be shared on a need-to-know basis for protection, referral, case management, investigation, legal obligation, donor reporting, or management decision-making.

Unauthorized disclosure of information involving children or vulnerable adults is a serious violation and may result in disciplinary action.

5.21 Protection from Retaliation, Stigma, and Further Harm

EAO shall protect children, vulnerable adults, complainants, witnesses, caregivers, staff, and community members who report or support safeguarding concerns from retaliation, intimidation, stigma, blame, threats, exclusion, or further harm.

EAO shall take action to reduce risks that may arise after reporting, including community pressure, family conflict, staff retaliation, partner retaliation, exposure of identity, or loss of access to services.

5.22 Prohibition of Informal Settlement in Serious Cases

EAO shall not allow serious safeguarding concerns involving children or vulnerable adults to be resolved through informal settlement, family pressure, community mediation, compensation, forced apology, forced marriage, silence, or withdrawal of complaint.

Community, cultural, religious, family, or clan mechanisms must never replace safeguarding reporting, survivor support, child protection measures, investigation, disciplinary action, or legal obligations where required.

5.23 Roles and Responsibilities

All EAO personnel and representatives are responsible for protecting children and vulnerable adults. This includes behaving appropriately, preventing harm, identifying risks, reporting concerns, respecting confidentiality, supporting safe referrals, and cooperating with safeguarding procedures.

Managers and supervisors are responsible for ensuring that staff and volunteers understand their responsibilities, receive safeguarding orientation, follow the code of conduct, apply safe program practices, and respond promptly to concerns.

Safeguarding focal persons are responsible for supporting awareness, receiving reports, coordinating safe referrals, advising management, maintaining confidential records, and supporting implementation of this policy according to their role and authority.

EAO leadership is responsible for ensuring that adequate systems, resources, accountability, training, partnerships, and oversight are in place to protect children and vulnerable adults.

5.24 Partnership, Contractors, and Third-Party Responsibilities

EAO shall require partners, consortium members, contractors, suppliers, consultants, service providers, and sub-grantees who work with or around children and vulnerable adults to comply with safeguarding and PSEA standards.

Safeguarding expectations should be included in partnership agreements, contracts, procurement documents, supplier arrangements, training sessions, and orientation where relevant.

EAO may suspend, review, terminate, or refuse collaboration with any partner, contractor, supplier, or third party that creates risk, violates safeguarding standards, refuses to report concerns, or fails to take appropriate protective action.

5.25 Training and Awareness

EAO shall provide safeguarding and PSEA awareness to staff, volunteers, interns, consultants, partners, and relevant representatives. Training should include child safeguarding, protection of vulnerable adults, PSEA, code of conduct, reporting channels, survivor-centered response, confidentiality, safe communication, disability inclusion, and prevention of retaliation.

Community awareness activities should inform children, vulnerable adults, caregivers, and communities about their rights, expected staff behavior, free access to services, prohibited conduct, and safe ways to report concerns.

5.26 Monitoring and Compliance

EAO shall monitor implementation of child and vulnerable adult protection standards across programs, offices, field sites, and partnerships. Monitoring may include supervision, field observation, feedback review, training records, risk assessments, complaint analysis, partner review, and safeguarding learning sessions.

Any gaps identified must be addressed through corrective action, additional training, improved procedures, stronger supervision, or management decisions.

5.27 Disciplinary and Corrective Action

Any violation of this section may result in disciplinary or corrective action. Depending on the seriousness of the violation, measures may include verbal or written warning, mandatory training, suspension, reassignment, removal from activities, termination of employment or contract, reporting to donors or partners, referral to competent authorities, or other lawful action.

EAO shall ensure that disciplinary action is fair, proportionate, confidential, and based on available evidence, while prioritizing the protection of children, vulnerable adults, survivors, complainants, and witnesses.

5.28 Review and Continuous Improvement

EAO shall review its child and vulnerable adult protection measures regularly to ensure that they remain effective, practical, inclusive, and aligned with donor expectations, Ethiopian law, humanitarian standards, child protection principles, disability inclusion standards, and organizational learning.

Lessons learned from incidents, complaints, feedback, field monitoring, partner engagement, and community input shall be used to strengthen EAO's safeguarding systems and reduce future risks.

6. Disability Inclusion and Protection of Persons with Disabilities

East Action Organization (EAO) is committed to ensuring that persons with disabilities are protected, respected, included, and able to participate safely and equally in all EAO programs, services, employment opportunities, partnerships, consultations, communication activities, complaint systems, and community engagement. EAO recognizes that persons with disabilities may face increased safeguarding risks because of physical, communication, social, economic, institutional, and attitudinal barriers, including dependency on caregivers, exclusion from information, discrimination, stigma, isolation, inaccessible services, and abuse of power.

This section establishes EAO's standards for disability-inclusive safeguarding and protection of persons with disabilities. It applies to all EAO board members, management, staff, volunteers, consultants, interns, partners, contractors, suppliers, service providers, visitors, community representatives, and any person acting for or on behalf of EAO.

6.1 Commitment to Disability Inclusion

EAO shall ensure that disability inclusion is integrated into safeguarding, PSEA, program design, implementation, monitoring, recruitment, communication, complaint handling, referral pathways, and partnership arrangements.

Persons with disabilities shall be treated as rights-holders with dignity, agency, voice, and equal value. EAO shall not treat disability as a reason for exclusion, pity, discrimination, silence, dependency, or reduced participation.

EAO shall promote the meaningful participation of persons with disabilities in decisions that affect them, including program planning, risk assessment, feedback systems, accessibility measures, and safeguarding improvement.

6.2 Equal Protection from Abuse, Exploitation, and Neglect

EAO strictly prohibits all forms of abuse, exploitation, neglect, discrimination, harassment, bullying, intimidation, humiliation, violence, unsafe communication, denial of services, and misuse of power against persons with disabilities.

This includes physical abuse, sexual exploitation and abuse, emotional abuse, psychological harm, financial exploitation, neglect, denial of reasonable accommodation, forced dependency, unsafe restraint, forced isolation, and any conduct that undermines dignity, safety, privacy, or participation.

Persons with disabilities must have equal access to protection, assistance, justice, referral services, safeguarding response, and complaint mechanisms.

6.3 Recognition of Specific Safeguarding Risks

EAO recognizes that persons with disabilities may face specific safeguarding risks, including but not limited to:

a. Dependence on caregivers, service providers, staff, or family members for mobility, communication, care, information, or access to assistance.

b. Communication barriers that make it difficult to report abuse, understand rights, or access complaint channels.

c. Physical barriers that prevent access to offices, distribution sites, training venues, health services, complaint desks, or safe spaces.

d. Social stigma, discrimination, isolation, exclusion, or harmful beliefs about disability.

e. Increased risk of sexual exploitation, abuse, harassment, neglect, or violence.

f. Denial of services, project benefits, referrals, or participation because of disability.

g. Misuse of disability status, personal information, photos, stories, or medical details without consent.

h. Lack of accessible information, sign language, visual aids, simplified language, or trusted communication support.

i. Being ignored, spoken over, or having decisions made by others without informed consent.

j. Increased risk during distributions, transport, home visits, emergency response, data collection, and case referrals.

EAO shall consider these risks in all safeguarding assessments and program activities.

6.4 Accessibility of Safeguarding Information

EAO shall make reasonable efforts to ensure that safeguarding and PSEA information is accessible to persons with different types of disabilities, including physical, sensory, intellectual, psychosocial, and communication-related disabilities.

Safeguarding information should be provided in formats and languages that people can understand. This may include simple language, verbal explanation, local language translation, visual materials, accessible meetings, sign language support where available, caregiver-supported communication where safe, or other reasonable accommodations.

Information shall include the right to protection, expected behavior of EAO staff and representatives, prohibited conduct, free access to services, complaint channels, referral options, confidentiality, and protection from retaliation.

6.5 Accessible Complaint and Feedback Channels

EAO shall ensure that persons with disabilities can safely and confidentially report safeguarding concerns, complaints, feedback, abuse, exploitation, harassment, discrimination, or barriers to access.

Complaint and feedback mechanisms should be physically accessible, easy to understand, confidential, and available through different channels. These may include in-person reporting, telephone reporting, trusted focal persons, complaint boxes, community feedback structures, written forms, verbal reporting, partner channels, or other safe methods.

EAO shall not rely on only one complaint method if that method excludes persons with disabilities. Reporting channels should consider mobility barriers, hearing barriers, visual barriers, literacy barriers, communication barriers, fear of retaliation, and dependency on caregivers or service providers.

6.6 Reasonable Accommodation

EAO shall provide reasonable accommodation where needed to support persons with disabilities to access programs, services, information, reporting channels, referrals, employment opportunities, training, and safeguarding procedures.

Reasonable accommodation may include accessible venues, adjusted communication methods, additional time, support persons where safe, transport consideration, seating arrangements, sign language support where possible, simplified explanations, home-based follow-up where appropriate and safe, or adaptation of forms and processes.

Failure to provide reasonable accommodation without justification may result in exclusion and may increase safeguarding risk.

6.7 Informed Consent and Supported Decision-Making

EAO shall respect the right of persons with disabilities to make their own decisions and provide informed consent. Disability shall not be assumed to remove a person's capacity to decide.

Staff and representatives must explain information clearly and respectfully, using accessible communication methods. Where a person requires support to understand information or communicate a decision, supported decision-making may be used, provided it is safe, respectful, and does not expose the person to pressure, manipulation, or conflict of interest.

Consent must never be obtained through force, fear, deception, dependency, pressure, or exchange of benefits.

6.8 Protection from Sexual Exploitation and Abuse

EAO maintains zero tolerance for sexual exploitation and abuse involving persons with disabilities. Staff and representatives must never use disability, dependency, communication barriers, poverty, isolation, or access to services to exploit, manipulate, coerce, or abuse any person.

It is strictly prohibited to exchange aid, money, services, assistive devices, referrals, employment, transport, training opportunities, medical support, protection, or project benefits for sex, sexual favors, silence, loyalty, companionship, or personal advantage.

EAO shall pay special attention to the risk of SEA where persons with disabilities depend on staff, partners, caregivers, drivers, service providers, or community representatives for access to assistance.

6.9 Protection from Discrimination and Exclusion

EAO prohibits discrimination against persons with disabilities in all programs, employment, partnerships, services, referrals, distributions, training, communication, decision-making, and community engagement.

Persons with disabilities must not be excluded because they are perceived as difficult to support, costly to include, unable to participate, or less important than others. EAO shall make reasonable efforts to remove barriers and promote equal access.

Selection of beneficiaries, employment opportunities, volunteer participation, training invitations, service referrals, and community consultations must be fair, transparent, and disability-inclusive.

6.10 Safe Communication, Images, and Storytelling

EAO shall ensure that all communication involving persons with disabilities is dignified, respectful, consent-based, and free from stigma, pity, shame, exploitation, or harmful stereotypes.

Photos, videos, stories, testimonials, case studies, social media posts, and reports must not portray persons with disabilities as helpless, passive, inferior, or objects of charity. Communication materials must respect privacy, informed consent, dignity, and safety.

EAO shall not disclose disability status, medical details, personal stories, case information, exact location, or images without informed consent and appropriate safeguarding review.

6.11 Safe Program Design and Participation

EAO shall design programs in ways that enable safe and meaningful participation of persons with disabilities. Program planning should identify accessibility barriers, protection risks, communication needs, transport challenges, privacy concerns, and referral gaps.

Activities should be organized in accessible and safe venues where possible. Timing, seating, communication methods, registration processes, distribution arrangements, complaint channels, and transport plans should consider the needs of persons with disabilities.

Persons with disabilities should be consulted directly about what makes participation safe, accessible, and dignified.

6.12 Disability-Inclusive Risk Assessment

Safeguarding risk assessments shall consider disability-related risks in all relevant programs and activities. This includes risks linked to exclusion, inaccessible venues, unsafe transport, inaccessible reporting channels, caregiver dependency, communication barriers, privacy concerns, abuse of power, exploitation during distributions, and exposure through media or data collection.

Higher-risk activities involving persons with disabilities shall require stronger safeguards, such as accessible reporting options, additional supervision, safe referral planning, informed consent procedures, staff briefing, transport safeguards, and confidentiality controls.

6.13 Safe Distribution and Service Delivery

EAO shall ensure that distributions, services, trainings, referrals, and community activities are organized in a way that protects the dignity and safety of persons with disabilities.

Distribution and service points should be accessible, orderly, respectful, and free from humiliation, pushing, discrimination, favoritism, or exploitation. Staff and volunteers must not demand payment, favors, private contact, loyalty, political support, or personal benefit in exchange for assistance.

Where persons with disabilities require support to collect or access assistance, EAO shall ensure that arrangements are safe, transparent, and do not expose the person to exploitation or diversion of assistance.

6.14 Safe Transport and Mobility Support

Where EAO arranges transport, mobility support, assistive devices, referrals, or accompaniment for persons with disabilities, safety and dignity must be prioritized.

Transport arrangements should be appropriate to the person's mobility, gender, age, protection needs, and context. Staff and representatives must avoid unnecessary private or isolated transport arrangements that may create safeguarding risk.

Assistive devices, mobility support, or transport services must never be used to manipulate, exploit, threaten, favor, or control persons with disabilities.

6.15 Confidentiality and Data Protection

EAO shall protect disability-related information with strict confidentiality. Disability status, medical information, psychosocial information, service needs, case details, photos, videos, personal data, and referral records must only be collected where necessary and used for legitimate program, safeguarding, or referral purposes.

Information must be stored securely and shared only with authorized persons on a need-to-know basis. Unauthorized disclosure of disability-related information may expose persons to stigma, discrimination, retaliation, or harm and shall be treated as a serious breach.

6.16 Referral Pathways for Persons with Disabilities

EAO shall identify and maintain referral options that are accessible and relevant to persons with disabilities. These may include health services, rehabilitation services, psychosocial support, assistive device providers, protection actors, legal support, GBV services, child protection services, livelihood support, education services, and specialized disability organizations.

Referral must be based on informed consent, confidentiality, safety, and respect for the person's choices. Where referral services are not accessible, EAO should document the gap and seek reasonable ways to support access or advocate for inclusion.

6.17 Protection from Retaliation and Caregiver-Related Risk

EAO recognizes that some persons with disabilities may be at risk of retaliation, pressure, neglect, or further harm if they report abuse, especially when the alleged perpetrator is a caregiver, family member, service provider, staff member, partner, or person controlling access to assistance.

EAO shall assess retaliation and dependency risks carefully and take reasonable steps to protect the person's safety, privacy, and access to support.

Reports must not be automatically shared with caregivers or family members if doing so may place the person at risk.

6.18 Staff Conduct and Professional Boundaries

EAO staff, volunteers, partners, and representatives must maintain professional boundaries when working with persons with disabilities. They must not create dependency, favoritism, private relationships, secret communication, emotional manipulation, financial exploitation, or inappropriate personal contact.

Staff and representatives must not speak disrespectfully, make jokes, use offensive language, touch assistive devices without permission, move a person without consent, ignore the person's own voice, or make decisions on their behalf without proper consent and support.

6.19 Training and Awareness on Disability-Inclusive Safeguarding

EAO shall provide staff, volunteers, partners, and relevant representatives with awareness on disability inclusion, disability rights, accessible communication, safeguarding risks, respectful conduct, informed consent, safe reporting, referral pathways, and protection from SEA and discrimination.

Training should address harmful attitudes, stereotypes, communication barriers, reasonable accommodation, and how to safely respond when a person with disability reports a concern.

6.20 Partnership with Disability Actors

EAO shall seek collaboration, where relevant, with organizations of persons with disabilities, disability-focused service providers, protection actors, government offices, community structures, and specialized partners to strengthen disability-inclusive safeguarding.

Partnership and referral arrangements should respect confidentiality, consent, safety, and the leadership and voice of persons with disabilities.

6.21 Responsibilities of Staff and Representatives

All EAO personnel and representatives are responsible for ensuring that persons with disabilities are treated with dignity, respect, equality, and protection. This includes identifying barriers, preventing abuse, reporting concerns, ensuring accessible communication, respecting consent, protecting confidentiality, and supporting safe referrals.

Managers and safeguarding focal persons are responsible for ensuring that disability inclusion is considered in planning, risk assessment, complaint handling, training, monitoring, and response.

EAO leadership is responsible for promoting disability-inclusive systems, allocating reasonable support where possible, and ensuring that disability protection is treated as part of organizational safeguarding accountability.

6.22 Monitoring, Learning, and Improvement

EAO shall monitor whether persons with disabilities can access programs, complaint systems, safeguarding information, referrals, and participation opportunities safely and equally.

Feedback from persons with disabilities, caregivers where appropriate and safe, staff, partners, and community members shall be used to improve accessibility, reduce safeguarding risks, strengthen reporting channels, and improve inclusion.

6.23 Corrective and Disciplinary Action

Any abuse, exploitation, harassment, discrimination, neglect, unsafe communication, breach of confidentiality, denial of reasonable accommodation, misuse of power, or retaliation involving persons with disabilities may result in corrective or disciplinary action.

Depending on the seriousness of the violation, measures may include warning, mandatory training, suspension, reassignment, removal from activities, contract termination, employment termination, partner review, donor notification, referral to authorities, or other lawful action.

6.24 Minimum Disability-Inclusive Safeguarding Standard

At minimum, EAO shall ensure that persons with disabilities are informed of their rights, included in programs without discrimination, able to access complaint channels, protected from abuse and exploitation, supported to give informed consent, treated with dignity, and referred safely when protection or support needs arise.

Disability inclusion is not optional. It is a core safeguarding responsibility and an essential part of EAO’s commitment to safe, accountable, inclusive, and rights-based programming

7. Prevention of Sexual Exploitation and Abuse, PSEA

East Action Organization (EAO) is fully committed to preventing sexual exploitation and abuse in all its programs, operations, partnerships, offices, field activities, service delivery, humanitarian response, development work, community engagement, communications, and institutional relationships. EAO recognizes that sexual exploitation and abuse are serious violations of human dignity, trust, professional ethics, organizational values, humanitarian principles, donor standards, and the rights of affected populations.

This section establishes EAO’s minimum standards, rules, responsibilities, and procedures for preventing, reporting, responding to, and addressing Sexual Exploitation and Abuse, SEA. It applies to all EAO board members, senior management, staff, volunteers, interns, consultants, contractors, suppliers, visitors, partners, consortium members, community mobilizers, service

providers, drivers, enumerators, trainers, temporary workers, and any person acting for or on behalf of EAO.

7.1 Definition of Sexual Exploitation and Abuse

Sexual exploitation means any actual or attempted abuse of a position of vulnerability, power, trust, dependency, or unequal authority for sexual purposes. It includes benefiting financially, socially, politically, professionally, personally, or materially from the sexual exploitation of another person.

Sexual abuse means any actual or threatened physical intrusion of a sexual nature, whether by force or under unequal, coercive, manipulative, deceptive, or exploitative conditions.

Sexual exploitation and abuse may occur in person, through digital communication, during field activities, in offices, during transport, in accommodation, during distributions, through referral processes, in community settings, or in any situation connected to EAO's work.

7.2 Zero Tolerance for Sexual Exploitation and Abuse

EAO adopts a strict zero-tolerance approach to sexual exploitation and abuse. No form of SEA shall be accepted, ignored, excused, hidden, minimized, informally settled, or tolerated.

Any allegation, suspicion, disclosure, complaint, or incident of SEA must be taken seriously, reported through approved channels, assessed promptly, handled confidentially, and responded to in a survivor-centered, safe, and accountable manner.

Zero tolerance applies regardless of the role, seniority, contract type, social status, professional background, partnership position, personal relationship, or length of service of the person involved.

7.3 Prohibited Sexual Conduct

EAO strictly prohibits the following conduct:

a. Sexual exploitation or sexual abuse of any beneficiary, community member, child, vulnerable adult, person with disability, refugee, internally displaced person, staff member, volunteer, partner, or any person connected to EAO's work.

b. Any sexual activity with a child under the age of 18, regardless of local law, consent, perceived maturity, marital status, appearance, or mistaken belief about age.

c. Exchange of money, employment, goods, services, protection, transport, training opportunities, project benefits, referrals, documents, shelter, food, cash assistance, medical support, education support, or any other benefit for sex, sexual favors, companionship, silence, loyalty, or personal advantage.

d. Requesting, demanding, pressuring, encouraging, or accepting sexual favors from any person in exchange for assistance, employment, selection, referral, protection, or service.

e. Using power, authority, project role, professional position, access to resources, or decision-making influence to start or maintain an exploitative sexual relationship.

f. Sexual harassment, unwanted sexual comments, sexual jokes, gestures, messages, images, touching, stalking, intimidation, or any sexual behavior that creates fear, humiliation, discomfort, or a hostile environment.

g. Sexual contact with a person who is unable to give free and informed consent because of age, disability, intoxication, trauma, fear, coercion, dependency, language barrier, unequal power, or other vulnerability.

h. Sharing, requesting, storing, producing, or distributing sexual images, videos, messages, or content involving beneficiaries, children, staff, volunteers, partners, or community members.

i. Retaliation, threats, intimidation, pressure, bribery, or manipulation against a survivor, complainant, witness, or person who reports or supports an SEA concern.

j. Any attempt to hide, delay, discourage, informally settle, mediate, or silence a report of sexual exploitation or abuse.

7.4 Sexual Activity with Children

Sexual activity with any person under the age of 18 is strictly prohibited. This rule applies regardless of the age of majority or age of consent under local law, the child's apparent age, the child's marital status, the child's consent, or the staff member's belief about the child's age.

Mistaken belief about a child's age is not a defense. Any concern involving sexual activity with a child must be treated as a serious safeguarding incident and reported immediately through approved procedures.

7.5 Exchange of Assistance for Sex or Sexual Favors

EAO strictly prohibits the exchange of assistance, services, employment opportunities, training opportunities, referrals, protection, aid, cash, food, transport, documents, shelter, medical support, school support, livelihood support, or any other benefit for sex or sexual favors.

All EAO assistance and services must be provided freely, fairly, transparently, and without sexual, financial, political, social, personal, or private conditions.

No beneficiary, community member, staff member, volunteer, partner, or vulnerable person shall be made to believe that access to EAO support depends on a sexual relationship, silence, loyalty, private contact, gifts, or personal favors.

7.6 Abuse of Power and Position

EAO personnel and representatives must never misuse their position, authority, influence, project role, resources, information, access to beneficiary lists, recruitment power, referral role, transport arrangements, or decision-making power for sexual purposes.

Sexual relationships involving unequal power may create safeguarding risks, even where consent appears to be given. Staff and representatives must avoid relationships that may involve dependency, coercion, favoritism, conflict of interest, reputational risk, or exploitation of vulnerability.

7.7 Protection of Beneficiaries and Affected Populations

EAO recognizes that beneficiaries and affected populations may be at increased risk of SEA because of poverty, displacement, crisis, disability, trauma, lack of information, reliance on aid, social exclusion, or unequal power relationships with aid workers and service providers.

EAO shall ensure that communities are informed that all services and assistance are free from sexual demands, personal favors, exploitation, abuse, discrimination, and retaliation.

Communities shall be informed about expected staff behavior, prohibited conduct, reporting channels, confidentiality, and available referral services.

7.8 Prevention Measures

EAO shall integrate PSEA prevention into all organizational systems and programs. Prevention measures shall include:

a. Clear policy commitments and leadership accountability.

b. Code of Conduct signing by staff, volunteers, consultants, partners, contractors, suppliers, and representatives.

c. Safe recruitment, reference checks, and screening procedures.

d. PSEA orientation during induction and onboarding.

e. Regular training and awareness sessions.

f. Community awareness on rights, free assistance, prohibited conduct, and reporting channels.

g. Safeguarding and PSEA risk assessment in program design and implementation.

h. Safe and accessible complaint and feedback mechanisms.

i. Confidential reporting and whistleblowing systems.

j. Survivor-centered referral pathways.

k. Partner, contractor, and supplier safeguarding commitments.

l. Monitoring, supervision, and corrective action.

m. Safe communication, data protection, and responsible use of images and stories.

7.9 PSEA Risk Assessment in Programs

EAO shall identify and manage SEA risks in all programs and activities. Risk assessment should be conducted during project design, implementation, monitoring, evaluation, field movement, distributions, beneficiary selection, service delivery, case referral, community mobilization, data collection, research, communication, and partnership arrangements.

Higher-risk activities may include cash or food distribution, shelter support, transport services, home visits, case management, protection referrals, GBV-related activities, disability inclusion activities, work with children, recruitment of volunteers, field travel, overnight accommodation, and activities involving persons with high dependency on assistance.

Risk assessments should consider power imbalance, staff access to beneficiaries, privacy, complaint channels, gender dynamics, disability access, transport safety, selection criteria, community information, referral options, and staff supervision.

7.10 Safe Recruitment and Staff Screening for PSEA

EAO shall apply safe recruitment measures to reduce the risk of hiring or engaging individuals who may pose SEA risks. Recruitment processes may include safeguarding questions during interviews, reference checks, identity verification, review of conduct history where possible, code of conduct signing, probation monitoring, and safeguarding induction.

Any person who refuses to comply with safeguarding and PSEA standards, refuses to sign the Code of Conduct, or presents credible safeguarding risk shall not be engaged in EAO work.

7.11 PSEA Responsibilities of Staff and Representatives

All EAO personnel and representatives are responsible for preventing SEA and upholding safe conduct. This includes:

a. Treating all people with dignity and respect.

b. Maintaining professional boundaries.

c. Avoiding exploitative relationships.

d. Not misusing power or project resources.

e. Reporting SEA concerns immediately.

f. Protecting confidentiality.

g. Cooperating with safeguarding procedures.

h. Supporting survivor-centered response.

i. Avoiding retaliation against reporters, survivors, or witnesses.

j. Participating in PSEA training and awareness activities.

Failure to report a known or suspected SEA concern may be treated as a serious breach of this policy.

7.12 Responsibilities of Managers and Leadership

EAO leadership, board members, senior management, managers, and safeguarding focal persons have a special responsibility to prevent and respond to SEA. They must create a safe organizational culture, model appropriate conduct, ensure staff awareness, provide reporting options, respond to concerns promptly, protect complainants and survivors, and take corrective action.

Managers must not discourage reporting, protect alleged perpetrators, delay action, blame survivors, force informal settlement, or prioritize organizational reputation over survivor safety and dignity.

7.13 Community Awareness on PSEA

EAO shall ensure that communities and affected populations understand their rights and EAO's PSEA commitments. Community awareness should communicate that:

a. EAO assistance and services are free.

b. No one may demand sex, favors, money, gifts, loyalty, or private services in exchange for assistance.

c. Sexual exploitation and abuse are prohibited.

d. Children must be protected from sexual abuse and exploitation.

e. Reports can be made safely and confidentially.

f. Retaliation against reporters is prohibited.

g. Survivors may access referral support where available.

Community awareness should be delivered in appropriate languages, accessible formats, and culturally sensitive ways without compromising protection standards.

7.14 Accessible and Confidential Reporting Channels

EAO shall maintain safe, accessible, confidential, and inclusive reporting channels for SEA concerns. Reports may be made by survivors, witnesses, staff, volunteers, partners, community members, family members, or any person who becomes aware of a concern.

Reporting channels may include safeguarding focal persons, supervisors, senior management, complaint boxes, telephone contacts, written complaint forms, community feedback mechanisms, partner channels, whistleblowing channels, or any other approved safe method.

Reporting options must consider women, children, persons with disabilities, refugees, IDPs, people with limited literacy, older persons, people facing language barriers, and people who may fear retaliation.

7.15 Duty to Report SEA Concerns

All EAO staff and representatives have a duty to report SEA concerns as soon as they become aware of them. This includes actual, suspected, alleged, attempted, or disclosed SEA.

Staff and representatives must not investigate SEA concerns on their own, confront the alleged perpetrator without authorization, promise secrecy, collect unnecessary details, pressure the survivor, or attempt informal resolution.

Reports must be made through approved procedures and handled only by authorized persons.

7.16 Survivor-Centered Response

EAO shall respond to SEA concerns using a survivor-centered approach. This means prioritizing the survivor’s safety, dignity, rights, wishes, privacy, and wellbeing in all decisions.

Survivors must be treated with respect, believed, listened to, protected from further harm, and supported to make informed decisions. EAO shall not blame survivors, force them to report to authorities, expose their identity, pressure them to participate in investigations, or deny them services because of a complaint.

7.17 Immediate Safety and Referral Support

When an SEA concern is reported, EAO shall assess immediate safety and support needs. Where appropriate and available, survivors may be referred to medical care, psychosocial support, GBV services, legal assistance, police or justice services, child protection services, disability support, shelter, protection actors, or other relevant services.

Referral shall be made with informed consent, except where mandatory reporting, child protection, or life-saving obligations apply. EAO shall explain referral options honestly and shall not promise services it cannot provide.

7.18 Confidentiality and Need-to-Know Information Sharing

All SEA reports and related information must be handled with strict confidentiality. Information shall only be shared on a need-to-know basis with authorized persons involved in protection, referral, case management, investigation, donor reporting, legal compliance, or management action.

Unauthorized disclosure of survivor information, complaint details, witness information, child information, investigation records, or case files is strictly prohibited and may result in disciplinary action.

7.19 Protection from Retaliation

EAO shall protect survivors, complainants, witnesses, whistleblowers, staff, volunteers, partners, and community members who report or support SEA concerns from retaliation.

Retaliation may include threats, intimidation, dismissal, demotion, exclusion, harassment, pressure, discrimination, denial of services, community stigma, or any negative action linked to reporting.

Any retaliation shall be treated as a serious violation of this policy.

7.20 Investigation and Case Handling

SEA allegations shall be handled through fair, confidential, timely, objective, and evidence-based procedures. Investigations shall be conducted only by authorized and competent persons.

Investigation processes must protect survivors, complainants, witnesses, and affected persons from further harm. The subject of complaint shall be treated fairly, but protection and safety shall remain the priority.

EAO shall avoid unnecessary questioning of survivors and shall not require survivors to repeat their story multiple times unless necessary for protection or investigation purposes.

7.21 Disciplinary and Corrective Measures

Where SEA misconduct is confirmed or where policy violations are established, EAO shall take appropriate disciplinary or corrective action. Measures may include warning, mandatory training, suspension, reassignment, removal from activities, termination of employment or contract, termination of partnership, donor notification, referral to authorities, or other lawful action.

The seriousness of SEA means that confirmed cases may lead to dismissal, contract cancellation, and referral to relevant authorities where legally required and safe to do so.

7.22 Donor, Partner, and Legal Reporting

EAO shall comply with applicable donor, partner, contractual, and legal reporting requirements related to SEA. Reporting to donors, partners, authorities, or coordination mechanisms must be done safely, confidentially, and in a way that protects survivors, children, witnesses, and personal data.

No external reporting shall expose survivor identity or sensitive details unless legally required, consented to, or necessary for protection and handled through appropriate safeguards.

7.23 PSEA in Partnerships, Consortiums, Contractors, and Suppliers

EAO shall require partners, consortium members, contractors, suppliers, service providers, consultants, and sub-grantees to respect PSEA standards where they work with or on behalf of EAO.

PSEA expectations should be included in partnership agreements, memoranda of understanding, contracts, procurement documents, supplier agreements, and sub-grant arrangements where relevant.

EAO may suspend, review, terminate, or refuse collaboration with any partner, contractor, supplier, or representative that violates PSEA standards, fails to report concerns, obstructs investigation, or creates serious safeguarding risk.

7.24 PSEA in Recruitment, Distribution, and Beneficiary Selection

EAO shall ensure that recruitment, beneficiary selection, targeting, registration, distribution, service delivery, referral, training selection, and employment processes are transparent, fair, documented, and free from sexual exploitation and abuse.

Staff and representatives must not use beneficiary lists, selection authority, employment opportunities, or access to resources to demand sex, favors, gifts, money, loyalty, silence, or private relationships.

Any complaint related to exploitation in selection or distribution must be taken seriously and investigated through appropriate procedures.

7.25 PSEA in Digital Communication and Online Spaces

EAO personnel and representatives must maintain professional conduct in all digital communication. It is prohibited to use phones, social media, messaging applications, email, online platforms, or digital systems to sexually exploit, harass, manipulate, threaten, groom, pressure, stalk, or abuse any person.

Staff and representatives must not request, send, receive, store, or share sexual images, messages, videos, or private content involving beneficiaries, children, staff, volunteers, partners, or community members.

Digital communication involving children, vulnerable adults, or beneficiaries must be professional, necessary, authorized, and safeguarding-sensitive.

7.26 PSEA Training and Capacity Building

EAO shall provide PSEA training and awareness to staff, volunteers, interns, consultants, partners, contractors, suppliers, community mobilizers, and relevant representatives.

Training shall cover prohibited conduct, zero tolerance, power imbalance, child protection, SEA definitions, reporting obligations, survivor-centered response, confidentiality, retaliation prevention, complaint channels, referral pathways, safe communication, disability inclusion, and consequences for violations.

PSEA orientation should be provided during induction and refreshed periodically based on risk, program needs, donor requirements, and organizational learning.

7.27 Monitoring, Learning, and Improvement

EAO shall monitor the implementation of PSEA standards through supervision, field monitoring, complaint analysis, risk assessment, community feedback, training records, partner reviews, and management oversight.

Lessons from reports, incidents, near misses, community feedback, and program reviews shall be used to improve prevention, reporting, response, training, supervision, and accountability systems.

7.28 Record Keeping and Data Protection

EAO shall maintain SEA-related records securely and confidentially. Records may include reports, referral notes, consent forms, risk assessments, investigation documents, disciplinary decisions, communication logs, and case closure information.

Access to SEA records shall be restricted to authorized persons only. Records must not be stored in unsecured files, shared through informal channels, or disclosed to unauthorized staff, partners, community members, or external actors.

7.29 False or Malicious Reporting

EAO encourages all concerns to be reported in good faith. A report made honestly, even if it is not later proven, shall not result in punishment.

However, knowingly false or malicious reports made with the intention to harm another person may result in disciplinary action. This provision must never be used to discourage reporting or intimidate complainants, survivors, witnesses, or whistleblowers.

7.30 Minimum PSEA Standard

At minimum, EAO shall ensure that all personnel and representatives understand that sexual exploitation and abuse are prohibited; assistance must never be exchanged for sex or favors; sexual activity with children is prohibited; concerns must be reported; survivors must be treated with dignity and confidentiality; and violations may result in serious disciplinary, contractual, legal, or corrective action.

PSEA is a mandatory organizational responsibility and a core condition for working with, representing, partnering with, or providing services on behalf of EAO.

8. Code of Conduct

East Action Organization (EAO) requires all board members, senior management, staff, volunteers, interns, consultants, contractors, suppliers, partners, consortium members, visitors, community mobilizers, service providers, temporary workers, and any person acting for or on behalf of EAO to follow the highest standards of ethical, professional, respectful, and safe conduct.

The Code of Conduct is a mandatory part of EAO's Safeguarding and PSEA Policy Manual. It sets out the minimum behavior expected from all EAO personnel and representatives and explains conduct that is prohibited. It applies during working hours, field activities, travel, trainings, meetings, distributions, home visits, community engagement, digital communication, accommodation, official events, and any other situation where a person's behavior may affect EAO's beneficiaries, communities, staff, partners, reputation, or safeguarding responsibilities.

8.1 Purpose of the Code of Conduct

The purpose of this Code of Conduct is to ensure that all persons connected to EAO act with integrity, accountability, respect, professionalism, impartiality, and care.

This Code is intended to:

a. Prevent harm, abuse, exploitation, harassment, discrimination, neglect, and misuse of power.

b. Protect children, vulnerable adults, persons with disabilities, women, girls, refugees, internally displaced persons, host communities, staff, volunteers, and partners.

c. Strengthen safeguarding, PSEA, child protection, disability inclusion, and accountability to affected populations.

d. Guide staff and representatives on acceptable and unacceptable behavior.

e. Promote respectful workplace and community relations.

f. Prevent conflicts of interest, favoritism, corruption, retaliation, and unethical conduct.

g. Ensure that EAO assistance and services are delivered safely, fairly, transparently, and without exploitation.

h. Support timely reporting and response to safeguarding concerns.

8.2 Scope of Application

This Code applies to all EAO personnel and representatives, whether paid or unpaid, permanent or temporary, full-time or part-time, formal or informal, office-based or field-based.

It applies to conduct:

a. In EAO offices, project sites, field locations, community settings, training venues, distribution sites, vehicles, accommodation, and partner locations.

b. During official duty, travel, meetings, workshops, field visits, assessments, monitoring, research, referrals, and community outreach.

c. During digital communication, including phone calls, email, social media, messaging applications, online meetings, and online platforms.

d. Outside working hours where the conduct is connected to EAO, affects the safety or dignity of others, involves misuse of EAO authority or resources, creates safeguarding risk, or damages trust in EAO.

8.3 Core Conduct Standards

All EAO personnel and representatives shall:

a. Treat all people with dignity, respect, fairness, compassion, and non-discrimination.

b. Uphold the rights, safety, privacy, and wellbeing of children, vulnerable adults, persons with disabilities, beneficiaries, staff, volunteers, partners, and community members.

c. Maintain professional boundaries at all times.

d. Use organizational authority, resources, information, and influence responsibly.

e. Deliver services and assistance fairly, transparently, and without personal, sexual, financial, political, or social conditions.

f. Avoid any conduct that may cause harm, fear, humiliation, dependency, exclusion, stigma, or abuse.

g. Report safeguarding, PSEA, fraud, abuse, exploitation, harassment, discrimination, or ethical concerns through approved channels.

h. Cooperate with safeguarding procedures, investigations, audits, monitoring, and management actions.

i. Protect confidential information and personal data.

j. Follow EAO policies, donor requirements, partnership agreements, applicable laws, and humanitarian principles.

8.4 Respectful and Professional Behavior

All EAO personnel and representatives shall behave respectfully and professionally toward beneficiaries, community members, colleagues, volunteers, partners, government actors, donors, suppliers, and visitors.

They shall:

a. Use respectful language and avoid insults, threats, shouting, humiliation, intimidation, or degrading treatment.

b. Listen to concerns with patience and seriousness.

c. Respect cultural and religious contexts while never using culture, religion, social status, or local custom to justify abuse, exploitation, harassment, discrimination, or silence.

d. Avoid gossip, defamation, harmful rumors, hostile behavior, or actions that damage the dignity of others.

e. Avoid favoritism, unfair treatment, exclusion, or misuse of personal relationships.

f. Represent EAO in a manner that strengthens trust, professionalism, and accountability.

8.5 Prohibition of Sexual Exploitation and Abuse

All EAO personnel and representatives are strictly prohibited from engaging in sexual exploitation and abuse.

They must never:

a. Exchange money, employment, goods, services, aid, protection, referrals, documents, transport, shelter, food, cash assistance, medical support, training opportunities, or project benefits for sex, sexual favors, companionship, silence, loyalty, or any personal advantage.

b. Demand, request, pressure, encourage, or accept sexual favors from beneficiaries, staff, volunteers, partners, or community members.

c. Use their position, authority, influence, resources, or access to assistance for sexual purposes.

d. Engage in sexual activity with any child under the age of 18, regardless of consent, local law, perceived maturity, marital status, appearance, or mistaken belief about age.

e. Sexually harass, threaten, stalk, manipulate, groom, exploit, or abuse any person.

f. Use digital platforms to send, request, receive, store, or share sexual content involving beneficiaries, children, staff, volunteers, partners, or community members.

8.6 Prohibition of Sexual Harassment

EAO strictly prohibits sexual harassment in the workplace, field sites, community settings, trainings, travel, accommodation, meetings, digital platforms, and any situation connected to EAO's work.

Sexual harassment may include:

a. Unwanted sexual comments, jokes, gestures, looks, messages, or questions.

b. Requests for dates, sex, sexual favors, or private meetings after refusal.

c. Unwanted touching, hugging, brushing, blocking movement, or physical closeness.

d. Sharing sexual images, videos, messages, or offensive materials.

e. Threats, pressure, punishment, or promises of benefit connected to sexual interest.

f. Creating a hostile, humiliating, intimidating, or unsafe environment through sexual behavior.

All EAO personnel and representatives must respect personal boundaries and stop any behavior that makes another person uncomfortable, unsafe, or humiliated.

8.7 Protection of Children

All EAO personnel and representatives must protect children from harm, abuse, exploitation, neglect, unsafe communication, and inappropriate relationships.

They must never:

a. Hit, physically punish, threaten, humiliate, insult, shame, degrade, or emotionally harm a child.

b. Engage in sexual activity, sexual communication, grooming, or exploitative conduct with a child.

c. Spend unnecessary time alone with a child in a private or isolated setting.

d. Invite a child to their home, hotel, private room, vehicle, or isolated place without approved program purpose and safeguards.

e. Use inappropriate language, images, jokes, games, or behavior with or around children.

f. Take or share photos, videos, stories, or personal information of children without proper consent, assent, and safeguarding review.

g. Use children for personal labor, errands, unpaid work, or activities unrelated to approved program purposes.

h. Ignore or delay reporting any concern involving child abuse, exploitation, neglect, or harm.

8.8 Protection of Vulnerable Adults

All EAO personnel and representatives must protect vulnerable adults from abuse, exploitation, neglect, discrimination, coercion, humiliation, harassment, violence, unsafe communication, and misuse of power.

They must respect the dignity, agency, choices, and informed consent of vulnerable adults. They must not assume that age, disability, illness, displacement, poverty, trauma, or dependency removes a person’s right to make decisions.

Any concern involving harm or risk of harm to a vulnerable adult must be reported through approved channels.

8.9 Disability-Inclusive Conduct

All EAO personnel and representatives shall treat persons with disabilities with dignity, equality, respect, and inclusion.

They must:

a. Communicate directly and respectfully with persons with disabilities.

b. Provide reasonable accommodation where possible and relevant.

c. Respect assistive devices, personal space, communication preferences, and decision-making rights.

d. Avoid pity, stigma, mockery, harmful language, exclusion, or assumptions about capacity.

e. Ensure persons with disabilities can access information, services, complaint channels, and referrals.

f. Never exploit disability, dependency, communication barriers, mobility limitations, or access needs for personal, sexual, financial, or social benefit.

8.10 Anti-Harassment, Bullying, and Anti-Discrimination

EAO personnel and representatives must not harass, bully, intimidate, humiliate, threaten, discriminate against, or exclude any person.

Discrimination is prohibited on the basis of gender, age, disability, ethnicity, religion, clan, nationality, displacement status, refugee status, health status, marital status, pregnancy, economic status, education level, political opinion, social background, or any other personal characteristic.

Bullying, intimidation, unfair targeting, hostile treatment, public humiliation, repeated criticism, abuse of authority, threats, exclusion, or pressure are not acceptable.

8.11 Professional Boundaries

EAO personnel and representatives must maintain clear professional boundaries with beneficiaries, children, vulnerable adults, staff, volunteers, partners, and community members.

They must avoid:

a. Secret or unnecessary private relationships with beneficiaries or children.

b. Giving or receiving inappropriate gifts, favors, money, or private support.

c. Creating emotional dependency or personal loyalty.

d. Sharing personal problems or private matters in a way that creates inappropriate closeness.

e. Using personal phones or social media for private contact with children or vulnerable beneficiaries unless authorized for program purposes.

f. Any relationship that creates conflict of interest, exploitation, favoritism, or safeguarding risk.

8.12 Responsible Use of Power, Authority, and Resources

EAO personnel and representatives must use their authority, role, information, and organizational resources only for legitimate purposes.

They must never misuse:

a. Beneficiary selection power.

b. Recruitment or employment authority.

c. Referral authority.

d. Access to aid, cash, food, shelter, assistive devices, training, transport, or services.

e. Project information, beneficiary lists, community data, or confidential files.

f. Vehicles, phones, funds, equipment, offices, accommodation, or materials.

Any misuse of power or resources for sexual, financial, political, personal, social, or discriminatory purposes is strictly prohibited.

8.13 Fair Access to Assistance and Services

EAO assistance, services, employment opportunities, referrals, trainings, distributions, and project benefits must be provided fairly, transparently, and based on approved criteria.

EAO personnel and representatives must never request or accept sex, money, gifts, labor, loyalty, political support, personal favors, silence, or private services in exchange for assistance.

Beneficiaries and community members must be informed that EAO services are free from exploitation, abuse, discrimination, favoritism, and personal conditions.

8.14 Safe Communication, Media, and Digital Conduct

EAO personnel and representatives must communicate safely and responsibly in all written, verbal, visual, and digital communication.

They must not:

a. Share confidential information without authorization.

b. Post photos, videos, stories, or personal details of beneficiaries, children, survivors, persons with disabilities, or vulnerable people without consent and safeguarding review.

c. Use images or stories that expose people to shame, stigma, retaliation, identification, exploitation, or harm.

d. Use social media, phones, email, or messaging platforms to harass, exploit, threaten, manipulate, groom, or pressure any person.

e. Send, request, receive, store, or share sexual, offensive, degrading, discriminatory, or harmful content.

All communication must protect dignity, consent, privacy, accuracy, and safety.

8.15 Confidentiality and Data Protection

EAO personnel and representatives must protect confidential and sensitive information.

This includes information about beneficiaries, children, survivors, persons with disabilities, staff, volunteers, partners, complaint records, case files, medical information, disability details, referral information, investigation records, financial records, and organizational documents.

Confidential information must only be shared with authorized persons on a need-to-know basis. Unauthorized access, disclosure, copying, photographing, forwarding, or public discussion of confidential information is prohibited.

8.16 Conflict of Interest

EAO personnel and representatives must avoid conflicts of interest and must declare any personal, family, financial, political, clan, professional, supervisory, or other relationship that may influence their duties, decisions, recruitment, procurement, beneficiary selection, referral, investigation, or safeguarding process.

They must not use their position to benefit themselves, relatives, friends, associates, preferred groups, political actors, businesses, or any person improperly.

Conflict of interest must be declared and managed transparently.

8.17 Gifts, Favors, and Benefits

EAO personnel and representatives must not request, demand, accept, or offer gifts, favors, money, services, personal benefits, hospitality, or private advantages that may influence decisions, create obligation, or appear improper.

Small culturally appropriate tokens may only be accepted where allowed by EAO rules, transparently declared, and not linked to beneficiary selection, recruitment, procurement, referral, assistance, or service access.

Any gift or benefit connected to sexual favors, exploitation, bribery, fraud, coercion, or preferential treatment is strictly prohibited.

8.18 Fraud, Corruption, and Diversion Linked to Safeguarding

EAO personnel and representatives must not engage in fraud, corruption, diversion, bribery, extortion, manipulation of beneficiary lists, false reporting, inflated claims, theft, misuse of funds, or misuse of project resources.

Fraud and corruption can create safeguarding risks when people are denied services, pressured for payments, manipulated for benefits, or exposed to exploitation. Any such concern must be reported through appropriate channels.

8.19 Alcohol, Drugs, and Unsafe Conduct

EAO personnel and representatives must not work, drive, supervise activities, interact with beneficiaries, manage resources, or represent EAO while under the influence of alcohol, illegal drugs, or substances that impair judgment, safety, or professionalism.

They must not use alcohol, drugs, or social events to exploit, pressure, harass, abuse, or manipulate any person.

Substance-related misconduct that creates safeguarding risk shall be treated seriously.

8.20 Weapons, Violence, and Threats

EAO personnel and representatives must not bring unauthorized weapons to EAO offices, vehicles, trainings, field sites, community activities, or partner locations.

Violence, threats, intimidation, coercion, physical aggression, forced restraint, or creating fear are strictly prohibited.

Any safety threat must be reported immediately to management or the appropriate focal person.

8.21 Safe Transport and Field Conduct

During field visits, travel, transport, distributions, referrals, and community activities, EAO personnel and representatives must behave professionally and protect the safety and dignity of all people.

They must:

a. Avoid transporting children alone unless authorized and necessary.

b. Avoid isolated private contact with beneficiaries.

c. Respect community norms without compromising safeguarding standards.

d. Follow approved travel and security procedures.

e. Use EAO vehicles and transport arrangements only for authorized purposes.

f. Report any incident, risk, accident, misconduct, or concern.

Transport, accommodation, and field movement must never be used for exploitation, harassment, intimidation, or private benefit.

8.22 Reporting Obligations

All EAO personnel and representatives have a duty to report safeguarding concerns, PSEA concerns, child protection concerns, abuse of vulnerable adults, harassment, discrimination, retaliation, fraud, corruption, or serious misconduct.

Reports must be made as soon as possible through approved channels. Personnel and representatives must not ignore, conceal, delay, destroy evidence, pressure complainants, confront alleged perpetrators without authorization, or attempt informal settlement.

Good faith reports shall be protected.

8.23 Cooperation with Investigations and Reviews

EAO personnel and representatives must cooperate honestly and respectfully with safeguarding reviews, investigations, audits, monitoring, complaint handling, and management actions.

They must not interfere with investigations, influence witnesses, hide information, destroy records, retaliate, provide false information, or obstruct case handling.

Failure to cooperate may result in disciplinary or contractual action.

8.24 Protection from Retaliation

EAO personnel and representatives must not retaliate against any person who reports a concern, supports a complainant, provides information, refuses unsafe conduct, participates in an investigation, or raises an ethical issue in good faith.

Retaliation includes threats, intimidation, dismissal, demotion, exclusion, harassment, pressure, discrimination, denial of services, or any negative treatment linked to reporting.

Retaliation is a serious breach of this Code.

8.25 Partner, Contractor, and Supplier Conduct

Partners, contractors, suppliers, consultants, service providers, and sub-grantees working with or on behalf of EAO must respect safeguarding and PSEA standards.

They must ensure that their staff and representatives do not exploit, abuse, harass, discriminate against, or harm beneficiaries, staff, volunteers, communities, or any person connected to EAO’s work.

EAO may suspend, review, terminate, or refuse collaboration where a partner, contractor, supplier, or third party violates this Code or creates serious safeguarding risk.

8.26 Personal Responsibility and Accountability

Every person covered by this Code is personally responsible for understanding and following it. Lack of awareness shall not excuse serious misconduct where the person had a duty to behave safely, respectfully, and professionally.

All personnel and representatives must ask for guidance if they are unsure about acceptable conduct, reporting obligations, confidentiality, conflict of interest, communication, or safeguarding risks.

8.27 Breach of the Code of Conduct

Any breach of this Code may result in corrective, disciplinary, contractual, administrative, legal, or other appropriate action.

Depending on the seriousness of the violation, measures may include verbal or written warning, mandatory training, supervision, suspension, reassignment, removal from activities, termination of employment or contract, termination of partnership, donor notification, referral to relevant authorities, or other lawful action.

Serious violations, including sexual exploitation and abuse, sexual activity with a child, abuse of vulnerable adults, retaliation, deliberate concealment, or serious misuse of power, may lead to immediate suspension, termination, and referral where legally required and safe.

8.28 Code of Conduct Acknowledgement

All EAO board members, management, staff, volunteers, interns, consultants, contractors, suppliers, partners, consortium members, visitors, community mobilizers, service providers, temporary workers, and representatives shall be required to read, understand, sign, and comply with the Code of Conduct.

Signing the Code confirms that the person understands EAO’s safeguarding and PSEA expectations, agrees to follow the required standards, accepts the duty to report concerns, and understands that violations may result in serious consequences.

8.29 Minimum Code of Conduct Standard

At minimum, every person representing EAO must:

a. Treat all people with dignity and respect.

b. Never exploit, abuse, harass, discriminate against, or harm any person.

c. Never engage in sexual activity with a child.

d. Never exchange assistance, services, employment, or opportunities for sex, money, favors, or personal benefit.

e. Protect children, vulnerable adults, and persons with disabilities.

f. Maintain professional boundaries.

g. Protect confidential information.

h. Report safeguarding concerns immediately.

i. Cooperate with authorized safeguarding procedures.

j. Uphold EAO's values, reputation, and duty of care.

This Code of Conduct is mandatory and forms a core condition for working with, representing, partnering with, or providing services on behalf of East Action Organization.

9. Anti-Harassment, Bullying, and Anti-Discrimination

East Action Organization (EAO) is committed to maintaining a safe, respectful, inclusive, professional, and dignified working and program environment for all people. EAO does not tolerate harassment, bullying, intimidation, discrimination, humiliation, retaliation, exclusion, victimization, or any behavior that undermines the dignity, safety, wellbeing, participation, or rights of any person.

This section applies to all EAO board members, senior management, staff, volunteers, interns, consultants, contractors, suppliers, partners, consortium members, visitors, service providers, community mobilizers, temporary workers, and any person acting for or on behalf of EAO. It applies in offices, field sites, community settings, trainings, workshops, meetings, distributions, travel, accommodation, digital communication, online platforms, and any setting connected to EAO's work.

9.1 Purpose of this Section

The purpose of this section is to prevent and address harassment, bullying, and discrimination within EAO's workplace, programs, partnerships, and community engagement.

This section aims to:

a. Promote dignity, respect, equality, inclusion, and fairness.

b. Protect staff, volunteers, beneficiaries, children, vulnerable adults, persons with disabilities, partners, and community members from harmful conduct.

c. Prevent abuse of power, intimidation, humiliation, exclusion, and hostile behavior.

d. Ensure that complaints are reported, handled, and resolved safely, confidentially, fairly, and without retaliation.

e. Strengthen EAO's safeguarding, PSEA, protection, and accountability commitments.

f. Create a workplace and program culture where all people feel safe to speak, participate, work, and receive services.

9.2 Definition of Harassment

Harassment means any unwanted behavior, conduct, comment, gesture, action, message, or communication that violates a person's dignity or creates an intimidating, hostile, degrading, humiliating, offensive, unsafe, or uncomfortable environment.

Harassment may be verbal, physical, sexual, psychological, written, visual, digital, or social. It may happen once or repeatedly. It may be intentional or may occur through careless conduct that causes harm or distress.

Harassment may include:

a. Insults, offensive jokes, mocking, name-calling, or degrading comments.

b. Threats, intimidation, shouting, public humiliation, or aggressive behavior.

c. Unwanted comments about a person's body, appearance, disability, gender, age, ethnicity, religion, clan, health status, social background, or personal life.

d. Spreading rumors, gossip, false accusations, or harmful information.

e. Excluding, isolating, or deliberately ignoring a person.

f. Sending offensive messages, images, videos, emojis, posts, or online comments.

g. Repeated unwanted contact, pressure, monitoring, stalking, or intrusive behavior.

h. Any conduct that makes a person feel unsafe, degraded, embarrassed, threatened, or disrespected.

9.3 Definition of Sexual Harassment

Sexual harassment means any unwanted conduct of a sexual nature that causes offence, fear, discomfort, humiliation, intimidation, or creates a hostile or unsafe environment.

Sexual harassment may happen between colleagues, supervisors and staff, staff and beneficiaries, staff and partners, service providers and community members, or any persons connected to EAO's work.

Sexual harassment may include:

a. Unwanted sexual comments, jokes, questions, gestures, looks, or advances.

b. Requests for dates, sex, sexual favors, private meetings, or intimate communication.

c. Unwanted touching, hugging, brushing, blocking movement, standing too close, or physical contact.

d. Sending or showing sexual images, videos, messages, audio, emojis, or materials.

e. Commenting on a person's body, clothing, marital status, sexual life, or private life.

f. Sexual rumors, gossip, threats, pressure, or blackmail.

g. Promising employment, promotion, benefits, training, protection, aid, or favorable treatment in exchange for sexual attention or favors.

h. Threatening punishment, exclusion, demotion, dismissal, denial of services, or negative treatment for refusing sexual interest.

Sexual harassment is prohibited whether it occurs in person, by phone, through social media, email, messaging applications, online meetings, during travel, during accommodation, at field sites, or outside working hours when connected to EAO.

9.4 Definition of Bullying

Bullying means repeated or serious behavior that intimidates, humiliates, undermines, threatens, controls, isolates, or harms another person. Bullying may be carried out by supervisors, colleagues, staff, volunteers, partners, contractors, community representatives, or groups of people.

Bullying may include:

a. Repeated shouting, insults, insults disguised as jokes, or harsh personal criticism.

b. Public humiliation, mocking, belittling, or degrading treatment.

c. Deliberately excluding a person from meetings, information, decisions, or opportunities.

d. Setting impossible tasks, unfair workloads, or unrealistic deadlines to cause failure.

e. Removing responsibilities unfairly or blocking someone's work without reason.

f. Threatening dismissal, demotion, reporting, punishment, or exclusion without fair basis.

g. Spreading rumors, creating hostility, or encouraging others to isolate someone.

h. Abusing authority or seniority to silence, control, punish, or intimidate.

i. Repeatedly undermining someone's confidence, reputation, or professional standing.

Reasonable supervision, constructive feedback, performance management, disciplinary action, or work instruction carried out respectfully and fairly is not bullying. However, management authority must never be used to humiliate, threaten, discriminate, or abuse.

9.5 Definition of Discrimination

Discrimination means unfair, unequal, exclusionary, or harmful treatment of a person or group based on their identity, status, personal characteristics, or perceived difference.

EAO prohibits discrimination based on:

a. Gender, sex, age, disability, ethnicity, clan, nationality, language, religion, or belief.

b. Refugee status, displacement status, migration status, returnee status, or social origin.

c. Health status, HIV status, pregnancy, marital status, family responsibility, or caregiving role.

d. Economic status, education level, occupation, political opinion, community background, or social status.

e. Any other personal characteristic that results in unfair treatment, exclusion, harm, or denial of opportunity.

Discrimination may happen in recruitment, promotion, training, pay, supervision, beneficiary selection, service delivery, referral, participation, communication, procurement, partnership, or access to assistance.

9.6 Direct and Indirect Discrimination

Direct discrimination occurs when a person is treated less favorably because of a protected or personal characteristic, such as disability, gender, age, ethnicity, religion, clan, displacement status, or health condition.

Indirect discrimination occurs when a rule, practice, condition, or procedure appears neutral but disadvantages certain groups, such as persons with disabilities, women, older persons, people with limited literacy, refugees, IDPs, or people who speak different languages.

EAO shall make reasonable efforts to identify and remove direct and indirect discrimination in its policies, procedures, programs, recruitment, complaint systems, communication, and service delivery.

9.7 Harassment and Discrimination Linked to Safeguarding

Harassment, bullying, and discrimination are safeguarding concerns when they cause harm, create fear, silence reporting, exclude people from services, increase vulnerability, or involve misuse of power.

Harassment and discrimination may also increase the risk of sexual exploitation and abuse, child abuse, abuse of vulnerable adults, retaliation, emotional harm, unsafe working conditions, and loss of trust in EAO.

All such concerns must be taken seriously and addressed through appropriate procedures.

9.8 Prohibited Conduct

EAO strictly prohibits the following conduct:

a. Harassment, sexual harassment, bullying, intimidation, humiliation, threats, or hostile behavior.

b. Discrimination, exclusion, unequal treatment, victimization, or denial of services based on personal characteristics.

c. Abuse of authority, power, position, supervision, resources, or influence.

d. Retaliation against any person who reports, complains, supports a complainant, participates in an investigation, or refuses unsafe conduct.

e. Pressure, coercion, manipulation, blackmail, or threats to silence a person.

f. Offensive language, jokes, images, videos, gestures, online posts, or messages.

g. Any conduct that creates fear, shame, dependency, distress, unsafe working conditions, or barriers to participation.

h. Informal settlement, forced apology, community pressure, family pressure, or mediation in serious safeguarding, harassment, or discrimination cases without approved procedures.

9.9 Respectful Workplace and Program Environment

EAO shall promote a workplace and program environment where every person is treated with respect, fairness, dignity, and professionalism.

All personnel and representatives must:

a. Communicate respectfully and avoid harmful language.

b. Listen to concerns seriously.

c. Respect different backgrounds, roles, opinions, cultures, languages, and identities.

d. Maintain professional boundaries.

e. Avoid gossip, public humiliation, or hostile behavior.

f. Support inclusion and teamwork.

g. Challenge unsafe or discriminatory behavior where safe to do so.

h. Report concerns through approved channels.

9.10 Equality and Inclusion in Employment

EAO shall promote fair and inclusive employment practices. Recruitment, selection, appointment, promotion, training, supervision, performance management, disciplinary action, and termination shall be based on merit, role requirements, organizational needs, fairness, safeguarding standards, and applicable rules.

EAO shall not discriminate against candidates or staff because of gender, disability, age, ethnicity, religion, clan, displacement status, marital status, pregnancy, health status, or other personal characteristics.

Reasonable accommodation should be considered for persons with disabilities and others who may face barriers, where possible and appropriate.

9.11 Equality and Inclusion in Programs and Services

EAO shall ensure that programs and services are designed and delivered in a way that promotes equal access, dignity, and non-discrimination.

Beneficiary selection, registration, distribution, referral, training participation, livelihood support, health services, education support, protection activities, and community engagement must be based on clear and fair criteria.

No person shall be denied access to services or treated unfairly because of disability, gender, age, ethnicity, clan, religion, refugee status, displacement status, health condition, poverty, social status, or any other personal characteristic.

9.12 Gender Sensitivity and Protection from Gender-Based Harm

EAO recognizes that harassment, bullying, and discrimination may affect women, girls, men, boys, persons with disabilities, older persons, and marginalized groups differently.

EAO shall apply gender-sensitive and age-sensitive approaches to prevent harm, promote equal participation, and reduce risks of gender-based violence, sexual harassment, exploitation, stigma, exclusion, and retaliation.

No person shall be blamed, shamed, silenced, excluded, or punished because they report harassment, sexual harassment, discrimination, or abuse.

9.13 Disability Inclusion and Reasonable Accommodation

EAO shall ensure that persons with disabilities are protected from harassment, bullying, discrimination, exclusion, neglect, and degrading treatment.

All staff and representatives must communicate respectfully with persons with disabilities, respect assistive devices and personal space, avoid harmful stereotypes, and support accessibility where possible.

EAO shall make reasonable efforts to provide accommodation in recruitment, employment, programs, training, complaint systems, referral pathways, communication, and service delivery.

9.14 Protection from Clan, Ethnic, Religious, and Social Discrimination

EAO shall not tolerate discrimination, favoritism, exclusion, harassment, or unequal treatment based on clan, ethnicity, religion, nationality, language, political opinion, social background, or community identity.

Staff and representatives must not use community identity, clan relationship, religion, social influence, or political connection to influence recruitment, beneficiary selection, procurement, referrals, complaint handling, investigation, or access to opportunities.

EAO decisions must be fair, transparent, documented, and based on approved criteria.

9.15 Protection from Retaliation and Victimization

EAO strictly prohibits retaliation and victimization against any person who reports harassment, bullying, discrimination, sexual harassment, safeguarding concerns, abuse, exploitation, or misconduct in good faith.

Retaliation may include dismissal, demotion, threats, intimidation, exclusion, denial of services, harassment, false accusations, pressure, discrimination, withholding opportunities, or community backlash.

Anyone who retaliates against a complainant, survivor, witness, whistleblower, staff member, volunteer, partner, or community member may face disciplinary or contractual action.

9.16 Reporting Harassment, Bullying, and Discrimination

Any person who experiences, witnesses, suspects, or becomes aware of harassment, bullying, discrimination, sexual harassment, retaliation, or related misconduct should report the concern through approved EAO channels.

Reports may be made to a supervisor, safeguarding focal person, HR or administration focal person, senior management, complaint and feedback mechanism, whistleblowing channel, partner reporting channel, or other safe reporting option approved by EAO.

A person does not need to prove the concern before reporting. Reports made in good faith shall be protected.

9.17 Responsibilities of Supervisors and Managers

Supervisors and managers have a special responsibility to prevent and address harassment, bullying, and discrimination.

They must:

a. Model respectful and inclusive conduct.

b. Ensure team members understand expected behavior.

c. Take complaints seriously.

d. Respond promptly and confidentially.

e. Prevent retaliation.

f. Avoid favoritism or conflict of interest.

g. Refer serious concerns to appropriate safeguarding, HR, or management channels.

h. Not ignore, dismiss, minimize, or informally settle serious complaints.

Managers who fail to act on known concerns may be held accountable.

9.18 Complaint Handling and Response

EAO shall handle complaints of harassment, bullying, and discrimination in a safe, confidential, timely, fair, impartial, and survivor-centered or complainant-centered manner.

The response may include risk assessment, immediate protection measures, referral support, management review, mediation only where appropriate and safe, investigation, disciplinary action, training, supervision, workplace adjustment, or other corrective measures.

Serious cases involving sexual harassment, SEA, child abuse, abuse of vulnerable adults, violence, threats, retaliation, or abuse of power must not be resolved through informal settlement alone.

9.19 Confidentiality and Information Sharing

All complaints and concerns shall be handled confidentially. Information shall only be shared with authorized persons on a need-to-know basis for protection, support, investigation, management decision-making, legal compliance, or donor/partner obligations.

Unauthorized sharing of complaint information, survivor or complainant identity, witness details, investigation records, or sensitive personal information is prohibited and may result in disciplinary action.

9.20 False or Malicious Complaints

EAO encourages reporting of all concerns in good faith. A complaint made honestly, even if it is not later proven, shall not result in punishment.

However, knowingly false or malicious complaints made with the intention to harm another person may result in disciplinary action. This rule shall never be used to discourage reporting, silence complainants, or intimidate survivors, witnesses, or whistleblowers.

9.21 Conflict of Interest in Complaint Handling

Any person involved in receiving, reviewing, investigating, or deciding on a harassment, bullying, or discrimination complaint must declare any conflict of interest.

A conflict of interest may include personal, family, financial, clan, political, professional, supervisory, friendship, or hostile relationship with the complainant, witness, or subject of complaint.

Persons with a conflict of interest shall not lead or influence complaint handling unless formally authorized under safe and transparent arrangements.

9.22 Corrective and Disciplinary Measures

Where harassment, bullying, discrimination, sexual harassment, retaliation, or related misconduct is confirmed, EAO shall take appropriate corrective or disciplinary action.

Depending on the seriousness of the violation, measures may include verbal or written warning, apology where appropriate and voluntary, mandatory training, supervision, transfer, restriction of duties, suspension, demotion where lawful, removal from activities, termination of employment or contract, termination of partnership, donor notification, referral to authorities, or other lawful action.

Serious violations may lead to immediate suspension, dismissal, contract cancellation, or referral to relevant authorities where legally required and safe.

9.23 Training and Awareness

EAO shall provide awareness and training to staff, volunteers, interns, consultants, managers, partners, contractors, and relevant representatives on anti-harassment, anti-bullying, anti-discrimination, respectful conduct, PSEA, safeguarding, disability inclusion, gender sensitivity, confidentiality, reporting channels, and protection from retaliation.

Training should be included in induction and refreshed periodically based on risk, organizational needs, donor requirements, and lessons learned.

9.24 Monitoring and Prevention

EAO shall monitor workplace and program environments to identify and reduce risks of harassment, bullying, and discrimination.

Monitoring may include staff feedback, community feedback, complaint trend analysis, field supervision, partner review, exit interviews, training records, safeguarding risk assessments, and management review.

EAO shall use monitoring findings to strengthen prevention, improve reporting systems, address harmful behavior, and promote a respectful organizational culture.

9.25 Safe Organizational Culture

EAO shall promote a culture where respect, inclusion, fairness, equality, and accountability are practiced daily. All personnel and representatives are encouraged to speak up against harmful behavior and support colleagues, beneficiaries, and community members who raise concerns.

Leadership shall ensure that organizational reputation, personal relationships, community pressure, or seniority never take priority over safety, dignity, and fairness.

9.26 Minimum Standard

At minimum, every person connected to EAO must treat others with dignity and respect; avoid harassment, bullying, discrimination, intimidation, and retaliation; report serious concerns; protect confidentiality; cooperate with complaint procedures; and support a safe, inclusive, and respectful working and program environment.

This section is mandatory and forms part of EAO’s core safeguarding, PSEA, child protection, disability inclusion, and accountability commitments.

10. Safe Recruitment and Screening

East Action Organization (EAO) is committed to ensuring that all recruitment, selection, appointment, engagement, and deployment processes are safe, transparent, fair, merit-based, and aligned with safeguarding and PSEA standards. EAO recognizes that recruitment is one of the most important prevention measures for protecting children, vulnerable adults, persons with disabilities, beneficiaries, staff, volunteers, partners, and communities from abuse, exploitation, harassment, discrimination, neglect, and misuse of power.

Safe recruitment and screening are mandatory for all positions and roles connected to EAO's work, especially roles involving direct contact with children, vulnerable adults, persons with disabilities, survivors, refugees, internally displaced persons, host communities, project beneficiaries, personal data, cash assistance, aid distribution, transport, referral services, case management, community mobilization, field work, supervision, or decision-making authority.

This section applies to all EAO board members, senior management, staff, volunteers, interns, consultants, contractors, suppliers, service providers, community mobilizers, enumerators, trainers, drivers, temporary workers, partner representatives, consortium members, and any person engaged to work for or on behalf of EAO.

10.1 Purpose of Safe Recruitment and Screening

The purpose of safe recruitment and screening is to reduce the risk of engaging individuals who may cause harm, exploit others, abuse power, violate safeguarding standards, or create unsafe conditions for communities, staff, partners, and beneficiaries.

Safe recruitment aims to:

a. Prevent unsuitable individuals from gaining access to children, vulnerable adults, persons with disabilities, beneficiaries, staff, or sensitive information.

b. Ensure that all candidates understand and accept EAO's safeguarding, PSEA, child protection, disability inclusion, anti-harassment, anti-discrimination, and code of conduct standards.

c. Promote a safe, respectful, inclusive, and accountable working environment.

d. Strengthen donor and partner confidence in EAO's organizational systems.

e. Ensure that recruitment decisions are fair, transparent, documented, and free from discrimination, favoritism, corruption, conflict of interest, or abuse of authority.

f. Support EAO's zero-tolerance commitment to sexual exploitation and abuse, child abuse, harassment, discrimination, retaliation, and other safeguarding misconduct.

10.2 Scope of Safe Recruitment

Safe recruitment applies to all categories of persons engaged by EAO, whether paid or unpaid, long-term or short-term, full-time or part-time, office-based or field-based, formal or informal.

This includes:

a. Permanent staff.

b. Temporary staff.

c. Volunteers.

d. Interns.

e. Consultants.

f. Enumerators and data collectors.

g. Community mobilizers.

h. Trainers and facilitators.

i. Drivers and transport service providers.

j. Contractors and suppliers with access to communities or project sites.

k. Service providers.

l. Partner and consortium personnel working under EAO-supported activities.

m. Board members and governance representatives where applicable.

n. Visitors, observers, or representatives participating in EAO activities.

The level of screening shall be proportionate to the role, level of contact with vulnerable groups, access to resources or data, decision-making authority, and safeguarding risk.

10.3 Risk-Based Recruitment Approach

EAO shall assess the safeguarding risk level of each role before recruitment or engagement. Roles with higher safeguarding risk shall require stronger screening, supervision, training, and monitoring.

Higher-risk roles may include positions involving:

a. Direct work with children.

b. Direct work with vulnerable adults.

c. Direct work with persons with disabilities.

d. Work with survivors of violence or protection cases.

e. Home visits, case referrals, counselling, psychosocial support, or community protection work.

f. Distribution of food, cash, non-food items, assistive devices, shelter, or other assistance.

g. Beneficiary selection, registration, verification, or complaints handling.

h. Access to confidential personal data, survivor information, child information, or complaint records.

i. Transport of beneficiaries, children, staff, or community members.

j. Overnight field travel or accommodation with communities or staff.

k. Management or supervisory authority.

l. Procurement, recruitment, grant management, or financial authority.

m. Representation of EAO in communities, partnerships, or public communication.

For high-risk roles, EAO shall apply additional safeguards such as stronger reference checks, safeguarding interview questions, code of conduct signing, safeguarding induction before deployment, close supervision, probation monitoring, and periodic performance review.

10.4 Job Descriptions and Safeguarding Responsibilities

All job descriptions, terms of reference, volunteer descriptions, consultancy agreements, and service contracts shall include safeguarding and PSEA responsibilities relevant to the role.

Job descriptions should clearly state that the person is expected to:

a. Comply with EAO’s Safeguarding and PSEA Policy Manual.

b. Sign and follow the Code of Conduct.

c. Maintain professional boundaries.

d. Treat all people with dignity and respect.

e. Protect children, vulnerable adults, persons with disabilities, beneficiaries, staff, and communities from harm.

f. Report safeguarding concerns immediately through approved channels.

g. Respect confidentiality and data protection requirements.

h. Avoid sexual exploitation and abuse, harassment, discrimination, bullying, retaliation, and misuse of power.

i. Participate in safeguarding and PSEA training.

j. Cooperate with safeguarding procedures and investigations.

10.5 Vacancy Announcements and Safeguarding Commitment

EAO shall include a safeguarding commitment statement in vacancy announcements, calls for consultants, volunteer opportunities, partnership roles, and other recruitment notices where appropriate.

Recommended standard statement:

East Action Organization is committed to safeguarding, protection from sexual exploitation and abuse, child protection, disability inclusion, and safe conduct. All applicants, staff, volunteers, consultants, and representatives are expected to uphold EAO's Safeguarding and PSEA Policy Manual and Code of Conduct. EAO applies safe recruitment procedures and may conduct reference checks and safeguarding screening as part of the recruitment process.

This statement helps inform candidates from the beginning that safeguarding is a mandatory condition of engagement.

10.6 Equal Opportunity and Non-Discrimination in Recruitment

EAO shall ensure that recruitment and selection processes are fair, inclusive, transparent, and non-discriminatory.

No applicant shall be unfairly excluded or disadvantaged because of gender, age, disability, ethnicity, clan, religion, nationality, language, displacement status, refugee status, health status, marital status, pregnancy, economic background, social status, or any other personal characteristic unrelated to the role.

EAO shall make reasonable efforts to promote inclusion of women, youth, persons with disabilities, qualified local candidates, and underrepresented groups, while maintaining merit, safeguarding standards, and role requirements.

10.7 Prevention of Favoritism, Nepotism, and Conflict of Interest

Recruitment processes must be free from favoritism, nepotism, political influence, clan influence, bribery, corruption, personal pressure, sexual favors, or conflict of interest.

Any person involved in recruitment must declare if they have a personal, family, financial, clan, political, professional, supervisory, or other relationship with an applicant.

Persons with a conflict of interest should not lead or influence recruitment decisions unless the conflict is declared and managed transparently by EAO management.

No staff member, manager, board member, partner, or representative shall request or accept money, gifts, sexual favors, loyalty, private services, or personal benefits in exchange for employment, volunteering, consultancy, training, internship, or project opportunities.

10.8 Application Screening

EAO shall screen applications fairly against approved criteria, role requirements, qualifications, experience, skills, safeguarding suitability, and organizational needs.

Application screening should look for:

a. Relevant qualifications and experience.

b. Employment history and unexplained gaps where relevant.

c. Experience working with children, vulnerable adults, persons with disabilities, communities, or sensitive data.

d. Safeguarding-related responsibilities in previous roles.

e. Any information that may require clarification during interview or reference check.

f. Potential conflict of interest.

g. Suitability for the level of contact and responsibility required by the role.

Screening must be documented and kept confidential.

10.9 Interview Process

Interviews shall be structured, fair, and conducted by an appropriate panel where possible. The interview panel should assess both technical competence and safeguarding suitability.

For roles involving contact with communities, children, vulnerable adults, persons with disabilities, survivors, or sensitive data, interview questions should include safeguarding and PSEA topics.

Safeguarding interview questions may assess:

a. Understanding of professional boundaries.

b. Awareness of child protection and protection of vulnerable adults.

c. Understanding of PSEA and abuse of power.

d. Response to a safeguarding concern or disclosure.

e. Commitment to confidentiality and reporting.

f. Attitude toward disability inclusion and non-discrimination.

g. Ability to work respectfully with diverse communities.

h. Understanding of conflict of interest and ethical conduct.

i. Willingness to sign and comply with the Code of Conduct.

10.10 Sample Safeguarding Interview Questions

EAO may use safeguarding questions such as:

a. What does safeguarding mean in community-based work?

b. What would you do if a beneficiary reported that a staff member requested sexual favors in exchange for assistance?

c. What would you do if you observed a colleague being alone with a child in an unsafe situation?

d. How would you maintain professional boundaries with beneficiaries and community members?

e. How would you ensure that persons with disabilities can safely access services and complaint channels?

f. What does confidentiality mean when handling sensitive information?

g. What would you do if your supervisor asked you not to report a safeguarding concern?

h. How would you respond if a community member offered you a gift in exchange for being selected for assistance?

i. Why is sexual activity with anyone under 18 prohibited, even if the child appears older or says they consent?

j. How would you handle a situation where your relative applies for a position or is proposed as a beneficiary?

Answers should be assessed for awareness, attitude, judgment, respect, accountability, and willingness to follow procedures.

10.11 Reference Checks

EAO shall conduct reference checks before confirming employment or engagement, especially for roles involving direct contact with children, vulnerable adults, persons with disabilities, beneficiaries, communities, sensitive data, or resources.

Reference checks should confirm:

a. Employment history and role performance.

b. Conduct and professional behavior.

c. Suitability to work with communities and vulnerable groups.

d. Integrity, reliability, and respect for policies.

e. Whether there were any known safeguarding, PSEA, harassment, abuse, exploitation, fraud, or misconduct concerns.

f. Whether the person is eligible for rehire, where appropriate.

Reference checks must be handled confidentially and documented securely.

10.12 Safeguarding Reference Questions

Where appropriate, EAO may ask previous employers or referees:

a. Did the candidate have direct contact with children, vulnerable adults, beneficiaries, or communities?

b. Were there any concerns related to safeguarding, PSEA, harassment, discrimination, bullying, abuse of power, or professional conduct?

c. Did the candidate follow organizational policies and code of conduct?

d. Did the candidate respect confidentiality and professional boundaries?

e. Would you rehire or re-engage this person?

f. Is there any reason this person should not work with children, vulnerable adults, persons with disabilities, or communities?

Only authorized recruitment or HR personnel should conduct and document reference checks.

10.13 Identity Verification and Documentation

EAO shall verify the identity of selected candidates before engagement where possible. This may include reviewing official identification documents, professional certificates, licenses, academic records, work permits where applicable, or other required documents.

EAO shall not knowingly engage a person under false identity, false qualification, falsified experience, or fraudulent documentation.

Any falsification of documents, false information, or misrepresentation during recruitment may lead to withdrawal of offer, termination, or other appropriate action.

10.14 Criminal Record and Background Checks

Where legally available, appropriate, and relevant to the role, EAO may require criminal record checks, police clearance, or other background checks, especially for high-risk roles involving children, vulnerable adults, persons with disabilities, protection cases, cash assistance, transport, or sensitive data.

Where formal background checks are not available or practical, EAO shall strengthen other screening measures, such as reference checks, identity verification, safeguarding interviews, community reputation checks where appropriate and safe, probation monitoring, supervision, and code of conduct enforcement.

Background checks must be conducted lawfully, fairly, confidentially, and without discrimination.

10.15 Safeguarding Declaration by Candidates

EAO may require selected candidates to complete a safeguarding declaration before appointment. The declaration may ask the candidate to confirm whether they have ever been subject to disciplinary action, investigation, dismissal, resignation during investigation, or allegation related to safeguarding, PSEA, child protection, harassment, abuse, exploitation, discrimination, fraud, or serious misconduct.

Candidates must answer truthfully. Failure to disclose relevant information may result in withdrawal of offer, disciplinary action, termination, or referral where appropriate.

10.16 Code of Conduct Signing

All selected candidates, staff, volunteers, interns, consultants, contractors, suppliers, service providers, and representatives must read, understand, sign, and comply with EAO’s Code of Conduct before beginning work or participating in EAO activities.

Signing the Code of Conduct confirms that the person understands:

a. EAO’s zero-tolerance position.

b. Prohibited behaviors.

c. Duty to report concerns.

d. Confidentiality requirements.

e. Protection from retaliation.

f. Consequences for violations.

No person should be deployed to work with communities, children, vulnerable adults, persons with disabilities, or beneficiaries before signing the Code of Conduct.

10.17 Safeguarding and PSEA Induction

All newly recruited or engaged personnel must receive safeguarding and PSEA induction as soon as possible, and preferably before deployment to field activities or community contact.

Induction should cover:

a. EAO Safeguarding and PSEA Policy Manual.

b. Code of Conduct.

c. PSEA standards and prohibited conduct.

d. Child protection and protection of vulnerable adults.

e. Disability inclusion and accessibility.

f. Anti-harassment, bullying, and anti-discrimination.

g. Safe communication and data protection.

h. Reporting channels and duty to report.

i. Survivor-centered response.

j. Confidentiality and protection from retaliation.

k. Consequences of policy violations.

Induction attendance should be documented.

10.18 Probation and Early Performance Monitoring

EAO shall use probation periods or early performance monitoring to observe conduct, professionalism, respect for safeguarding standards, teamwork, and behavior with communities.

Managers should monitor whether new staff or representatives:

a. Maintain professional boundaries.

b. Respect beneficiaries, colleagues, and communities.

c. Follow reporting and confidentiality rules.

d. Avoid favoritism or misuse of authority.

e. Behave appropriately during field work, travel, distributions, and community contact.

f. Demonstrate inclusive and respectful conduct.

Safeguarding concerns during probation must be taken seriously and addressed promptly.

10.19 Volunteer, Intern, and Community Mobilizer Screening

Volunteers, interns, and community mobilizers often work closely with communities and may have access to children, vulnerable adults, persons with disabilities, beneficiary lists, and sensitive information. Therefore, they must be screened and oriented before engagement.

Minimum requirements should include:

a. Clear role description.

b. Identity verification where possible.

c. Reference or community verification where appropriate.

d. Safeguarding briefing.

e. Code of Conduct signing.

f. Explanation of prohibited conduct.

g. Reporting channel orientation.

h. Supervision arrangements.

i. Limits of authority and professional boundaries.

Volunteers and community mobilizers must not be used in ways that create unsupervised safeguarding risks.

10.20 Consultant, Contractor, and Supplier Screening

Consultants, contractors, suppliers, and service providers may create safeguarding risks where they interact with communities, staff, children, vulnerable adults, persons with disabilities, data, project sites, or resources.

EAO shall include safeguarding expectations in procurement, consultancy, and service agreements where relevant. Screening may include:

a. Review of previous experience.

b. Reference checks.

c. Safeguarding declaration.

d. Code of Conduct or supplier safeguarding commitment signing.

e. Briefing on PSEA and prohibited conduct.

f. Requirement to report concerns.

g. Clear limits on interaction with beneficiaries and communities.

h. Supervision and monitoring during service delivery.

EAO may refuse, suspend, or terminate contracts where a consultant, contractor, supplier, or service provider poses safeguarding risk or violates policy standards.

10.21 Partner and Consortium Screening

Before entering into partnership, consortium, sub-grant, or implementation arrangements, EAO should assess whether the partner has basic safeguarding and PSEA capacity or is willing to comply with EAO's standards.

Partner screening may consider:

a. Safeguarding and PSEA policies.

b. Code of Conduct.

c. Complaint and feedback systems.

d. Child protection measures.

e. Disability inclusion practices.

f. Staff screening and training.

g. Incident reporting procedures.

h. Past misconduct concerns where known.

i. Willingness to sign safeguarding commitments.

j. Ability to cooperate with investigations and corrective action.

Where gaps are identified, EAO may agree on capacity-strengthening measures, risk mitigation actions, or minimum compliance conditions.

10.22 Safeguarding in Hiring Panels

Recruitment panels must conduct themselves ethically and professionally. Panel members must:

a. Treat all candidates with respect and fairness.

b. Keep recruitment information confidential.

c. Avoid discriminatory questions or comments.

d. Declare conflicts of interest.

e. Avoid favoritism or pressure.

f. Assess candidates against approved criteria.

g. Include safeguarding suitability in decision-making.

h. Document decisions appropriately.

Panel members must not ask inappropriate personal, sexual, discriminatory, political, clan-related, or irrelevant questions.

10.23 Recruitment of Persons with Disabilities and Inclusive Hiring

EAO shall promote inclusive hiring and ensure that persons with disabilities can participate in recruitment processes fairly.

This may include accessible interview locations, adjusted communication methods, additional time, accessible information, support persons where appropriate and safe, and other reasonable accommodations.

Persons with disabilities must not be excluded because of assumptions about capacity. Role requirements should be assessed fairly and based on actual duties, reasonable accommodation, and safeguarding needs.

10.24 Recruitment of Staff Working with Children

For roles involving direct or regular contact with children, EAO shall apply stronger screening and supervision. This may include safeguarding-specific interview questions, reference checks, child safeguarding declaration, code of conduct signing, induction, close supervision, and clear rules on safe interaction with children.

No person shall be allowed to work with children if there is credible information suggesting risk of child abuse, exploitation, grooming, harassment, or unsafe conduct.

10.25 Recruitment of Staff Working with Survivors or Sensitive Cases

For roles involving GBV, PSEA, child protection, psychosocial support, case referral, health, protection, or survivor support, EAO shall assess the candidate's ability to work confidentially, respectfully, and safely with sensitive information and affected persons.

Candidates for such roles should demonstrate:

a. Survivor-centered attitudes.

b. Respect for confidentiality.

c. Non-blaming approach.

d. Ability to maintain boundaries.

e. Understanding of referral pathways.

f. Ability to avoid re-traumatization.

g. Respect for informed consent.

h. Commitment to do no harm.

10.26 Recruitment Records and Confidentiality

EAO shall keep recruitment records securely and confidentially. Records may include applications, interview notes, scoring sheets, reference checks, identity verification, safeguarding declarations, signed Code of Conduct forms, induction records, and appointment letters.

Access to recruitment records shall be limited to authorized persons. Safeguarding-related information must be stored carefully and shared only on a need-to-know basis.

10.27 Appointment Letters and Contracts

Appointment letters, employment contracts, consultancy agreements, volunteer agreements, contractor agreements, and supplier agreements should include or refer to safeguarding and PSEA obligations.

Contracts should state that compliance with EAO's Safeguarding and PSEA Policy Manual, Code of Conduct, confidentiality requirements, and reporting obligations is a condition of engagement.

Contracts may also state that safeguarding violations may result in disciplinary action, suspension, termination, contract cancellation, donor notification, referral to authorities, or other lawful action.

10.28 Deployment Before Completion of Screening

EAO should avoid deploying any person into high-risk roles before completing the required screening, code of conduct signing, and safeguarding induction.

Where urgent deployment is unavoidable, EAO shall apply temporary risk controls, such as limited duties, close supervision, no unsupervised contact with children or vulnerable adults, restricted access to sensitive data, and rapid completion of screening requirements.

10.29 Re-Engagement and Rehire Checks

Before rehiring former staff, re-engaging consultants, renewing volunteer roles, or extending contracts, EAO should review previous performance, conduct, safeguarding compliance, complaints history where relevant, and suitability for continued engagement.

A person previously dismissed, suspended, or found responsible for serious safeguarding misconduct shall not be re-engaged unless formally reviewed and approved under exceptional and lawful circumstances, with clear risk assessment and leadership authorization.

10.30 Handling Negative or Concerning Information

If screening reveals concerning information, EAO shall assess the seriousness, relevance, reliability, and risk before making a decision.

Concerning information may include previous safeguarding allegations, disciplinary action, unexplained employment gaps, refusal to provide references, inconsistent information, falsified documents, history of harassment, abuse of power, fraud, violence, or unsafe conduct.

EAO may withdraw an offer, delay appointment, request further clarification, apply restrictions, or reject the candidate where safeguarding risk is credible or cannot be safely managed.

10.31 Prohibition of Recruitment in Exchange for Favors

EAO strictly prohibits recruitment, appointment, internship, volunteering, consultancy, training selection, or employment opportunities being exchanged for sex, money, gifts, political support, clan loyalty, personal favors, private services, or any improper advantage.

Any person who requests, offers, accepts, or facilitates such exchange shall be subject to disciplinary, contractual, or legal action.

10.32 Reporting Concerns During Recruitment

Candidates, staff, panel members, referees, partners, or community members may report concerns about recruitment misconduct, safeguarding risks, harassment, discrimination, corruption, conflict of interest, favoritism, or abuse of power.

Reports must be handled confidentially and without retaliation. Concerns involving SEA, child abuse, harassment, or serious misconduct must be escalated through safeguarding procedures.

10.33 Responsibilities of Human Resources and Administration

EAO's Human Resources or Administration function is responsible for supporting safe recruitment procedures. Responsibilities may include:

a. Ensuring job descriptions include safeguarding responsibilities.

b. Including safeguarding statements in vacancy notices.

c. Organizing fair and documented screening.

d. Supporting reference checks.

e. Ensuring Code of Conduct signing.

f. Coordinating safeguarding induction.

g. Maintaining confidential recruitment records.

h. Advising managers on conflict of interest.

i. Ensuring contracts include safeguarding obligations.

j. Supporting action where recruitment concerns arise.

10.34 Responsibilities of Hiring Managers

Hiring managers are responsible for ensuring that recruitment decisions consider safeguarding suitability, role risk, professional competence, and organizational values.

Hiring managers must not rush recruitment in ways that bypass safeguarding checks for high-risk roles. They must declare conflicts of interest, participate fairly in selection, and ensure that new staff or representatives are properly supervised and oriented.

10.35 Responsibilities of Safeguarding Focal Persons

Safeguarding focal persons may support safe recruitment by advising on safeguarding questions, induction content, role risk assessment, code of conduct orientation, and referral of concerns identified during recruitment.

Safeguarding focal persons should not make recruitment decisions alone unless assigned by EAO management, but they may provide technical safeguarding advice.

10.36 Responsibilities of Candidates and New Recruits

Candidates and new recruits are required to provide accurate information, disclose relevant safeguarding or misconduct history when requested, participate honestly in screening, sign the Code of Conduct, attend safeguarding induction, and comply with EAO standards.

Providing false information, hiding serious misconduct history, or refusing to comply with safeguarding requirements may result in withdrawal of offer, termination, or other action.

10.37 Training for Recruitment Panels

EAO shall provide basic awareness to staff involved in recruitment on safe recruitment principles, non-discrimination, conflict of interest, safeguarding interview questions, confidentiality, and how to identify red flags.

Recruitment panel members should understand that safe recruitment is not only an HR task but a safeguarding prevention measure.

10.38 Monitoring Safe Recruitment Compliance

EAO shall periodically review whether safe recruitment procedures are being followed. Monitoring may include review of recruitment files, signed Code of Conduct forms, reference check records, induction attendance, probation reports, and role risk assessments.

Gaps should be corrected through improved procedures, staff training, management action, or additional supervision.

10.39 Minimum Safe Recruitment Standard

At minimum, EAO shall ensure that every person engaged by the organization has a clear role, is screened according to risk, signs the Code of Conduct, receives safeguarding and PSEA orientation, understands reporting obligations, and is supervised appropriately.

For roles involving children, vulnerable adults, persons with disabilities, survivors, communities, aid distribution, transport, or sensitive data, additional screening and safeguards are required.

10.40 Corrective Action for Breach of Safe Recruitment Standards

Failure to follow safe recruitment and screening procedures may expose EAO and communities to safeguarding risks. Any intentional bypassing of safe recruitment rules, concealment of concerns, favoritism, corruption, conflict of interest, or recruitment in exchange for favors may result in disciplinary or corrective action.

Corrective action may include recruitment review, cancellation of recruitment, re-screening, suspension of deployment, management warning, staff discipline, contract termination, partner review, or other appropriate action.

Safe recruitment and screening are essential parts of EAO's duty of care. No recruitment decision should prioritize speed, personal interest, favoritism, or convenience over the safety, dignity, and protection of the people EAO serves.

11. Safeguarding Risk Assessment in Programs

East Action Organization (EAO) is committed to identifying, assessing, preventing, reducing, monitoring, and responding to safeguarding risks in all its programs, projects, operations, partnerships, services, and community engagement. EAO recognizes that safeguarding risks can arise at any stage of the project cycle, including assessment, design, planning, recruitment, procurement, beneficiary selection, implementation, service delivery, communication, monitoring, evaluation, learning, reporting, and project closure.

Safeguarding risk assessment is a mandatory prevention measure under this Safeguarding and PSEA Policy Manual. It helps EAO ensure that its programs do not expose children, vulnerable adults, persons with disabilities, women, girls, boys, refugees, internally displaced persons, host communities, survivors, staff, volunteers, partners, or community members to harm, abuse, exploitation, harassment, discrimination, neglect, retaliation, unsafe communication, or misuse of power.

This section applies to all EAO board members, senior management, program teams, field staff, safeguarding focal persons, MEAL staff, finance and operations teams, HR and administration teams, volunteers, consultants, contractors, suppliers, partners, consortium members, service providers, community mobilizers, and any person involved in designing, implementing, monitoring, or supporting EAO programs.

11.1 Purpose of Safeguarding Risk Assessment

The purpose of safeguarding risk assessment is to ensure that potential risks of harm are identified early and managed before, during, and after program implementation.

Safeguarding risk assessment aims to:

a. Identify activities, locations, groups, relationships, and systems that may create safeguarding risks.

b. Prevent sexual exploitation and abuse, child abuse, abuse of vulnerable adults, harassment, discrimination, exclusion, retaliation, and misuse of power.

c. Protect children, vulnerable adults, persons with disabilities, survivors, beneficiaries, staff, volunteers, partners, and communities.

d. Ensure safe and inclusive access to EAO programs and services.

e. Strengthen accountability to affected populations.

f. Improve safe program design and implementation.

g. Guide staff, volunteers, partners, and contractors on risk reduction measures.

h. Support donor compliance and partnership due diligence.

i. Ensure that complaint, feedback, referral, and response systems are appropriate and accessible.

j. Promote continuous learning and improvement in safeguarding practice.

11.2 When Safeguarding Risk Assessment Shall Be Conducted

EAO shall conduct safeguarding risk assessments at key stages of the program cycle.

Risk assessment should be conducted:

a. During project design and proposal development.

b. Before starting a new project or activity.

c. Before working with children, vulnerable adults, persons with disabilities, survivors, refugees, IDPs, or other higher-risk groups.

d. Before distributions of food, cash, non-food items, assistive devices, shelter, livelihood inputs, or other assistance.

e. Before community consultations, trainings, workshops, assessments, research, surveys, or data collection.

f. Before home visits, case referrals, transport support, field travel, or overnight stays.

g. Before taking or using photos, videos, stories, case studies, interviews, or digital content.

h. Before engaging partners, contractors, suppliers, consultants, volunteers, or community mobilizers.

i. When there is a change in context, security situation, community dynamics, staffing, partner arrangement, donor requirement, or project location.

j. After a safeguarding incident, complaint, near miss, community concern, monitoring finding, or audit observation.

k. During periodic project review and monitoring.

l. During project closure where risks may remain after activities end.

11.3 Risk-Based Approach

EAO shall apply a risk-based approach to safeguarding. This means that stronger safeguarding controls shall be applied where the risk of harm is higher.

Higher-risk programs and activities may include:

a. Work involving children.

b. Work involving persons with disabilities.

c. Work involving survivors of violence, GBV, SEA, trafficking, torture, or serious trauma.

d. Work involving vulnerable adults, older persons, refugees, IDPs, returnees, or crisis-affected populations.

e. Distribution of food, cash, vouchers, shelter materials, assistive devices, medicine, livelihood inputs, or other high-demand assistance.

f. Beneficiary registration, verification, selection, targeting, or complaints handling.

g. Activities involving transport, accommodation, field movement, or home visits.

h. Case management, referral, protection monitoring, psychosocial support, health services, or legal support.

i. Data collection involving sensitive personal information.

j. Activities involving photos, videos, storytelling, communication, media, or public visibility.

k. Recruitment of volunteers, community mobilizers, enumerators, drivers, or temporary staff.

l. Work through partners, contractors, suppliers, or consortium members.

m. Activities in areas with weak services, limited reporting options, conflict, displacement, insecurity, social tension, or high dependency on aid.

11.4 Key Safeguarding Risks to Consider

EAO shall assess risks that may affect beneficiaries, community members, staff, volunteers, partners, and the organization.

Key safeguarding risks may include:

a. Sexual exploitation and abuse.

b. Sexual harassment.

c. Child abuse, child exploitation, child neglect, and unsafe child participation.

d. Abuse, neglect, or exploitation of vulnerable adults.

e. Exploitation, exclusion, or discrimination against persons with disabilities.

f. Gender-based violence risks.

g. Harassment, bullying, intimidation, or workplace abuse.

h. Discrimination based on gender, age, disability, ethnicity, clan, religion, displacement status, health status, or social background.

i. Retaliation against complainants, survivors, witnesses, whistleblowers, staff, volunteers, or community members.

j. Misuse of power, position, resources, beneficiary lists, referral authority, recruitment authority, or access to services.

k. Corruption, bribery, favoritism, nepotism, diversion of aid, or fraud linked to assistance.

l. Unsafe recruitment, weak supervision, or engagement of unsuitable personnel.

m. Unsafe transport, accommodation, field travel, or isolated contact.

n. Lack of accessible complaint and feedback channels.

o. Lack of safe referral pathways for medical, psychosocial, legal, child protection, GBV, disability, or protection support.

p. Unsafe communication, photography, videography, storytelling, social media, or data sharing.

q. Breach of confidentiality or misuse of personal data.

r. Community pressure, cultural silence, stigma, forced mediation, or informal settlement of serious cases.

s. Partner, contractor, supplier, or third-party safeguarding risks.

t. Weak monitoring, lack of accountability, or failure to act on known concerns.

11.5 Risk Assessment for Children

Any program or activity involving children must include a child safeguarding risk assessment.

EAO shall consider:

a. Whether children will participate directly or indirectly.

b. Whether staff, volunteers, partners, or visitors will have access to children.

c. Whether any one-to-one contact, transport, home visit, training, school activity, child consultation, data collection, photo, video, or interview is planned.

d. Whether parental or caregiver consent and child assent are required.

e. Whether the activity location is safe, supervised, accessible, and appropriate.

f. Whether staff understand child safeguarding rules and professional boundaries.

g. Whether reporting channels are child-sensitive and accessible.

h. Whether referral options exist for child protection, medical, psychosocial, legal, or safety support.

i. Whether children may face stigma, retaliation, exposure, or family/community pressure after participation.

j. Whether communication materials could identify or endanger children.

Children must never be placed at risk for the purpose of program visibility, reporting, fundraising, media, research, or implementation convenience.

11.6 Risk Assessment for Vulnerable Adults

Programs involving vulnerable adults must assess risks related to dependency, power imbalance, trauma, disability, illness, displacement, poverty, isolation, limited literacy, limited access to information, or reliance on assistance.

EAO shall consider whether vulnerable adults:

a. Understand their rights and available services.

b. Can access complaint and feedback channels.

c. Can give informed consent.

d. Are dependent on staff, caregivers, community leaders, partners, or service providers.

e. May face coercion, pressure, intimidation, exploitation, or retaliation.

f. Have access to safe referral services.

g. May be exposed to stigma or harm through communication, data collection, or public visibility.

h. Are protected from abuse during transport, distribution, home visits, referrals, or service delivery.

11.7 Disability-Inclusive Risk Assessment

EAO shall ensure that all safeguarding risk assessments consider the specific risks and barriers faced by persons with disabilities.

Risk assessment should consider:

a. Physical accessibility of venues, offices, distribution points, complaint desks, and service sites.

b. Accessibility of communication, reporting channels, consent processes, and referral information.

c. Risk of exclusion from beneficiary selection or participation.

d. Dependency on caregivers, interpreters, service providers, family members, or staff.

e. Risk of abuse, neglect, exploitation, harassment, or denial of services.

f. Safe transport and mobility support.

g. Protection of disability-related information and medical data.

h. Reasonable accommodation needs.

i. Referral options for health, rehabilitation, assistive devices, psychosocial support, protection, legal support, and disability services.

j. Whether persons with disabilities are directly consulted on what makes participation safe and dignified.

11.8 Gender and GBV Risk Assessment

EAO shall assess gender-related safeguarding risks in all relevant programs.

Risk assessment should consider:

a. Whether women, girls, men, boys, and persons with disabilities face different risks.

b. Risk of sexual exploitation and abuse during beneficiary selection, distribution, referral, transport, or employment.

c. Risk of sexual harassment in workplaces, field teams, trainings, and community activities.

d. Safety of women and girls traveling to and from activities.

e. Privacy and safety at service points, complaint desks, distribution sites, and sanitation facilities.

f. Risk of family conflict, community backlash, stigma, or retaliation after participation or reporting.

g. Availability of GBV referral services.

h. Gender balance and safety among staff, volunteers, community mobilizers, and focal persons.

i. Cultural barriers that may prevent safe reporting.

j. Measures to ensure dignity, confidentiality, and survivor-centered response.

11.9 PSEA Risk Assessment

EAO shall assess the risk of sexual exploitation and abuse in all programs, especially where staff or representatives have power over access to services, assistance, employment, referrals, selection, information, or protection.

PSEA risk assessment should consider:

a. Power differences between EAO personnel and beneficiaries.

b. Whether beneficiaries depend on EAO assistance.

c. Whether staff control beneficiary lists, distribution, referrals, or employment opportunities.

d. Whether beneficiaries know that services are free and no favors are required.

e. Whether reporting channels are safe, trusted, confidential, and accessible.

f. Whether community members understand prohibited conduct.

g. Whether staff, partners, volunteers, contractors, and suppliers have signed safeguarding commitments.

h. Whether there is risk of private contact, isolated meetings, transport misuse, or digital exploitation.

i. Whether referral pathways are available for survivors.

j. Whether monitoring can detect signs of exploitation, favoritism, or abuse of power.

11.10 Risk Assessment for Distribution and Beneficiary Selection

EAO shall assess safeguarding risks in beneficiary selection, targeting, registration, verification, distribution, and service delivery.

Risks may include:

a. Sexual exploitation or abuse linked to access to assistance.

b. Bribery, favoritism, nepotism, or clan-based exclusion.

c. Discrimination against persons with disabilities, women, older persons, refugees, IDPs, minorities, or marginalized groups.

d. Unsafe crowd control, pushing, humiliation, or public exposure.

e. Lack of privacy during registration or complaint handling.

f. Misuse of beneficiary data or lists.

g. Pressure on beneficiaries to provide money, labor, gifts, loyalty, political support, or personal favors.

h. Retaliation against those who complain.

i. Unsafe distribution locations, timing, or travel routes.

j. Lack of accessible distribution arrangements for persons with disabilities and older persons.

EAO shall use clear criteria, transparent communication, accessible complaint channels, supervision, and monitoring to reduce these risks.

11.11 Risk Assessment for Data Collection, Research, and MEAL Activities

EAO shall assess safeguarding risks before conducting surveys, interviews, focus group discussions, assessments, research, monitoring visits, evaluations, or data collection.

Risk assessment should consider:

a. Whether sensitive information will be collected.

b. Whether questions may cause distress, shame, trauma, or risk.

c. Whether informed consent is obtained.

d. Whether participation is voluntary.

e. Whether children or vulnerable adults are involved.

f. Whether data collectors are trained on safeguarding and confidentiality.

g. Whether interviews are conducted in safe and private locations.

h. Whether referral options are available if distress or disclosure occurs.

i. Whether personal data will be securely stored.

j. Whether findings could identify individuals or communities and create harm.

No data collection should proceed if it creates serious risk that cannot be safely managed.

11.12 Risk Assessment for Communication, Media, and Visibility

EAO shall assess safeguarding risks before collecting or using photos, videos, stories, case studies, testimonials, interviews, social media content, or public communication materials.

Risk assessment should consider:

a. Whether informed consent and, for children, caregiver consent and child assent are obtained.

b. Whether the person understands how the image or story will be used.

c. Whether the content may expose a person to stigma, retaliation, identification, exploitation, discrimination, shame, or harm.

d. Whether names, exact locations, disability details, survivor details, medical details, or case details should be removed.

e. Whether the image or story portrays the person with dignity and respect.

f. Whether children, survivors, persons with disabilities, refugees, IDPs, or vulnerable adults are protected from unsafe exposure.

g. Whether communication staff and partners understand safeguarding standards.

h. Whether digital storage and sharing are secure.

11.13 Risk Assessment for Transport, Travel, and Accommodation

EAO shall assess safeguarding risks related to transport, travel, accommodation, field movement, and overnight stays.

Risk assessment should consider:

a. Whether children, vulnerable adults, persons with disabilities, staff, or beneficiaries will be transported.

b. Whether anyone may be alone with a child or vulnerable person.

c. Whether travel is authorized, documented, and supervised.

d. Whether accommodation arrangements are safe, appropriate, and gender-sensitive.

e. Whether transport providers understand safeguarding expectations.

f. Whether vehicles, drivers, or travel arrangements may be misused for exploitation, harassment, intimidation, or private benefit.

g. Whether emergency contacts and reporting channels are available.

h. Whether persons with disabilities have safe and accessible transport arrangements.

i. Whether staff safety and harassment risks during travel are managed.

11.14 Risk Assessment for Home Visits and Community-Based Activities

Home visits and community-based activities can create safeguarding risks due to privacy, power imbalance, dependency, family dynamics, and limited supervision.

EAO shall assess:

a. Purpose and necessity of the home visit.

b. Staff or volunteer conducting the visit.

c. Whether two-person visit arrangements are needed.

d. Consent of the participant or caregiver where appropriate.

e. Safety of the location.

f. Risk of being alone with a child or vulnerable adult.

g. Risk of community stigma or exposure.

h. Referral needs that may arise.

i. Confidentiality of information discussed.

j. Documentation and supervisor notification.

Home visits should be conducted professionally, safely, respectfully, and only for legitimate program purposes.

11.15 Risk Assessment for Partners, Contractors, and Suppliers

EAO shall assess safeguarding risks linked to partners, consortium members, contractors, suppliers, consultants, service providers, and sub-grantees.

Risk assessment should consider:

a. Whether the third party will interact with beneficiaries, children, vulnerable adults, persons with disabilities, or communities.

b. Whether the third party has a safeguarding or PSEA policy.

c. Whether their staff have signed a Code of Conduct.

d. Whether they have complaint and reporting systems.

e. Whether they have past safeguarding concerns where known.

f. Whether they understand EAO’s safeguarding expectations.

g. Whether safeguarding clauses are included in agreements or contracts.

h. Whether supervision and monitoring arrangements are in place.

i. Whether they can report concerns promptly to EAO.

j. Whether they may create risk through transport, service delivery, construction, procurement, distribution, or community access.

EAO may apply additional controls or refuse engagement where risks are too high.

11.16 Risk Assessment for Digital Platforms and Online Engagement

EAO shall assess safeguarding risks related to digital communication, online training, social media, remote data collection, messaging groups, digital registration, and online service delivery.

Risks may include:

a. Online harassment, grooming, exploitation, or abuse.

b. Sharing of personal data without consent.

c. Unauthorized contact with children or beneficiaries.

d. Exposure of survivors or vulnerable people.

e. Cyberbullying, threats, or intimidation.

f. Misuse of photos, videos, stories, or personal information.

g. Lack of privacy in online meetings or messaging groups.

h. Digital exclusion of persons with disabilities, older persons, or people with limited access.

EAO shall establish safe digital conduct, consent, privacy, moderation, and reporting measures.

11.17 Risk Assessment for Staff and Workplace Safety

Safeguarding risk assessment shall also consider risks affecting staff, volunteers, interns, consultants, and representatives.

These may include:

a. Sexual harassment.

b. Workplace bullying.

c. Abuse of authority.

d. Discrimination.

e. Unsafe supervision.

f. Retaliation for reporting.

g. Field travel safety.

h. Stress, burnout, or exposure to traumatic information.

i. Unsafe accommodation or transport.

j. Lack of confidential reporting channels.

EAO shall ensure that staff and volunteers have safe reporting options, respectful supervision, access to support, and protection from retaliation.

11.18 Risk Rating

EAO shall rate safeguarding risks according to likelihood and impact.

A simple rating may be used:

a. Low risk: Harm is unlikely and existing controls are sufficient.

b. Medium risk: Harm is possible and additional controls are required.

c. High risk: Harm is likely or impact may be serious; strong controls and management approval are required.

d. Critical risk: Serious harm is likely or controls are insufficient; activity should not proceed until risks are reduced to an acceptable level.

Risk rating should consider the vulnerability of participants, level of staff contact, power imbalance, privacy, access to services, type of activity, location, available reporting channels, referral services, and capacity of staff or partners.

11.19 Risk Mitigation Measures

EAO shall identify practical measures to reduce safeguarding risks.

Risk mitigation measures may include:

a. Safeguarding briefing for staff, volunteers, partners, and contractors.

b. Code of Conduct signing.

c. Safe recruitment and screening.

d. Clear beneficiary selection criteria.

e. Community awareness on free services and prohibited conduct.

f. Accessible complaint and feedback channels.

g. Referral pathway mapping.

h. Gender-sensitive and disability-inclusive arrangements.

i. Child-safe participation procedures.

j. Safe transport and travel controls.

k. Adequate supervision and monitoring.

l. Avoiding isolated one-to-one contact.

m. Consent procedures for photos, videos, stories, and data collection.

n. Secure storage of personal data.

o. Conflict of interest declaration.

p. Management approval for high-risk activities.

q. Partner safeguarding clauses and orientation.

r. Immediate reporting and escalation procedures.

s. Corrective action where gaps are identified.

11.20 Approval of High-Risk Activities

Activities assessed as high or critical safeguarding risk must receive management review before implementation.

High-risk activities should not proceed unless:

a. Risks have been clearly identified.

b. Mitigation measures are in place.

c. Staff and partners understand their responsibilities.

d. Reporting channels are available.

e. Referral options are identified.

f. Consent and confidentiality measures are prepared.

g. Supervision arrangements are clear.

h. Management has approved the activity.

Critical-risk activities shall be postponed, redesigned, or cancelled if risks cannot be safely managed.

11.21 Roles and Responsibilities in Risk Assessment

Program teams are responsible for identifying safeguarding risks during project planning and implementation.

Safeguarding focal persons are responsible for providing technical guidance, reviewing risk concerns, supporting mitigation plans, and advising on reporting and referral measures.

MEAL staff are responsible for ensuring that monitoring, evaluation, accountability, feedback, and data collection activities are safe and confidential.

HR and administration teams are responsible for safe recruitment, staff orientation, code of conduct signing, and workplace-related safeguarding measures.

Finance, procurement, and operations teams are responsible for ensuring that suppliers, contractors, transport providers, and service providers follow safeguarding expectations.

Managers are responsible for approving risk mitigation plans, allocating resources, ensuring implementation, and addressing gaps.

Partners and contractors are responsible for complying with safeguarding requirements and reporting risks or concerns.

11.22 Documentation of Risk Assessment

Safeguarding risk assessments must be documented using an approved template or project risk tool.

Documentation should include:

a. Project or activity name.

b. Location.

c. Target groups.

d. Description of activity.

e. Identified safeguarding risks.

f. People who may be affected.

g. Likelihood and impact rating.

h. Existing controls.

i. Additional mitigation measures.

j. Responsible person.

k. Timeline for action.

l. Review date.

m. Approval where required.

Risk assessment documents must be stored securely and reviewed when circumstances change.

11.23 Review and Updating of Risk Assessments

Safeguarding risk assessments shall be reviewed regularly and updated when needed.

Updates may be required when:

a. A new activity is introduced.

b. A new location is added.

c. Target groups change.

d. A safeguarding concern is reported.

e. A complaint trend is identified.

f. A partner or contractor changes.

g. Security or community context changes.

h. Staff structure changes.

i. Donor requirements change.

j. Monitoring identifies gaps.

Risk assessment is not a one-time activity. It must be part of continuous program management.

11.24 Community Participation in Risk Identification

EAO shall involve communities where appropriate and safe in identifying safeguarding risks and solutions.

Community participation may include consultation with women, youth, children where appropriate, persons with disabilities, older persons, refugees, IDPs, host communities, caregivers, community leaders, and local protection actors.

Consultations must be safe, voluntary, inclusive, and confidential where needed. EAO must avoid asking questions or organizing discussions in ways that expose individuals to stigma, retaliation, or harm.

11.25 Use of Complaints and Feedback in Risk Assessment

EAO shall use complaints, feedback, community concerns, staff observations, incident reports, and monitoring findings to update safeguarding risk assessments.

Patterns of complaints may indicate risks such as:

a. Favoritism in beneficiary selection.

b. Unsafe staff behavior.

c. Lack of accessible reporting channels.

d. Discrimination against persons with disabilities.

e. Sexual harassment or SEA risk.

f. Retaliation or fear of reporting.

g. Poor communication with communities.

h. Data privacy concerns.

i. Partner or contractor misconduct.

EAO shall analyze such information carefully and take corrective action.

11.26 Safeguarding Risk Assessment in Emergency Response

In emergency response, safeguarding risks may increase because of urgency, displacement, dependency on aid, weakened protection systems, insecurity, staff pressure, and rapid recruitment.

EAO shall ensure that even during emergency response:

a. Code of Conduct is signed.

b. Staff and volunteers receive basic safeguarding briefing.

c. Complaint channels are established.

d. Beneficiaries are informed that assistance is free.

e. Distribution and selection processes are transparent.

f. Children and vulnerable adults are protected.

g. Persons with disabilities are not excluded.

h. Referral options are identified.

i. Staff and volunteers are supervised.

j. SEA concerns are reported and escalated.

Urgency must never be used as a reason to ignore safeguarding standards.

11.27 Safeguarding Risk Assessment in Project Closure

EAO shall consider safeguarding risks during project closure or transition.

Risks may include:

a. Loss of services or referrals.

b. Unresolved complaints.

c. Unclear communication with beneficiaries.

d. Misuse of remaining resources.

e. Retaliation after project exit.

f. Abandonment of vulnerable cases.

g. Data storage or disposal risks.

h. Continued partner or community expectations.

EAO shall communicate closure clearly, manage referrals responsibly, protect records, and ensure that unresolved safeguarding concerns are followed up appropriately.

11.28 Escalation of Serious Risks

Any serious safeguarding risk identified during assessment or implementation must be escalated to the appropriate manager, safeguarding focal person, or senior leadership without delay.

Serious risks may include:

a. Risk of sexual exploitation and abuse.

b. Risk of child abuse.

c. Risk of serious harm to vulnerable adults or persons with disabilities.

d. Risk of retaliation against complainants or witnesses.

e. Unsafe staff or partner conduct.

f. Weak reporting systems in high-risk activities.

g. Serious breach of confidentiality.

h. Partner or contractor refusal to comply with safeguarding standards.

EAO shall take immediate action to reduce risk and protect affected persons.

11.29 Corrective Action and Risk Reduction Follow-Up

Where safeguarding risks or gaps are identified, EAO shall develop and implement corrective actions.

Corrective actions may include:

a. Additional staff training.

b. Revision of activity design.

c. Improved supervision.

d. Replacement or removal of unsafe personnel.

e. Strengthening complaint channels.

f. Updating referral pathways.

g. Improved accessibility measures.

h. Partner capacity strengthening.

i. Revision of communication materials.

j. Suspension or cancellation of unsafe activities.

k. Disciplinary or contractual action where necessary.

Follow-up must be documented and reviewed by responsible managers.

11.30 Minimum Safeguarding Risk Assessment Standard

At minimum, every EAO project or activity shall identify who may be at risk, what harm may occur, how likely and serious the risk is, what controls are already in place, what additional measures are needed, who is responsible, and when the risk assessment will be reviewed.

No high-risk activity should proceed without clear safeguarding controls, accessible reporting channels, staff awareness, referral options, and management oversight.

Safeguarding risk assessment is a continuous duty of care and an essential part of safe, accountable, inclusive, and professional programming at East Action Organization.

12. Complaints and Feedback Mechanism

East Action Organization (EAO) is committed to maintaining a safe, accessible, inclusive, confidential, transparent, and responsive Complaints and Feedback Mechanism for staff, volunteers, beneficiaries, community members, partners, contractors, suppliers, visitors, and all people who interact with EAO's work. EAO recognizes that communities and affected populations have the right to raise concerns, provide feedback, report misconduct, request information, and complain safely without fear of retaliation, discrimination, intimidation, exclusion, or loss of access to services.

The Complaints and Feedback Mechanism is a core part of EAO's safeguarding, PSEA, accountability to affected populations, program quality, community engagement, and organizational learning system. It helps EAO identify risks, respond to concerns, improve services, prevent abuse, strengthen trust, and ensure that assistance is delivered fairly, respectfully, and safely.

This section applies to all EAO programs, offices, field sites, community activities, distributions, trainings, assessments, monitoring activities, partnerships, consortium arrangements,

procurement activities, service delivery points, digital platforms, and all persons acting for or on behalf of EAO.

12.1 Purpose of the Complaints and Feedback Mechanism

The purpose of EAO's Complaints and Feedback Mechanism is to provide safe and trusted ways for people to share concerns, complaints, suggestions, questions, appreciation, or reports about EAO's work, staff conduct, partner conduct, service quality, access to assistance, safeguarding risks, and possible misconduct.

The mechanism aims to:

a. Ensure that beneficiaries and communities can safely raise concerns.

b. Promote accountability to affected populations.

c. Identify and respond to safeguarding and PSEA concerns.

d. Improve program quality, inclusion, fairness, and service delivery.

e. Prevent abuse, exploitation, harassment, discrimination, corruption, and misuse of power.

f. Provide communities with clear information on how to report concerns.

g. Ensure complaints are handled confidentially, fairly, and promptly.

h. Strengthen trust between EAO, communities, partners, and donors.

i. Support learning, corrective action, and continuous improvement.

12.2 Scope of Complaints and Feedback

EAO's Complaints and Feedback Mechanism may receive different types of feedback and complaints, including:

a. Safeguarding concerns.

b. Sexual exploitation and abuse concerns.

c. Sexual harassment.

d. Child protection concerns.

e. Abuse or neglect of vulnerable adults.

f. Disability exclusion or discrimination.

g. Harassment, bullying, intimidation, or discrimination.

h. Corruption, fraud, bribery, diversion of aid, or misuse of resources.

i. Unfair beneficiary selection or exclusion.

j. Poor quality of services or assistance.

k. Staff, volunteer, partner, contractor, or supplier misconduct.

l. Lack of information or poor communication.

m. Unsafe distribution, transport, referral, training, or field activity.

n. Breach of confidentiality or misuse of personal data.

o. Retaliation, threats, or pressure after making a complaint.

p. Suggestions for improvement.

q. Appreciation, positive feedback, or general comments.

All complaints must be taken seriously, even when they are anonymous, incomplete, informal, or made through community channels.

12.3 Guiding Principles

EAO's Complaints and Feedback Mechanism shall be guided by the following principles:

a. Safety: The mechanism must not expose complainants, survivors, witnesses, staff, or community members to further harm.

b. Accessibility: Reporting channels must be easy to use and accessible to women, men, children, persons with disabilities, older persons, refugees, IDPs, host communities, and people with limited literacy.

c. Confidentiality: Complaint information must be protected and shared only on a strict need-to-know basis.

d. Survivor-centered approach: Safeguarding and PSEA complaints must prioritize the safety, dignity, wishes, rights, and wellbeing of survivors.

e. Child-sensitive approach: Complaints involving children must be handled in the best interests of the child.

f. Non-discrimination: All people must be able to complain without discrimination or exclusion.

g. Transparency: Communities should understand how to complain, what to expect, and how EAO will respond.

h. Timeliness: Complaints should be acknowledged, referred, reviewed, and addressed within reasonable timeframes.

i. Accountability: EAO shall take corrective action when complaints reveal misconduct, service gaps, or safeguarding risks.

j. Protection from retaliation: No person shall be punished or disadvantaged for raising a concern in good faith.

12.4 Accessible Reporting Channels

EAO shall provide multiple complaint and feedback channels to ensure that different people can report safely and conveniently.

Reporting channels may include:

a. Direct reporting to EAO staff or supervisors.

b. Reporting to safeguarding focal persons.

c. Complaint and feedback forms.

d. Complaint boxes at field sites or offices.

e. Telephone or mobile contact.

f. Email or written communication.

g. Community feedback meetings.

h. Women, youth, disability, or community focal persons where safe and appropriate.

i. Partner reporting channels.

j. Whistleblowing channels for serious or sensitive concerns.

k. Verbal reporting for people with limited literacy.

l. Accessible reporting support for persons with disabilities.

EAO shall avoid relying on only one reporting channel, especially where it may exclude women, children, persons with disabilities, people with limited literacy, or those who fear speaking publicly.

12.5 Accessibility for Children, Persons with Disabilities, and Vulnerable Groups

EAO shall ensure that complaint channels are accessible to children, persons with disabilities, vulnerable adults, older persons, refugees, IDPs, women and girls, minority groups, and people facing communication barriers.

This may include:

a. Simple language explanations.

b. Local language communication.

c. Verbal complaint options.

d. Child-friendly reporting methods.

e. Disability-accessible complaint locations.

f. Sign language or communication support where available.

g. Trusted focal persons of different genders where possible.

h. Private reporting options.

i. Community awareness sessions.

j. Reasonable accommodation for persons with disabilities.

No person should be denied the opportunity to report because of disability, age, gender, language, literacy level, displacement status, social status, or fear of retaliation.

12.6 Community Awareness on Complaints and Feedback

EAO shall inform communities and beneficiaries about the Complaints and Feedback Mechanism.

Community awareness should explain:

a. Their right to complain or give feedback.

b. That EAO assistance and services are free from exploitation and abuse.

c. Expected behavior of EAO staff, volunteers, partners, and contractors.

d. Prohibited conduct, including SEA, harassment, discrimination, and corruption.

e. Available reporting channels.

f. How complaints will be handled.

g. Confidentiality and protection from retaliation.

h. Available referral support for safeguarding and PSEA cases.

i. That complaints can be made without losing access to services.

j. That anonymous complaints will be reviewed where possible.

Information should be shared in appropriate languages and formats and repeated during key program stages, such as registration, distribution, training, monitoring, and project closure.

12.7 Receiving Complaints

Any EAO staff member or representative who receives a complaint must listen respectfully, remain calm, avoid judgment, and record only necessary information.

The person receiving the complaint must:

a. Thank the complainant for sharing the concern.

b. Treat the concern seriously.

c. Avoid blaming, questioning aggressively, or doubting the complainant.

d. Avoid promising outcomes that cannot be guaranteed.

e. Explain confidentiality and its limits.

f. Ask only necessary questions for safety and referral purposes.

g. Report or refer the complaint through approved channels.

h. Protect the complainant’s privacy.

i. Avoid discussing the complaint with unauthorized persons.

j. Take urgent action if there is immediate risk of harm.

Staff must not investigate complaints by themselves unless authorized. Safeguarding, PSEA, child protection, and serious misconduct complaints must be escalated immediately according to approved procedures.

12.8 Classification of Complaints

EAO may classify complaints to ensure appropriate response.

Complaint categories may include:

a. General feedback or suggestion.

b. Request for information.

c. Service quality complaint.

d. Program access or beneficiary selection complaint.

e. Staff conduct complaint.

f. Partner, contractor, or supplier conduct complaint.

g. Fraud, corruption, bribery, or aid diversion complaint.

h. Harassment, bullying, or discrimination complaint.

i. Safeguarding complaint.

j. PSEA complaint.

k. Child protection complaint.

l. Serious safety or security concern.

Safeguarding, PSEA, child protection, abuse, exploitation, harassment, retaliation, or serious misconduct complaints must be treated as sensitive and escalated through confidential channels.

12.9 Anonymous Complaints

EAO shall accept and review anonymous complaints where possible. Anonymous complaints may provide important information about safeguarding risks, misconduct, fraud, corruption, exploitation, harassment, or service gaps.

EAO shall assess anonymous complaints based on available information, seriousness, risk level, and possibility of verification. Lack of identity shall not be used as a reason to automatically dismiss a complaint.

However, anonymous complaints may limit EAO’s ability to follow up directly with the complainant or provide feedback.

12.10 Confidentiality and Information Protection

Complaint information must be handled with strict confidentiality. Information shall be shared only with authorized persons on a need-to-know basis for response, referral, investigation, management decision-making, donor reporting, legal compliance, or corrective action.

EAO shall protect:

a. Names and identities of complainants.

b. Survivor information.

c. Child information.

d. Witness information.

e. Subject of complaint information.

f. Personal data.

g. Complaint forms and records.

h. Referral information.

i. Investigation documents.

j. Case outcomes.

Unauthorized sharing, gossip, disclosure, copying, photographing, forwarding, or public discussion of complaint information is prohibited and may result in disciplinary action.

12.11 Protection from Retaliation

EAO strictly prohibits retaliation against anyone who submits a complaint, gives feedback, reports misconduct, supports a complainant, provides information, refuses unsafe conduct, or participates in a review or investigation in good faith.

Retaliation may include threats, intimidation, dismissal, demotion, exclusion, harassment, denial of services, discrimination, community pressure, false accusations, or any negative treatment linked to reporting.

Any concern about retaliation must be treated seriously and addressed immediately.

12.12 Complaints Involving Sexual Exploitation and Abuse

Complaints involving sexual exploitation and abuse must be handled as serious safeguarding concerns.

EAO shall ensure that SEA complaints are:

a. Received safely and respectfully.

b. Treated confidentially.

c. Escalated immediately to authorized safeguarding or management channels.

d. Responded to using a survivor-centered approach.

e. Referred to appropriate services where available and with informed consent.

f. Protected from retaliation and exposure.

g. Investigated only by authorized and competent persons.

h. Reported to donors or authorities where required and safe.

No SEA complaint shall be resolved through informal settlement, forced apology, community mediation, family pressure, silence, or compensation.

12.13 Complaints Involving Children

Complaints involving children must be handled with the best interests of the child as a primary consideration.

EAO shall ensure that:

a. The child is treated with care, respect, and age-appropriate communication.

b. The child is not blamed, pressured, exposed, or forced to repeat information unnecessarily.

c. Immediate safety concerns are addressed.

d. Appropriate child protection referral is considered.

e. Parents or caregivers are involved only where safe and appropriate.

f. Child information is kept confidential.

g. Mandatory reporting obligations are followed where applicable.

h. The child is protected from retaliation, stigma, or further harm.

12.14 Complaints Involving Persons with Disabilities

EAO shall ensure that persons with disabilities can safely submit complaints and receive appropriate response.

Complaint handling must consider:

a. Accessible communication.

b. Reasonable accommodation.

c. Supported decision-making where safe and appropriate.

d. Protection from caregiver-related retaliation or dependency risk.

e. Confidentiality of disability-related information.

f. Safe referral to disability-inclusive services.

g. Equal treatment and respect for the person's voice and choices.

No complaint by a person with disability shall be dismissed because of assumptions about capacity, communication style, or dependency.

12.15 Complaints Involving Partners, Contractors, or Suppliers

EAO shall accept complaints about partners, consortium members, contractors, suppliers, consultants, service providers, and other third parties working with or on behalf of EAO.

Such complaints may involve safeguarding violations, SEA, harassment, discrimination, fraud, corruption, poor service delivery, unsafe behavior, or breach of contract.

EAO shall review the complaint, assess risks, notify relevant management, and take appropriate action. This may include partner engagement, corrective action, suspension of activities, contract review, termination, donor notification, or referral to authorities where required.

12.16 Complaint Acknowledgement and Feedback to Complainants

Where the complainant is known and it is safe to do so, EAO should acknowledge receipt of the complaint and explain the next steps in simple and respectful language.

Feedback to complainants should be provided where possible, while respecting confidentiality, safety, and privacy. EAO may not be able to share all details of investigations, disciplinary decisions, or actions involving other people.

The complainant should be informed that their concern has been received, taken seriously, and handled according to EAO procedures.

12.17 Timeframe for Response

EAO shall respond to complaints as promptly as possible based on seriousness and urgency.

Suggested response timeframes may include:

a. Immediate action for life-threatening, child protection, SEA, serious abuse, or urgent safety concerns.

b. Initial acknowledgement within a reasonable period where contact details are available.

c. Referral support as soon as possible for survivors or affected persons.

d. Management review according to the nature and complexity of the complaint.

e. Regular follow-up where a complaint requires longer review or investigation.

Urgent safeguarding and PSEA complaints must never be delayed because of administrative convenience.

12.18 Complaint Records and Documentation

EAO shall document complaints accurately and securely. Records may include complaint forms, referral notes, risk assessments, actions taken, follow-up notes, investigation references, corrective action, and closure information.

Complaint records must be stored securely and accessed only by authorized persons. Sensitive complaints, especially safeguarding and PSEA cases, must be separated from general feedback records where possible and protected with higher confidentiality.

12.19 Complaint Review and Corrective Action

EAO shall use complaints and feedback to identify weaknesses, risks, and improvement areas.

Corrective action may include:

a. Improving service delivery.

b. Changing unsafe procedures.

c. Strengthening supervision.

d. Training staff or partners.

e. Updating communication materials.

f. Improving accessibility.

g. Revising beneficiary selection processes.

h. Strengthening complaint channels.

i. Taking disciplinary action.

j. Reviewing partner, contractor, or supplier performance.

k. Updating safeguarding risk assessments.

Corrective actions must be documented and followed up by responsible managers.

12.20 Complaints Related to Fraud, Corruption, or Aid Diversion

Complaints involving fraud, corruption, bribery, theft, aid diversion, beneficiary manipulation, inflated claims, or misuse of resources must be handled seriously.

Where fraud or corruption creates safeguarding risks, such as demanding payments from beneficiaries, denying assistance, exploiting people for access, or manipulating lists, the case must also be reviewed from a safeguarding perspective.

12.21 Complaint Mechanism During Emergency Response

During emergency response, EAO shall establish complaint channels as early as possible. Emergency conditions shall not be used as a reason to ignore feedback, safeguarding complaints, PSEA reporting, or community accountability.

At minimum, emergency complaint systems should include:

a. Clear community information.

b. Free assistance messaging.

c. Safe reporting channels.

d. Staff and volunteer briefing.

e. Complaint recording.

f. Referral pathways for urgent cases.

g. Protection from retaliation.

12.22 Roles and Responsibilities

EAO leadership is responsible for ensuring that the Complaints and Feedback Mechanism is active, trusted, resourced, monitored, and linked to safeguarding response.

Managers are responsible for ensuring that complaints are taken seriously, reviewed appropriately, and acted upon.

Safeguarding focal persons are responsible for receiving or supporting sensitive safeguarding complaints, advising on safe handling, referral, confidentiality, and escalation.

Program teams are responsible for informing communities about complaint channels and responding to program-related feedback.

MEAL staff, where available, are responsible for supporting feedback collection, analysis, documentation, and learning.

All staff and representatives are responsible for receiving complaints respectfully and reporting them through approved channels.

12.23 Monitoring and Learning

EAO shall monitor complaint trends to identify repeated problems, safeguarding risks, service gaps, exclusion, discrimination, staff conduct issues, or partner-related concerns.

Complaint data shall be analyzed in a way that protects confidentiality. Findings should be used for program improvement, management action, staff training, partner review, and safeguarding risk reduction.

12.24 Minimum Standard for Complaints and Feedback

At minimum, EAO shall ensure that communities know how to complain, complaints can be made safely, sensitive complaints are handled confidentially, urgent risks are escalated immediately, complainants are protected from retaliation, and feedback is used to improve programs and accountability.

The Complaints and Feedback Mechanism is a mandatory part of EAO's commitment to safeguarding, PSEA, accountability, inclusion, transparency, and community trust.

13. Whistleblowing and Confidential Reporting

East Action Organization (EAO) is committed to maintaining a safe, confidential, trusted, and protective whistleblowing and confidential reporting system. EAO recognizes that staff, volunteers, partners, contractors, suppliers, beneficiaries, community members, and other stakeholders may become aware of serious wrongdoing, safeguarding violations, abuse of power,

sexual exploitation and abuse, fraud, corruption, harassment, discrimination, retaliation, or other misconduct and may need a safe way to report without fear.

Whistleblowing is an important accountability and risk management tool. It enables people to report serious concerns in good faith so that EAO can prevent harm, protect affected persons, address misconduct, comply with legal and donor obligations, and maintain public trust.

This section applies to all EAO board members, management, staff, volunteers, interns, consultants, contractors, suppliers, service providers, partners, consortium members, visitors, community representatives, beneficiaries, and any person who becomes aware of serious concerns connected to EAO's work.

13.1 Purpose of Whistleblowing and Confidential Reporting

The purpose of whistleblowing and confidential reporting is to provide a safe way to report serious wrongdoing or misconduct that may not be safely reported through ordinary management channels.

This section aims to:

a. Encourage good faith reporting of serious concerns.

b. Protect whistleblowers from retaliation.

c. Ensure confidential handling of sensitive information.

d. Support early detection of safeguarding risks, SEA, fraud, corruption, and abuse of power.

e. Strengthen organizational integrity and accountability.

f. Ensure that serious concerns are reviewed and acted upon appropriately.

g. Promote a culture where people can speak up safely.

13.2 Matters That May Be Reported Through Whistleblowing

Whistleblowing may be used to report serious concerns, including:

a. Sexual exploitation and abuse.

b. Sexual harassment.

c. Child abuse, exploitation, or neglect.

d. Abuse, exploitation, or neglect of vulnerable adults.

e. Abuse, discrimination, or exclusion of persons with disabilities.

f. Fraud, corruption, bribery, theft, or diversion of aid.

g. Misuse of organizational funds, assets, authority, or information.

h. Serious breach of EAO policies, donor rules, or legal obligations.

i. Harassment, bullying, discrimination, intimidation, or retaliation.

j. Concealment of safeguarding concerns or misconduct.

k. Falsification of documents, reports, records, or financial information.

l. Conflict of interest, nepotism, favoritism, or recruitment corruption.

m. Unsafe practices that place people at risk of harm.

n. Obstruction of investigation, destruction of evidence, or witness intimidation.

o. Serious misconduct by staff, management, board members, partners, contractors, suppliers, or representatives.

p. Any attempt to silence, threaten, punish, or disadvantage a person for reporting a concern.

13.3 Who May Report

Whistleblowing reports may be made by:

a. Staff members.

b. Volunteers.

c. Interns.

d. Consultants.

e. Contractors and suppliers.

f. Partner and consortium staff.

g. Board members.

h. Beneficiaries.

i. Community members.

j. Visitors.

k. Service providers.

l. Witnesses.

m. Former staff or former partners.

n. Any person who has credible information about serious wrongdoing connected to EAO's work.

A person does not need to be directly affected to report a concern.

13.4 Good Faith Reporting

EAO encourages all persons to report concerns in good faith. A good faith report means that the person honestly believes the information is true or that there is a genuine concern, even if the concern is later not proven.

Whistleblowers are not required to prove the concern before reporting. They should provide as much relevant information as they safely can, but lack of complete information shall not prevent reporting.

Good faith reporters shall be protected from retaliation, punishment, discrimination, or disadvantage.

13.5 Anonymous Reporting

EAO shall accept anonymous whistleblowing reports where possible. Anonymous reporting may be necessary where the reporter fears retaliation, stigma, job loss, community pressure, or harm.

EAO shall assess anonymous reports based on the seriousness of the concern, available information, risk level, and possibility of verification.

Anonymous reporting may limit EAO's ability to follow up with the reporter or ask clarifying questions, but it shall not be automatically dismissed.

13.6 Confidential Reporting

Confidential reporting means that the identity of the whistleblower is known to authorized persons but is protected and not shared without a legitimate need.

EAO shall protect the identity of whistleblowers and shall share information only on a need-to-know basis for protection, assessment, investigation, legal compliance, donor reporting, or management action.

Confidentiality may have limits where there is an immediate risk of serious harm, child protection concern, legal obligation, or need to protect others. Any such limits should be explained where safe and possible.

13.7 Reporting Channels

Whistleblowing and confidential reports may be made through approved EAO channels, such as:

a. Safeguarding focal person.

b. Executive Director or senior management.

c. Board-designated contact where senior management is implicated.

d. HR or administration focal person.

e. Written whistleblowing report form.

f. Dedicated email or phone contact where available.

g. Complaint and feedback mechanism.

h. Partner or donor reporting channel where appropriate.

i. Direct confidential meeting with an authorized person.

EAO shall ensure that people know which channels are available and which channel to use when the concern involves their supervisor or senior staff.

13.8 Reporting Where Management Is Involved

If the concern involves a direct supervisor, manager, senior leader, board member, safeguarding focal person, or person who normally receives complaints, the whistleblower may report to another trusted senior person, board-designated contact, partner channel, donor channel, or other approved independent route.

No person implicated in a complaint shall be responsible for receiving, managing, investigating, or deciding on that complaint.

13.9 Protection from Retaliation

EAO strictly prohibits retaliation against whistleblowers and persons who support or participate in reporting.

Retaliation may include:

a. Dismissal, demotion, suspension, transfer, or denial of promotion.

b. Threats, intimidation, harassment, bullying, or humiliation.

c. Exclusion from work, meetings, services, or opportunities.

d. Discrimination or hostile treatment.

e. False accusations or damage to reputation.

f. Pressure to withdraw a complaint.

g. Denial of assistance or services.

h. Community pressure, family pressure, or partner pressure.

i. Any negative action linked to reporting in good faith.

Retaliation is a serious violation and may lead to disciplinary or contractual action.

13.10 Protection Measures for Whistleblowers

EAO shall assess risks to whistleblowers and take reasonable protection measures where needed.

Protection measures may include:

a. Keeping identity confidential.

b. Limiting information access to authorized persons.

c. Temporary adjustment of duties or reporting lines.

d. Safe communication arrangements.

e. Protection from contact with the subject of complaint.

f. Management instruction against retaliation.

g. Referral to support services where needed.

h. Monitoring of workplace or community retaliation risks.

i. Escalation to senior leadership or board level where necessary.

13.11 Responsibilities of Whistleblowers

Whistleblowers should report concerns honestly and responsibly. They should provide relevant information where safely available, such as:

a. What happened or what is suspected.

b. Who was involved.

c. Who may have been affected.

d. When and where it happened.

e. Whether there is immediate risk.

f. Whether anyone else knows.

g. Whether any evidence or documents exist.

h. Whether the reporter fears retaliation.

Whistleblowers must not knowingly provide false information, destroy evidence, threaten others, or use whistleblowing for malicious purposes.

13.12 Responsibilities of Staff and Representatives

All EAO personnel and representatives have a responsibility to report serious concerns and cooperate with authorized review or investigation processes.

They must not:

a. Ignore serious concerns.

b. Delay reporting.

c. Conceal misconduct.

d. Discourage others from reporting.

e. Retaliate against whistleblowers.

f. Share confidential information without authorization.

g. Destroy or alter evidence.

h. Conduct unauthorized investigations.

i. Pressure complainants or witnesses.

j. Protect wrongdoers because of personal, professional, clan, political, or family relationships.

13.13 Responsibilities of Management and Leadership

EAO management and leadership shall ensure that whistleblowing reports are taken seriously, handled confidentially, assessed promptly, and acted upon appropriately.

Management and leadership must:

a. Promote a speak-up culture.

b. Protect whistleblowers from retaliation.

c. Ensure independent handling where conflicts of interest exist.

d. Take urgent action where people are at risk.

e. Ensure safeguarding and PSEA complaints are escalated properly.

f. Maintain confidential records.

g. Ensure corrective or disciplinary action where required.

h. Report to donors, partners, or authorities where required and safe.

i. Avoid protecting organizational reputation at the expense of safety and accountability.

13.14 Receiving a Whistleblowing Report

Any authorized person receiving a whistleblowing report must:

a. Listen respectfully and seriously.

b. Thank the reporter for speaking up.

c. Record only necessary information.

d. Assess immediate safety concerns.

e. Explain confidentiality and its limits.

f. Avoid promising a specific outcome.

g. Avoid confronting the subject of complaint without authorization.

h. Refer or escalate the report through appropriate channels.

i. Protect the reporter’s identity.

j. Avoid discussing the report with unauthorized persons.

13.15 Initial Assessment of Reports

EAO shall conduct an initial assessment of whistleblowing reports to determine:

a. Nature and seriousness of the concern.

b. Whether there is immediate risk of harm.

c. Whether safeguarding, PSEA, child protection, fraud, corruption, or legal obligations are involved.

d. Who may be affected.

e. Whether referral or protection support is needed.

f. Whether a conflict of interest exists.

g. Whether an investigation or management review is required.

h. Whether donor or partner notification is required.

i. What urgent measures are needed to prevent further harm.

13.16 Investigation and Follow-Up

Where investigation is required, it shall be conducted by authorized and competent persons in a fair, confidential, objective, timely, and evidence-based manner.

Investigations must protect whistleblowers, survivors, complainants, witnesses, and affected persons from retaliation or further harm. The subject of complaint shall be treated fairly, but safety and confidentiality shall remain priorities.

EAO shall document findings and take appropriate corrective, disciplinary, contractual, or legal action based on the outcome.

13.17 Conflict of Interest

Any person involved in receiving, assessing, investigating, or deciding on a whistleblowing report must declare any conflict of interest.

A conflict of interest may include personal, family, financial, clan, political, professional, supervisory, friendship, hostile, or other relationship with the whistleblower, survivor, witness, or subject of complaint.

Persons with a conflict of interest shall not lead or influence the process unless formally authorized under safe and transparent arrangements.

13.18 Confidential Records and Data Protection

Whistleblowing reports and related records must be securely stored and accessed only by authorized persons.

Records may include:

a. Whistleblowing report forms.

b. Notes of confidential meetings.

c. Risk assessments.

d. Referral information.

e. Investigation documents.

f. Evidence records.

g. Management decisions.

h. Corrective or disciplinary action.

i. Case closure notes.

Records must not be stored in unsecured locations, shared through informal communication, or disclosed to unauthorized persons.

13.19 Feedback to Whistleblowers

Where the whistleblower’s identity and contact details are known, EAO should provide appropriate feedback where safe and possible.

Feedback may include confirmation that the report was received, information that the matter is being reviewed, and confirmation that appropriate action has been taken where possible.

EAO may not be able to share detailed investigation findings, disciplinary measures, or confidential information about other persons.

13.20 False or Malicious Reports

EAO encourages reporting in good faith. A report made honestly shall not result in punishment, even if the concern is not proven.

However, knowingly false or malicious reports made with the intention to harm another person may result in disciplinary or corrective action.

This provision must never be used to discourage genuine reporting or intimidate whistleblowers.

13.21 External Reporting

In some circumstances, whistleblowers may report concerns through external channels, such as donors, partners, authorities, professional bodies, or protection actors, especially where internal reporting is unsafe, ineffective, or compromised.

EAO shall not retaliate against a person who reports externally in good faith where they reasonably believe internal reporting would expose them or others to risk, conceal serious wrongdoing, or fail to address the concern.

External reporting must still respect survivor safety, child protection, confidentiality, and data protection requirements.

13.22 Donor, Partner, and Legal Reporting Obligations

EAO shall comply with donor, partner, contractual, and legal reporting obligations related to serious misconduct, safeguarding, SEA, fraud, corruption, and other reportable concerns.

Such reporting must be handled safely, confidentially, and through authorized channels. Personal details of survivors, children, whistleblowers, or witnesses must not be disclosed unless legally required, consented to, or necessary for protection and handled with safeguards.

13.23 Whistleblowing Involving Partners, Contractors, or Suppliers

EAO shall accept whistleblowing reports involving partners, contractors, suppliers, consultants, service providers, consortium members, and sub-grantees connected to EAO’s work.

Where serious concerns involve third parties, EAO may conduct a review, request corrective action, suspend activities, terminate agreements, notify donors, refer to authorities, or take other appropriate action.

Third parties must not retaliate against whistleblowers, complainants, beneficiaries, staff, or community members.

13.24 Awareness and Training

EAO shall ensure that staff, volunteers, partners, contractors, and relevant representatives understand whistleblowing procedures, reporting channels, confidentiality, protection from retaliation, and their duty to report serious concerns.

Whistleblowing information should be included in induction, safeguarding training, Code of Conduct orientation, partner briefing, and community accountability communication where appropriate.

13.25 Monitoring and Learning

EAO shall monitor whistleblowing reports and trends to identify systemic risks, repeated misconduct, weak controls, safeguarding gaps, management failures, partner risks, or areas requiring improvement.

Learning from whistleblowing reports shall be used to strengthen policies, procedures, supervision, training, risk assessment, complaint systems, and organizational culture, while protecting confidentiality.

13.26 Minimum Standard for Whistleblowing and Confidential Reporting

At minimum, EAO shall ensure that people can report serious concerns safely, reports are handled confidentially, whistleblowers are protected from retaliation, conflicts of interest are managed, urgent risks are escalated, and appropriate action is taken.

Whistleblowing and confidential reporting are essential parts of EAO's commitment to safeguarding, PSEA, accountability, transparency, ethical leadership, and organizational integrity.

14. Incident Reporting and Response

East Action Organization (EAO) is committed to ensuring that all safeguarding incidents, concerns, allegations, disclosures, and risks are reported, recorded, assessed, referred, responded to, and followed up in a timely, confidential, survivor-centered, child-sensitive, disability-inclusive, fair, and accountable manner. EAO recognizes that timely reporting and response are essential to prevent further harm, protect survivors and affected persons, support accountability, and maintain trust with communities, staff, partners, and donors.

This section applies to all safeguarding-related incidents involving EAO board members, management, staff, volunteers, interns, consultants, contractors, suppliers, partners, consortium members, service providers, community mobilizers, temporary workers, visitors, beneficiaries, and any person acting for or on behalf of EAO.

14.1 Purpose of Incident Reporting and Response

The purpose of incident reporting and response is to ensure that safeguarding concerns are handled safely, consistently, and professionally.

This section aims to:

a. Ensure that safeguarding incidents are reported without delay.

b. Protect survivors, children, vulnerable adults, persons with disabilities, complainants, witnesses, and affected persons from further harm.

c. Ensure timely referral to appropriate support services.

d. Maintain confidentiality and data protection.

e. Ensure that concerns are assessed and escalated according to seriousness and risk.

f. Prevent concealment, informal settlement, retaliation, or mishandling of incidents.

g. Support fair investigation and case management where required.

h. Ensure corrective, disciplinary, contractual, legal, or management action where appropriate.

i. Strengthen learning, prevention, and safeguarding improvement.

14.2 Types of Incidents That Must Be Reported

EAO personnel and representatives must report any actual, suspected, alleged, attempted, or disclosed safeguarding incident, including:

a. Sexual exploitation and abuse.

b. Sexual harassment.

c. Child abuse, child exploitation, child neglect, or unsafe child contact.

d. Abuse, exploitation, neglect, or mistreatment of vulnerable adults.

e. Abuse, exclusion, discrimination, or exploitation of persons with disabilities.

f. Harassment, bullying, intimidation, humiliation, or discrimination.

g. Gender-based violence related to EAO personnel, activities, services, or project access.

h. Retaliation against complainants, survivors, witnesses, whistleblowers, staff, volunteers, or community members.

i. Misuse of power, authority, resources, beneficiary lists, referral roles, or access to services.

j. Exchange of assistance, employment, training, referrals, transport, or project benefits for sex, money, favors, loyalty, silence, or personal benefit.

k. Unsafe communication, photos, videos, storytelling, or social media use involving children, survivors, persons with disabilities, or vulnerable persons.

l. Breach of confidentiality, unauthorized disclosure, or misuse of personal data.

m. Safeguarding misconduct by partners, contractors, suppliers, consultants, service providers, or consortium members.

n. Any incident that creates or may create serious harm, protection risk, reputational risk, legal risk, donor compliance risk, or community trust risk.

14.3 Duty to Report

All EAO board members, management, staff, volunteers, interns, consultants, contractors, suppliers, partners, community mobilizers, and representatives have a duty to report safeguarding concerns as soon as they become aware of them.

A person does not need to prove that misconduct occurred before reporting. Suspicion, disclosure, observation, allegation, rumor, pattern of concern, or risk is enough to report through the appropriate channel.

Failure to report a known or suspected safeguarding concern, especially where a child, vulnerable adult, survivor, person with disability, beneficiary, staff member, or community member may be at risk, may be treated as a serious breach of this policy.

14.4 Immediate Reporting Requirement

Urgent safeguarding concerns must be reported immediately through the fastest safe channel.

Urgent concerns include:

a. Immediate risk of serious harm.

b. Sexual exploitation or abuse.

c. Sexual activity or abuse involving a child.

d. Serious physical violence or threat.

e. Survivor requiring urgent medical care.

f. Risk of retaliation or intimidation.

g. Serious breach of confidentiality that may expose a survivor or child.

h. Ongoing abuse or exploitation.

i. Concern involving a staff member, partner, contractor, or person in authority.

j. Any incident requiring urgent protection, referral, or management action.

Where there is immediate danger, the first priority is safety and life-saving support.

14.5 Reporting Channels

Safeguarding incidents may be reported through approved EAO channels, including:

a. Safeguarding focal person.

b. Direct supervisor or manager.

c. Senior management.

d. Executive Director or designated senior leader.

e. Human Resources or administration focal person.

f. Complaints and Feedback Mechanism.

g. Whistleblowing and confidential reporting channel.

h. Partner or donor reporting channel where appropriate.

i. Written incident reporting form.

j. Telephone, email, verbal, or in-person reporting where safe.

Where the concern involves a supervisor, manager, safeguarding focal person, or senior leader, the report should be made to another trusted senior person, board-designated contact, donor/partner channel, or other safe alternative route.

14.6 Receiving an Incident Report

Any EAO staff member or representative who receives an incident report must respond calmly, respectfully, and safely.

The person receiving the report shall:

a. Listen without judgment.

b. Thank the person for reporting.

c. Avoid blaming, doubting, criticizing, or pressuring the person.

d. Ask only necessary questions for immediate safety and referral.

e. Avoid asking the survivor to repeat unnecessary details.

f. Explain confidentiality and its limits.

g. Avoid promising secrecy or guaranteed outcomes.

h. Avoid confronting the alleged perpetrator.

i. Avoid investigating personally unless authorized.

j. Record only essential information.

k. Escalate the report through approved procedures.

l. Protect the identity and privacy of the survivor, complainant, child, witness, or affected person.

14.7 Information to Record

Incident reports should record only necessary and relevant information.

This may include:

a. Date and time of report.

b. Name and contact of reporter, if provided.

c. Whether the report is anonymous.

d. Name or description of affected person, if safely provided.

e. Age and gender of affected person, where relevant and safe.

f. Disability or accessibility needs, where relevant and consented.

g. Type of concern or incident.

h. Date, time, and location of incident, if known.

i. Name or description of alleged subject of complaint, if known.

j. Immediate safety concerns.

k. Referral or support needs.

l. Actions already taken.

m. Name of person receiving the report.

n. Required escalation or next steps.

Staff must avoid collecting unnecessary graphic details, especially in sexual violence, child abuse, or trauma-related cases.

14.8 Incident Classification

EAO shall classify incidents according to seriousness, urgency, and type of risk.

Possible categories include:

a. Low-risk conduct concern.

b. Program quality or access concern with safeguarding implications.

c. Harassment, bullying, or discrimination concern.

d. Child protection concern.

e. Protection concern involving a vulnerable adult.

f. Disability-related safeguarding concern.

g. PSEA or sexual harassment concern.

h. Retaliation or whistleblower protection concern.

i. Fraud, corruption, or aid diversion linked to safeguarding.

j. Serious misconduct requiring investigation.

k. Critical incident requiring urgent safety, referral, donor, legal, or leadership action.

Classification helps determine response, referral, escalation, investigation, and reporting requirements.

14.9 Immediate Safety Assessment

After receiving a safeguarding report, EAO shall assess whether there is immediate risk to the survivor, child, vulnerable adult, person with disability, complainant, witness, staff member, or community member.

The safety assessment should consider:

a. Is the affected person in immediate danger?

b. Does the person need urgent medical care?

c. Is the alleged perpetrator still in contact with the affected person?

d. Is there risk of retaliation, threats, pressure, or stigma?

e. Is a child involved?

f. Is the person dependent on the alleged perpetrator for care, transport, employment, aid, or services?

g. Are confidentiality or data protection risks present?

h. Is emergency referral needed?

i. Are temporary protection measures required?

Safety and protection must be prioritized before administrative or disciplinary considerations.

14.10 Immediate Response Measures

Depending on the risk, EAO may take immediate response measures, such as:

a. Arranging urgent medical referral.

b. Supporting psychosocial or protection referral.

c. Contacting child protection or GBV services where appropriate.

d. Ensuring disability-inclusive support.

e. Separating the alleged subject of complaint from the affected person where necessary and lawful.

f. Adjusting duties, supervision, or field access.

g. Suspending contact with beneficiaries or children pending review.

h. Protecting confidential records.

i. Preventing retaliation or witness intimidation.

j. Informing senior management or safeguarding focal person.

k. Activating donor, partner, or legal reporting where required.

Immediate action must be proportionate, confidential, documented, and focused on preventing further harm.

14.11 Survivor-Centered Response

All incident responses involving abuse, exploitation, harassment, or violence shall follow a survivor-centered approach.

EAO shall ensure that survivors are:

a. Treated with dignity and respect.

b. Listened to without blame or judgment.

c. Supported to make informed choices.

d. Protected from further harm.

e. Provided with referral information where available.

f. Not forced to report to authorities unless required by law or child protection obligations.

g. Not forced to participate in investigation processes against their wishes, except where mandatory obligations apply.

h. Protected from exposure, stigma, pressure, and retaliation.

The survivor's safety, dignity, wishes, and wellbeing shall guide the response.

14.12 Child-Sensitive Response

Incidents involving children must be handled with special care and with the best interests of the child as a primary consideration.

EAO shall ensure that:

a. The child is safe from further harm.

b. The child is communicated with in an age-appropriate and respectful way.

c. The child is not blamed, shamed, exposed, or forced to repeat the story unnecessarily.

d. Parents or caregivers are involved only where safe and appropriate.

e. Child protection actors or authorities are engaged where required and safe.

f. Mandatory reporting obligations are followed.

g. Child information is kept confidential.

h. Decisions consider the child's safety, dignity, wellbeing, and views according to age and maturity.

14.13 Disability-Inclusive Response

EAO shall ensure that persons with disabilities receive equal, accessible, and respectful response to safeguarding incidents.

This may include:

a. Accessible communication.

b. Reasonable accommodation.

c. Supported decision-making where safe and appropriate.

d. Safe referral to disability-inclusive services.

e. Confidential protection of disability-related information.

f. Careful assessment of caregiver-related risk.

g. Respect for the person's own voice, choices, dignity, and consent.

No report involving a person with disability shall be dismissed because of communication barriers, assumptions about capacity, dependency, or stigma.

14.14 Referral Support

EAO shall refer affected persons to appropriate services where available and with informed consent, except where mandatory reporting or immediate safety obligations apply.

Referral options may include:

a. Medical care.

b. Psychosocial support.

c. GBV response services.

d. Child protection services.

e. Protection actors.

f. Legal assistance.

g. Police or justice services where appropriate and safe.

h. Disability support services.

i. Shelter or safe accommodation.

j. Case management.

k. Livelihood or social support where relevant.

EAO shall not promise services that it cannot provide and shall explain options honestly.

14.15 Confidentiality and Information Sharing

All incident reports and response actions must be handled with strict confidentiality.

Information shall only be shared:

a. With authorized persons.

b. On a need-to-know basis.

c. For protection, referral, investigation, management decision-making, donor reporting, legal compliance, or safety purposes.

d. In a way that does not expose survivors, children, complainants, witnesses, or affected persons to further harm.

Unauthorized disclosure, gossip, sharing of names, forwarding of incident details, or public discussion of safeguarding incidents is strictly prohibited.

14.16 Escalation of Serious Incidents

Serious incidents must be escalated immediately to the designated safeguarding focal person, senior management, or other authorized person.

Serious incidents may include:

a. SEA.

b. Sexual harassment.

c. Child abuse or exploitation.

d. Serious harm to a vulnerable adult or person with disability.

e. Retaliation or threats.

f. Serious misconduct by staff, partner, contractor, or senior leader.

g. Allegations involving management.

h. Multiple or repeated complaints.

i. Serious breach of confidentiality.

j. Any incident likely to require donor, partner, legal, or authority notification.

Escalation must protect confidentiality and avoid unnecessary sharing of sensitive information.

14.17 Incident Response Decision-Making

EAO shall make incident response decisions based on risk, safety, survivor wishes, child protection obligations, evidence available, policy requirements, donor obligations, legal requirements, and organizational accountability.

Decision-making may include:

a. No further action due to insufficient information, while monitoring risk.

b. Referral support.

c. Management action.

d. Safeguarding review.

e. Formal investigation.

f. Disciplinary action.

g. Contract or partnership action.

h. Donor or partner notification.

i. Referral to authorities where required and safe.

j. Corrective action to prevent recurrence.

All decisions must be documented confidentially.

14.18 Prohibition of Informal Settlement

EAO shall not permit serious safeguarding incidents to be resolved through informal settlement, forced apology, compensation, family pressure, community mediation, religious pressure, clan negotiation, silence, intimidation, or withdrawal of complaint.

This is especially important in cases involving SEA, sexual harassment, child abuse, abuse of vulnerable adults, serious violence, retaliation, or abuse of power.

Community or family processes may only be considered where safe, lawful, voluntary, non-coercive, appropriate, and not replacing formal safeguarding obligations.

14.19 Protection from Retaliation

EAO shall protect survivors, complainants, witnesses, whistleblowers, staff, volunteers, partners, and community members from retaliation after an incident is reported.

Retaliation includes:

a. Threats or intimidation.

b. Dismissal, demotion, or suspension.

c. Exclusion from services or activities.

d. Harassment, bullying, or discrimination.

e. Community pressure or stigma.

f. False accusations.

g. Pressure to withdraw a complaint.

h. Harm to reputation.

i. Any negative action linked to reporting or supporting a case.

Any retaliation shall be treated as a serious violation.

14.20 Responsibilities of Staff and Representatives

All EAO personnel and representatives are responsible for:

a. Reporting safeguarding concerns immediately.

b. Acting safely and respectfully when receiving reports.

c. Maintaining confidentiality.

d. Cooperating with authorized response procedures.

e. Avoiding unauthorized investigation.

f. Avoiding retaliation or pressure.

g. Supporting safe referral where requested by authorized staff.

h. Protecting records and personal information.

i. Following EAO's Code of Conduct and safeguarding policy.

14.21 Responsibilities of Managers

Managers are responsible for ensuring that incidents are handled seriously, promptly, safely, and confidentially.

Managers must:

a. Ensure immediate safety measures where needed.

b. Escalate serious concerns.

c. Protect complainants, survivors, and witnesses.

d. Avoid conflicts of interest.

e. Not discourage reporting.

f. Not protect alleged perpetrators.

g. Not prioritize organizational reputation over safety.

h. Support referral, investigation, and corrective action.

i. Ensure documentation and follow-up.

j. Prevent retaliation.

14.22 Responsibilities of Safeguarding Focal Persons

Safeguarding focal persons are responsible for supporting safe incident handling according to their assigned role.

This may include:

a. Receiving or advising on safeguarding reports.

b. Supporting risk assessment.

c. Coordinating referral pathways.

d. Advising on confidentiality.

e. Supporting documentation.

f. Escalating serious concerns.

g. Advising managers on response steps.

h. Supporting survivor-centered and child-sensitive response.

i. Monitoring follow-up and learning.

Safeguarding focal persons shall not conduct investigations unless formally authorized and competent to do so.

14.23 Responsibilities of Leadership and Board

EAO senior leadership and board members are responsible for ensuring that incident reporting and response systems are functioning, trusted, resourced, confidential, and accountable.

Leadership must ensure:

a. Serious incidents are not ignored or hidden.

b. Conflicts of interest are managed.

c. Appropriate action is taken.

d. Donor, partner, and legal obligations are followed.

e. Survivors and reporters are protected.

f. Staff are trained and supported.

g. Safeguarding is prioritized over reputation management.

14.24 Incident Documentation and Records

EAO shall document safeguarding incidents securely and confidentially.

Records may include:

a. Incident report forms.

b. Initial safety assessment.

c. Referral notes.

d. Consent records.

e. Case management notes.

f. Investigation records.

g. Management decisions.

h. Disciplinary action.

i. Donor or partner reporting records.

j. Case closure records.

k. Lessons learned and corrective action.

Records must be stored securely and accessed only by authorized persons.

14.25 Reporting to Donors, Partners, and Authorities

EAO shall comply with donor, partner, contractual, and legal reporting requirements related to safeguarding incidents.

External reporting must be handled carefully and confidentially. Personal identifying information about survivors, children, complainants, witnesses, or whistleblowers should not be shared unless legally required, consented to, or necessary for protection and handled with safeguards.

Where reporting to authorities is required, EAO shall consider survivor safety, child protection obligations, legal duties, and risk of further harm.

14.26 Incident Closure

A safeguarding incident may be closed when appropriate actions have been completed, risks have been addressed, referrals have been made where possible, investigation or review has concluded where applicable, and corrective or disciplinary actions have been taken where required.

Case closure must be documented and approved by authorized persons.

Closure does not mean forgetting the issue. Lessons learned should be used to strengthen prevention, training, supervision, risk assessment, reporting channels, and policy implementation.

14.27 Learning and Corrective Action

EAO shall use safeguarding incidents to identify gaps and improve systems.

Learning may result in:

a. Staff refresher training.

b. Strengthening reporting channels.

c. Updating referral pathways.

d. Revising risk assessments.

e. Improving supervision.

f. Reviewing partner or contractor arrangements.

g. Updating communication practices.

h. Improving recruitment or screening.

i. Strengthening data protection.

j. Applying disciplinary or management action.

Learning must protect confidentiality and must not expose survivors or complainants.

14.28 Minimum Standard for Incident Reporting and Response

At minimum, EAO shall ensure that safeguarding incidents are reported promptly, received respectfully, recorded safely, assessed for immediate risk, referred where needed, escalated appropriately, handled confidentially, protected from retaliation, and followed up through fair and accountable procedures.

Incident reporting and response are mandatory responsibilities and form a core part of EAO's safeguarding, PSEA, child protection, disability inclusion, accountability, and duty of care.

15. Survivor-Centered Referral Pathway

East Action Organization (EAO) is committed to ensuring that survivors and affected persons are supported to access safe, confidential, timely, appropriate, and dignified referral services. EAO recognizes that survivors of sexual exploitation and abuse, sexual harassment, gender-based violence, child abuse, abuse of vulnerable adults, violence, neglect, exploitation, discrimination, or other safeguarding harm may require urgent and specialized support that EAO may not directly provide.

A survivor-centered referral pathway is a clear and safe process for connecting survivors and affected persons to relevant services based on their needs, wishes, informed consent, safety, dignity, confidentiality, and best interests. This pathway is essential for ensuring that EAO does not only receive reports but also supports affected persons to access available care and protection.

This section applies to all EAO staff, volunteers, safeguarding focal persons, managers, partners, contractors, suppliers, consultants, service providers, community mobilizers, and representatives involved in receiving reports, responding to concerns, providing information, or supporting referrals.

15.1 Purpose of the Referral Pathway

The purpose of the survivor-centered referral pathway is to ensure that survivors and affected persons are connected to appropriate services safely and confidentially.

This section aims to:

a. Prioritize survivor safety, dignity, rights, wishes, and wellbeing.

b. Provide clear guidance for safe referral.

c. Ensure that referrals are based on informed consent.

d. Reduce risk of further harm, stigma, exposure, or retaliation.

e. Support access to medical, psychosocial, legal, protection, child protection, GBV, disability, shelter, and other relevant services.

f. Ensure that staff do not make promises beyond EAO's capacity.

g. Strengthen coordination with trusted service providers.

h. Ensure that referral records are protected and confidential.

i. Promote accountability, care, and professional response.

15.2 Survivor-Centered Principles in Referral

All referrals shall be guided by survivor-centered principles.

These include:

a. Safety: The referral must not increase risk to the survivor or affected person.

b. Confidentiality: Information must be shared only with consent and on a need-to-know basis.

c. Respect: Survivors must be treated with dignity and without blame or judgment.

d. Informed consent: Survivors must understand available options before deciding.

e. Choice: Survivors should decide whether to accept or refuse referral, except where mandatory obligations apply.

f. Non-discrimination: Services and referrals must be accessible to all survivors regardless of gender, age, disability, ethnicity, clan, religion, displacement status, health status, or social status.

g. Do no harm: Referral actions must avoid stigma, exposure, retaliation, trauma, or unsafe contact.

h. Best interests of the child: For children, all referral decisions must prioritize the child's safety, protection, wellbeing, and development.

i. Accessibility: Referral information and services should be accessible to persons with disabilities and people with communication barriers.

15.3 Who May Need Referral Support

Referral support may be needed by:

a. Survivors of sexual exploitation and abuse.

b. Survivors of sexual harassment.

c. Survivors of gender-based violence.

d. Children who experience or are at risk of abuse, exploitation, neglect, or violence.

e. Vulnerable adults experiencing abuse, neglect, exploitation, or discrimination.

f. Persons with disabilities experiencing abuse, exclusion, neglect, or exploitation.

g. Staff, volunteers, partners, or community members affected by harassment, violence, discrimination, retaliation, or trauma.

h. Whistleblowers, complainants, or witnesses at risk of retaliation.

i. Families or caregivers affected by safeguarding incidents where support is appropriate and safe.

15.4 Types of Referral Services

Depending on the survivor's needs and available services, referrals may include:

a. Emergency medical care.

b. Clinical management of rape or sexual assault.

c. Psychosocial support and counseling.

d. GBV response services.

e. Child protection services.

f. Protection case management.

g. Legal assistance.

h. Police or justice services where appropriate and safe.

i. Safe shelter or temporary accommodation.

j. Disability support services.

k. Assistive device services.

l. Rehabilitation services.

m. Mental health support.

n. Social support and family tracing where appropriate.

o. Livelihood or basic needs support where relevant.

p. Community-based protection support where safe.

q. Specialized services for refugees, IDPs, returnees, or host communities.

EAO shall maintain updated information on available and trusted referral services in its operating areas.

15.5 Referral Mapping

EAO shall map available referral services in each area of operation where possible.

Referral mapping should include:

a. Name of service provider.

b. Type of service provided.

c. Location and contact details.

d. Opening hours or availability.

e. Eligibility criteria.

f. Cost, if any.

g. Language capacity.

h. Disability accessibility.

i. Child-friendly capacity.

j. GBV or survivor-centered capacity.

k. Confidentiality standards.

l. Emergency contact options.

m. Safety considerations.

n. Any known service gaps.

Referral mapping should be reviewed and updated regularly because services, contacts, and availability may change.

15.6 Informed Consent Before Referral

EAO shall obtain informed consent before making a referral, except where mandatory legal, child protection, or life-saving obligations apply.

Before referral, staff should explain:

a. What service options are available.

b. What information may need to be shared.

c. Who will receive the information.

d. Possible benefits and risks of referral.

e. Whether the service is free or has costs.

f. Whether the survivor can accept or refuse referral.

g. What confidentiality protections apply.

h. Any limits to confidentiality.

Consent must be voluntary and free from pressure, fear, manipulation, deception, or exchange of benefits.

15.7 Referral for Children

Referral involving children must be guided by the best interests of the child.

EAO shall ensure that:

a. The child’s immediate safety is assessed.

b. Child protection services are contacted where appropriate and available.

c. The child is communicated with in an age-appropriate and respectful way.

d. The child’s views are considered according to age and maturity.

e. Parents or caregivers are involved only where safe and appropriate.

f. Mandatory reporting obligations are followed.

g. Referral does not expose the child to further harm, stigma, or retaliation.

h. Child information is protected.

i. The child is not forced to repeat their story unnecessarily.

Where a caregiver is suspected of causing harm or may place the child at risk, information must not be shared with that caregiver without proper protection assessment.

15.8 Referral for Persons with Disabilities

Referral for persons with disabilities shall be disability-inclusive, accessible, respectful, and based on informed consent.

EAO shall consider:

a. Communication support needs.

b. Physical accessibility of referral services.

c. Transport and mobility barriers.

d. Need for reasonable accommodation.

e. Whether a support person is requested and safe.

f. Risk of caregiver-related abuse or retaliation.

g. Confidentiality of disability-related information.

h. The person's own choices, voice, and decision-making rights.

Disability must never be used as a reason to deny referral, ignore a complaint, or make decisions without the person's participation.

15.9 Referral for Survivors of Sexual Exploitation, Abuse, and GBV

Survivors of SEA, sexual assault, or GBV may need urgent medical, psychosocial, legal, and protection support.

EAO shall ensure that:

a. The survivor is treated with dignity and without blame.

b. The survivor is informed of available services.

c. Urgent medical referral is prioritized where needed.

d. Referral is made with informed consent.

e. Confidentiality is strictly protected.

f. The survivor is not forced to report to police unless required by law or chosen by the survivor.

g. Safety and retaliation risks are assessed.

h. The survivor's wishes guide the response where legally possible.

Staff must avoid asking unnecessary details about the incident and must not pressure the survivor to make decisions.

15.10 Emergency Referral

Emergency referral may be required when there is immediate danger, serious injury, urgent medical need, risk of suicide or self-harm, child protection emergency, severe violence, threat of retaliation, or risk of continued abuse.

In emergency cases, EAO shall:

a. Prioritize immediate safety.

b. Contact appropriate emergency services or protection actors where available.

c. Seek informed consent where possible.

d. Act in the best interests of the child where a child is involved.

e. Inform authorized management or safeguarding focal person.

f. Document actions taken confidentially.

g. Follow up where safe and appropriate.

Life-saving action should not be delayed by administrative procedures.

15.11 Safe Referral Process

EAO shall follow a safe referral process.

The basic steps are:

a. Receive the concern respectfully and safely.

b. Assess immediate safety and urgent needs.

c. Explain available referral options.

d. Obtain informed consent, except where mandatory obligations apply.

e. Contact the appropriate service provider safely.

f. Share only necessary information.

g. Arrange safe access where possible.

h. Document the referral confidentially.

i. Follow up only where safe, appropriate, and consented.

j. Protect all records and personal data.

15.12 Information Sharing During Referral

EAO shall share only the minimum necessary information needed for the referral.

Information may include:

a. Survivor’s preferred name or identifier.

b. Contact details where consented.

c. Immediate need or type of service requested.

d. Safety concerns.

e. Accessibility needs.

f. Age, if relevant for child protection or service eligibility.

g. Consent confirmation.

Detailed incident information should not be shared unless necessary, consented, and safe.

15.13 Confidentiality in Referral

Referral information must be treated as highly confidential. Staff shall not discuss referrals with unauthorized persons, community members, colleagues, family members, caregivers, partners, or service providers who do not need the information.

Referral records must be stored securely. Names, phone numbers, case details, child information, disability information, survivor information, and service records must be protected from unauthorized access.

15.14 Referral Without Consent

Referral without consent should only occur in limited circumstances, such as:

a. Immediate risk of serious harm or death.

b. Mandatory child protection reporting.

c. Legal obligation.

d. Serious risk to others.

e. Life-saving medical emergency where the person cannot provide consent.

Even where consent cannot be obtained, EAO shall act in the safest and most respectful manner possible, share only necessary information, and consider the survivor's dignity and protection.

15.15 No Promise of Guaranteed Services

EAO staff and representatives must not promise services that are outside EAO's control.

Staff may say that EAO will try to connect the person to available services, but must not guarantee:

a. Medical treatment.

b. Legal outcome.

c. Police action.

d. Shelter placement.

e. Financial support.

f. Confidentiality by external actors beyond what is known.

g. Investigation outcome.

h. Employment or project assistance.

Honest communication helps protect trust and avoid further harm.

15.16 Referral Follow-Up

Follow-up should be conducted only where safe, appropriate, and consented by the survivor or affected person.

Follow-up may check:

a. Whether the person reached the service.

b. Whether additional support is needed.

c. Whether there are safety concerns.

d. Whether retaliation or stigma has occurred.

e. Whether referral pathways need improvement.

Follow-up must avoid pressuring the survivor, exposing their identity, or requiring them to repeat traumatic information.

15.17 Coordination with Service Providers

EAO may coordinate with relevant service providers to improve referral pathways, including health facilities, GBV actors, child protection actors, psychosocial support providers, legal aid providers, disability organizations, protection actors, government offices, and humanitarian coordination structures.

Coordination must respect confidentiality, informed consent, data protection, and survivor safety.

EAO should avoid referring survivors to service providers that are unsafe, discriminatory, abusive, unreliable, or unable to protect confidentiality.

15.18 Referral Pathway Template

EAO shall maintain a referral pathway template as an annex to this policy.

The template should include:

a. Type of service.

b. Service provider name.

c. Contact person.

d. Phone number or email.

e. Location.

f. Working hours.

g. Eligibility criteria.

h. Cost information.

i. Accessibility notes.

j. Confidentiality considerations.

k. Emergency contact.

l. Date last updated.

m. Person responsible for updating.

15.19 Roles and Responsibilities

EAO staff and representatives are responsible for reporting concerns, respecting confidentiality, and referring cases to authorized persons.

Safeguarding focal persons are responsible for supporting safe referral, maintaining referral pathway information, advising on informed consent, and coordinating with management where needed.

Managers are responsible for ensuring that referral pathways are available, staff are trained, and urgent cases receive appropriate attention.

Leadership is responsible for ensuring that referral systems are resourced, reviewed, and integrated into safeguarding and program systems.

Partners and service providers are responsible for complying with confidentiality, survivor-centered practice, and safe referral standards where they are part of referral arrangements.

15.20 Referral Records and Data Protection

EAO shall document referrals carefully and confidentially.

Referral records may include:

a. Date of referral.

b. Type of service requested.

c. Consent confirmation.

d. Service provider contacted.

e. Safety concerns.

f. Accessibility needs.

g. Follow-up action where appropriate.

h. Name of staff member handling referral.

Referral records must not include unnecessary details and must be stored securely with restricted access.

15.21 Referral Risks and Mitigation

EAO shall assess possible risks before and during referral.

Risks may include:

a. Exposure of survivor identity.

b. Retaliation by perpetrator, family, community, staff, or partner.

c. Unsafe transport.

d. Untrusted service providers.

e. Lack of confidentiality.

f. Discrimination by service providers.

g. Cost barriers.

h. Disability access barriers.

i. Language barriers.

j. Emotional distress or re-traumatization.

Mitigation measures should be applied where possible.

15.22 Referral in Areas with Limited Services

In some locations, referral services may be limited or unavailable. EAO shall still provide respectful support, accurate information, safety planning where possible, and connection to any available trusted service.

Where service gaps exist, EAO should document the gap, inform management, coordinate with protection actors where possible, and advocate for improved service access without exposing survivors or affected persons.

15.23 Referral for Staff, Volunteers, and Representatives

EAO's referral pathway also applies to staff, volunteers, interns, consultants, partners, or representatives who experience harassment, abuse, exploitation, violence, discrimination, retaliation, or trauma connected to EAO's work.

Staff-related referrals may include psychosocial support, medical care, legal support, HR support, protection support, or other appropriate services.

Confidentiality and protection from retaliation must be maintained.

15.24 Minimum Standard for Survivor-Centered Referral

At minimum, EAO shall ensure that survivors and affected persons are treated with dignity, informed of available options, supported to make voluntary decisions, referred safely where services are available, protected from retaliation and exposure, and supported through confidential and survivor-centered procedures.

A referral pathway is not only a list of service providers. It is a safeguarding process that connects people to help while protecting their safety, dignity, privacy, rights, and choices.

16. Investigation and Case Management

East Action Organization (EAO) is committed to ensuring that safeguarding concerns, allegations, incidents, and complaints are managed through a fair, confidential, timely, survivor-centered, child-sensitive, disability-inclusive, objective, and accountable process. EAO recognizes that poor handling of safeguarding cases can cause further harm, expose survivors and witnesses, damage trust, weaken accountability, and increase organizational risk.

Investigation and case management are essential parts of EAO's Safeguarding and PSEA Policy Manual. They ensure that concerns are assessed properly, survivors and affected persons are supported, evidence is handled responsibly, decisions are made fairly, and appropriate corrective or disciplinary action is taken where required.

This section applies to all safeguarding-related cases involving EAO board members, management, staff, volunteers, interns, consultants, contractors, suppliers, partners, consortium members, service providers, visitors, community mobilizers, temporary workers, beneficiaries, and any person acting for or on behalf of EAO.

16.1 Purpose of Investigation and Case Management

The purpose of investigation and case management is to ensure that safeguarding concerns are handled safely, professionally, and consistently.

This section aims to:

a. Protect survivors, children, vulnerable adults, persons with disabilities, complainants, witnesses, and affected persons from further harm.

b. Ensure that safeguarding concerns are assessed and managed through approved procedures.

c. Establish facts fairly and objectively where investigation is required.

d. Ensure that survivors and complainants are treated with dignity and respect.

e. Protect confidentiality and personal data.

f. Ensure that the subject of complaint is treated fairly and in line with due process.

g. Prevent retaliation, intimidation, interference, or informal settlement.

h. Support appropriate disciplinary, corrective, contractual, legal, donor, or management action.

i. Strengthen organizational learning and prevention.

16.2 Difference Between Case Management and Investigation

Case management refers to the process of receiving, recording, assessing, referring, supporting, monitoring, documenting, and closing a safeguarding case in a safe and confidential manner.

Investigation refers to a formal process of establishing facts about an allegation or concern through authorized, impartial, and evidence-based review.

Not every safeguarding case requires a full investigation. Some cases may require referral, safety planning, management action, partner follow-up, or corrective action only. However, serious allegations involving SEA, child abuse, abuse of vulnerable adults, serious harassment, retaliation, serious misconduct, abuse of power, or repeated policy violations may require formal investigation.

16.3 Guiding Principles

Investigation and case management shall be guided by the following principles:

a. Survivor-centered approach.

b. Best interests of the child.

c. Do no harm.

d. Confidentiality.

e. Safety and protection from retaliation.

f. Impartiality and fairness.

g. Due process.

h. Non-discrimination and inclusion.

i. Disability accessibility.

j. Informed consent where applicable.

k. Timeliness.

l. Evidence-based decision-making.

m. Accountability.

n. Documentation and secure record keeping.

o. Compliance with law, donor requirements, partnership obligations, and EAO procedures.

16.4 Receiving and Registering Cases

All safeguarding concerns received through complaint mechanisms, whistleblowing channels, staff reports, partner reports, community feedback, direct disclosures, monitoring, or management observations shall be registered confidentially by authorized persons.

Case registration should include only necessary information, such as:

a. Date and time of report.

b. Reporting channel.

c. Type of concern.

d. Immediate safety risks.

e. People affected.

f. Alleged subject of complaint, if known.

g. Actions already taken.

h. Referral needs.

i. Person responsible for next steps.

j. Case reference number where possible.

Sensitive cases, especially SEA, child protection, GBV, survivor-related cases, and cases involving persons with disabilities, must be recorded with extra confidentiality and restricted access.

16.5 Initial Case Assessment

EAO shall conduct an initial case assessment to determine the nature, seriousness, urgency, risk level, and required response.

The initial assessment should consider:

a. Is anyone in immediate danger?

b. Is the case related to SEA, sexual harassment, child abuse, abuse of vulnerable adults, disability-related abuse, retaliation, or serious misconduct?

c. Does the survivor or affected person need urgent referral support?

d. Is a child involved?

e. Is the subject of complaint an EAO staff member, partner, contractor, supplier, volunteer, or person in authority?

f. Is there a risk of retaliation, intimidation, stigma, or further harm?

g. Is there a conflict of interest?

h. Is an investigation required?

i. Are donor, partner, legal, or authority reporting obligations triggered?

j. What immediate protection measures are needed?

The initial assessment must be completed by authorized persons and documented confidentially.

16.6 Immediate Protection and Risk Management

Before any investigation decision, EAO shall prioritize safety and protection.

Immediate protection measures may include:

a. Urgent medical referral.

b. Psychosocial or protection referral.

c. Child protection referral.

d. Disability-inclusive support.

e. Safety planning.

f. Temporary separation of the subject of complaint from the affected person.

g. Suspension from contact with beneficiaries, children, vulnerable adults, or sensitive data.

h. Adjustment of duties or reporting lines.

i. Secure storage of case information.

j. Measures to prevent retaliation or witness intimidation.

k. Restriction of access to offices, field sites, vehicles, or project activities where necessary and lawful.

Protection measures are not a finding of guilt. They are temporary safeguards to prevent further harm while the case is managed.

16.7 Decision to Investigate

EAO shall decide whether an investigation is required based on the seriousness of the allegation, available information, risk level, policy requirements, donor obligations, legal requirements, and possibility of establishing facts.

Investigation may be required where the concern involves:

a. Sexual exploitation and abuse.

b. Sexual activity with a child.

c. Sexual harassment.

d. Child abuse, exploitation, or neglect.

e. Abuse or exploitation of vulnerable adults.

f. Abuse, discrimination, or exploitation of persons with disabilities.

g. Serious harassment, bullying, discrimination, or retaliation.

h. Misuse of power, coercion, or exploitation linked to assistance.

i. Serious breach of confidentiality.

j. Fraud, corruption, or aid diversion linked to safeguarding.

k. Serious misconduct by staff, partners, contractors, suppliers, or senior representatives.

l. Repeated complaints or patterns of unsafe behavior.

Where investigation is not possible or appropriate, EAO shall still take reasonable management action to reduce risk and support affected persons.

16.8 Investigation Authorization

No person shall conduct a safeguarding investigation without proper authorization from EAO leadership, designated safeguarding authority, HR, board-designated authority, or other approved decision-making body.

Authorization should clarify:

a. Purpose of the investigation.

b. Scope of allegations.

c. Investigator or investigation team.

d. Timeframe.

e. Confidentiality requirements.

f. Safety measures.

g. Reporting line.

h. Information access.

i. Conflict of interest controls.

j. Required outputs.

Investigations involving senior management, board members, or serious conflict of interest may require independent or external support where available.

16.9 Investigator Competence and Independence

Investigations must be conducted by competent and impartial persons. Investigators should have appropriate knowledge of safeguarding, PSEA, child protection, confidentiality, survivor-centered practice, interviewing, evidence handling, and due process.

Investigators must not have a personal, family, financial, clan, political, professional, supervisory, friendship, hostile, or other conflict of interest with the survivor, complainant, witness, or subject of complaint.

Where internal capacity is limited, EAO may seek support from qualified external investigators, partner safeguarding specialists, legal advisors, donor-approved mechanisms, or other competent bodies where appropriate and safe.

16.10 Conflict of Interest

Any person involved in receiving, assessing, investigating, deciding, or following up on a case must declare any conflict of interest.

A person with conflict of interest shall not lead, influence, approve, or interfere with the case process unless formally authorized under transparent and safe arrangements.

Failure to declare conflict of interest may result in disciplinary action.

16.11 Confidentiality During Investigation

All investigation and case management processes must be confidential.

Information shall be shared only with authorized persons on a strict need-to-know basis. This includes information about survivors, complainants, witnesses, children, persons with disabilities, subjects of complaint, evidence, referral services, investigation findings, and management decisions.

Unauthorized disclosure, gossip, forwarding documents, sharing names, discussing cases publicly, or exposing sensitive information is strictly prohibited and may result in disciplinary action.

16.12 Survivor-Centered Investigation Approach

Where a survivor is involved, EAO shall ensure that the investigation process does not cause further harm.

Survivors shall:

a. Be treated with dignity and respect.

b. Be informed about available support and referral options.

c. Be protected from retaliation and exposure.

d. Be asked only necessary questions.

e. Not be blamed or judged.

f. Not be forced to participate against their will, except where mandatory obligations apply.

g. Be supported to make informed decisions where possible.

h. Have their privacy protected.

Investigations must avoid repeated or unnecessary interviews that may retraumatize survivors.

16.13 Child-Sensitive Investigation Approach

Where a child is involved, the best interests of the child shall guide all investigation and case management decisions.

EAO shall ensure that:

a. The child's safety is prioritized.

b. The child is interviewed only by trained or appropriate persons where necessary.

c. Age-appropriate communication is used.

d. The child is not blamed, shamed, threatened, or forced to repeat information unnecessarily.

e. Parents or caregivers are involved only where safe and appropriate.

f. Child protection actors are engaged where required and safe.

g. Mandatory reporting obligations are followed.

h. The child's identity and information are protected.

Child cases require heightened confidentiality, protection, and sensitivity.

16.14 Disability-Inclusive Investigation Approach

Where a person with disability is involved, EAO shall ensure equal access to the investigation and case management process.

This may include:

a. Accessible communication.

b. Reasonable accommodation.

c. Supported decision-making where safe and appropriate.

d. Respect for the person's own voice and choices.

e. Protection from caregiver-related pressure or retaliation.

f. Confidential handling of disability-related information.

g. Accessible referral options.

h. Avoiding assumptions about credibility or capacity based on disability.

A disability shall never be used as a reason to dismiss, ignore, or minimize a safeguarding concern.

16.15 Interviewing Survivors, Complainants, Witnesses, and Subjects of Complaint

Interviews shall be conducted safely, respectfully, confidentially, and only when necessary.

Investigators shall:

a. Explain the purpose of the interview.

b. Explain confidentiality and its limits.

c. Obtain consent where appropriate.

d. Use respectful and non-leading questions.

e. Avoid blame, pressure, threats, or judgment.

f. Avoid unnecessary repeated questioning.

g. Allow breaks where needed.

h. Consider language, gender, disability, cultural, and safety needs.

i. Document information accurately.

j. Protect interview notes and records.

Subjects of complaint shall be given a fair opportunity to respond to allegations, unless doing so would create serious safety risk or compromise the process.

16.16 Evidence Collection and Management

Evidence may include:

a. Written reports.

b. Complaint forms.

c. Witness statements.

d. Emails, messages, call logs, or digital records.

e. Photos, videos, or documents.

f. Attendance sheets, distribution lists, beneficiary records, or referral records.

g. HR, procurement, finance, or operational documents.

h. Medical or service referral confirmation where consented and appropriate.

i. Field monitoring observations.

j. Partner or contractor records.

Evidence must be collected lawfully, safely, confidentially, and without exposing survivors, children, complainants, witnesses, or affected persons to further harm.

16.17 Digital Evidence and Data Protection

Digital evidence must be handled carefully. This may include screenshots, messages, photos, videos, emails, social media content, audio records, GPS information, or electronic files.

EAO shall ensure that digital evidence is:

a. Collected only where relevant and lawful.

b. Stored securely.

c. Protected from copying or unauthorized sharing.

d. Not edited or manipulated.

e. Accessed only by authorized persons.

f. Not shared through insecure channels.

g. Deleted or archived according to approved procedures when no longer needed.

Sexual images, child images, survivor information, and sensitive personal data require the highest level of confidentiality and protection.

16.18 Case Management Plan

For each serious safeguarding case, EAO should develop a case management plan.

The plan may include:

a. Case summary.

b. Immediate safety measures.

c. Referral needs.

d. Consent considerations.

e. Investigation decision.

f. Roles and responsibilities.

g. Communication plan.

h. Confidentiality controls.

i. Retaliation risk management.

j. Donor, partner, or legal reporting requirements.

k. Timeline.

l. Follow-up actions.

m. Closure criteria.

The case management plan must be confidential and reviewed as the case progresses.

16.19 Timeliness

Safeguarding cases should be handled promptly. Delays can increase harm, weaken evidence, expose survivors and witnesses to retaliation, and damage trust.

EAO shall aim to:

a. Address immediate safety risks immediately.

b. Escalate serious concerns without delay.

c. Provide referral information as soon as possible.

d. Begin initial assessment promptly.

e. Make investigation decisions within a reasonable timeframe.

f. Complete investigations as quickly as possible while maintaining fairness and quality.

Where delays occur, reasons should be documented and risk management measures should continue.

16.20 Rights of the Subject of Complaint

The subject of complaint shall be treated fairly and in line with due process.

This includes:

a. Being informed of the allegations at an appropriate stage.

b. Being given an opportunity to respond.

c. Being treated without abuse, humiliation, or prejudgment.

d. Having confidentiality protected.

e. Being subject to proportionate temporary measures where needed.

f. Being judged based on available evidence and policy standards.

Fair treatment of the subject of complaint must not undermine survivor safety, witness protection, or confidentiality.

16.21 Temporary Measures During Case Handling

EAO may apply temporary measures while a case is being reviewed or investigated.

Temporary measures may include:

a. Suspension from duty.

b. Restriction from field work.

c. No contact with survivors, complainants, witnesses, children, or beneficiaries.

d. Adjustment of supervision or reporting lines.

e. Removal from beneficiary selection, distribution, transport, or referral duties.

f. Restriction of access to confidential data.

g. Temporary transfer or reassignment.

h. Increased supervision.

i. Partner or contractor suspension.

Temporary measures are not disciplinary findings. They are risk management actions.

16.22 Donor, Partner, and Legal Reporting During Case Management

EAO shall comply with donor, partner, contractual, and legal reporting obligations.

External reporting must be done through authorized channels and must protect confidentiality. Personal identifying information of survivors, children, complainants, witnesses, or whistleblowers shall not be shared unless legally required, consented to, or necessary for protection and handled safely.

Where reporting to authorities is required, EAO shall consider legal duties, survivor safety, child protection obligations, and risk of further harm.

16.23 Investigation Findings

At the end of an investigation, findings should be documented clearly and confidentially.

Possible findings may include:

a. Substantiated: evidence supports the allegation.

b. Not substantiated: insufficient evidence to support the allegation.

c. Unfounded: evidence indicates the allegation did not occur.

d. Inconclusive: evidence is unclear or unavailable.

e. Policy breach without confirmed abuse: conduct violated policy even if the full allegation is not proven.

A finding of “not substantiated” does not automatically mean the complaint was false. It may mean that there was not enough evidence to confirm the allegation.

16.24 Investigation Report

The investigation report should be confidential and shared only with authorized decision-makers.

The report may include:

a. Case reference number.

b. Allegation summary.

c. Scope and methodology.

d. Persons interviewed.

e. Evidence reviewed.

f. Key findings.

g. Analysis.

h. Conclusion.

i. Safeguarding risks identified.

j. Recommendations.

k. Required corrective or disciplinary action.

l. Referral or follow-up needs.

m. Lessons learned.

The report must avoid unnecessary personal details and protect survivor and witness confidentiality.

16.25 Decision-Making After Investigation

Authorized decision-makers shall review investigation findings and determine appropriate action.

Decisions may include:

a. Disciplinary action.

b. Contract termination.

c. Partner or supplier action.

d. Referral to authorities where required and safe.

e. Donor or partner notification.

f. Management action.

g. Training or supervision.

h. Policy or procedure changes.

i. Risk mitigation measures.

j. No further action where appropriate.

Decision-makers must avoid bias, conflict of interest, favoritism, pressure, or influence from seniority, clan, political, family, or personal relationships.

16.26 Case Closure

A safeguarding case may be closed when:

a. Immediate safety risks have been addressed.

b. Referral support has been offered or provided where possible.

c. Investigation or review has concluded where applicable.

d. Corrective, disciplinary, contractual, or management actions have been taken where required.

e. Donor, partner, or legal reporting has been completed where required.

f. Records are securely stored.

g. Follow-up actions are documented.

h. Lessons learned are identified.

Case closure must be approved by authorized persons and recorded confidentially.

16.27 Communication of Outcomes

Where appropriate and safe, EAO may provide limited outcome information to the complainant, survivor, whistleblower, or affected person.

EAO may confirm that:

a. The concern was received.

b. It was reviewed.

c. Appropriate action was taken.

d. Referral or support options remain available.

EAO shall not share confidential disciplinary details, private personnel information, witness information, or investigation records unless authorized and appropriate.

16.28 Protection from Retaliation During and After Case Handling

EAO shall monitor and address retaliation risks during and after case handling.

Retaliation may include threats, intimidation, dismissal, demotion, harassment, exclusion, denial of services, community pressure, family pressure, witness intimidation, false accusations, or any negative action linked to reporting or participating in a case.

Retaliation shall be treated as a serious policy violation and may result in disciplinary action.

16.29 Record Keeping and Secure Storage

All case management and investigation records shall be stored securely and confidentially.

Records may include:

a. Complaint or incident report.

b. Initial assessment.

c. Referral and consent records.

d. Risk assessments.

e. Interview notes.

f. Evidence logs.

g. Investigation report.

h. Decision records.

i. Disciplinary action.

j. Donor or legal reporting records.

k. Case closure form.

Access shall be restricted to authorized persons only.

16.30 Case Learning and System Improvement

EAO shall use lessons from safeguarding cases to improve prevention and response systems.

Learning may inform:

a. Staff training.

b. Safe recruitment.

c. Program risk assessment.

d. Complaint mechanisms.

e. Referral pathways.

f. Partner management.

g. Supervision.

h. Communication practices.

i. Data protection.

j. Policy review.

Learning must be anonymized and must not expose survivors, complainants, witnesses, children, or affected persons.

16.31 Minimum Standard for Investigation and Case Management

At minimum, EAO shall ensure that safeguarding cases are received safely, assessed promptly, managed confidentially, referred where needed, investigated where required, protected from

retaliation, documented securely, decided fairly, and closed with appropriate follow-up and learning.

Investigation and case management must always prioritize safety, dignity, confidentiality, fairness, accountability, and prevention of further harm.

17. Disciplinary Measures and Corrective Action

East Action Organization (EAO) is committed to taking appropriate disciplinary, corrective, contractual, administrative, legal, and management action when safeguarding standards, PSEA obligations, the Code of Conduct, organizational policies, donor requirements, partnership agreements, or applicable laws are violated. EAO recognizes that accountability is essential for preventing harm, protecting communities, maintaining trust, and ensuring that misconduct is not ignored, excused, hidden, repeated, or normalized.

Disciplinary measures and corrective action are intended to protect people, address misconduct, improve systems, prevent recurrence, and uphold EAO's zero-tolerance commitment to sexual exploitation and abuse, sexual harassment, child abuse, abuse of vulnerable adults, discrimination, bullying, retaliation, misuse of power, and other safeguarding violations.

This section applies to all EAO board members, senior management, staff, volunteers, interns, consultants, contractors, suppliers, partners, consortium members, visitors, community mobilizers, service providers, temporary workers, and any person acting for or on behalf of EAO.

17.1 Purpose of Disciplinary Measures and Corrective Action

The purpose of this section is to ensure that violations of safeguarding standards are addressed fairly, consistently, proportionately, and in a way that prioritizes safety and accountability.

This section aims to:

a. Protect survivors, children, vulnerable adults, persons with disabilities, complainants, witnesses, staff, partners, and communities.

b. Hold individuals and entities accountable for misconduct.

c. Prevent recurrence of safeguarding violations.

d. Strengthen organizational systems and safe conduct.

e. Ensure fair and evidence-based decision-making.

f. Support donor, partner, legal, and organizational compliance.

g. Demonstrate EAO's commitment to zero tolerance and safe programming.

h. Promote learning, prevention, and continuous improvement.

17.2 Types of Misconduct That May Lead to Action

Disciplinary or corrective action may be taken for misconduct including but not limited to:

a. Sexual exploitation and abuse.

b. Sexual harassment.

c. Sexual activity with a child.

d. Child abuse, exploitation, neglect, or unsafe child contact.

e. Abuse, exploitation, neglect, or mistreatment of vulnerable adults.

f. Abuse, exclusion, discrimination, or exploitation of persons with disabilities.

g. Harassment, bullying, intimidation, humiliation, or discrimination.

h. Retaliation against complainants, survivors, witnesses, whistleblowers, staff, volunteers, partners, or community members.

i. Failure to report a known or suspected safeguarding concern.

j. Concealment, delay, informal settlement, or interference in a safeguarding case.

k. Misuse of authority, resources, beneficiary lists, referral power, recruitment power, or access to assistance.

l. Exchange of assistance, employment, training, referrals, transport, or project benefits for sex, money, favors, loyalty, silence, or personal benefit.

m. Breach of confidentiality or unauthorized sharing of safeguarding information.

n. Unsafe communication, photos, videos, storytelling, social media use, or misuse of personal data.

o. Failure to comply with safe recruitment, code of conduct, risk assessment, or reporting procedures.

p. Obstruction of investigation, destruction of evidence, witness intimidation, or false statements.

q. Fraud, corruption, bribery, nepotism, favoritism, or aid diversion linked to safeguarding risk.

r. Failure of managers to act on known safeguarding concerns.

s. Partner, contractor, supplier, consultant, or service provider misconduct.

17.3 Guiding Principles for Disciplinary Action

Disciplinary and corrective action shall be guided by the following principles:

a. Safety and protection from further harm.

b. Survivor-centered response.

c. Best interests of the child.

d. Confidentiality.

e. Fairness and due process.

f. Evidence-based decision-making.

g. Proportionality.

h. Non-discrimination.

i. Consistency.

j. Timeliness.

k. Conflict of interest management.

l. Protection from retaliation.

m. Compliance with law, donor requirements, contracts, and EAO policies.

17.4 Proportionality of Measures

Disciplinary or corrective measures shall be proportionate to the seriousness of the violation, level of harm, risk of recurrence, role of the person, level of responsibility, evidence available, policy breach, and applicable legal or contractual requirements.

Minor conduct concerns may require coaching, supervision, warning, or training. Serious safeguarding misconduct may require suspension, termination, donor notification, referral to authorities, or termination of partnership or contract.

Confirmed SEA, sexual activity with a child, serious abuse, retaliation, serious breach of confidentiality, or deliberate concealment of safeguarding misconduct may lead to immediate termination or contract cancellation, subject to due process and applicable law.

17.5 Immediate Protective Measures

EAO may apply immediate protective measures while a case is being reviewed or investigated.

These may include:

a. Temporary suspension from duties.

b. Restriction from contact with beneficiaries, children, vulnerable adults, persons with disabilities, survivors, or witnesses.

c. Removal from field activities, distributions, referrals, transport, or community engagement.

d. Adjustment of reporting lines.

e. Increased supervision.

f. Restriction of access to offices, vehicles, data, files, or digital systems.

g. Temporary partner or contractor suspension.

h. Separation of the subject of complaint from the affected person.

i. Measures to prevent retaliation, intimidation, or interference.

Protective measures are not disciplinary findings. They are used to reduce risk and protect people during case handling.

17.6 Possible Disciplinary Measures for Staff

Depending on the seriousness of the violation and applicable HR rules, disciplinary measures for staff may include:

a. Verbal warning.

b. Written warning.

c. Formal reprimand.

d. Mandatory safeguarding or conduct training.

e. Close supervision or performance improvement plan.

f. Restriction of duties.

g. Reassignment or transfer where lawful and appropriate.

h. Suspension with or without pay, according to applicable rules.

i. Removal from contact with beneficiaries or vulnerable groups.

j. Demotion where legally permitted.

k. Termination of employment.

l. Referral to professional bodies where relevant.

m. Referral to authorities where legally required and safe.

n. Donor or partner notification where required.

17.7 Possible Measures for Volunteers, Interns, and Community Mobilizers

Measures for volunteers, interns, community mobilizers, temporary workers, or unpaid representatives may include:

a. Verbal or written warning.

b. Mandatory training or re-orientation.

c. Increased supervision.

d. Restriction of duties.

e. Removal from field activities.

f. Suspension from volunteer or internship role.

g. Termination of volunteer or internship engagement.

h. Removal from community mobilizer list.

i. Referral to authorities where legally required and safe.

j. Notification to partner or donor where required.

17.8 Possible Measures for Consultants, Contractors, and Suppliers

Measures for consultants, contractors, suppliers, service providers, drivers, vendors, or other third parties may include:

a. Formal warning.

b. Required corrective action plan.

c. Mandatory safeguarding briefing for personnel.

d. Restriction of access to beneficiaries, communities, offices, or field sites.

e. Suspension of work.

f. Withholding of payment where contractually justified.

g. Termination of contract.

h. Removal from supplier or consultant roster.

i. Reporting to donor or partner where required.

j. Referral to authorities where legally required and safe.

k. Exclusion from future EAO procurement or engagement.

17.9 Possible Measures for Partners and Consortium Members

Where a partner, consortium member, sub-grantee, or implementing partner violates safeguarding or PSEA standards, EAO may take action depending on the seriousness of the concern and the partnership agreement.

Measures may include:

a. Formal discussion and written notice.

b. Corrective action plan.

c. Safeguarding capacity strengthening.

d. Additional monitoring.

e. Restriction of high-risk activities.

f. Suspension of activities.

g. Suspension of fund transfer.

h. Request for removal of unsafe personnel.

i. Investigation or joint review.

j. Donor notification where required.

k. Termination of partnership agreement.

l. Referral to competent authorities where legally required and safe.

17.10 Corrective Action for Systems Gaps

Corrective action may be required even when individual misconduct is not confirmed. Safeguarding incidents may reveal weaknesses in systems, supervision, communication, risk assessment, complaint mechanisms, referral pathways, recruitment, partnerships, or data protection.

Corrective action may include:

a. Updating policies or procedures.

b. Revising program design.

c. Strengthening supervision.

d. Improving complaint channels.

e. Updating referral pathways.

f. Conducting refresher training.

g. Improving safe recruitment.

h. Strengthening partner agreements.

i. Revising communication and consent processes.

j. Improving data protection.

k. Addressing accessibility gaps for persons with disabilities.

l. Improving community awareness.

m. Strengthening monitoring and management oversight.

17.11 Disciplinary Decision-Making

Disciplinary decisions shall be made by authorized persons or bodies according to EAO’s governance and HR procedures.

Decision-makers must:

a. Review available evidence.

b. Consider investigation findings.

c. Assess seriousness and risk.

d. Ensure due process.

e. Manage conflicts of interest.

f. Apply measures consistently and proportionately.

g. Protect confidentiality.

h. Document the decision and reasons.

i. Ensure survivor and witness protection.

j. Consider donor, partner, legal, and contractual obligations.

No person with conflict of interest shall lead or influence disciplinary decision-making.

17.12 Due Process and Fairness

EAO shall ensure that disciplinary action is fair and based on available evidence and policy standards.

The subject of complaint should be given an opportunity to respond to allegations at an appropriate stage, unless doing so would create serious safety risk or compromise the process.

Fairness includes:

a. No prejudgment.

b. Confidential handling.

c. Clear allegations.

d. Opportunity to respond.

e. Evidence-based decision.

f. Proportionate measure.

g. Right to use any available internal appeal or review process where applicable.

Due process must not be used to delay safety measures or expose survivors and witnesses to harm.

17.13 Serious Misconduct and Gross Misconduct

Some violations may be treated as serious misconduct or gross misconduct.

These may include:

a. Sexual exploitation and abuse.

b. Sexual activity with a child.

c. Serious sexual harassment.

d. Serious child abuse or exploitation.

e. Abuse of vulnerable adults.

f. Physical violence or threat of violence.

g. Retaliation or witness intimidation.

h. Serious breach of confidentiality.

i. Deliberate concealment of safeguarding misconduct.

j. Obstruction of investigation.

k. Falsification or destruction of evidence.

l. Exploitation of beneficiaries or affected populations.

m. Serious fraud, corruption, or aid diversion linked to safeguarding risk.

Gross misconduct may lead to immediate suspension and possible termination, subject to due process and applicable law.

17.14 Failure to Report

Failure to report a known or suspected safeguarding concern may result in disciplinary action, especially where the failure allowed harm to continue, exposed others to risk, concealed misconduct, or violated legal, donor, partnership, or organizational obligations.

Managers and supervisors may face disciplinary action if they ignore, delay, minimize, conceal, or mishandle safeguarding reports.

17.15 Retaliation as a Disciplinary Offense

Retaliation against survivors, complainants, witnesses, whistleblowers, staff, volunteers, partners, or community members is strictly prohibited and shall be treated as a serious disciplinary offense.

Retaliation may include threats, intimidation, dismissal, demotion, exclusion, harassment, denial of services, pressure, discrimination, false accusations, or reputational harm.

17.16 Breach of Confidentiality as a Disciplinary Offense

Unauthorized disclosure of safeguarding information, survivor identity, child information, complaint records, investigation details, witness information, or confidential personal data is a serious violation.

Disciplinary action may be taken against any person who discusses, shares, forwards, leaks, stores insecurely, photographs, publishes, or misuses confidential safeguarding information without authorization.

17.17 Referral to Authorities

EAO may refer matters to competent authorities where legally required, where there is serious risk, or where criminal conduct may be involved, provided that survivor safety, child protection obligations, legal duties, and risk of further harm are considered.

Referrals to authorities must be handled by authorized persons and documented confidentially.

Where a child is involved, mandatory child protection reporting obligations must be carefully considered and followed.

17.18 Donor and Partner Notification

EAO shall notify donors or partners of safeguarding incidents, disciplinary outcomes, or corrective actions where required by grant agreements, partnership agreements, donor rules, or legal obligations.

Notification must protect confidentiality and avoid sharing unnecessary personal details. Survivor identities, child identities, witness details, and sensitive case information should not be disclosed unless required, consented, or necessary for protection and handled safely.

17.19 Documentation of Disciplinary Measures

All disciplinary and corrective actions must be documented securely and confidentially.

Records may include:

a. Investigation findings.

b. Decision notes.

c. Disciplinary letters.

d. Corrective action plans.

e. Suspension or termination records.

f. Partner or contractor notices.

g. Donor or authority reporting records.

h. Follow-up actions.

i. Appeal or review records where applicable.

Access to disciplinary records shall be limited to authorized persons only.

17.20 Appeals or Review

Where applicable under EAO's HR rules, employment law, contracts, or internal procedures, the subject of disciplinary action may request review or appeal of a decision.

Appeals must be handled fairly, confidentially, and by persons not involved in the original decision where possible.

Appeals shall not be used to intimidate survivors, complainants, or witnesses, or to delay necessary protection measures.

17.21 Communication of Disciplinary Outcomes

EAO shall communicate disciplinary outcomes only to those who have a legitimate need to know.

The complainant, survivor, or whistleblower may be informed that appropriate action has been taken, where safe and appropriate, but detailed disciplinary information about another person shall not be shared unless authorized.

Public communication about disciplinary action is prohibited unless approved by authorized leadership and legally appropriate.

17.22 Rehabilitation and Training Measures

In some cases, corrective action may include training, coaching, supervision, or behavior improvement measures. This may be appropriate for lower-risk conduct issues where there is no serious abuse, exploitation, retaliation, or harm.

Training or coaching shall not be used as a substitute for serious disciplinary action where serious safeguarding misconduct is confirmed.

17.23 Organizational Learning

EAO shall use disciplinary and corrective action outcomes to strengthen safeguarding systems.

Learning may inform:

a. Policy updates.

b. Training plans.

c. Staff supervision.

d. Safe recruitment procedures.

e. Partner management.

f. Risk assessment.

g. Complaint systems.

h. Referral pathways.

i. Community awareness.

j. Data protection.

k. Management accountability.

Lessons learned must be anonymized and must not expose survivors, complainants, witnesses, or affected persons.

17.24 Minimum Standard for Disciplinary Measures and Corrective Action

At minimum, EAO shall ensure that safeguarding violations are addressed through fair, confidential, proportionate, evidence-based, and timely action; survivors and witnesses are protected; retaliation is prohibited; serious misconduct is not ignored or informally settled; and systems are improved to prevent recurrence.

Disciplinary measures and corrective action are essential to EAO's zero-tolerance commitment, safeguarding culture, donor compliance, and duty of care to communities, staff, partners, and all people connected to EAO's work

18. Data Protection and Confidentiality

East Action Organization (EAO) is committed to protecting the privacy, dignity, safety, and personal information of all people who come into contact with its work. EAO recognizes that safeguarding and PSEA information is highly sensitive and that poor handling of personal data can expose survivors, children, vulnerable adults, persons with disabilities, complainants, witnesses, staff, volunteers, partners, and communities to stigma, retaliation, discrimination, emotional harm, legal risk, or further abuse.

Data protection and confidentiality are mandatory responsibilities under this Safeguarding and PSEA Policy Manual. All safeguarding-related information must be collected, used, stored, shared, transferred, retained, and disposed of safely, lawfully, respectfully, and only for legitimate safeguarding, referral, case management, investigation, reporting, accountability, or organizational purposes.

This section applies to all EAO board members, senior management, staff, volunteers, interns, consultants, contractors, suppliers, partners, consortium members, service providers, community mobilizers, data collectors, enumerators, visitors, and any person who collects, receives, uses, stores, manages, or shares information on behalf of EAO.

18.1 Purpose of Data Protection and Confidentiality

The purpose of this section is to ensure that personal and safeguarding-related information is protected from unauthorized access, misuse, disclosure, loss, damage, alteration, or unsafe sharing.

This section aims to:

a. Protect the privacy, dignity, safety, and rights of survivors and affected persons.

b. Prevent retaliation, stigma, discrimination, exposure, and further harm.

c. Ensure that safeguarding and PSEA information is handled confidentially.

d. Promote responsible collection and use of personal data.

e. Ensure that information is shared only on a need-to-know basis.

f. Protect children, vulnerable adults, persons with disabilities, complainants, witnesses, whistleblowers, staff, volunteers, and community members.

g. Support safe referral, case management, investigation, donor reporting, and legal compliance.

h. Ensure that EAO complies with applicable laws, donor requirements, partnership obligations, and ethical standards.

18.2 Definition of Personal Data

Personal data means any information that can identify a person directly or indirectly.

Personal data may include:

a. Name.

b. Age or date of birth.

c. Gender.

d. Address or location.

e. Phone number or email address.

f. Identification number.

g. Family information.

h. Photos, videos, voice recordings, or images.

i. Health or medical information.

j. Disability information.

k. Refugee, IDP, returnee, or migration status.

l. Beneficiary registration information.

m. Complaint or feedback information.

n. Case management records.

o. Staff or volunteer records.

p. Financial or assistance records.

q. Any other information that can identify a person.

18.3 Sensitive Data

Sensitive data requires higher protection because unauthorized disclosure may cause serious harm.

Sensitive data may include:

a. Survivor information.

b. Sexual exploitation and abuse reports.

c. Sexual harassment complaints.

d. GBV-related information.

e. Child protection information.

f. Information about abuse, exploitation, neglect, or violence.

g. Disability and health information.

h. Medical and psychosocial records.

i. Legal or police information.

j. Whistleblowing reports.

k. Investigation records.

l. Witness statements.

m. Identity of complainants or reporters.

n. Photos, videos, or stories of children, survivors, persons with disabilities, or vulnerable adults.

o. Information that may expose a person to stigma, retaliation, exclusion, or danger.

18.4 Confidentiality Principle

EAO shall ensure that safeguarding and PSEA information is treated as confidential. Confidentiality means that information is not shared publicly, casually, unnecessarily, or with unauthorized persons.

Information shall only be shared with authorized persons who need the information to protect someone, provide referral support, manage a case, conduct an investigation, make an authorized decision, meet legal requirements, or comply with donor or partner obligations.

Confidentiality is not optional. It is a core safeguarding requirement.

18.5 Need-to-Know Basis

EAO shall apply a strict need-to-know approach in all safeguarding and PSEA matters.

This means:

a. Only people directly responsible for referral, protection, case management, investigation, decision-making, legal compliance, or donor reporting may access relevant information.

b. Information shared must be limited to what is necessary for the specific purpose.

c. Staff curiosity, seniority, personal relationship, informal discussion, or general interest is not a valid reason to access or share safeguarding information.

d. Information must not be shared through gossip, group chats, public meetings, community discussions, or informal communication.

18.6 Informed Consent for Data Collection and Sharing

EAO shall seek informed consent before collecting, using, storing, sharing, referring, photographing, recording, interviewing, or publishing personal information, unless there is a legal, child protection, life-saving, or mandatory reporting reason that allows or requires action without consent.

Before collecting or sharing information, EAO shall explain:

a. What information is being collected.

b. Why the information is needed.

c. How the information will be used.

d. Who may access the information.

e. Whether the person can refuse or withdraw consent.

f. Possible risks and benefits.

g. Limits of confidentiality.

h. How information will be protected.

Consent must be voluntary, informed, specific, and free from pressure, fear, manipulation, deception, or exchange of benefits.

18.7 Consent for Children

For children, EAO shall seek consent from a parent or caregiver where required and safe, and shall also seek the child's assent according to age, maturity, and understanding.

Where a parent, caregiver, or guardian is suspected of causing harm, may place the child at risk, or may misuse the information, EAO shall not automatically share information with that person. The best interests of the child shall guide all decisions.

Child information must be handled with special confidentiality and protection.

18.8 Consent for Persons with Disabilities

EAO shall respect the right of persons with disabilities to provide informed consent and make decisions about their own information.

Disability shall not be assumed to remove a person's capacity to consent. EAO shall provide reasonable accommodation, accessible communication, simplified explanation, additional time, or supported decision-making where needed and safe.

Information should not be shared with caregivers, family members, interpreters, or support persons unless the person consents or there is a serious protection or legal reason to do so.

18.9 Minimum Data Collection

EAO shall collect only the information that is necessary for a clear and legitimate purpose. Staff and representatives must avoid collecting excessive, irrelevant, intrusive, or unnecessary details, especially in safeguarding, SEA, GBV, child protection, disability, medical, or trauma-related cases.

EAO shall not ask survivors, children, or affected persons to repeat traumatic details unless necessary for protection, referral, investigation, or legal purposes.

18.10 Safe Recording of Information

Information shall be recorded accurately, respectfully, and only by authorized persons.

Records should be factual and avoid judgmental language, gossip, assumptions, blame, or unnecessary personal opinions. Where possible, direct statements should be recorded carefully without exaggeration or distortion.

Sensitive forms and notes must not be left in open areas, shared casually, or stored in personal devices without authorization.

18.11 Secure Storage of Physical Records

Physical records such as complaint forms, incident reports, consent forms, referral notes, investigation files, staff records, and case documents must be stored securely.

Safe storage may include:

a. Locked cabinets.

b. Restricted-access offices.

c. Sealed envelopes for sensitive cases.

d. Controlled access by authorized persons only.

e. Separate storage for highly sensitive safeguarding and PSEA records.

f. Clear record management responsibility.

g. Protection from loss, theft, damage, fire, water, or unauthorized copying.

18.12 Secure Storage of Digital Records

Digital records must be protected from unauthorized access, loss, misuse, or sharing.

Safe digital storage may include:

a. Password-protected files.

b. Restricted-access folders.

c. Secure organizational devices where available.

d. Encrypted storage where possible.

e. Limited access permissions.

f. Avoiding storage of sensitive case files on personal phones or personal computers unless formally authorized.

g. Secure backup where appropriate.

h. Regular review of who has access.

i. Removal of access when staff leave or change roles.

18.13 Safe Use of Email, Phones, and Messaging Applications

EAO personnel and representatives must use caution when sharing sensitive information by email, phone, messaging applications, or online platforms.

They must not:

a. Share survivor or child information in group chats.

b. Forward sensitive files to unauthorized persons.

c. Send confidential information to personal email accounts without authorization.

d. Discuss safeguarding cases on unsecured platforms unnecessarily.

e. Store sensitive images, case details, or personal data on personal phones without authorization.

f. Share screenshots, voice notes, photos, videos, or documents without clear need and approval.

Where digital sharing is necessary, information must be limited, protected, and sent only to authorized persons.

18.14 Protection of Photos, Videos, Stories, and Case Studies

Photos, videos, audio recordings, stories, testimonials, and case studies are personal data and must be treated with care.

EAO shall ensure that:

a. Informed consent is obtained before collection or use.

b. For children, caregiver consent and child assent are obtained where safe and required.

c. Images and stories do not expose people to stigma, retaliation, shame, identification, exploitation, discrimination, or harm.

d. Names, exact locations, survivor details, disability information, health status, and sensitive case details are removed where needed.

e. Content is stored securely and accessed only by authorized persons.

f. Consent is respected if a person withdraws permission where possible.

g. Communication materials portray people with dignity and respect.

18.15 Confidentiality in Complaints and Investigations

Complaints, incident reports, whistleblowing reports, investigation records, witness statements, disciplinary files, and case management notes must be handled with the highest level of confidentiality.

Information shall not be shared with:

a. Unauthorized staff.

b. Community members.

c. Family members without consent or safety justification.

d. The alleged perpetrator before authorized process.

e. Partners or donors beyond required and safe reporting.

f. Media or public platforms.

g. Anyone not directly involved in authorized response.

18.16 Confidentiality in Referral

Referral information shall only be shared with the survivor's informed consent, except where mandatory reporting, child protection, life-saving, or legal obligations apply.

Only the minimum necessary information should be shared with service providers. Staff must not share detailed incident information unless it is necessary, consented, and safe.

Referral records must be stored securely and separately from general program documents where possible.

18.17 Confidentiality During Meetings

Safeguarding and PSEA cases must not be discussed in general staff meetings, public meetings, community meetings, informal conversations, or open office spaces.

Where case discussion is necessary, it must take place in a private setting with authorized persons only. Information shared should be limited to what is necessary.

Meeting notes involving sensitive cases must be stored securely and circulated only to authorized persons.

18.18 Data Access and Authorization

EAO shall restrict access to safeguarding and PSEA information to authorized persons only.

Authorized access may be granted to:

a. Safeguarding focal persons.

b. Designated senior management.

c. HR or administration staff where relevant.

d. Investigators where appointed.

e. Legal or donor compliance focal persons where required.

f. Referral or case management focal persons where necessary.

g. Board-designated persons where senior leadership is involved.

Access must be based on role, need, authorization, and confidentiality responsibility.

18.19 Data Sharing with Donors, Partners, and Authorities

EAO shall comply with donor, partner, contractual, and legal reporting requirements while protecting confidentiality and personal data.

When reporting externally, EAO shall:

a. Share only required information.

b. Avoid unnecessary identifying details.

c. Protect survivor, child, complainant, witness, and whistleblower identity.

d. Use anonymized or coded information where possible.

e. Ensure reporting is handled by authorized persons.

f. Consider safety risks before sharing.

g. Document what was shared, with whom, when, and why.

18.20 Anonymization and De-Identification

Where information is used for reporting, learning, training, donor updates, monitoring, or policy improvement, EAO shall anonymize or de-identify personal information where possible.

Anonymization may include removing or changing:

a. Names.

b. Exact locations.

c. Phone numbers.

d. Family details.

e. Photos or identifying images.

f. Specific case details that reveal identity.

g. Rare disability or medical details.

h. Any information that could allow identification.

18.21 Data Retention

EAO shall retain safeguarding and PSEA records only for as long as necessary for protection, case management, investigation, legal compliance, donor requirements, organizational accountability, or learning.

Retention periods should consider the seriousness of the case, legal requirements, donor obligations, HR needs, and risks of keeping or deleting information.

Records must not be kept indefinitely without a valid reason.

18.22 Safe Disposal of Records

When records are no longer needed and disposal is authorized, EAO shall dispose of them safely.

Safe disposal may include:

a. Shredding physical documents.

b. Secure deletion of digital files.

c. Removing files from shared folders.

d. Deleting copies from devices.

e. Destroying duplicate records.

f. Recording disposal where required.

Sensitive records must never be thrown into open waste, left in offices, or deleted casually without authorization.

18.23 Data Breach or Unauthorized Disclosure

A data breach occurs when personal or sensitive information is lost, stolen, accessed, disclosed, shared, altered, or used without authorization.

Examples include:

a. Lost complaint forms.

b. Sharing survivor information in a group chat.

c. Sending a case file to the wrong person.

d. Unauthorized access to investigation records.

e. Leaking child information.

f. Stolen laptop or phone containing sensitive data.

g. Public sharing of photos without consent.

h. Discussion of confidential case information in public.

Any data breach involving safeguarding information must be reported immediately to management or the safeguarding focal person.

18.24 Response to Data Breach

When a data breach occurs, EAO shall take immediate steps to reduce harm.

Actions may include:

a. Securing the information.

b. Limiting further access or sharing.

c. Notifying authorized management.

d. Assessing risk to affected persons.

e. Informing the affected person where safe and appropriate.

f. Taking protection measures if exposure creates risk.

g. Reporting to donors or authorities where required.

h. Reviewing how the breach happened.

i. Applying corrective or disciplinary action where needed.

j. Improving data protection systems.

18.25 Responsibilities of Staff and Representatives

All EAO personnel and representatives are responsible for protecting personal and sensitive information.

They must:

a. Collect only necessary information.

b. Explain consent and confidentiality.

c. Store records safely.

d. Share information only with authorized persons.

e. Avoid gossip or informal discussion.

f. Protect passwords and devices.

g. Report data breaches immediately.

h. Follow EAO data protection and safeguarding procedures.

i. Return or delete sensitive data when leaving a role, as instructed.

j. Respect the privacy and dignity of all persons.

18.26 Responsibilities of Managers and Leadership

Managers and leadership are responsible for ensuring that data protection systems are implemented and monitored.

They must:

a. Ensure staff understand confidentiality rules.

b. Provide secure storage options where possible.

c. Limit access to sensitive information.

d. Respond to data breaches.

e. Ensure donor and legal reporting is safe and appropriate.

f. Enforce disciplinary measures for breaches.

g. Support training on confidentiality and data protection.

h. Ensure safeguarding records are protected during staff turnover, project closure, and office movement.

18.27 Data Protection in Partnerships and Contracts

EAO shall require partners, contractors, suppliers, consultants, service providers, and consortium members to protect personal and safeguarding-related information where they collect, receive, or use data connected to EAO's work.

Agreements should include confidentiality and data protection obligations where relevant.

Third parties must not use EAO data for unauthorized purposes, share information without approval, or publish photos, stories, reports, or beneficiary information without consent and authorization.

18.28 Breach of Confidentiality

Breach of confidentiality is a serious violation of this policy.

Depending on the seriousness of the breach, action may include:

a. Verbal or written warning.

b. Mandatory training.

c. Restriction of access to information.

d. Suspension.

e. Termination of employment or contract.

f. Partner or supplier review.

g. Donor notification.

h. Referral to authorities where required.

i. Other corrective or disciplinary action.

18.29 Minimum Standard for Data Protection and Confidentiality

At minimum, EAO shall ensure that personal and safeguarding-related information is collected only when needed, stored securely, shared only with authorized persons on a need-to-know basis, protected from unauthorized disclosure, and used in a way that upholds safety, dignity, privacy, consent, and accountability.

Data protection and confidentiality are essential to EAO's safeguarding, PSEA, survivor-centered response, child protection, disability inclusion, accountability, and duty of care.

19. Safe Communication, Photos, Videos, and Storytelling

East Action Organization (EAO) is committed to ensuring that all communication, photography, videography, storytelling, interviews, case studies, publications, social media posts, reports, and digital content are conducted safely, ethically, respectfully, accurately, and in a way that protects the dignity, privacy, rights, and safety of all people. EAO recognizes that communication can raise awareness, demonstrate impact, strengthen accountability, and mobilize support, but it can also create harm if images, stories, or personal information are collected or shared without proper safeguarding measures.

This section establishes EAO's standards for safe communication, photos, videos, and storytelling. It applies to all EAO board members, management, staff, volunteers, interns, consultants, partners, contractors, suppliers, media teams, visitors, donors, photographers, videographers, content creators, community mobilizers, and any person collecting or using communication materials on behalf of EAO.

19.1 Purpose of Safe Communication

The purpose of safe communication is to ensure that EAO's communication practices protect people from exposure, stigma, exploitation, shame, retaliation, discrimination, re-traumatization, unsafe identification, breach of privacy, or misuse of personal information.

This section aims to:

a. Protect the dignity and safety of children, vulnerable adults, persons with disabilities, survivors, beneficiaries, staff, volunteers, partners, and communities.

b. Ensure informed consent before collecting or using images, videos, stories, or personal information.

c. Prevent harmful, degrading, sensational, or exploitative representation.

d. Ensure responsible use of social media and digital platforms.

e. Protect confidential and sensitive information.

f. Ensure that communication materials follow safeguarding and PSEA standards.

g. Prevent unauthorized photography, videography, interviews, or publication.

h. Ensure that donors, partners, visitors, and media actors respect EAO’s safeguarding rules.

19.2 Scope of Communication Materials

This section applies to all forms of communication and visibility materials, including:

a. Photos.

b. Videos.

c. Audio recordings.

d. Interviews.

e. Case studies.

f. Testimonials.

g. Human-interest stories.

h. Social media posts.

i. Website content.

j. Newsletters.

k. Reports.

l. Donor updates.

m. Presentations.

n. Press releases.

o. Campaign materials.

p. Training materials.

q. Posters, flyers, and brochures.

r. Digital messages and online content.

s. Any material that includes personal stories, images, voices, locations, or identifying details.

19.3 Guiding Principles

EAO's communication shall be guided by the following principles:

a. Do no harm.

b. Dignity and respect.

c. Informed consent.

d. Confidentiality and privacy.

e. Best interests of the child.

f. Survivor-centered approach.

g. Disability inclusion and accessibility.

h. Non-discrimination.

i. Accuracy and honesty.

j. Cultural sensitivity without compromising protection.

k. Avoidance of stereotypes and exploitation.

l. Protection from retaliation, stigma, and unsafe identification.

m. Accountability and authorization.

19.4 Informed Consent for Photos, Videos, and Stories

EAO shall obtain informed consent before taking, recording, using, storing, publishing, or sharing photos, videos, stories, interviews, voice recordings, or personal details.

Consent must be:

a. Voluntary.

b. Informed.

c. Specific.

d. Given without pressure, fear, manipulation, deception, or exchange of benefits.

e. Based on clear understanding of how the material will be used.

f. Documented where possible.

g. Able to be withdrawn where practical and reasonable.

Before consent is given, the person should understand:

a. Who is collecting the information or image.

b. Why it is being collected.

c. Where it may be used.

d. Who may see it.

e. Whether it may be shared online or with donors.

f. Possible risks and benefits.

g. That refusal will not affect access to services.

h. That they can ask questions before agreeing.

19.5 Consent for Children

For children, EAO shall obtain consent from a parent or caregiver where required and safe, and shall also seek the child's assent according to age, maturity, and understanding.

A child must never be forced, pressured, bribed, or manipulated to participate in photos, videos, interviews, or storytelling.

EAO shall not use a child's image or story if it may expose the child to stigma, retaliation, exploitation, identification, family conflict, community pressure, or harm.

Where the parent or caregiver may be a source of risk, consent decisions must be guided by the best interests of the child and child protection standards.

19.6 Consent for Persons with Disabilities

Persons with disabilities have the right to make their own decisions about photos, videos, interviews, stories, and personal information.

EAO shall provide accessible communication and reasonable accommodation to support informed consent. This may include simple language, verbal explanation, sign language support where available, additional time, trusted support person where safe, or other communication assistance.

Disability shall not be used as a reason to take photos, videos, or stories without consent. Caregiver consent must not replace the person's own consent unless legally required and appropriate.

19.7 Consent for Survivors and Sensitive Cases

EAO shall apply extra caution when communication involves survivors of sexual exploitation and abuse, GBV, violence, child abuse, trafficking, torture, disability-related abuse, or other sensitive protection cases.

As a general rule, EAO should avoid using identifiable images, names, exact locations, or detailed personal stories of survivors, especially where publication may create risk.

If a survivor chooses to share their story, EAO must ensure that consent is fully informed, voluntary, safe, and not influenced by dependency, pressure, expectations of assistance, or emotional vulnerability.

Survivors must be informed of possible risks, especially online sharing, community identification, stigma, family conflict, retaliation, or loss of privacy.

19.8 Right to Refuse Without Consequence

No person shall lose access to EAO assistance, services, referrals, employment, training, protection, or participation because they refuse to be photographed, filmed, recorded, interviewed, or publicly identified.

Staff and representatives must clearly explain that refusal will not affect services or benefits.

Consent must never be connected to aid, selection, employment, referral, or any project benefit.

19.9 Dignified Representation

EAO shall portray people with dignity, respect, agency, and strength. Communication materials must avoid images, words, or stories that are degrading, humiliating, sensational, exploitative, pity-based, discriminatory, or harmful.

EAO shall avoid portraying people as helpless, passive, inferior, voiceless, or objects of charity. Communication should recognize people as rights-holders, community members, leaders, participants, survivors, caregivers, youth, professionals, and agents of change.

19.10 Avoidance of Harmful Stereotypes

EAO communication shall avoid stereotypes based on gender, disability, age, ethnicity, clan, religion, poverty, displacement, refugee status, health status, or social background.

Communication materials must not reinforce harmful ideas such as:

a. Persons with disabilities are helpless.

b. Women and girls are only victims.

c. Refugees or IDPs are powerless.

d. Poor communities lack dignity.

e. Children should be used for emotional fundraising.

f. Survivors should be identified to prove impact.

g. Communities should be shown in shameful or degrading situations.

19.11 Protection of Identity and Location

EAO shall avoid publishing identifying information that may expose people to harm.

This includes:

a. Full names.

b. Exact home addresses.

c. School names where risky.

d. Camp block or household location where risky.

e. Phone numbers.

f. Identification documents.

g. Family details.

h. Disability or medical details.

i. Survivor details.

j. Case details.

k. Images showing recognizable location where harmful.

Where necessary, EAO may use pseudonyms, general locations, blurred images, back-view photos, group photos without identification, or non-identifying stories.

19.12 Safe Photography and Videography Practice

Before taking photos or videos, EAO staff and representatives must:

a. Explain the purpose.

b. Obtain consent.

c. Respect refusal.

d. Avoid intrusive or humiliating images.

e. Avoid photographing people in distress, grief, medical treatment, private moments, or unsafe conditions unless there is a clear ethical reason and consent.

f. Avoid images that expose children, survivors, persons with disabilities, or vulnerable adults to harm.

g. Avoid taking images in bathrooms, shelters, medical spaces, private homes, or sensitive locations without strict safeguards.

h. Stop immediately if the person becomes uncomfortable or withdraws consent.

19.13 Safe Interviewing and Story Collection

When collecting stories or interviews, EAO personnel must:

a. Explain the purpose and intended use.

b. Obtain informed consent.

c. Ask respectful and non-leading questions.

d. Avoid forcing people to discuss trauma.

e. Avoid unnecessary details about abuse, violence, or suffering.

f. Allow the person to stop at any time.

g. Avoid promises of assistance, payment, or personal benefit.

h. Protect confidentiality.

i. Check whether the story may create risk if published.

j. Use respectful language and accurate representation.

19.14 Communication Involving Children

Communication involving children must be child-safe.

EAO shall ensure that:

a. Child participation is voluntary.

b. The best interests of the child guide all decisions.

c. Caregiver consent and child assent are obtained where required and safe.

d. Images are respectful and non-exploitative.

e. Children are appropriately clothed and not shown in degrading situations.

f. Names, locations, school details, or case information are removed where needed.

g. Children are not asked harmful, traumatic, or leading questions.

h. Children are not used to create emotional pressure for fundraising.

i. Any child protection concern observed during communication is reported.

19.15 Communication Involving Persons with Disabilities

Communication involving persons with disabilities must be respectful, inclusive, and rights-based.

EAO shall ensure that:

a. The person’s own voice and consent are respected.

b. Disability is not presented as shame, pity, or helplessness.

c. Assistive devices are shown respectfully and only with consent.

d. Personal care, medical conditions, or private support needs are not exposed.

e. Communication materials highlight dignity, participation, leadership, ability, and inclusion.

f. Accessibility needs are considered during interviews, photos, and videos.

19.16 Communication Involving Refugees, IDPs, and Vulnerable Communities

EAO shall apply caution when communicating about refugees, IDPs, returnees, host communities, and crisis-affected people.

Communication must not expose people to:

a. Protection risks.

b. Political or security risks.

c. Stigma or discrimination.

d. Family or community conflict.

e. Identification by harmful actors.

f. Loss of privacy.

g. Exploitation or manipulation.

EAO shall avoid publishing exact locations or sensitive personal details where this may create risk.

19.17 Communication Involving Safeguarding, GBV, or PSEA Cases

EAO shall not publish identifiable information about safeguarding, GBV, or PSEA cases unless there is a clear, safe, lawful, and consented reason, and approval by authorized leadership and safeguarding personnel.

In most cases, safeguarding and PSEA cases should be communicated only through anonymized, aggregated, or non-identifying information.

No communication material shall expose a survivor, complainant, child, witness, or subject of complaint.

19.18 Digital and Social Media Safety

EAO personnel and representatives must use digital platforms responsibly.

They must not:

a. Post photos or videos without consent and authorization.

b. Share personal data in public or group platforms.

c. Tag beneficiaries, children, survivors, or vulnerable persons without consent and risk review.

d. Share exact locations where risky.

e. Use offensive, discriminatory, sexual, or harmful language.

f. Engage in online harassment, exploitation, grooming, stalking, or intimidation.

g. Share confidential documents, case details, or complaint information.

h. Use personal accounts to publish EAO-related sensitive content without approval.

Online content can be copied, saved, shared, and misused beyond EAO's control. Therefore, digital publication requires careful risk review.

19.19 Approval of Communication Materials

Communication materials involving children, survivors, persons with disabilities, vulnerable adults, sensitive cases, field activities, donors, partners, or public visibility should be reviewed and approved by authorized EAO personnel before publication.

Approval should confirm that:

a. Consent was obtained.

b. The material is dignified and accurate.

c. No sensitive information is exposed.

d. Safeguarding risks have been considered.

e. Donor and partner visibility rules are respected.

f. The content aligns with EAO values and protection standards.

19.20 Visitors, Donors, Media, and External Photographers

Visitors, donors, media representatives, photographers, consultants, and external communication teams must follow EAO's safeguarding and communication rules.

Before field visits or media activities, EAO shall brief them on:

a. Informed consent.

b. Do no harm.

c. Child safeguarding.

d. Disability-inclusive communication.

e. Confidentiality.

f. Prohibited images and questions.

g. Safe interaction with communities.

h. Restrictions on independent publication.

i. Approval requirements.

EAO may stop any communication activity that creates safeguarding risk.

19.21 Use of Existing Images and Stories

EAO shall use existing photos, videos, and stories only where consent, purpose, and safeguarding conditions remain valid.

Before reusing old materials, EAO should consider:

a. Was consent given for this new use?

b. Has the person's situation changed?

c. Could reuse create new risks?

d. Is the content still accurate?

e. Does the material remain dignified and respectful?

f. Should identifying details be removed?

Old consent should not be assumed to cover all future uses.

19.22 Withdrawal of Consent

Where a person withdraws consent, EAO shall make reasonable efforts to stop future use of the image, video, story, or personal information.

EAO may not always be able to remove content already published or shared externally, but it shall take reasonable steps to remove or stop use where practical and safe.

Staff must inform participants of this limitation before publication.

19.23 Storage and Retention of Communication Materials

Communication materials containing personal information must be stored securely.

EAO shall ensure that:

a. Photos, videos, stories, and consent forms are stored safely.

b. Access is limited to authorized persons.

c. Files are labeled and managed responsibly.

d. Sensitive materials are not stored casually on personal phones or laptops.

e. Materials are not shared with unauthorized persons.

f. Materials are deleted or archived according to EAO procedures when no longer needed.

19.24 Breach of Safe Communication Standards

Any breach of safe communication standards may result in corrective or disciplinary action.

Breaches may include:

a. Taking photos without consent.

b. Publishing child images without safeguards.

c. Sharing survivor stories without authorization.

d. Posting confidential information online.

e. Using degrading or exploitative images.

f. Sharing photos or videos in personal groups.

g. Exposing names, locations, or case details.

h. Misusing communication materials for personal benefit.

i. Ignoring withdrawal of consent where practical.

19.25 Roles and Responsibilities

All staff and representatives are responsible for following safe communication standards.

Communication staff are responsible for ensuring that content is ethical, consent-based, dignified, and approved before publication.

Program staff are responsible for supporting safe consent processes and identifying risks during field communication.

Safeguarding focal persons are responsible for advising on sensitive communication risks.

Managers are responsible for approving communication activities and ensuring staff compliance.

Leadership is responsible for ensuring that communication practices protect dignity, safety, and organizational accountability.

19.26 Minimum Standard for Safe Communication

At minimum, EAO shall ensure that photos, videos, stories, interviews, and public communication are collected with informed consent, used respectfully, reviewed for safeguarding risk, stored securely, and published only when they do not expose people to harm.

Safe communication is essential to EAO's safeguarding, PSEA, child protection, disability inclusion, accountability, ethical storytelling, and responsible public engagement.

20. Safeguarding in Partnerships, Consortiums, Contractors, and Suppliers

East Action Organization (EAO) is committed to ensuring that safeguarding and PSEA standards are applied not only within EAO's internal operations, but also across its partnerships, consortiums, sub-grants, contractors, suppliers, consultants, service providers, vendors, and third-party relationships. EAO recognizes that safeguarding risks may arise through any person or entity working with, representing, funded by, contracted by, or delivering services on behalf of EAO.

EAO shall take reasonable steps to ensure that partners, consortium members, contractors, suppliers, consultants, service providers, sub-grantees, community-based organizations, vendors, transport providers, construction providers, trainers, enumerators, and other third parties understand and comply with EAO's safeguarding, PSEA, child protection, disability inclusion, anti-harassment, anti-discrimination, confidentiality, and safe conduct requirements.

This section applies to all formal and informal collaborations where a third party works with EAO, receives EAO funding, represents EAO, accesses EAO beneficiaries, participates in EAO activities, provides goods or services to EAO, handles EAO data, or interacts with communities connected to EAO's work.

20.1 Purpose of Safeguarding in Partnerships and Third-Party Engagements

The purpose of this section is to ensure that EAO's safeguarding commitments are clearly communicated, understood, applied, monitored, and enforced across all partnership and third-party relationships.

This section aims to:

a. Prevent safeguarding risks caused by partners, contractors, suppliers, consultants, service providers, and consortium members.

b. Ensure that third parties do not expose beneficiaries, children, vulnerable adults, persons with disabilities, survivors, staff, volunteers, or communities to harm.

c. Integrate safeguarding and PSEA requirements into partnership agreements, contracts, memoranda of understanding, sub-grant agreements, procurement documents, and supplier arrangements.

d. Promote shared responsibility for safe programming, accountability, inclusion, and ethical conduct.

e. Ensure that safeguarding concerns involving third parties are reported, referred, investigated, and addressed appropriately.

f. Protect EAO's communities, reputation, donor compliance, and organizational integrity.

g. Strengthen partner capacity where gaps are identified.

h. Ensure that EAO does not knowingly collaborate with entities or individuals that pose serious safeguarding risks.

20.2 Scope of Application

This section applies to all third parties connected to EAO's work, including:

a. Implementing partners.

b. Consortium members.

c. Sub-grantees.

d. Community-based organizations.

e. Civil society partners.

f. Government or public-sector partners where applicable.

g. Contractors.

h. Suppliers.

i. Vendors.

j. Consultants.

k. Service providers.

l. Transport providers and drivers.

m. Construction and facility service providers.

n. Trainers and facilitators.

o. Enumerators and data collectors.

p. Media teams, photographers, videographers, and communication consultants.

q. Referral service providers.

r. Volunteers or community mobilizers engaged through partners.

s. Any other individual or entity working with, funded by, or representing EAO.

20.3 Shared Safeguarding Responsibility

Safeguarding is a shared responsibility. EAO shall not assume that safeguarding risks are limited to its own staff. Any third party working with or on behalf of EAO may create safeguarding risks through direct interaction with beneficiaries, control of resources, access to sensitive information, transport, construction sites, service delivery, recruitment, distribution, communication, or community engagement.

EAO shall require all relevant third parties to act in a manner that protects the dignity, safety, rights, privacy, and wellbeing of all people connected to EAO's work.

20.4 Minimum Safeguarding Expectations for Partners and Third Parties

All partners, consortium members, contractors, suppliers, consultants, service providers, and other third parties working with or on behalf of EAO are expected to:

a. Prevent sexual exploitation and abuse.

b. Prevent sexual harassment.

c. Protect children from abuse, exploitation, neglect, and unsafe contact.

d. Protect vulnerable adults from abuse, exploitation, neglect, and mistreatment.

e. Respect and include persons with disabilities.

f. Prevent harassment, bullying, intimidation, and discrimination.

g. Maintain professional boundaries.

h. Treat all people with dignity, respect, fairness, and non-discrimination.

i. Avoid misuse of power, resources, services, information, or authority.

j. Ensure that assistance and services are never exchanged for sex, money, favors, loyalty, silence, or personal benefit.

k. Report safeguarding concerns promptly to EAO or through agreed reporting channels.

l. Protect confidentiality and personal data.

m. Cooperate with safeguarding reviews, referrals, investigations, and corrective actions.

n. Protect complainants, survivors, witnesses, and whistleblowers from retaliation.

20.5 Partner Safeguarding Due Diligence

Before entering into a partnership, consortium, sub-grant, or implementation arrangement, EAO should conduct proportionate safeguarding due diligence.

Partner safeguarding due diligence may review:

a. Whether the partner has a safeguarding or PSEA policy.

b. Whether the partner has a Code of Conduct.

c. Whether staff and volunteers sign conduct commitments.

d. Whether the partner has complaint and feedback channels.

e. Whether the partner has a whistleblowing or confidential reporting system.

f. Whether the partner has safe recruitment procedures.

g. Whether the partner has child protection measures.

h. Whether the partner applies disability inclusion and accessibility standards.

i. Whether the partner provides safeguarding and PSEA training.

j. Whether the partner has referral pathways for survivors and affected persons.

k. Whether the partner has experience managing safeguarding concerns.

l. Whether the partner has had previous safeguarding concerns, sanctions, or serious misconduct where known.

m. Whether the partner is willing to comply with EAO's safeguarding standards where gaps exist.

20.6 Risk-Based Partner Assessment

EAO shall apply a risk-based approach to partner assessment. Higher-risk partnerships require stronger review and monitoring.

Higher-risk partnerships may include:

a. Partners working directly with children.

b. Partners working with persons with disabilities.

c. Partners working with survivors, GBV cases, protection cases, or vulnerable adults.

d. Partners managing distributions, cash, food, shelter, assistive devices, or livelihood inputs.

e. Partners handling beneficiary selection or registration.

f. Partners collecting sensitive data.

g. Partners providing transport, accommodation, referral, health, protection, or case management services.

h. Partners working in displacement, emergency, conflict, or high-dependency contexts.

i. Partners with weak safeguarding systems or no prior safeguarding policy.

j. Partners with previous complaints or misconduct concerns.

20.7 Safeguarding in Partnership Agreements

EAO shall include safeguarding and PSEA expectations in partnership agreements, memoranda of understanding, consortium agreements, sub-grant agreements, and implementation arrangements where relevant.

Partnership documents should include:

a. Commitment to safeguarding and PSEA.

b. Requirement to follow EAO's Safeguarding and PSEA Policy Manual or equivalent standards.

c. Code of Conduct obligations.

d. Duty to report safeguarding concerns.

e. Confidentiality and data protection requirements.

f. Protection from retaliation.

g. Safe recruitment and staff briefing requirements.

h. Referral and survivor-centered response expectations.

i. Cooperation with investigations and corrective action.

j. Donor and legal reporting obligations where applicable.

k. Consequences for breach, including suspension or termination.

20.8 Safeguarding in Consortium Arrangements

In consortium arrangements, EAO shall ensure that safeguarding roles, reporting lines, incident escalation procedures, partner responsibilities, referral arrangements, and confidentiality expectations are clearly agreed.

Consortium safeguarding arrangements should clarify:

a. Which safeguarding policy applies.

b. How incidents are reported between consortium members.

c. Who leads initial response and referral.

d. Who informs donors where required.

e. How confidentiality and survivor safety are protected.

f. How investigations are coordinated.

g. How conflicts of interest are managed.

h. How partner non-compliance is handled.

i. How safeguarding learning is shared without exposing confidential information.

20.9 Safeguarding in Contractor and Supplier Engagement

EAO shall assess safeguarding risks before engaging contractors, suppliers, vendors, consultants, service providers, and transport providers, especially where they may interact with communities, beneficiaries, children, vulnerable adults, persons with disabilities, staff, or sensitive data.

Contractor and supplier safeguarding controls may include:

a. Safeguarding clauses in contracts or purchase orders.

b. Supplier Code of Conduct or safeguarding commitment form.

c. Briefing on prohibited conduct.

d. Restrictions on contact with beneficiaries.

e. Confidentiality agreements.

f. Supervision during field work.

g. Requirement to report concerns.

h. Prohibition of harassment, SEA, discrimination, bribery, and exploitation.

i. Sanctions for breach, including contract termination.

20.10 Safeguarding in Procurement

EAO shall ensure that procurement processes do not create safeguarding risks. Procurement staff and committees must act fairly, transparently, and without corruption, exploitation, favoritism, conflict of interest, or discrimination.

Safeguarding risks in procurement may include:

a. Suppliers demanding favors from beneficiaries.

b. Contractors harassing community members.

c. Vendors exploiting vulnerable groups.

d. Bribery or corruption affecting service quality.

e. Unsafe construction or service delivery.

f. Contractors accessing children or vulnerable adults without supervision.

g. Misuse of beneficiary data.

h. Fraud or diversion that denies communities safe assistance.

Where procurement involves community-facing services, safeguarding requirements must be included and monitored.

20.11 Safeguarding in Transport and Logistics Providers

Transport providers, drivers, and logistics contractors may have direct contact with staff, beneficiaries, children, vulnerable adults, persons with disabilities, and community members. EAO shall ensure that transport providers understand safeguarding expectations.

Transport-related safeguarding standards include:

a. No harassment, exploitation, abuse, or discrimination.

b. No demand for payment, favors, sex, loyalty, or private service.

c. No unauthorized private transport of children or beneficiaries.

d. Respectful and safe treatment of passengers.

e. Safe and appropriate communication.

f. Reporting of incidents or concerns.

g. Respect for confidentiality and privacy.

h. No misuse of vehicles or transport arrangements.

20.12 Safeguarding in Communication and Media Partners

Media teams, photographers, videographers, communication consultants, and visitors must follow EAO's safe communication standards.

They must:

a. Obtain informed consent.

b. Respect refusal.

c. Protect children and vulnerable adults.

d. Avoid identifying survivors or sensitive cases.

e. Avoid degrading or exploitative images.

f. Avoid unsafe publication of names, locations, or personal information.

g. Follow EAO approval procedures before publication.

h. Store images, videos, and stories securely.

i. Avoid independent use of materials without authorization.

EAO may stop any media or communication activity that creates safeguarding risk.

20.13 Safeguarding in Data Collection and Research Partners

Partners, consultants, enumerators, and researchers who collect data for EAO must follow safe data collection and confidentiality standards.

They must:

a. Obtain informed consent.

b. Avoid harmful or intrusive questions.

c. Protect personal data.

d. Use safe interview locations.

e. Refer safeguarding disclosures through approved channels.

f. Avoid interviewing children or vulnerable persons without safeguards.

g. Secure digital and physical data.

h. Avoid sharing data without authorization.

i. Respect disability accessibility and language needs.

20.14 Capacity Strengthening for Partners

Where a partner has safeguarding gaps but is willing and appropriate to work with EAO, EAO may support capacity strengthening.

Capacity strengthening may include:

a. Safeguarding and PSEA orientation.

b. Code of Conduct development.

c. Complaint mechanism guidance.

d. Safe recruitment support.

e. Referral pathway mapping.

f. Child protection guidance.

g. Disability inclusion support.

h. Data protection guidance.

i. Incident reporting procedures.

j. Partner safeguarding action plan.

Capacity strengthening does not remove the responsibility of the partner to comply with minimum safeguarding standards.

20.15 Reporting Concerns Involving Partners or Third Parties

Any safeguarding concern involving a partner, contractor, supplier, consultant, service provider, consortium member, or other third party must be reported through EAO's approved channels.

EAO shall assess:

a. Immediate safety risks.

b. Need for referral support.

c. Whether the third party should be suspended from activities.

d. Whether donor or partner notification is required.

e. Whether an investigation or joint review is needed.

f. Whether contract or partnership action is required.

g. Whether affected persons are protected from retaliation.

20.16 Investigation and Cooperation

Partners and third parties are expected to cooperate with safeguarding reviews, investigations, corrective actions, donor reporting, legal obligations, and case management processes.

They must not:

a. Hide information.

b. Retaliate against reporters.

c. Intimidate witnesses.

d. Interfere with investigations.

e. Destroy or alter evidence.

f. Force informal settlement.

g. Protect staff because of seniority, family, clan, political, financial, or organizational relationships.

Failure to cooperate may result in suspension, termination, or other action.

20.17 Corrective Action for Partner or Third-Party Breach

Where a partner or third party breaches safeguarding standards, EAO may take appropriate action.

Possible measures include:

a. Written warning.

b. Corrective action plan.

c. Mandatory safeguarding training.

d. Increased monitoring.

e. Restriction of activities.

f. Suspension of staff or activity.

g. Request for removal of unsafe personnel.

h. Suspension of fund transfer.

i. Contract suspension.

j. Contract termination.

k. Partnership termination.

l. Donor notification.

m. Referral to authorities where legally required and safe.

20.18 Termination or Refusal of Collaboration

EAO may refuse, suspend, or terminate collaboration with any entity or individual that:

a. Commits or enables safeguarding misconduct.

b. Fails to report serious safeguarding concerns.

c. Retaliates against complainants, survivors, witnesses, or whistleblowers.

d. Refuses to cooperate with investigation or corrective action.

e. Has safeguarding risks that cannot be reasonably managed.

f. Misuses EAO's name, resources, data, or authority.

g. Violates PSEA, child protection, disability inclusion, or confidentiality obligations.

h. Places communities, staff, or beneficiaries at serious risk.

20.19 Confidentiality and Data Protection in Partnerships

Partners and third parties must protect personal, sensitive, and safeguarding-related information.

They must not:

a. Share beneficiary data without authorization.

b. Publish photos, videos, stories, or reports without consent and approval.

c. Discuss safeguarding cases publicly.

d. Share survivor, child, witness, or complainant information without need and authorization.

e. Use EAO data for private, political, commercial, or unauthorized purposes.

f. Store sensitive data insecurely.

Data sharing arrangements should be clearly defined where partners or contractors collect or manage information.

20.20 Safeguarding Monitoring of Partners and Third Parties

EAO shall monitor safeguarding compliance in partnerships and third-party engagements according to risk.

Monitoring may include:

a. Review of safeguarding documents.

b. Site visits.

c. Staff and community feedback.

d. Complaint trend analysis.

e. Review of training records.

f. Partner self-assessments.

g. Contract compliance checks.

h. Observation of service delivery.

i. Review of incident reporting and corrective action.

Monitoring findings should be used to improve safeguarding systems and address risks.

20.21 Responsibilities of EAO

EAO is responsible for:

a. Communicating safeguarding expectations to partners and third parties.

b. Conducting proportionate due diligence.

c. Including safeguarding clauses in agreements and contracts.

d. Providing orientation or guidance where appropriate.

e. Monitoring compliance.

f. Receiving and responding to concerns.

g. Taking corrective action where needed.

h. Protecting communities and affected persons from partner-related harm.

i. Reporting to donors or authorities where required and safe.

20.22 Responsibilities of Partners and Third Parties

Partners and third parties are responsible for:

a. Following EAO safeguarding standards or equivalent standards.

b. Ensuring their staff and representatives understand safeguarding expectations.

c. Preventing abuse, exploitation, harassment, discrimination, and retaliation.

d. Reporting concerns promptly.

e. Protecting confidentiality.

f. Cooperating with investigations and corrective action.

g. Ensuring assistance and services are delivered safely and fairly.

h. Ensuring no staff member or representative misuses power, resources, or access.

20.23 Minimum Standard for Partnerships, Contractors, and Suppliers

At minimum, EAO shall ensure that all relevant partners, consortium members, contractors, suppliers, consultants, service providers, and third parties are informed of safeguarding and PSEA expectations, agree to safe conduct, report concerns, protect confidentiality, avoid retaliation, and cooperate with corrective action.

Safeguarding in partnerships and third-party engagement is essential to EAO's duty of care, donor compliance, community trust, and commitment to safe, accountable, and inclusive programming.

21. Roles and Responsibilities

East Action Organization (EAO) recognizes that safeguarding and PSEA are shared responsibilities across the whole organization. Safeguarding cannot be implemented by one person or one department alone. Every person connected to EAO has a duty to prevent harm, uphold safe conduct, report concerns, protect confidentiality, cooperate with procedures, and contribute to a safe, respectful, inclusive, and accountable organizational culture.

This section defines the safeguarding roles and responsibilities of EAO's board, leadership, management, safeguarding focal persons, staff, volunteers, consultants, partners, contractors, suppliers, community representatives, and all persons acting on behalf of EAO.

21.1 Purpose of Roles and Responsibilities

The purpose of this section is to clarify who is responsible for safeguarding and PSEA implementation within EAO and how responsibilities are shared across governance, management, program, operations, partnership, and community levels.

This section aims to:

a. Ensure clear accountability for safeguarding and PSEA.

b. Prevent confusion, delay, or inaction when concerns arise.

c. Strengthen implementation of the Safeguarding and PSEA Policy Manual.

d. Ensure that safeguarding responsibilities are embedded across all departments and functions.

e. Support timely reporting, referral, response, investigation, and corrective action.

f. Promote leadership accountability and organizational learning.

g. Ensure that partners and third parties understand their responsibilities.

21.2 Responsibility of the Board of Directors or Governing Body

The Board of Directors or governing body is responsible for providing oversight and ensuring that safeguarding is treated as an institutional priority.

The Board shall:

a. Approve and support implementation of the Safeguarding and PSEA Policy Manual.

b. Ensure that EAO has clear safeguarding governance and accountability structures.

c. Promote a culture of zero tolerance for SEA, abuse, harassment, discrimination, retaliation, and misconduct.

d. Ensure that senior leadership is accountable for safeguarding implementation.

e. Review serious safeguarding risks where appropriate and confidential.

f. Ensure that safeguarding concerns involving senior leadership are handled independently and fairly.

g. Support allocation of resources for safeguarding training, reporting systems, referral pathways, and policy implementation.

h. Ensure that organizational reputation is never prioritized over survivor safety, child protection, accountability, or legal and donor obligations.

i. Maintain confidentiality in all safeguarding matters.

21.3 Responsibility of the Executive Director

The Executive Director has overall responsibility for ensuring that safeguarding and PSEA standards are implemented across EAO.

The Executive Director shall:

a. Lead organizational commitment to safeguarding and PSEA.

b. Ensure that safeguarding is integrated into strategy, programs, operations, partnerships, and management systems.

c. Ensure that staff, volunteers, partners, and representatives understand safeguarding expectations.

d. Ensure that complaints and incident reporting systems are functional.

e. Ensure serious safeguarding concerns are acted upon promptly.

f. Ensure that donor, partner, and legal reporting obligations are met where required and safe.

g. Ensure that safeguarding focal persons or responsible officers are appointed and supported.

h. Ensure that conflicts of interest are managed.

i. Ensure that corrective and disciplinary measures are taken when required.

j. Promote safe, respectful, inclusive, and accountable organizational culture.

21.4 Responsibility of Senior Management

Senior management is responsible for translating safeguarding commitments into operational practice.

Senior management shall:

a. Implement this policy across departments, offices, and field locations.

b. Ensure that safeguarding is included in program planning, budgeting, recruitment, procurement, partnership, monitoring, and reporting.

c. Ensure that staff and partners receive safeguarding orientation and training.

d. Respond promptly to safeguarding concerns.

e. Support safe referral, case management, investigation, and corrective action.

f. Protect complainants, survivors, witnesses, and whistleblowers from retaliation.

g. Ensure confidentiality and data protection.

h. Monitor safeguarding implementation and address gaps.

i. Ensure that safeguarding risk assessments are completed for relevant programs and activities.

j. Report serious risks to leadership and donors where required.

21.5 Responsibility of Safeguarding and PSEA Focal Persons

Safeguarding and PSEA focal persons support the implementation of safeguarding and PSEA standards within EAO. Their role is to guide, support, advise, receive concerns where appropriate, and help ensure safe response.

Safeguarding focal persons shall:

a. Support staff and partners to understand the Safeguarding and PSEA Policy Manual.

b. Receive safeguarding concerns through approved channels where assigned.

c. Support initial risk assessment and safe escalation.

d. Provide guidance on survivor-centered and child-sensitive response.

e. Support referral pathway mapping and updates.

f. Advise on confidentiality and safe information handling.

g. Support safeguarding awareness and training.

h. Support program teams to conduct safeguarding risk assessments.

i. Maintain confidential records where authorized.

j. Support monitoring, learning, and safeguarding improvement.

k. Escalate serious concerns to authorized management without delay.

Safeguarding focal persons shall not conduct formal investigations unless they are specifically authorized, trained, and competent to do so.

21.6 Responsibility of Program Managers and Project Coordinators

Program managers and project coordinators are responsible for ensuring that safeguarding is integrated into program design, implementation, monitoring, and community engagement.

They shall:

a. Ensure safeguarding risk assessments are completed for activities.

b. Ensure staff, volunteers, community mobilizers, and partners understand safeguarding expectations.

c. Ensure beneficiaries and communities are informed of their rights and reporting channels.

d. Ensure program activities are safe, inclusive, child-sensitive, disability-inclusive, and non-discriminatory.

e. Ensure beneficiary selection, distributions, referrals, trainings, and services are fair and transparent.

f. Monitor field conduct and identify safeguarding risks.

g. Report safeguarding concerns immediately.

h. Support corrective action where gaps are identified.

i. Ensure partners and contractors comply with safeguarding standards.

j. Ensure that program data, photos, videos, and stories are handled safely.

21.7 Responsibility of Human Resources and Administration

Human Resources and Administration are responsible for integrating safeguarding into recruitment, staffing, workplace conduct, personnel management, induction, and records.

HR and Administration shall:

a. Apply safe recruitment and screening procedures.

b. Ensure job descriptions include safeguarding responsibilities.

c. Ensure candidates are asked safeguarding-related questions where relevant.

d. Conduct reference checks where appropriate.

e. Ensure staff, volunteers, interns, consultants, and representatives sign the Code of Conduct.

f. Ensure safeguarding and PSEA induction is provided.

g. Maintain confidential personnel and safeguarding-related records.

h. Support disciplinary processes where required.

i. Support staff welfare and respectful workplace standards.

j. Ensure leavers return organizational data and no longer access confidential systems.

21.8 Responsibility of Finance, Procurement, and Operations Teams

Finance, procurement, and operations teams are responsible for ensuring that safeguarding is integrated into resource management, procurement, logistics, contracts, transport, and supplier engagement.

They shall:

a. Ensure procurement processes are fair, transparent, and free from exploitation, corruption, favoritism, or abuse of power.

b. Include safeguarding clauses in contracts and supplier agreements where relevant.

c. Ensure contractors, suppliers, drivers, vendors, and service providers understand safeguarding expectations.

d. Prevent misuse of financial or material resources that may create safeguarding risks.

e. Ensure safe transport and logistics arrangements.

f. Protect confidential beneficiary, staff, financial, and procurement information.

g. Report concerns involving fraud, exploitation, harassment, or misconduct.

h. Support corrective action involving contractors or suppliers.

21.9 Responsibility of MEAL, Accountability, and Data Teams

Monitoring, Evaluation, Accountability, and Learning teams are responsible for ensuring that feedback, complaints, data collection, surveys, monitoring, and reporting are safe and confidential.

MEAL and data teams shall:

a. Ensure complaints and feedback mechanisms are accessible and safe.

b. Collect data ethically and with informed consent.

c. Protect personal and sensitive data.

d. Ensure data collectors and enumerators receive safeguarding briefing.

e. Identify safeguarding risks through monitoring and community feedback.

f. Escalate safeguarding and PSEA concerns immediately.

g. Ensure that reports and learning products do not expose individuals or sensitive information.

h. Include women, children, persons with disabilities, and vulnerable groups safely in feedback processes.

i. Support learning and program improvement based on complaint and feedback trends.

21.10 Responsibility of Communications Staff

Communications staff are responsible for ensuring that EAO's photos, videos, stories, reports, publications, and social media content are safe, consent-based, dignified, and ethical.

Communications staff shall:

a. Obtain informed consent before collecting or using images, videos, stories, or interviews.

b. Ensure child consent and assent procedures are followed where relevant.

c. Avoid identifying survivors or sensitive safeguarding cases.

d. Represent communities with dignity, respect, and accuracy.

e. Avoid harmful stereotypes, pity-based images, or exploitative storytelling.

f. Protect communication files and consent records.

g. Seek safeguarding advice before using sensitive content.

h. Ensure donors, visitors, photographers, and media teams follow EAO's safe communication rules.

21.11 Responsibility of All Staff

All EAO staff members are responsible for upholding safeguarding and PSEA standards in their daily conduct.

All staff shall:

a. Read, understand, and comply with this policy.

b. Sign and follow the Code of Conduct.

c. Treat all people with dignity, respect, fairness, and non-discrimination.

d. Prevent harm and avoid unsafe conduct.

e. Maintain professional boundaries.

f. Never engage in SEA, child abuse, harassment, discrimination, retaliation, or misuse of power.

g. Report safeguarding concerns immediately.

h. Protect confidential information.

i. Cooperate with safeguarding procedures and investigations.

j. Participate in safeguarding and PSEA training.

k. Support a safe and respectful working environment.

21.12 Responsibility of Volunteers, Interns, and Community Mobilizers

Volunteers, interns, and community mobilizers are responsible for following EAO's safeguarding standards and acting within their assigned roles.

They shall:

a. Sign and follow the Code of Conduct.

b. Attend safeguarding and PSEA orientation.

c. Treat community members with respect and dignity.

d. Avoid misuse of their role, influence, or access.

e. Maintain professional boundaries.

f. Never request or accept sex, money, favors, gifts, loyalty, or personal benefit in exchange for assistance or information.

g. Report concerns immediately.

h. Protect confidential information.

i. Work under appropriate supervision.

j. Avoid acting beyond their authority.

21.13 Responsibility of Consultants, Contractors, Suppliers, and Service Providers

Consultants, contractors, suppliers, drivers, vendors, trainers, facilitators, and service providers must comply with EAO's safeguarding and PSEA expectations when working with or on behalf of EAO.

They shall:

a. Follow safeguarding clauses in contracts or agreements.

b. Sign safeguarding commitment forms where required.

c. Treat communities, staff, and beneficiaries with dignity and respect.

d. Avoid harassment, abuse, exploitation, discrimination, and retaliation.

e. Protect confidential information.

f. Report safeguarding concerns promptly.

g. Avoid unauthorized contact with children, vulnerable adults, or beneficiaries.

h. Cooperate with safeguarding reviews or investigations where required.

i. Accept that breach of safeguarding standards may lead to contract termination or other action.

21.14 Responsibility of Partners and Consortium Members

Partners and consortium members are responsible for ensuring that safeguarding standards are applied in activities connected to EAO.

They shall:

a. Follow EAO's safeguarding standards or equivalent standards.

b. Ensure their staff and representatives understand safeguarding expectations.

c. Report safeguarding concerns promptly through agreed channels.

d. Protect survivors, complainants, witnesses, and whistleblowers from retaliation.

e. Cooperate with investigations, referrals, corrective action, and donor reporting where required.

f. Protect confidential information and personal data.

g. Ensure safe recruitment and staff conduct.

h. Include safeguarding in field activities, community engagement, and service delivery.

i. Take corrective action where safeguarding gaps or violations are identified.

21.15 Responsibility of Visitors, Donors, Media, and External Representatives

Visitors, donors, media teams, photographers, observers, and external representatives must follow EAO's safeguarding and safe communication standards during visits or engagement with communities.

They shall:

a. Receive safeguarding briefing where appropriate.

b. Respect community dignity and privacy.

c. Obtain consent before photos, videos, or interviews.

d. Avoid private or unsupervised contact with children or vulnerable adults.

e. Avoid asking harmful or intrusive questions.

f. Avoid publishing content without authorization.

g. Report any safeguarding concern observed during the visit.

h. Follow EAO staff guidance during field visits.

21.16 Responsibility of Communities and Beneficiaries

EAO recognizes communities and beneficiaries as rights-holders, not passive recipients of assistance. Communities and beneficiaries have the right to safe, respectful, fair, and dignified services.

EAO shall encourage communities to:

a. Know their rights and reporting channels.

b. Report concerns safely.

c. Participate in safeguarding awareness and feedback processes.

d. Support protection of children, vulnerable adults, persons with disabilities, and survivors.

e. Avoid retaliation against complainants, survivors, or witnesses.

f. Help identify barriers to safe and inclusive programming.

EAO shall not place the burden of safeguarding on communities, but shall work with them to strengthen safety and accountability.

21.17 Responsibility to Report Concerns

All persons covered by this policy have a responsibility to report safeguarding concerns as soon as they become aware of them.

This includes:

a. Suspected SEA.

b. Child protection concerns.

c. Abuse of vulnerable adults.

d. Disability-related abuse or exclusion.

e. Harassment, bullying, or discrimination.

f. Retaliation.

g. Misuse of power or resources.

h. Breach of confidentiality.

i. Partner, contractor, or supplier misconduct.

A person does not need proof before reporting. Concerns raised in good faith shall be protected.

21.18 Responsibility to Maintain Confidentiality

All persons involved in safeguarding matters must maintain confidentiality.

They must not:

a. Share case information with unauthorized persons.

b. Discuss complaints in public or informal settings.

c. Forward reports, photos, videos, or names without authorization.

d. Reveal survivor, child, complainant, witness, or whistleblower identity.

e. Use safeguarding information for personal, political, social, or organizational advantage.

Breach of confidentiality may result in disciplinary or contractual action.

21.19 Responsibility to Prevent Retaliation

All EAO personnel and representatives must prevent and avoid retaliation.

No person shall threaten, punish, intimidate, dismiss, demote, exclude, harass, discriminate against, pressure, or harm anyone for reporting a concern, supporting a complainant, providing information, or participating in an investigation.

Managers and leaders must actively monitor and address retaliation risks.

21.20 Responsibility to Cooperate with Safeguarding Procedures

All persons covered by this policy must cooperate with safeguarding procedures, including reporting, referral, risk assessment, investigation, corrective action, monitoring, and learning.

They must not obstruct investigations, destroy evidence, intimidate witnesses, conceal information, or interfere with case handling.

21.21 Responsibility for Training and Awareness

EAO leadership and managers are responsible for ensuring that staff, volunteers, partners, contractors, and relevant representatives receive safeguarding and PSEA awareness appropriate to their role.

Staff and representatives are responsible for attending training, asking questions when unclear, applying learning in practice, and supporting awareness within their work areas.

21.22 Responsibility for Safeguarding Culture

Safeguarding culture is the responsibility of everyone. EAO expects all personnel and representatives to promote a culture where people feel safe to report, leaders act with integrity, misconduct is not hidden, communities are respected, and safeguarding is practiced daily.

EAO shall encourage respectful challenge, ethical leadership, active listening, inclusion, and accountability at all levels.

21.23 Minimum Standard for Roles and Responsibilities

At minimum, every person connected to EAO must understand their safeguarding responsibilities, follow the Code of Conduct, prevent harm, report concerns, protect

confidentiality, avoid retaliation, cooperate with procedures, and uphold the dignity, safety, and rights of all people.

Clear roles and responsibilities are essential to effective safeguarding, PSEA, child protection, disability inclusion, ethical conduct, donor compliance, and accountability across East Action Organization.

22. Training and Awareness

East Action Organization (EAO) is committed to ensuring that all board members, management, staff, volunteers, interns, consultants, contractors, suppliers, partners, consortium members, community mobilizers, service providers, and representatives understand their safeguarding and PSEA responsibilities. EAO recognizes that policies alone are not enough unless people are trained, aware, confident, and able to apply safeguarding standards in daily work.

Training and awareness are essential for preventing harm, identifying risks, reporting concerns, protecting survivors, strengthening accountability, and building a safe organizational culture. Safeguarding and PSEA training shall be provided in a practical, inclusive, accessible, and role-appropriate manner.

22.1 Purpose of Training and Awareness

The purpose of safeguarding and PSEA training is to ensure that all persons connected to EAO understand the policy, know expected conduct, recognize safeguarding risks, and know how to report and respond to concerns safely.

Training and awareness aim to:

a. Build understanding of safeguarding and PSEA standards.

b. Prevent sexual exploitation, abuse, harassment, discrimination, bullying, child abuse, and abuse of vulnerable adults.

c. Promote safe, respectful, inclusive, and professional behavior.

d. Ensure staff and representatives understand their duty to report.

e. Strengthen survivor-centered, child-sensitive, and disability-inclusive response.

f. Support safe recruitment, safe communication, data protection, and complaint handling.

g. Improve program risk assessment and prevention.

h. Ensure partners, contractors, and suppliers understand EAO’s safeguarding expectations.

i. Strengthen donor compliance and organizational accountability.

j. Promote continuous learning and safeguarding improvement.

22.2 Scope of Training

Safeguarding and PSEA training shall apply to all persons connected to EAO, including:

a. Board members and governance representatives.

b. Executive Director and senior management.

c. Program staff and field teams.

d. Finance, procurement, HR, administration, logistics, MEAL, and communication staff.

e. Volunteers, interns, temporary workers, and community mobilizers.

f. Consultants, trainers, enumerators, data collectors, drivers, and service providers.

g. Partners, consortium members, sub-grantees, contractors, and suppliers where relevant.

h. Visitors, donors, media teams, and external representatives where they engage with communities or sensitive information.

The depth and type of training may differ depending on role, level of responsibility, contact with communities, access to children or vulnerable adults, access to sensitive data, and safeguarding risk level.

22.3 Induction Training

All new EAO staff, volunteers, interns, consultants, and relevant representatives shall receive safeguarding and PSEA induction as soon as possible after engagement and preferably before field deployment or direct contact with beneficiaries.

Induction should cover:

a. EAO Safeguarding and PSEA Policy Manual.

b. Code of Conduct.

c. Zero-tolerance commitment.

d. PSEA definitions and prohibited conduct.

e. Child protection and protection of vulnerable adults.

f. Disability inclusion and reasonable accommodation.

g. Anti-harassment, bullying, and anti-discrimination.

h. Safe recruitment and professional boundaries.

i. Complaints and feedback mechanism.

j. Whistleblowing and confidential reporting.

k. Incident reporting and response.

l. Survivor-centered referral pathways.

m. Confidentiality and data protection.

n. Safe photos, videos, communication, and storytelling.

o. Protection from retaliation.

p. Disciplinary consequences for violations.

Induction attendance shall be documented and retained by the responsible department.

22.4 Refresher Training

EAO shall provide refresher training periodically to ensure that safeguarding knowledge remains active and updated.

Refresher training may be provided:

a. Annually or according to organizational need.

b. Before high-risk projects or activities.

c. After policy revision.

d. After a safeguarding incident or complaint trend.

e. When donor or partner requirements change.

f. When staff roles or responsibilities change.

g. Before emergency response or rapid deployment.

h. When monitoring identifies gaps in understanding or practice.

Refresher sessions should be practical and include examples, scenarios, reporting steps, and lessons learned.

22.5 Role-Specific Training

EAO shall provide role-specific safeguarding training based on responsibilities and risk exposure.

Examples include:

a. Board and leadership training on governance, accountability, oversight, and duty of care.

b. Manager training on responding to concerns, preventing retaliation, and supervising safe conduct.

c. Safeguarding focal person training on receiving reports, referral, confidentiality, documentation, and escalation.

d. HR training on safe recruitment, screening, contracts, induction, and disciplinary processes.

e. Program staff training on risk assessment, community engagement, beneficiary selection, and safe implementation.

f. MEAL staff training on safe data collection, complaint handling, informed consent, and confidentiality.

g. Communications staff training on ethical storytelling, consent, safe images, and digital protection.

h. Finance and procurement staff training on supplier safeguarding, corruption risks, and third-party conduct.

i. Drivers and logistics staff training on safe transport, professional boundaries, and reporting.

j. Volunteers and community mobilizers training on community conduct, referral, reporting, and limits of authority.

22.6 PSEA Training

PSEA training shall be a core component of EAO safeguarding training.

PSEA training should include:

a. Definition of sexual exploitation and abuse.

b. Definition of sexual harassment.

c. Zero tolerance for SEA and sexual harassment.

d. Prohibition of sexual activity with children.

e. Prohibition of exchange of assistance or services for sex or sexual favors.

f. Power imbalance between aid workers and beneficiaries.

g. Professional boundaries.

h. Reporting obligations.

i. Survivor-centered response.

j. Confidentiality.

k. Referral support.

l. Protection from retaliation.

m. Consequences for SEA violations.

All staff and representatives must understand that assistance and services must never be conditioned on sex, money, favors, loyalty, silence, or personal benefit.

22.7 Child Safeguarding Training

EAO shall ensure that staff and representatives working with or around children understand child safeguarding standards.

Child safeguarding training should include:

a. Definition of a child as any person under 18.

b. Types of child abuse, exploitation, neglect, and harm.

c. Best interests of the child.

d. Safe interaction with children.

e. Prohibition of sexual activity with children.

f. Child-sensitive reporting and response.

g. Consent and assent for child participation, photos, videos, and interviews.

h. Safe communication with children.

i. Mandatory reporting obligations where applicable.

j. Referral pathways for child protection.

k. Confidentiality and protection from retaliation.

22.8 Disability-Inclusive Safeguarding Training

EAO shall include disability inclusion in safeguarding training.

Training should cover:

a. Rights and dignity of persons with disabilities.

b. Disability-related safeguarding risks.

c. Accessible communication.

d. Reasonable accommodation.

e. Protection from exploitation, neglect, discrimination, and abuse.

f. Informed consent and supported decision-making.

g. Safe reporting channels for persons with disabilities.

h. Caregiver-related risks and confidentiality.

i. Disability-inclusive referral pathways.

j. Avoidance of stigma, pity-based language, harmful stereotypes, and exclusion.

22.9 Training on Complaints and Reporting

EAO shall train staff, volunteers, partners, and representatives on how to receive and report complaints safely.

Training should include:

a. How to listen respectfully.

b. What information to record.

c. What not to ask.

d. How to explain confidentiality and its limits.

e. How to identify urgent risks.

f. How to report through approved channels.

g. How to protect complainants and survivors.

h. How to avoid retaliation and informal settlement.

i. How to handle anonymous complaints.

j. How to escalate safeguarding and PSEA concerns.

22.10 Training on Data Protection and Confidentiality

EAO shall train staff and relevant representatives on protecting sensitive information.

Training should include:

a. What personal and sensitive data means.

b. Need-to-know information sharing.

c. Safe storage of physical and digital records.

d. Confidentiality in safeguarding cases.

e. Safe use of email, phones, and messaging applications.

f. Data protection in referrals, complaints, and investigations.

g. Safe communication, photos, videos, and stories.

h. Response to data breaches.

i. Consequences of confidentiality breaches.

22.11 Training for Partners, Contractors, and Suppliers

EAO shall provide safeguarding and PSEA orientation to partners, contractors, suppliers, consultants, service providers, and third parties where relevant.

Training or briefing should cover:

a. EAO’s safeguarding expectations.

b. Code of Conduct or safeguarding commitment.

c. PSEA and prohibited conduct.

d. Child protection and disability inclusion.

e. Professional boundaries.

f. Confidentiality and data protection.

g. Reporting channels.

h. Protection from retaliation.

i. Consequences for breach, including contract or partnership action.

The level of training may depend on the third party's role, level of community contact, and safeguarding risk.

22.12 Community Awareness

EAO shall conduct community awareness on safeguarding and PSEA where appropriate and safe.

Community awareness should inform beneficiaries and communities about:

a. Their right to safe and respectful services.

b. EAO's expected staff and representative behavior.

c. That EAO assistance is free from sexual, financial, political, social, or personal conditions.

d. Prohibited conduct, including SEA, harassment, discrimination, and corruption.

e. How to report complaints or safeguarding concerns.

f. Confidentiality and protection from retaliation.

g. Available referral options where relevant.

h. Inclusion of women, children, persons with disabilities, older persons, refugees, IDPs, and vulnerable groups.

Community awareness should be delivered in accessible language and formats and should consider literacy, disability, gender, age, culture, and security context.

22.13 Training Methods

EAO may use different training methods depending on resources, location, risk level, and participant needs.

Methods may include:

a. Face-to-face training.

b. Short orientation sessions.

c. Refresher briefings.

d. Scenario-based exercises.

e. Group discussions.

f. Case studies.

g. Role plays.

h. Posters and visual materials.

i. Staff meetings.

j. Online or remote training.

k. Field briefings before activities.

l. Partner and supplier briefings.

Training should be practical and linked to real program situations.

22.14 Accessibility of Training

EAO shall make reasonable efforts to ensure safeguarding training is accessible to persons with disabilities and people with different literacy, language, and communication needs.

This may include:

a. Simple language.

b. Local language translation.

c. Verbal explanations.

d. Visual materials.

e. Accessible venues.

f. Additional time.

g. Sign language support where available.

h. Adapted materials.

i. Inclusive facilitation methods.

No person should be excluded from safeguarding awareness because of disability, language, literacy level, role, or location.

22.15 Training Records

EAO shall document safeguarding and PSEA training.

Training records may include:

a. Training title.

b. Date and location.

c. Trainer or facilitator.

d. Topics covered.

e. Participant names and roles.

f. Attendance sheet.

g. Training materials used.

h. Evaluation results where applicable.

i. Follow-up actions.

Training records shall be stored securely and used to demonstrate compliance, identify gaps, and plan future training.

22.16 Training Evaluation

EAO shall evaluate safeguarding training where appropriate to assess understanding and improve quality.

Evaluation may include:

a. Participant feedback.

b. Pre- and post-training questions.

c. Scenario exercises.

d. Observation of field practice.

e. Review of reporting behavior.

f. Monitoring of complaint trends.

g. Manager feedback.

h. Refresher training needs assessment.

Training evaluation shall be used for learning and improvement, not for blaming participants.

22.17 Responsibilities for Training and Awareness

EAO leadership is responsible for ensuring that safeguarding training is prioritized and supported.

Managers are responsible for ensuring their teams attend training and apply learning.

Safeguarding focal persons are responsible for supporting training content and awareness activities.

HR and Administration are responsible for including safeguarding in induction and maintaining training records.

Program teams are responsible for community awareness and field-level application.

Partners and contractors are responsible for ensuring their personnel understand and follow EAO's safeguarding expectations.

All personnel and representatives are responsible for attending training, asking questions when unclear, and applying the standards in practice.

22.18 Training Gaps and Corrective Action

Where staff, volunteers, partners, contractors, or representatives have not received required training, EAO shall take corrective action.

Corrective action may include:

a. Immediate briefing before field deployment.

b. Refresher training.

c. Restriction from high-risk activities until trained.

d. Additional supervision.

e. Partner capacity strengthening.

f. Updated training schedule.

g. Follow-up by managers.

No person should be assigned to high-risk activities involving children, vulnerable adults, persons with disabilities, survivors, sensitive data, or aid distribution without appropriate safeguarding briefing.

22.19 Minimum Training Standard

At minimum, every person working with or on behalf of EAO shall understand the Code of Conduct, zero tolerance for SEA, prohibition of sexual activity with children, duty to report, confidentiality requirements, protection from retaliation, and consequences of policy violations.

Training and awareness are continuous responsibilities and essential to EAO's safeguarding culture, donor compliance, safe programming, and accountability to the communities it serves.

23. Monitoring, Learning, and Safeguarding Improvement

East Action Organization (EAO) is committed to continuously monitoring, reviewing, learning from, and improving its safeguarding and PSEA systems. EAO recognizes that safeguarding is not a one-time activity or a document kept in place only for compliance. It is a continuous organizational responsibility that must be practiced, reviewed, strengthened, and adapted based on risks, incidents, community feedback, donor requirements, program learning, and changing contexts.

Monitoring, learning, and improvement help EAO ensure that safeguarding commitments are implemented in practice, gaps are identified early, corrective actions are taken, and communities, staff, volunteers, partners, and beneficiaries are better protected from harm.

23.1 Purpose of Monitoring, Learning, and Safeguarding Improvement

The purpose of this section is to ensure that EAO regularly checks whether safeguarding systems are working effectively and improves them where needed.

This section aims to:

a. Monitor implementation of the Safeguarding and PSEA Policy Manual.

b. Identify safeguarding risks, gaps, and weaknesses.

c. Track complaints, incidents, trends, and response actions.

d. Improve prevention, reporting, referral, investigation, and response systems.

e. Strengthen accountability to affected populations.

f. Improve staff, partner, and community awareness.

g. Support donor compliance and due diligence readiness.

h. Ensure continuous organizational learning and improvement.

i. Promote a strong safeguarding culture across EAO.

23.2 Areas to Be Monitored

EAO shall monitor key safeguarding areas, including:

a. Staff understanding and compliance with the Code of Conduct.

b. Completion of safeguarding and PSEA training.

c. Safe recruitment and screening practices.

d. Complaint and feedback mechanism functionality.

e. Whistleblowing and confidential reporting channels.

f. Safeguarding risk assessments in programs.

g. Incident reporting and response procedures.

h. Survivor-centered referral pathways.

i. Data protection and confidentiality.

j. Safe communication, photos, videos, and storytelling.

k. Partner, contractor, and supplier safeguarding compliance.

l. Child safeguarding measures.

m. Disability inclusion and accessibility.

n. Anti-harassment, bullying, and anti-discrimination measures.

o. Protection from retaliation.

p. Corrective actions and disciplinary follow-up.

q. Community awareness and accountability.

23.3 Monitoring Methods

EAO may use different monitoring methods depending on program size, risk level, resources, location, and donor requirements.

Monitoring methods may include:

a. Field visits.

b. Staff supervision.

c. Safeguarding checklists.

d. Review of training records.

e. Review of signed Code of Conduct forms.

f. Complaint and feedback analysis.

g. Incident trend analysis.

h. Partner monitoring visits.

i. Community consultations.

j. Beneficiary feedback.

k. Staff and volunteer feedback.

l. Review of risk assessments.

m. Review of referral pathway updates.

n. Review of communication consent forms.

o. Internal audits or compliance reviews.

p. Management meetings and safeguarding review sessions.

23.4 Safeguarding Indicators

EAO may use safeguarding indicators to track implementation.

Possible indicators include:

a. Number or percentage of staff who signed the Code of Conduct.

b. Number or percentage of staff trained on safeguarding and PSEA.

c. Number of volunteers and community mobilizers oriented on safeguarding.

d. Number of partners or contractors briefed on safeguarding.

e. Number of programs with safeguarding risk assessments completed.

f. Number of community awareness sessions conducted.

g. Number of complaint channels available and functioning.

h. Number of complaints received by type, without exposing confidential details.

i. Percentage of urgent safeguarding concerns escalated within required timeframes.

j. Number of referral pathways updated.

k. Number of safe communication consent forms completed.

l. Number of corrective actions completed.

m. Number of monitoring visits that included safeguarding checks.

Indicators must be used responsibly and must not expose survivors, complainants, children, witnesses, or confidential case information.

23.5 Complaint and Incident Trend Analysis

EAO shall review complaints, feedback, incident reports, whistleblowing reports, and safeguarding concerns to identify patterns and risks.

Trend analysis may help identify:

a. Repeated concerns about staff conduct.

b. Unsafe beneficiary selection processes.

c. Exclusion of persons with disabilities.

d. Barriers to reporting.

e. Retaliation risks.

f. Sexual exploitation or harassment risks.

g. Child protection concerns.

h. Partner or contractor misconduct.

i. Weaknesses in referral pathways.

j. Gaps in training or supervision.

k. Data protection or communication risks.

Trend analysis must be anonymized and confidential.

23.6 Learning from Safeguarding Cases

EAO shall use learning from safeguarding cases to improve systems, while protecting confidentiality.

Learning may include:

a. What risks were missed.

b. Whether reporting channels were accessible.

c. Whether response was timely.

d. Whether referral pathways worked.

e. Whether confidentiality was protected.

f. Whether staff understood their responsibilities.

g. Whether partners complied with standards.

h. Whether retaliation risks were addressed.

i. Whether additional training is needed.

j. Whether procedures should be updated.

Learning must not disclose names, personal details, locations, or other information that may identify survivors, complainants, witnesses, children, or subjects of complaint.

23.7 Community Feedback for Improvement

EAO shall use community feedback to improve safeguarding and accountability.

Communities may provide feedback on:

a. Whether they know how to complain.

b. Whether reporting channels are trusted.

c. Whether services are provided respectfully.

d. Whether assistance is free from exploitation and demands.

e. Whether women, children, persons with disabilities, older persons, refugees, IDPs, and marginalized groups can access services safely.

f. Whether staff behavior is respectful.

g. Whether communication is clear.

h. Whether complaint responses are timely.

Community feedback must be gathered safely and inclusively.

23.8 Staff and Volunteer Feedback

EAO shall encourage staff and volunteers to share feedback on safeguarding implementation.

Staff and volunteer feedback may help identify:

a. Training needs.

b. Unsafe field practices.

c. Workplace harassment or bullying risks.

d. Lack of clarity on reporting.

e. Fear of retaliation.

f. Problems with supervision.

g. Data protection gaps.

h. Partner or contractor concerns.

i. Stress, burnout, or exposure to difficult cases.

Staff feedback mechanisms must be safe and confidential where needed.

23.9 Partner and Contractor Learning

EAO shall review safeguarding implementation with partners, consortium members, contractors, suppliers, consultants, and service providers where relevant.

This may include:

a. Review of safeguarding clauses.

b. Review of partner training.

c. Review of complaints involving partners.

d. Joint safeguarding risk assessment.

e. Corrective action follow-up.

f. Capacity strengthening needs.

g. Partner self-assessment.

h. Lessons from consortium implementation.

i. Contract performance and safeguarding compliance review.

23.10 Monitoring Safeguarding in High-Risk Activities

EAO shall pay special attention to high-risk activities, including:

a. Work with children.

b. Work with persons with disabilities.

c. GBV, PSEA, protection, and survivor-related activities.

d. Distributions of food, cash, vouchers, shelter materials, or livelihood inputs.

e. Beneficiary selection and registration.

f. Home visits and referrals.

g. Transport support.

h. Data collection and research.

i. Photos, videos, storytelling, and media visits.

j. Emergency response.

k. Partnership implementation.

High-risk activities may require additional supervision, field monitoring, safeguarding briefings, and reporting controls.

23.11 Corrective Action Plans

When monitoring identifies gaps or risks, EAO shall develop corrective action plans.

A corrective action plan should include:

a. Identified gap or risk.

b. Required action.

c. Responsible person.

d. Timeline.

e. Resources needed.

f. Follow-up method.

g. Status of completion.

h. Management oversight.

Corrective action may include training, revised procedures, improved supervision, stronger complaint channels, updated risk assessments, partner action plans, or disciplinary measures.

23.12 Management Review

EAO management shall periodically review safeguarding implementation.

Management review may consider:

a. Training coverage.

b. Incident and complaint trends.

c. Risk assessment completion.

d. Partner compliance.

e. Referral pathway functionality.

f. Community feedback.

g. Data protection issues.

h. Staffing and resource needs.

i. Policy implementation gaps.

j. Corrective action progress.

Management review should lead to decisions, resource allocation, and follow-up actions.

23.13 Safeguarding Learning Without Breaching Confidentiality

EAO shall ensure that safeguarding learning is shared in a way that protects confidentiality.

Learning may be shared through:

a. Anonymous case lessons.

b. General risk trends.

c. Policy updates.

d. Training examples without identifying details.

e. Management learning notes.

f. Program improvement recommendations.

g. Partner capacity-building sessions.

No learning product shall identify survivors, children, complainants, witnesses, whistleblowers, or subjects of complaint unless legally required and authorized.

23.14 Policy and Procedure Improvement

Monitoring and learning may show that policies or procedures need improvement.

EAO may update:

a. Safeguarding and PSEA Policy Manual.

b. Code of Conduct.

c. Complaint and feedback procedures.

d. Incident reporting forms.

e. Referral pathway templates.

f. Safe recruitment checklists.

g. Safeguarding risk assessment tools.

h. Consent forms.

i. Partner safeguarding commitment forms.

j. Training materials.

k. Data protection procedures.

Updates should be approved through appropriate organizational processes.

23.15 Safeguarding Culture Improvement

EAO shall use monitoring and learning to strengthen safeguarding culture.

A strong safeguarding culture means:

a. Leaders model safe conduct.

b. Staff feel safe to report concerns.

c. Communities understand their rights.

d. Misconduct is not hidden.

e. Survivors are treated with dignity.

f. Retaliation is not tolerated.

g. Staff understand boundaries.

h. Partners respect safeguarding standards.

i. Safeguarding is included in planning and decision-making.

j. Learning is used to improve practice.

23.16 Reporting Safeguarding Learning to Donors and Partners

Where required, EAO shall report safeguarding implementation progress to donors and partners.

Reports may include:

a. Training conducted.

b. Policy implementation progress.

c. Complaint mechanism strengthening.

d. Risk assessment completion.

e. Partner safeguarding actions.

f. Community awareness activities.

g. Corrective actions taken.

h. General trends and lessons learned.

Reports must not include confidential personal details unless required, consented, lawful, and safely handled.

23.17 Periodic Safeguarding Review

EAO shall conduct periodic safeguarding reviews to assess the effectiveness of safeguarding systems.

The review may examine:

a. Whether the policy is understood and applied.

b. Whether reporting channels are working.

c. Whether cases are handled safely.

d. Whether training is sufficient.

e. Whether partners meet safeguarding standards.

f. Whether communities trust the mechanism.

g. Whether persons with disabilities can access reporting channels.

h. Whether children and vulnerable adults are protected.

i. Whether data protection systems are adequate.

j. Whether improvements have been implemented.

23.18 Responsibilities for Monitoring and Learning

EAO leadership is responsible for ensuring that safeguarding monitoring and improvement are prioritized.

Senior management is responsible for reviewing trends, addressing gaps, and ensuring corrective action.

Safeguarding focal persons are responsible for supporting monitoring, learning, and technical guidance.

Program teams are responsible for applying safeguarding learning in implementation.

MEAL teams are responsible for integrating safe feedback and accountability data into learning systems.

HR and administration are responsible for training records, safe recruitment compliance, and staff conduct monitoring.

Partners and contractors are responsible for participating in safeguarding monitoring and corrective action where relevant.

23.19 Minimum Standard for Monitoring, Learning, and Safeguarding Improvement

At minimum, EAO shall regularly monitor safeguarding implementation, review complaints and risks confidentially, identify gaps, take corrective action, update procedures when needed, and use learning to improve prevention, reporting, response, and accountability.

Safeguarding improvement is a continuous duty and a key part of EAO's commitment to safe, accountable, inclusive, donor-compliant, and community-centered programming.

24. Policy Implementation and Review

East Action Organization (EAO) is committed to ensuring that this Safeguarding and PSEA Policy Manual is not only approved as an organizational document, but is actively implemented, communicated, monitored, reviewed, and improved across all EAO offices, programs, field sites, partnerships, consortiums, procurement arrangements, and community engagement activities.

This policy shall guide EAO's institutional behavior, program implementation, staff conduct, partnership management, complaint handling, incident response, referral support, disciplinary action, and safeguarding learning. All persons working with or on behalf of EAO are required to comply with this policy and support its implementation.

24.1 Purpose of Policy Implementation and Review

The purpose of this section is to ensure that EAO has clear arrangements for putting the Safeguarding and PSEA Policy Manual into practice and keeping it relevant, effective, updated, and aligned with organizational, donor, legal, and community protection requirements.

This section aims to:

a. Ensure the policy is approved, communicated, and applied across EAO.

b. Clarify responsibility for implementation and oversight.

c. Ensure staff, volunteers, partners, contractors, and suppliers understand the policy.

d. Integrate safeguarding into organizational systems and program practice.

e. Ensure regular review and updating of the policy.

f. Strengthen compliance with donor and partner due diligence requirements.

g. Promote accountability, learning, and continuous improvement.

h. Ensure that safeguarding remains a living organizational commitment.

24.2 Approval and Authority of the Policy

This Safeguarding and PSEA Policy Manual shall be approved by EAO's authorized leadership or governing body. Once approved, it becomes an official organizational policy and applies to all persons and entities covered by its scope.

The policy shall have authority across all EAO departments and functions, including governance, management, programs, HR, finance, procurement, MEAL, communications, administration, partnerships, field operations, and community engagement.

No internal practice, informal arrangement, personal relationship, management instruction, community pressure, or partnership interest shall override this policy where safeguarding protection is required.

24.3 Effective Date

This policy shall take effect from the approved date stated on the cover page or approval page.

For this manual:

Approved Date: 9 July 2023

Effective Date: 9 July 2023

From the effective date, all EAO personnel, representatives, partners, contractors, suppliers, consultants, volunteers, interns, and relevant third parties shall be expected to comply with the policy requirements.

24.4 Policy Dissemination

EAO shall ensure that this policy is shared with all relevant persons and entities.

Policy dissemination may include:

a. Providing copies to board members and senior management.

b. Sharing the policy with all staff and volunteers.

c. Including policy orientation during induction.

d. Sharing relevant sections with consultants, contractors, suppliers, and service providers.

e. Sharing safeguarding commitments with partners and consortium members.

f. Presenting key community-facing messages to beneficiaries and affected populations.

g. Making complaint and reporting channels known to communities.

h. Translating or simplifying key messages where needed.

i. Keeping copies available at EAO offices and field sites where appropriate.

24.5 Mandatory Compliance

Compliance with this Safeguarding and PSEA Policy Manual is mandatory.

All EAO personnel and representatives shall:

a. Read and understand the policy.

b. Sign the Code of Conduct.

c. Sign the Policy Acknowledgement and Signature Form where required.

d. Attend safeguarding and PSEA orientation.

e. Apply the policy in daily work.

f. Report safeguarding concerns immediately.

g. Protect confidentiality.

h. Avoid retaliation.

i. Cooperate with safeguarding procedures.

j. Accept accountability for violations.

Failure to comply with this policy may result in disciplinary, contractual, administrative, legal, or corrective action.

24.6 Integration into Organizational Systems

EAO shall integrate safeguarding and PSEA into organizational systems and procedures.

This includes:

a. Governance and leadership oversight.

b. Strategic planning.

c. Program design and proposal development.

d. Safeguarding risk assessment.

e. Recruitment and screening.

f. Staff induction and training.

g. Performance management.

h. Complaint and feedback systems.

i. Whistleblowing and confidential reporting.

j. Incident reporting and response.

k. Referral pathway management.

l. Investigation and case management.

m. Disciplinary processes.

n. Procurement and supplier management.

o. Partnership and consortium agreements.

p. Communication, media, and visibility work.

q. Data protection and record keeping.

r. Monitoring, evaluation, accountability, and learning.

24.7 Implementation Responsibilities

Implementation of this policy is a shared responsibility.

EAO leadership shall ensure institutional commitment, resources, oversight, and accountability.

Senior management shall ensure policy implementation across departments, projects, and field locations.

Safeguarding focal persons shall provide technical support, guidance, awareness, referral support, and reporting assistance.

Managers and supervisors shall ensure staff and volunteers apply the policy in practice.

HR and administration shall ensure safe recruitment, code of conduct signing, induction, and staff records.

Program teams shall integrate safeguarding into activities, community engagement, and risk assessment.

MEAL teams shall ensure safe feedback, complaints, data collection, and learning.

Finance, procurement, and operations teams shall integrate safeguarding into contracts, suppliers, logistics, and resource management.

Communications staff shall ensure safe, consent-based, and dignified communication.

Partners, contractors, suppliers, consultants, and service providers shall comply with safeguarding requirements relevant to their role.

All staff and representatives shall prevent harm, report concerns, and uphold safe conduct.

24.8 Resource Allocation

EAO shall make reasonable efforts to allocate the resources needed to implement this policy effectively.

Resources may include:

a. Staff time for safeguarding implementation.

b. Safeguarding and PSEA training materials.

c. Complaint and feedback tools.

d. Referral pathway mapping.

e. Safe storage for confidential records.

f. Communication materials for communities.

g. Monitoring and supervision support.

h. Partner orientation and capacity strengthening.

i. Support for accessibility and disability inclusion.

j. Investigation or technical support where needed and available.

Resource limitations shall not be used as a reason to ignore safeguarding responsibilities.

24.9 Policy Orientation and Acknowledgement

All EAO personnel and relevant representatives shall receive orientation on the policy. Orientation shall explain the purpose of the policy, expected conduct, prohibited behavior, reporting channels, confidentiality, referral procedures, protection from retaliation, and consequences for violations.

Staff, volunteers, interns, consultants, contractors, suppliers, partners, and other relevant representatives may be required to sign a policy acknowledgement form confirming that they have read, understood, and agreed to comply with the policy.

24.10 Implementation in Field Offices and Project Sites

EAO shall ensure that safeguarding and PSEA standards are implemented in field offices, project sites, training venues, distribution points, community centers, partner locations, and mobile field activities.

Field-level implementation should include:

a. Staff and volunteer briefing.

b. Community awareness on rights and reporting channels.

c. Accessible complaint mechanisms.

d. Safe beneficiary selection and distribution practices.

e. Safeguarding risk assessment before activities.

f. Safe communication and consent procedures.

g. Referral pathway information.

h. Monitoring of staff, partner, and contractor conduct.

i. Confidential reporting and escalation.

j. Immediate response to urgent concerns.

24.11 Implementation in Partnerships and Consortiums

EAO shall ensure that safeguarding expectations are clearly included in partnership and consortium arrangements.

This may include:

a. Safeguarding clauses in agreements.

b. Partner safeguarding due diligence.

c. Partner Code of Conduct or safeguarding commitment.

d. Agreed reporting and escalation procedures.

e. Confidentiality and data protection requirements.

f. Cooperation with investigations and corrective action.

g. Joint safeguarding risk assessment for shared activities.

h. Partner capacity strengthening where needed.

i. Donor reporting coordination where required.

24.12 Implementation in Procurement and Supplier Engagement

EAO shall ensure that contractors, suppliers, consultants, vendors, drivers, service providers, and other third parties comply with safeguarding expectations where their work connects to EAO activities, communities, staff, data, or resources.

Supplier and contractor implementation may include:

a. Safeguarding clauses in contracts.

b. Supplier safeguarding commitment form.

c. Briefing on prohibited conduct.

d. Restrictions on contact with beneficiaries where needed.

e. Monitoring of supplier conduct.

f. Confidentiality requirements.

g. Reporting obligations.

h. Corrective or contract action in case of breach.

24.13 Community Awareness and Accessibility

EAO shall communicate key safeguarding and PSEA messages to communities in accessible and understandable ways.

Community awareness should include:

a. EAO’s commitment to safe and respectful services.

b. The right to report concerns.

c. Prohibited conduct by staff and representatives.

d. Confirmation that EAO assistance is free from sexual, financial, political, or personal conditions.

e. Available complaint and feedback channels.

f. Confidentiality and protection from retaliation.

g. Referral support where available.

h. Inclusion of women, children, persons with disabilities, older persons, refugees, IDPs, and marginalized groups.

EAO shall make reasonable efforts to provide information in local languages, simple wording, verbal formats, visual materials, and accessible methods where needed.

24.14 Monitoring Policy Implementation

EAO shall monitor implementation of this policy regularly.

Monitoring may include:

a. Review of signed Code of Conduct forms.

b. Review of training attendance.

c. Review of complaints and feedback systems.

d. Safeguarding risk assessment checks.

e. Field monitoring visits.

f. Partner and contractor compliance review.

g. Review of incident response records.

h. Review of referral pathway updates.

i. Data protection and confidentiality checks.

j. Review of safe communication consent forms.

k. Management safeguarding review meetings.

Monitoring findings shall be used to improve systems and address gaps.

24.15 Review Schedule

This policy shall be reviewed periodically to ensure that it remains relevant, practical, effective, and aligned with EAO's work, legal requirements, donor standards, partner obligations, and safeguarding best practices.

Recommended review schedule:

a. Full review every two years.

b. Immediate review after serious safeguarding incident or major learning.

c. Review when donor or partner requirements change.

d. Review when applicable laws or national requirements change.

e. Review when EAO's structure, programs, or risk context changes significantly.

f. Review when monitoring identifies serious implementation gaps.

For this manual:

Approved Date: 9 July 2023

Suggested Next Review Date: July 2025

If not reviewed by the suggested date, the policy should remain active until formally revised, replaced, or reapproved by EAO.

24.16 Review Process

The policy review process may include:

a. Review of current policy content.

b. Analysis of safeguarding incidents and complaint trends.

c. Feedback from staff, volunteers, partners, and communities where safe.

d. Review of donor and partner due diligence expectations.

e. Review of legal and regulatory requirements.

f. Review of referral pathways and reporting systems.

g. Consultation with safeguarding focal persons and management.

h. Identification of gaps and required updates.

i. Drafting of revisions.

j. Approval by authorized leadership or governing body.

k. Communication of changes to staff and relevant stakeholders.

24.17 Updating the Policy

Updates to this policy shall be made when necessary to strengthen safeguarding protection, improve clarity, address gaps, reflect new risks, meet donor requirements, or align with legal and operational changes.

Updates may include revision of:

a. Definitions.

b. Code of Conduct.

c. Reporting channels.

d. Referral pathways.

e. Complaint forms.

f. Safeguarding risk assessment tools.

g. Data protection procedures.

h. Safe communication rules.

i. Partner and supplier requirements.

j. Investigation and disciplinary procedures.

k. Training materials.

Any updated version shall clearly indicate the version number, date of revision, and approval authority.

24.18 Version Control

EAO shall maintain version control for this policy.

Version control should include:

a. Policy title.

b. Version number.

c. Approved date.

d. Effective date.

e. Review date.

f. Revision date.

g. Approved by.

h. Summary of key changes.

i. Responsible department or focal person.

This helps ensure that staff and partners use the most current approved version.

24.19 Managing Policy Gaps or Ambiguity

Where this policy does not clearly address a specific situation, EAO shall interpret the policy in line with its purpose, safeguarding principles, survivor-centered approach, best interests of the child, disability inclusion, do no harm, confidentiality, accountability, donor obligations, and applicable law.

Where there is uncertainty, EAO shall apply the higher protection standard, provided it is lawful, safe, and does not place any person at further risk.

24.20 Consequences of Non-Implementation

Failure to implement this policy may expose people to harm and may create serious organizational, legal, donor, partnership, and reputational risks.

Non-implementation may include:

a. Failure to train staff.

b. Failure to sign the Code of Conduct.

c. Failure to establish reporting channels.

d. Failure to respond to incidents.

e. Failure to protect confidentiality.

f. Failure to manage partner or contractor risks.

g. Failure to conduct risk assessments.

h. Failure to protect survivors, children, persons with disabilities, or vulnerable adults.

i. Failure to take corrective action.

Such failures may result in management action, disciplinary action, partner review, donor concern, or other corrective measures.

24.21 Policy Ownership

The policy shall be owned institutionally by EAO, with implementation support from leadership, senior management, safeguarding focal persons, HR, programs, MEAL, finance, procurement, communications, and all relevant departments.

No single person owns safeguarding alone. Safeguarding is an organizational responsibility shared by all.

24.22 Minimum Standard for Policy Implementation and Review

At minimum, EAO shall ensure that this policy is approved, communicated, understood, signed where required, integrated into operations, applied across programs and partnerships, monitored regularly, reviewed periodically, and updated when needed.

Policy implementation and review are essential to keeping EAO safe, accountable, donor-compliant, community-centered, and committed to protecting the dignity and rights of all people.

25. Annexes

The annexes form an important part of the EAO Safeguarding and PSEA Policy Manual. They provide practical tools, forms, checklists, templates, and acknowledgement documents to support implementation of the policy. These annexes help EAO document compliance, receive reports, assess risks, manage consent, support referrals, strengthen recruitment, monitor training, and ensure that staff, volunteers, partners, contractors, and representatives understand their responsibilities.

All annexes shall be used carefully, confidentially, and only for legitimate safeguarding, PSEA, HR, program, partnership, referral, training, or accountability purposes. Sensitive annexes, especially incident reporting forms, complaint forms, whistleblowing forms, referral forms, and consent forms, must be stored securely and accessed only by authorized persons.

25.1 Purpose of the Annexes

The purpose of the annexes is to provide standardized tools for implementing this policy in a consistent, professional, and documented manner.

The annexes aim to:

a. Support practical implementation of safeguarding and PSEA standards.

b. Help staff and representatives understand required procedures.

c. Provide standard forms for reporting, referral, consent, risk assessment, and acknowledgement.

d. Support donor and partner due diligence.

e. Improve documentation, accountability, and compliance.

f. Reduce confusion during safeguarding reporting and response.

g. Strengthen confidentiality, transparency, and professional practice.

25.2 Use of Annexes

EAO personnel and representatives shall use the annexes according to their purpose and level of sensitivity.

General annexes, such as training attendance sheets and policy acknowledgement forms, may be used for routine documentation.

Sensitive annexes, such as safeguarding incident reports, whistleblowing reports, complaint forms, referral pathway templates, and consent forms, must be handled with strict confidentiality.

No annex shall be used in a way that exposes survivors, complainants, children, witnesses, persons with disabilities, vulnerable adults, or community members to harm, stigma, retaliation, or unauthorized disclosure.

25.3 Confidential Handling of Annexes

Any completed annex containing personal, sensitive, safeguarding, complaint, referral, or investigation information must be treated as confidential.

Completed forms shall be:

a. Stored securely.

b. Shared only with authorized persons.

c. Used only for the purpose for which they were collected.

d. Protected from unauthorized copying, photography, forwarding, or discussion.

e. Retained and disposed of according to EAO data protection rules.

f. Never left in public or open spaces.

g. Never shared through informal channels or group chats unless authorized and safe.

25.4 Annex 1: Staff and Volunteer Code of Conduct Form

This annex shall be used to confirm that staff, volunteers, interns, consultants, community mobilizers, temporary workers, and relevant representatives have read, understood, and agreed to comply with EAO's Code of Conduct.

The form should include:

a. Name of person.

b. Position or role.

c. Department or project.

d. Declaration of understanding.

e. Commitment to comply with safeguarding and PSEA standards.

f. Commitment to report concerns.

g. Commitment to confidentiality.

h. Signature.

i. Date.

j. Name and signature of witness or supervisor where required.

25.5 Annex 2: Safeguarding Incident Reporting Form

This annex shall be used to document safeguarding incidents, allegations, disclosures, suspicions, or concerns.

The form should collect only necessary information, such as:

a. Date and time of report.

b. Person receiving the report.

c. Reporting channel.

d. Type of concern.

e. Affected person’s information, where safely provided.

f. Immediate safety risk.

g. Alleged subject of complaint, where known.

h. Brief factual description of concern.

i. Referral needs.

j. Immediate action taken.

k. Escalation required.

l. Signature of authorized person.

The form must not collect unnecessary graphic details and must be stored with strict confidentiality.

25.6 Annex 3: Complaint and Feedback Form

This annex shall be used for receiving general complaints, feedback, suggestions, service concerns, program access concerns, and non-sensitive or sensitive complaints where appropriate.

The form should include:

a. Date of complaint or feedback.

b. Name and contact of complainant, if they choose to provide it.

c. Option for anonymous complaint.

d. Location or project.

e. Type of complaint or feedback.

f. Description of concern.

g. Preferred response method, if any.

h. Immediate risk, if any.

i. Action taken or referral.

j. Responsible person.

k. Follow-up and closure notes.

Sensitive complaints must be escalated according to safeguarding procedures.

25.7 Annex 4: Whistleblowing Report Form

This annex shall be used for confidential reporting of serious wrongdoing, including SEA, safeguarding violations, fraud, corruption, abuse of power, retaliation, harassment, discrimination, concealment of misconduct, or serious policy breaches.

The form should include:

a. Reporter information, if provided.

b. Option for anonymous reporting.

c. Type of concern.

d. Person or entity involved.

e. Date, location, and description of concern.

f. People affected or at risk.

g. Immediate safety concerns.

h. Evidence or documents available, if any.

i. Retaliation concerns.

j. Preferred safe contact method.

k. Action taken by authorized person.

Whistleblowing forms must be stored with restricted access.

25.8 Annex 5: Referral Pathway Template

This annex shall be used to map available referral services for survivors and affected persons.

The template should include:

a. Type of service.

b. Name of service provider.

c. Contact person.

d. Phone number or email.

e. Location.

f. Working hours.

g. Eligibility criteria.

h. Cost, if any.

i. Accessibility notes.

j. Child-friendly capacity.

k. Disability-inclusive capacity.

l. GBV or survivor-centered capacity.

m. Confidentiality considerations.

n. Emergency contact information.

o. Date last updated.

p. Person responsible for updating.

The referral pathway should be reviewed and updated regularly.

25.9 Annex 6: Photo, Video, and Story Consent Form

This annex shall be used before collecting or using photos, videos, interviews, stories, testimonials, case studies, or personal information for communication, reporting, fundraising, donor visibility, or media purposes.

The form should include:

a. Name of participant.

b. Purpose of photo, video, or story.

c. Where the material may be used.

d. Explanation that participation is voluntary.

e. Explanation that refusal will not affect services.

f. Risks and limits of online/public sharing.

g. Consent options.

h. Permission for use of name or anonymous use.

i. Permission for photo, video, audio, or written story.

j. Right to withdraw consent where practical.

k. Signature or thumbprint.

l. Date.

m. Staff name and signature.

For children, Annex 7 shall also be used where required.

25.10 Annex 7: Child Safeguarding Consent Form

This annex shall be used when children participate in activities, interviews, photos, videos, stories, research, consultations, or services requiring consent.

The form should include:

a. Child’s name or code, where appropriate.

b. Child’s age.

c. Activity or purpose.

d. Parent or caregiver consent.

e. Child assent according to age and understanding.

f. Explanation of voluntary participation.

g. Explanation of confidentiality and limits.

h. Risk and safety considerations.

i. Permission for photo, video, story, or participation where relevant.

j. Parent or caregiver signature.

k. Child assent confirmation.

l. Staff name and signature.

m. Date.

Where caregiver involvement may place the child at risk, EAO shall follow child protection procedures.

25.11 Annex 8: Safe Recruitment Checklist

This annex shall be used to ensure that recruitment and engagement processes include safeguarding controls.

The checklist may include:

a. Job description includes safeguarding responsibilities.

b. Vacancy notice includes safeguarding statement.

c. Role risk level assessed.

d. Safeguarding questions included in interview.

e. Reference checks completed.

f. Identity documents reviewed where applicable.

g. Safeguarding declaration completed where required.

h. Code of Conduct signed.

i. Safeguarding and PSEA induction completed.

j. Probation or supervision plan established.

k. Conflict of interest declared and managed.

l. Recruitment documents stored securely.

25.12 Annex 9: Safeguarding Risk Assessment Template

This annex shall be used during project design, activity planning, field implementation, partnership planning, communication work, and high-risk activities.

The template should include:

a. Project or activity name.

b. Location.

c. Target groups.

d. Activity description.

e. People who may be at risk.

f. Identified safeguarding risks.

g. Likelihood rating.

h. Impact rating.

i. Overall risk level.

j. Existing controls.

k. Additional mitigation measures.

l. Responsible person.

m. Timeline.

n. Review date.

o. Approval for high-risk activities.

25.13 Annex 10: Training Attendance Sheet

This annex shall be used to document safeguarding, PSEA, Code of Conduct, child protection, disability inclusion, complaint handling, safe communication, or related training.

The sheet should include:

a. Training title.

b. Date.

c. Location.

d. Facilitator or trainer.

e. Topics covered.

f. Participant name.

g. Position or organization.

h. Gender, if needed and appropriate.

i. Signature.

j. Contact information, if needed.

k. Remarks.

Training records should be stored and used to monitor compliance and future training needs.

25.14 Annex 11: Policy Acknowledgement and Signature Form

This annex shall be used to confirm that staff, volunteers, board members, consultants, partners, contractors, suppliers, and relevant representatives have received, read, understood, and agreed to comply with the EAO Safeguarding and PSEA Policy Manual.

The form should include:

a. Name.

b. Role or position.

c. Organization or department.

d. Confirmation of receipt of policy.

e. Confirmation of understanding.

f. Commitment to comply.

g. Commitment to report concerns.

h. Commitment to confidentiality.

i. Acknowledgement of disciplinary consequences.

j. Signature.

k. Date.

25.15 Annex 12: Partner/Contractor Safeguarding Commitment Form

This annex shall be used for partners, consortium members, contractors, suppliers, consultants, service providers, vendors, and other third parties working with or on behalf of EAO.

The form should include:

a. Name of organization or individual.

b. Type of engagement.

c. Contact person.

d. Commitment to safeguarding and PSEA.

e. Commitment to protect children and vulnerable adults.

f. Commitment to disability inclusion and non-discrimination.

g. Commitment to prevent SEA, harassment, abuse, retaliation, and exploitation.

h. Commitment to protect confidential data.

i. Duty to report safeguarding concerns.

j. Agreement to cooperate with reviews, investigations, and corrective action.

k. Acknowledgement of consequences for breach.

l. Authorized signature.

m. Date.

25.16 Additional Annexes That May Be Added Later

EAO may add additional annexes as needed to strengthen implementation.

Possible future annexes may include:

a. Safeguarding Case Management Log.

b. Investigation Terms of Reference Template.

c. Confidentiality Agreement Form.

d. Survivor Referral Consent Form.

e. Safeguarding Field Visit Checklist.

f. Partner Safeguarding Due Diligence Checklist.

g. Data Breach Reporting Form.

h. Visitor Safeguarding Briefing Form.

i. Community Awareness Message Template.

j. Safeguarding Corrective Action Plan Template.

k. Safeguarding Review Checklist.

l. Donor Incident Notification Template.

25.17 Annex Control and Review

EAO shall review annexes periodically to ensure they remain useful, practical, clear, confidential, and aligned with the policy.

Annexes may be updated when:

a. Policy sections are revised.

b. Donor or partner requirements change.

c. Forms are found to be unclear or incomplete.

d. Monitoring identifies gaps.

e. Case handling shows the need for improved tools.

f. New safeguarding risks emerge.

g. EAO expands into new programs or partnerships.

Updates to annexes should be approved by the responsible management or authorized leadership.

25.18 Minimum Standard for Annexes

At minimum, EAO shall maintain practical tools for Code of Conduct acknowledgement, incident reporting, complaints and feedback, whistleblowing, referral pathways, consent, safe recruitment, safeguarding risk assessment, training records, policy acknowledgement, and partner or contractor safeguarding commitment.

Annexes are implementation tools and must be used responsibly, confidentially, and consistently to support EAO's safeguarding, PSEA, accountability, donor compliance, and duty of care.

Organization Name: East Action Organization (EAO)
Main Address: Jigjiga, Somali Regional State, Ethiopia
Liaison Office: Addis Ababa, Ethiopia

1. Head Office Address
East Action Organization (EAO)
Zone 2, Kebele 10, House No. 01270
Behind the main road, next to the Supreme Court Head Office
P.O. Box 438
Jigjiga, Somali Regional State, Ethiopia

2. Liaison Office Address
East Action Organization (EAO)
Bole Sub-City, District 01
House Number Under Registration
Addis Ababa, Ethiopia

Email
info@eastaction.org
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+251 915 330 907

EAO Official Website:
https://eastaction.org/

EAO Facebook:
https://www.facebook.com/eastaction.org

EAO X / Twitter:
https://x.com/EastActionorg

EAO Instagram:
https://www.instagram.com/eastactionorganization

EAO TikTok:
https://www.tiktok.com/@eastactionorg

EAO YouTube:
https://www.youtube.com/@eastactionorganization

EAO Telegram:
https://t.me/Eastactionorg

EAO WhatsApp:
https://wa.me/251915330907

EAO Unified Link:
https://linktr.ee/EastactionorganizationEAO

East Action Organization (EAO)

Safeguarding and Protection from Sexual Exploitation and Abuse (PSEA) Policy Manual

Unified Annex Forms

Organization	East Action Organization (EAO)
Document Type	Safeguarding and PSEA Annex Forms
Approved Date	9 July 2023
Effective Date	9 July 2023
Main Office Address	Jigjiga, Somali Regional State, Ethiopia
Liaison Office	Addis Ababa, Ethiopia
Applicable To	Board members, management, staff, volunteers, interns, consultants, partners, contractors, suppliers, visitors, and all EAO representatives
Confidentiality Level	Internal safeguarding and accountability document; completed sensitive forms are confidential

Action for Betterment

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East Action Organization
Action for Betterment

East Action Organization (EAO)

Safeguarding and PSEA Policy Manual

Annex 1: Staff and Volunteer Code of Conduct Form

Approved Date: 9 July 2023

1. Purpose of this Form

This Staff and Volunteer Code of Conduct Form confirms that every person working with, representing, volunteering for, or supporting EAO understands and agrees to follow EAO safeguarding, PSEA, child protection, disability inclusion, anti-harassment, anti-discrimination, confidentiality, and professional conduct standards. This form is mandatory for all EAO board members, management, staff, volunteers, interns, consultants, community mobilizers, temporary workers, field representatives, and any person acting for or on behalf of EAO.

2. Personal Information

Full Name	
Position / Role	
Department / Project	
Duty Station / Location	
Phone Number	
Email Address	
Start Date	
Supervisor / Focal Person	

Employment / Engagement Type:

[ ] Staff	[ ] Volunteer
[ ] Intern	[ ] Consultant
[ ] Community Mobilizer	[ ] Temporary Worker
[ ] Other: _____	

3. Code of Conduct Declaration

I confirm that I have read, understood, and agree to comply with the EAO Safeguarding and PSEA Policy Manual and this Code of Conduct. I understand that EAO has zero tolerance for sexual exploitation and abuse, sexual harassment, child abuse, abuse of vulnerable adults, harassment, bullying, discrimination, retaliation, corruption, misuse of power, and any conduct that causes harm or places people at risk.

4. I Commit To

[ ] Treat all people with dignity, respect, fairness, compassion, and non-discrimination.
[ ] Uphold EAO safeguarding, PSEA, child protection, disability inclusion, and safe conduct standards at all times.
[ ] Maintain professional boundaries with beneficiaries, children, vulnerable adults, persons with disabilities, staff, volunteers, partners, and community members.
[ ] Provide services, assistance, referrals, training, employment opportunities, and project benefits fairly, transparently, and without exploitation, favoritism, abuse, or personal conditions.
[ ] Respect the rights, views, privacy, and informed consent of all people, especially children, survivors, persons with disabilities, and vulnerable adults.
[ ] Protect children from abuse, exploitation, neglect, violence, unsafe communication, harmful discipline, and inappropriate relationships.

[ ] Protect vulnerable adults and persons with disabilities from abuse, exploitation, neglect, discrimination, exclusion, and misuse of power.
[ ] Use respectful language and avoid insults, humiliation, threats, intimidation, shouting, bullying, harassment, or degrading treatment.
[ ] Protect confidential information, personal data, complaint records, survivor information, child information, disability-related information, and organizational documents.
[ ] Use EAO property, funds, vehicles, equipment, communication tools, beneficiary information, and project resources only for authorized and ethical purposes.
[ ] Report any safeguarding, PSEA, child protection, harassment, discrimination, abuse, exploitation, fraud, corruption, retaliation, or serious misconduct concern as soon as I become aware of it.
[ ] Cooperate honestly with any authorized safeguarding review, case management process, investigation, audit, or disciplinary procedure.
[ ] Participate in safeguarding, PSEA, Code of Conduct, and related training or orientation provided by EAO.
[ ] Promote a safe, inclusive, respectful, and accountable working and community environment.

5. I Will Not

[ ] Engage in sexual exploitation, sexual abuse, sexual harassment, or any form of sexual misconduct.
[ ] Engage in any sexual activity with a child under the age of 18, regardless of consent, local law, perceived maturity, marital status, appearance, or mistaken belief about age.
[ ] Exchange money, employment, goods, services, aid, protection, referrals, transport, shelter, food, cash assistance, training, documents, or project benefits for sex, sexual favors, companionship, loyalty, silence, personal benefit, or any exploitative relationship.
[ ] Use my position, authority, project role, resources, information, influence, or access to assistance for sexual, financial, political, social, or personal gain.
[ ] Abuse, exploit, neglect, harm, threaten, manipulate, coerce, intimidate, humiliate, or discriminate against any person.
[ ] Hit, physically punish, verbally abuse, shame, degrade, or emotionally harm a child, vulnerable adult, person with disability, staff member, volunteer, beneficiary, or community member.
[ ] Spend unnecessary time alone with a child or vulnerable person in a private or isolated place.
[ ] Invite a child, beneficiary, or vulnerable person to my home, hotel, private room, vehicle, or isolated place without approved program purpose and safeguarding measures.
[ ] Communicate privately or inappropriately with children, beneficiaries, or vulnerable persons through personal phones, social media, or messaging applications without authorized program purpose and safeguards.
[ ] Take, store, publish, or share photos, videos, stories, interviews, or personal information without informed consent and EAO approval.
[ ] Share survivor details, child information, complaint records, investigation information, or confidential data with unauthorized persons.
[ ] Retaliate against, threaten, punish, intimidate, exclude, harass, demote, dismiss, or discriminate against anyone who reports a concern or participates in a safeguarding process.
[ ] Obstruct, delay, hide, ignore, or informally settle a safeguarding concern, PSEA allegation, child protection concern, or serious misconduct case.
[ ] Accept or request bribes, gifts, money, favors, private services, political support, clan loyalty, or personal benefits in exchange for recruitment, assistance, procurement, referral, selection, or service access.
[ ] Engage in fraud, corruption, theft, aid diversion, favoritism, nepotism, conflict of interest, false reporting, or misuse of EAO resources.
[ ] Work, drive, supervise activities, or represent EAO while under the influence of alcohol, illegal drugs, or substances that affect judgment, safety, or professionalism.
[ ] Use offensive, discriminatory, sexual, violent, degrading, or harmful language, images, jokes, posts, gestures, or messages.
[ ] Bring unauthorized weapons to EAO offices, vehicles, field sites, trainings, distributions, or community activities.

6. Duty to Report

I understand that I must report any concern, suspicion, allegation, disclosure, incident, or risk related to safeguarding, PSEA, child protection, harassment, discrimination, retaliation, fraud, corruption, or serious misconduct. I do not need proof before reporting a concern. I must not investigate the concern myself, confront the alleged person, pressure the complainant, promise secrecy, destroy evidence, or discuss the matter with unauthorized persons.

7. Confidentiality Commitment

I agree to protect confidential information and only share safeguarding-related information with authorized persons on a strict need-to-know basis. I understand that unauthorized sharing may cause harm and may result in disciplinary or legal action.

8. Conflict of Interest Declaration

Do you have any actual, potential, or perceived conflict of interest to declare at this time?

[ ] No	[ ] Yes - explain below

_____

_____

_____

9. Acknowledgement of Consequences

I understand that violation of this Code or the EAO Safeguarding and PSEA Policy Manual may result in corrective, disciplinary, contractual, administrative, legal, or other appropriate action, including warning, mandatory training, suspension, reassignment, removal from activities, termination, contract cancellation, partner/donor notification, referral to authorities, or other lawful action.

10. Staff / Volunteer Declaration and Signature

Full Name	
Position / Role	
Organization / Department	
Signature	
Date	

11. Witness / Supervisor Confirmation

Full Name	
Position / Role	
Organization / Department	
Signature	
Date	

12. For Office Use Only

[ ] Code of Conduct signed and filed	[ ] Safeguarding and PSEA induction completed
[ ] Follow-up required	[ ] No follow-up required

Date of Induction	
Name of Induction Facilitator	
Remarks	

East Action Organization
Action for Betterment

East Action Organization (EAO)

Safeguarding and PSEA Policy Manual

Annex 2: Safeguarding Incident Reporting Form

Approved Date: 9 July 2023

1. Purpose of this Form

This form is used to record any safeguarding concern, suspicion, allegation, disclosure, incident, or risk involving children, vulnerable adults, persons with disabilities, survivors, beneficiaries, staff, volunteers, partners, contractors, suppliers, visitors, or any person connected to EAO work. It supports safe, confidential, timely, survivor-centered, child-sensitive, disability-inclusive, and accountable reporting and response.

2. Confidentiality Notice

This form contains sensitive and confidential information. It shall be shared only with authorized persons on a strict need-to-know basis for protection, referral, case management, investigation, management decision-making, donor reporting, legal compliance, or safeguarding response.

3. Basic Report Information

Incident Report Number	
Date Report Received	
Time Report Received	
Location Where Report Was Received	
Name of Person Receiving Report	
Position / Role	
Department / Project	

Reporting Channel:

[ ] Direct verbal report	[ ] Written report
[ ] Complaint box	[ ] Phone call
[ ] Email	[ ] Community feedback mechanism
[ ] Whistleblowing channel	[ ] Partner report
[ ] Staff observation	[ ] Other:

Is the report anonymous?

[ ] Yes	[ ] No

4. Type of Safeguarding Concern

[ ] Sexual Exploitation and Abuse, SEA
[ ] Sexual harassment
[ ] Child abuse, exploitation, or neglect
[ ] Abuse or neglect of vulnerable adult
[ ] Abuse, discrimination, or exploitation of person with disability
[ ] Harassment, bullying, intimidation, or discrimination
[ ] Gender-based violence concern
[ ] Retaliation or threat against complainant/witness
[ ] Misuse of power, authority, resources, or assistance

[ ] Exchange of aid, services, employment, or benefits for sex, money, favors, or personal benefit
[ ] Unsafe communication, photo, video, or storytelling concern
[ ] Breach of confidentiality or data protection
[ ] Partner, contractor, supplier, or third-party misconduct
[ ] Fraud, corruption, or aid diversion linked to safeguarding risk
[ ] Other safeguarding concern: _____

5. Person Reporting the Concern

Full Name	
Sex / Gender	
Age, if relevant	
Phone Number	
Email Address	
Address / Location	

Relationship to the Incident:

[ ] Survivor / affected person	[ ] Witness
[ ] Family member / caregiver	[ ] Community member
[ ] EAO staff	[ ] Volunteer
[ ] Partner staff	[ ] Contractor / supplier
[ ] Anonymous reporter	[ ] Other:

Preferred safe contact method:

[ ] Phone	[ ] Email
[ ] In person	[ ] Through trusted person
[ ] No follow-up requested	[ ] Other:

Does the reporter fear retaliation or harm?

[ ] Yes	[ ] No	[ ] Not known

_____
_____

6. Affected Person / Survivor Information

Full Name or Code	
Sex / Gender	
Age	
Phone / Contact, if safely provided	
Current Location, if safely provided	

Relevant status or group:

[ ] Child	[ ] Woman / girl
[ ] Vulnerable adult	[ ] Person with disability
[ ] Refugee	[ ] Internally displaced person
[ ] Host community member	[ ] Staff member
[ ] Volunteer	[ ] Partner staff
[ ] Other: _____	

Current safety and urgent needs:

[ ] Affected person is currently safe
[ ] Affected person is not safe
[ ] Safety not known
[ ] Urgent medical care needed
[ ] Psychosocial support needed
[ ] Child protection support needed

[ ] GBV support needed
[ ] Legal assistance needed
[ ] Disability support needed
[ ] Safe shelter / protection support needed
[ ] Other: _____

7. Alleged Subject of Complaint

Full Name, if known	
Position / Role, if known	
Duty Station / Location, if known	
Relationship to affected person, if known	

Organization / Affiliation:

[ ] EAO staff	[ ] EAO volunteer
[ ] EAO intern	[ ] EAO consultant
[ ] EAO contractor / supplier	[ ] Partner staff
[ ] Consortium member	[ ] Community mobilizer
[ ] Beneficiary / community member	[ ] Unknown
[ ] Other: _____	

Does the alleged person still have access to the affected person or other vulnerable people?

[ ] Yes	[ ] No	[ ] Not known

_____
_____

8. Incident Details

Date of Incident, if known	
Time of Incident, if known	
Location of Incident, if known	

Brief factual description of concern. Do not include unnecessary graphic details:

_____
_____
_____
_____
_____

Was the incident witnessed by anyone?

[ ] Yes	[ ] No	[ ] Not known

Has this happened before or is it ongoing?

[ ] First known incident	[ ] Repeated concern
[ ] Ongoing concern	[ ] Not known

9. Immediate Risk Assessment

[ ] Immediate risk of further harm
[ ] Urgent medical, safety, protection, or referral support needed
[ ] Child involved
[ ] Risk of retaliation, intimidation, stigma, or community/family pressure
[ ] Risk of confidentiality breach or unsafe sharing of information
[ ] No immediate risk identified
[ ] Risk not known

Immediate action required:

[ ] Urgent referral	[ ] Inform safeguarding focal person
[ ] Inform senior management	[ ] Safety planning
[ ] Temporary separation from alleged subject of complaint	[ ] Restrict alleged person access to beneficiaries/children/data
[ ] Preserve evidence or records safely	[ ] Other:

10. Referral and Support

[ ] Referral information offered
[ ] Informed consent obtained for referral
[ ] Consent not possible due to emergency / child protection obligation
[ ] Referral not applicable

Referral made to:

[ ] Medical service	[ ] Psychosocial support
[ ] GBV service	[ ] Child protection service
[ ] Protection actor	[ ] Legal aid
[ ] Police / justice service where appropriate and safe	[ ] Disability support service
[ ] Shelter / safe accommodation	[ ] Other:

Name of referral service/provider, if safe to record	
Date referral made	
Person responsible for referral follow-up	

11. Immediate Action Taken

_____
_____
_____

Person who took action	
Date action taken	

12. Escalation

[ ] Escalated to safeguarding focal person
[ ] Senior management informed
[ ] Donor/partner/legal/authority reporting required
[ ] Reporting requirement to be determined

Name of person informed	
Date and time escalated	
Responsible person for next step	

13. Evidence or Supporting Information

[ ] Written complaint	[ ] Messages / SMS / WhatsApp / email
[ ] Photos / videos / audio	[ ] Witness statement
[ ] Medical or referral document	[ ] Attendance / distribution / beneficiary record
[ ] Staff or HR record	[ ] Partner / contractor record
[ ] Other:	[ ] No evidence available
[ ] Not known	

Where is evidence stored?	
Person responsible for securing evidence	

Important note: Evidence must be stored securely and shared only with authorized persons. Do not copy, forward, edit, delete, or circulate evidence without authorization.

14. Confidentiality and Data Protection

[ ] Reporter/affected person informed about confidentiality and its limits
[ ] Report stored in locked physical file
[ ] Report stored in restricted digital folder
[ ] Report stored in safeguarding case file

Authorized persons with access to this report:

_____
_____
_____

15. Case Classification and Next Step

[ ] Safeguarding concern requiring monitoring
[ ] Safeguarding incident requiring management action
[ ] PSEA case
[ ] Child protection case
[ ] Vulnerable adult protection case
[ ] Disability-related safeguarding case
[ ] Harassment / discrimination / bullying case
[ ] Retaliation concern
[ ] Partner / contractor / supplier misconduct
[ ] Serious incident requiring investigation
[ ] Other: _____

Recommended next step:

[ ] Referral support only	[ ] Management review
[ ] Safeguarding case management	[ ] Formal investigation
[ ] Disciplinary process	[ ] Partner/contractor action
[ ] Donor/partner notification	[ ] Legal/authority reporting where required and safe
[ ] Corrective action / risk mitigation	[ ] Other:

16. Reporter Statement, if Applicable

Full Name	
Position / Role	
Organization / Department	
Signature	
Date	

17. Person Receiving the Report

Full Name	
Position / Role	
Organization / Department	
Signature	
Date	

18. Safeguarding Focal Person / Authorized Review

Reviewed by	
Position	
Date reviewed	

Immediate risk level:

[ ] Low	[ ] Medium	[ ] High	[ ] Critical

Action approved:

19. Case Follow-Up Log

Date	
Action Taken	
Responsible Person	
Status / Next Step	

Date	
Action Taken	
Responsible Person	
Status / Next Step	

Date	
Action Taken	
Responsible Person	
Status / Next Step	

20. Case Closure, for Authorized Use Only

Date case closed	
Closed by	

Reason for closure:

[ ] Referral completed	[ ] Risk addressed
[ ] Management action completed	[ ] Investigation completed
[ ] Disciplinary/corrective action completed	[ ] Insufficient information but risk monitored
[ ] Transferred to appropriate authority/service	[ ] Other:

Summary of closure decision and lessons learned:

Authorization

Full Name	
Position / Role	
Organization / Department	
Signature	
Date	

East Action Organization
Action for Betterment

East Action Organization (EAO)

Safeguarding and PSEA Policy Manual

Annex 3: Complaint and Feedback Form

Approved Date: 9 July 2023

1. Purpose of this Form

This form is used to receive, record, review, and respond to complaints, feedback, suggestions, concerns, questions, appreciation, and reports from beneficiaries, community members, staff, volunteers, partners, contractors, suppliers, visitors, and any person who interacts with EAO work. Sensitive safeguarding, PSEA, child protection, sexual harassment, abuse, exploitation, retaliation, or whistleblowing concerns must be handled confidentially and escalated immediately through the appropriate safeguarding or confidential reporting procedures.

2. Confidentiality and Protection from Retaliation Notice

EAO will treat complaints and feedback with respect and confidentiality. Information shall be shared only with authorized persons on a need-to-know basis. EAO strictly prohibits threats, punishment, exclusion, discrimination, loss of services, intimidation, or any negative action against a person who submits a complaint or feedback in good faith.

3. Complaint / Feedback Reference Information

Complaint / Feedback Number	
Date Received	
Time Received	
Location Received	
Project / Program	
Name of Person Receiving Complaint	
Position / Role	

Reporting Channel:

[ ] Verbal report	[ ] Written form
[ ] Complaint box	[ ] Phone call
[ ] SMS / WhatsApp	[ ] Email
[ ] Community meeting	[ ] Field visit
[ ] Partner channel	[ ] Staff observation
[ ] Anonymous report	[ ] Other:

4. Type of Submission

[ ] General feedback
[ ] Suggestion for improvement
[ ] Request for information
[ ] Appreciation / positive feedback
[ ] Complaint about service quality
[ ] Complaint about beneficiary selection
[ ] Complaint about exclusion or unfair treatment
[ ] Complaint about staff conduct
[ ] Complaint about volunteer conduct
[ ] Complaint about partner conduct
[ ] Complaint about contractor / supplier conduct

[ ] Complaint about delay or poor communication
[ ] Complaint about discrimination
[ ] Complaint about harassment or bullying
[ ] Complaint about corruption, fraud, bribery, or misuse of resources
[ ] Complaint about data privacy or confidentiality
[ ] Safeguarding concern
[ ] PSEA concern
[ ] Child protection concern
[ ] Retaliation or threat concern
[ ] Other: _____

5. Complainant / Feedback Provider Information

Full Name, optional	
Sex / Gender, optional	
Age, optional	
Phone Number, optional	
Email Address, optional	
Address / Location, optional	
Preferred Language	

Preferred Safe Contact Method:

[ ] Phone	[ ] SMS / WhatsApp
[ ] Email	[ ] In person
[ ] Through trusted person	[ ] No response requested
[ ] Other: _____	

Relationship to EAO:

[ ] Beneficiary / project participant	[ ] Community member
[ ] Parent / caregiver	[ ] Child / youth participant
[ ] Person with disability	[ ] Staff member
[ ] Volunteer	[ ] Partner staff
[ ] Contractor / supplier	[ ] Government / stakeholder representative
[ ] Visitor	[ ] Anonymous
[ ] Other: _____	

6. Anonymous Complaint

Is the complainant anonymous?

[ ] Yes	[ ] No

Can EAO follow up with the complainant?

[ ] Yes	[ ] No
[ ] Not applicable	[ ] Not known

7. Details of Complaint or Feedback

Describe the complaint, feedback, concern, suggestion, or question. Record the complainant words as accurately as possible and avoid assumptions or personal opinions.

_____
_____
_____
_____
_____

Date of issue or incident, if known	

Location of issue or incident, if known	
Person, team, partner, or service involved, if known	

Has this issue happened before?

[ ] Yes	[ ] No	[ ] Not known

_____

_____

8. Immediate Risk Check

[ ] Immediate risk of harm
[ ] Involves a child
[ ] Involves sexual exploitation, sexual abuse, or sexual harassment
[ ] Involves abuse, neglect, or exploitation of a vulnerable adult or person with disability
[ ] Complainant fears retaliation, threats, stigma, or loss of services
[ ] Requires urgent referral or protection action
[ ] No urgent risk identified
[ ] Not known

Important note: If any urgent risk is identified, escalate immediately to the safeguarding focal person or authorized senior management through confidential procedures.

9. Complaint Category, for Office Use Only

[ ] General feedback / suggestion
[ ] Service quality issue
[ ] Program access or selection issue
[ ] Staff conduct issue
[ ] Partner / contractor / supplier issue
[ ] Fraud, corruption, or misuse of resources
[ ] Harassment, bullying, or discrimination
[ ] Safeguarding concern
[ ] PSEA concern
[ ] Child protection concern
[ ] Vulnerable adult protection concern
[ ] Disability inclusion or access concern
[ ] Retaliation concern
[ ] Data protection / confidentiality concern
[ ] Other: _____

Sensitivity level:

[ ] Low	[ ] Medium	[ ] High	[ ] Critical

10. Action Requested by Complainant

[ ] Provide information	[ ] Correct an error
[ ] Improve service delivery	[ ] Review beneficiary selection
[ ] Take action against misconduct	[ ] Provide referral support
[ ] Protect confidentiality	[ ] Prevent retaliation
[ ] Investigate the concern	[ ] No specific action requested
[ ] Other: _____	

_____

_____

11. Consent for Follow-Up

[ ] Complainant consents to follow-up
[ ] Complainant does not consent to follow-up

[ ] Anonymous complaint
[ ] Consent to share necessary information with authorized EAO staff for response
[ ] No consent to share information

12. Initial Action Taken

[ ] Complaint received and recorded	[ ] Information provided
[ ] Referred to program team	[ ] Referred to supervisor / manager
[ ] Referred to safeguarding focal person	[ ] Referred to HR / administration
[ ] Referred to finance / procurement	[ ] Referred to partner focal person
[ ] Urgent protection action initiated	[ ] Referral support offered
[ ] Other: _____	

Brief description of initial action:

_____

_____

Name of person taking action	
Date	

13. Escalation

[ ] Escalation needed	[ ] No escalation needed	[ ] To be determined

Escalated to:

[ ] Safeguarding focal person	[ ] Program manager
[ ] Senior management	[ ] HR / administration
[ ] Finance / procurement	[ ] Executive Director
[ ] Board-designated person	[ ] Partner focal person
[ ] Donor / authority where required and safe	[ ] Other:

Name of person informed	
Position	
Date and time escalated	

Reason for escalation:

_____

_____

14. Referral Support

[ ] Referral support needed	[ ] Referral information provided
[ ] Referral not needed	[ ] Referral need not known
[ ] Consent obtained for referral	[ ] Emergency / mandatory reporting situation

Referral made to:

[ ] Medical service	[ ] Psychosocial support
[ ] GBV service	[ ] Child protection service
[ ] Protection actor	[ ] Legal aid
[ ] Disability support service	[ ] Safe shelter / protection support
[ ] Other: _____	

Name of referral service/provider, if safe to record	
Date of referral	

15. Review and Response Plan

Responsible person / department	
Target response date	

Review required:

[ ] No review required, feedback noted	[ ] Program review
[ ] Management review	[ ] Safeguarding review
[ ] HR review	[ ] Finance / procurement review
[ ] Partner / contractor review	[ ] Formal investigation
[ ] Corrective action plan	[ ] Other:

Planned response action:

_____

_____

_____

_____

16. Feedback to Complainant

[ ] Feedback can be provided	[ ] Feedback cannot be provided
[ ] Anonymous complaint	[ ] Not safe at this time

Date feedback provided	
Method of feedback	
Person who provided feedback	

Summary of feedback provided, without breaching confidentiality:

_____

_____

_____

17. Corrective Action

[ ] Service improvement	[ ] Correction of beneficiary list or selection issue
[ ] Staff briefing	[ ] Staff training
[ ] Partner / contractor follow-up	[ ] Safeguarding risk assessment updated
[ ] Complaint channel improved	[ ] Referral pathway updated
[ ] Disciplinary action	[ ] Contract / partnership action
[ ] Data protection action	[ ] Other:

Responsible person	
Deadline	
Status	[ ] Pending [ ] In progress [ ] Completed [ ] Not applicable

Details of corrective action:

_____

_____

_____

_____

18. Follow-Up Log

Date	
Action Taken	
Responsible Person	
Status / Next Step	

Date	

Action Taken	
Responsible Person	
Status / Next Step	

Date	
Action Taken	
Responsible Person	
Status / Next Step	

19. Complaint Closure

Date complaint closed	
Closed by	
Position	

Reason for closure:

[ ] Feedback recorded, no further action required	[ ] Information provided
[ ] Issue resolved	[ ] Referral completed
[ ] Corrective action completed	[ ] Safeguarding case transferred to incident/case management process
[ ] Investigation completed	[ ] Insufficient information, risk monitored
[ ] Complaint withdrawn voluntarily	[ ] Other:

Closure summary and lessons learned:

_____
_____
_____
_____
_____

20. Signature of Person Receiving Complaint

Full Name	
Position / Role	
Organization / Department	
Signature	
Date	

21. Signature of Authorized Reviewer

Full Name	
Position / Role	
Organization / Department	
Signature	
Date	

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Annex 4: Whistleblowing Report Form

Approved Date: 9 July 2023

1. Purpose of this Form

This Whistleblowing Report Form is used for confidential reporting of serious wrongdoing, including safeguarding violations, PSEA, fraud, corruption, abuse of power, harassment, discrimination, retaliation, concealment of misconduct, or serious breach of EAO policies, donor rules, or legal obligations. It may be used by staff, volunteers, partners, contractors, suppliers, beneficiaries, community members, visitors, or any person with credible concern connected to EAO work.

2. Confidentiality and Protection Notice

EAO protects good faith whistleblowers from retaliation. Information in this form shall be shared only with authorized persons on a strict need-to-know basis. Anonymous reports are accepted where possible. Do not use this form maliciously or knowingly provide false information.

3. Report Reference

Whistleblowing Report Number	
Date Received	
Time Received	
Reporting Channel	
Person Receiving Report	
Position / Role	

4. Reporter Information, Optional

Full Name	
Phone / Email	
Role / Relationship to EAO	
Preferred Safe Contact Method	
Do you wish to remain anonymous?	[ ] Yes [ ] No
Do you fear retaliation?	[ ] Yes [ ] No [ ] Not known

5. Type of Serious Concern

[ ] Sexual exploitation and abuse
[ ] Sexual harassment
[ ] Child abuse, exploitation, or neglect
[ ] Abuse of vulnerable adult
[ ] Disability-related abuse, exclusion, or discrimination
[ ] Fraud, corruption, bribery, theft, or aid diversion
[ ] Misuse of organizational funds, assets, information, or authority
[ ] Harassment, bullying, discrimination, intimidation, or retaliation
[ ] Concealment of safeguarding concern or misconduct
[ ] Falsification of documents, reports, records, or financial information
[ ] Conflict of interest, nepotism, favoritism, or recruitment corruption

[ ] Unsafe practice that places people at risk of harm
[ ] Obstruction of investigation, destruction of evidence, or witness intimidation
[ ] Serious misconduct by staff, management, board, partner, contractor, supplier, or representative
[ ] Other: _____

6. Details of Concern

Date of concern / incident, if known	
Location, if known	
Person(s) or entity involved, if known	
People affected or at risk	

Describe the concern clearly and factually:

_____
_____
_____
_____
_____
_____
_____

7. Evidence or Supporting Information

[ ] Documents	[ ] Emails
[ ] Messages / SMS / WhatsApp	[ ] Photos / videos / audio
[ ] Financial records	[ ] Witness information
[ ] Complaint or incident records	[ ] Procurement/recruitment records
[ ] Other:	[ ] No evidence available now

Where is evidence located/stored?	
Who has access to the evidence?	

8. Immediate Risk and Protection Needs

[ ] Immediate risk to survivor or affected person
[ ] Risk to child
[ ] Risk to vulnerable adult or person with disability
[ ] Risk to whistleblower
[ ] Risk to witnesses
[ ] Risk of document destruction or evidence tampering
[ ] Risk of retaliation, intimidation, or pressure
[ ] No immediate risk known

Protection measures requested or needed:

_____
_____
_____

9. Escalation and Initial Assessment, Authorized Use Only

Received by	
Escalated to	
Date and time escalated	
Conflict of interest identified?	[ ] Yes [ ] No [ ] To be assessed
Immediate risk level	[ ] Low [ ] Medium [ ] High [ ] Critical

Initial action required:

[ ] Safeguarding referral	[ ] Management review
[ ] Formal investigation	[ ] HR review

[ ] Finance/procurement review	[ ] Partner/contractor review
[ ] Donor/partner notification	[ ] Legal/authority reporting where required and safe
[ ] Protection from retaliation measures	[ ] Other:

10. Follow-Up Log

Date	
Action Taken	
Responsible Person	
Status / Next Step	

Date	
Action Taken	
Responsible Person	
Status / Next Step	

Date	
Action Taken	
Responsible Person	
Status / Next Step	

11. Closure, Authorized Use Only

Date closed	
Closed by	
Outcome / status	

Closure summary and corrective action, without unnecessary personal details:

_____

_____

_____

_____

_____

12. Authorized Signature

Full Name	
Position / Role	
Organization / Department	
Signature	
Date	

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Annex 5: Referral Pathway Template

Approved Date: 9 July 2023

1. Purpose of this Template

This Referral Pathway Template is used to map safe, confidential, survivor-centered, child-sensitive, and disability-inclusive services available to survivors and affected persons. It helps EAO connect people to medical, psychosocial, GBV, child protection, protection, legal, disability, shelter, and other relevant services based on informed consent and safety.

2. Referral Area Information

Region / Zone / Woreda	
Project / Program	
Prepared by	
Date prepared	
Last updated	
Next review date	

3. Emergency Contacts

Service Type	Provider Name	Contact Person	Phone/Email	Location/Hours	Accessibility/ Safety Notes

4. Detailed Referral Service Directory

Medical / health care

Provider name	
Contact person	
Phone / email	
Location	
Working hours	
Eligibility criteria	
Cost, if any	
Language capacity	
Child-friendly capacity	
Disability accessibility	
Confidentiality considerations	
Safety concerns or restrictions	
Date verified	

Clinical management of rape / sexual assault

Provider name	
Contact person	
Phone / email	
Location	
Working hours	
Eligibility criteria	
Cost, if any	
Language capacity	
Child-friendly capacity	
Disability accessibility	
Confidentiality considerations	
Safety concerns or restrictions	
Date verified	

Psychosocial support / counseling

Provider name	
Contact person	
Phone / email	
Location	
Working hours	
Eligibility criteria	
Cost, if any	
Language capacity	
Child-friendly capacity	
Disability accessibility	
Confidentiality considerations	
Safety concerns or restrictions	
Date verified	

GBV response service

Provider name	
Contact person	
Phone / email	
Location	
Working hours	
Eligibility criteria	
Cost, if any	
Language capacity	
Child-friendly capacity	
Disability accessibility	
Confidentiality considerations	
Safety concerns or restrictions	
Date verified	

Child protection service

Provider name	
Contact person	
Phone / email	
Location	
Working hours	
Eligibility criteria	
Cost, if any	
Language capacity	
Child-friendly capacity	
Disability accessibility	
Confidentiality considerations	

Safety concerns or restrictions	
Date verified	

Protection case management

Provider name	
Contact person	
Phone / email	
Location	
Working hours	
Eligibility criteria	
Cost, if any	
Language capacity	
Child-friendly capacity	
Disability accessibility	
Confidentiality considerations	
Safety concerns or restrictions	
Date verified	

Legal aid / legal support

Provider name	
Contact person	
Phone / email	
Location	
Working hours	
Eligibility criteria	
Cost, if any	
Language capacity	
Child-friendly capacity	
Disability accessibility	
Confidentiality considerations	
Safety concerns or restrictions	
Date verified	

Police / justice service where appropriate and safe

Provider name	
Contact person	
Phone / email	
Location	
Working hours	
Eligibility criteria	
Cost, if any	
Language capacity	
Child-friendly capacity	
Disability accessibility	
Confidentiality considerations	
Safety concerns or restrictions	
Date verified	

Safe shelter / temporary accommodation

Provider name	
Contact person	
Phone / email	
Location	
Working hours	
Eligibility criteria	

Cost, if any	
Language capacity	
Child-friendly capacity	
Disability accessibility	
Confidentiality considerations	
Safety concerns or restrictions	
Date verified	

Disability support / rehabilitation / assistive device service

Provider name	
Contact person	
Phone / email	
Location	
Working hours	
Eligibility criteria	
Cost, if any	
Language capacity	
Child-friendly capacity	
Disability accessibility	
Confidentiality considerations	
Safety concerns or restrictions	
Date verified	

Mental health support

Provider name	
Contact person	
Phone / email	
Location	
Working hours	
Eligibility criteria	
Cost, if any	
Language capacity	
Child-friendly capacity	
Disability accessibility	
Confidentiality considerations	
Safety concerns or restrictions	
Date verified	

Livelihood/basic needs support where relevant

Provider name	
Contact person	
Phone / email	
Location	
Working hours	
Eligibility criteria	
Cost, if any	
Language capacity	
Child-friendly capacity	
Disability accessibility	
Confidentiality considerations	
Safety concerns or restrictions	
Date verified	

Other specialized service

Provider name	

Contact person	
Phone / email	
Location	
Working hours	
Eligibility criteria	
Cost, if any	
Language capacity	
Child-friendly capacity	
Disability accessibility	
Confidentiality considerations	
Safety concerns or restrictions	
Date verified	

5. Referral Consent and Safety Check

[ ] Survivor/affected person informed of available options
[ ] Informed consent obtained
[ ] Only minimum necessary information will be shared
[ ] Referral is safe and does not increase retaliation risk
[ ] Transport or accompaniment need considered
[ ] Disability/accessibility need considered
[ ] Child protection or mandatory reporting considered where relevant
[ ] Referral provider confidentiality considered

6. Referral Follow-Up Record

Date	
Person referred/code	
Service referred to	
Consent confirmed	
Follow-up status	
Additional safety concern	

Date	
Person referred/code	
Service referred to	
Consent confirmed	
Follow-up status	
Additional safety concern	

Date	
Person referred/code	
Service referred to	
Consent confirmed	
Follow-up status	
Additional safety concern	

7. Prepared / Updated By

Full Name	
Position / Role	
Organization / Department	
Signature	
Date	

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Annex 6: Photo, Video, and Story Consent Form

Approved Date: 9 July 2023

1. Purpose of this Form

This form is used before EAO collects, stores, uses, publishes, or shares photos, videos, audio recordings, interviews, stories, testimonials, case studies, or personal information for communication, reporting, donor visibility, fundraising, learning, or media purposes. Participation is voluntary and refusal shall not affect access to EAO services or assistance.

2. Participant Information

Full Name	
Age	
Sex / Gender	
Phone / Contact, optional	
Location / Project	
Language used for consent explanation	

3. Material to Be Collected

[ ] Photo	[ ] Video
[ ] Audio recording	[ ] Written story
[ ] Interview	[ ] Testimonial
[ ] Case study	[ ] Social media content
[ ] Donor report content	[ ] Website/newsletter content
[ ] Other: _____	

4. Purpose and Possible Use

The material may be used for the following approved purposes:

[ ] Internal report	[ ] Donor report
[ ] Training or learning	[ ] EAO website
[ ] EAO social media	[ ] Newsletter
[ ] Proposal or fundraising material	[ ] Presentation
[ ] Media/press content	[ ] Other: _____

Specific purpose explained to participant:

_____

_____

_____

5. Consent Statements

[ ] I understand the purpose of the photo/video/story/interview.
[ ] I understand where the material may be used.
[ ] I understand that online/public sharing may be copied or shared beyond EAO control.
[ ] I understand that I may refuse without losing assistance or services.
[ ] I understand that I may ask questions before agreeing.

[ ] I consent voluntarily without pressure, payment, manipulation, or promise of benefit.
[ ] I allow EAO to use my name.
[ ] I prefer anonymous use or pseudonym only.
[ ] I allow EAO to use my photo/video/story for the purpose explained above.
[ ] I do not consent to use of my photo/video/story.

6. Safeguarding and Sensitivity Check, Office Use

[ ] Participant is a child - use Annex 7 also
[ ] Participant is a survivor or sensitive case - avoid identifiable publication unless specially approved
[ ] Participant is a person with disability - accessible consent provided
[ ] Content does not expose exact location or identifying details where risky
[ ] Content is dignified and not degrading or pity-based
[ ] No confidential case details disclosed
[ ] Safeguarding approval needed before publication
[ ] Communication approval completed

7. Participant Signature / Thumbprint

Participant Name	
Signature / Thumbprint	
Date	

8. Staff Confirmation

Staff Name	
Position	
Signature	
Date	

9. Withdrawal of Consent

Participant may request withdrawal of consent for future use where practical. EAO may not always be able to remove material already published or shared externally, but will take reasonable steps where safe and possible.

Withdrawal request received?	[ ] Yes [ ] No
Date	
Action taken	

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Annex 7: Child Safeguarding Consent Form

Approved Date: 9 July 2023

1. Purpose of this Form

This Child Safeguarding Consent Form is used when a child participates in EAO activities, interviews, photos, videos, stories, consultations, research, assessments, or services requiring consent. The best interests of the child must guide all decisions. Consent from a parent/caregiver and assent from the child should be obtained where safe and appropriate.

2. Child Information

Child Name or Code	
Age	
Sex / Gender	
Location / Project	
Activity / Purpose	
Date of Activity	

3. Parent / Caregiver Information

Parent/Caregiver Name	
Relationship to Child	
Phone / Contact	
Address / Location	

4. Consent Type

[ ] Participation in activity	[ ] Interview / consultation
[ ] Photo	[ ] Video
[ ] Audio recording	[ ] Story / case study
[ ] Research / assessment	[ ] Referral support
[ ] Other: _____	

5. Safeguarding Explanation Provided

[ ] Purpose explained to parent/caregiver
[ ] Purpose explained to child in age-appropriate language
[ ] Participation is voluntary
[ ] Refusal will not affect services
[ ] Confidentiality and limits explained
[ ] Risks and benefits explained
[ ] Child may stop participation at any time
[ ] Photos/videos/stories will be used only for approved purpose
[ ] Child safety and dignity considered

6. Parent / Caregiver Consent

I confirm that the purpose, use, risks, benefits, confidentiality, and voluntary nature of the activity have been explained to me. I give consent for the child to participate as indicated above.

Parent/Caregiver Name	
Signature / Thumbprint	
Date	

7. Child Assent

I have been told what this activity is about. I know I can say yes or no and can stop if I feel uncomfortable.

[ ] Child agrees / assents
[ ] Child does not agree
[ ] Child too young/unable to provide assent - reason documented

Child Name or Code	
Signature / Mark, if appropriate	
Date	

8. Staff Safeguarding Check

[ ] Caregiver involvement is safe
[ ] Caregiver involvement may create risk - child protection guidance needed
[ ] No sensitive identifying information will be published
[ ] Child is appropriately represented with dignity
[ ] Activity location is safe and supervised
[ ] Referral or protection concern identified
[ ] No protection concern identified

Notes and protection actions, if any:

_____
_____
_____
_____

9. Staff Confirmation

Full Name	
Position / Role	
Organization / Department	
Signature	
Date	

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Annex 8: Safe Recruitment Checklist

Approved Date: 9 July 2023

1. Purpose of this Checklist

This Safe Recruitment Checklist ensures that recruitment and engagement processes include safeguarding controls to reduce the risk of unsuitable individuals accessing children, vulnerable adults, persons with disabilities, beneficiaries, staff, sensitive data, and EAO resources.

2. Recruitment Information

Position / Role	
Department / Project	
Duty Station	
Recruitment Type	[ ] Staff [ ] Volunteer [ ] Intern [ ] Consultant [ ] Temporary [ ] Other
Hiring Manager	
HR/Admin Focal Person	
Date	

3. Role Risk Assessment

[ ] Direct contact with children
[ ] Direct contact with vulnerable adults
[ ] Direct contact with persons with disabilities
[ ] Access to survivors or protection cases
[ ] Access to beneficiary selection or distribution
[ ] Access to sensitive personal data
[ ] Transport or field movement role
[ ] Supervisory or management authority
[ ] Procurement/finance authority
[ ] Community representation role
[ ] Low safeguarding contact role

Safeguarding risk level:

[ ] Low	[ ] Medium	[ ] High	[ ] Critical

4. Pre-Selection Checklist

[ ] Job description includes safeguarding and PSEA responsibilities
[ ] Vacancy notice includes safeguarding commitment statement
[ ] Selection criteria approved
[ ] Conflict of interest declarations completed by panel
[ ] Inclusive/non-discriminatory recruitment considered
[ ] Safeguarding interview questions prepared
[ ] Role risk level reviewed

5. Interview and Screening Checklist

[ ] Candidate interviewed by appropriate panel
[ ] Safeguarding and PSEA questions asked
[ ] Professional boundaries assessed
[ ] Child safeguarding awareness assessed where relevant
[ ] Disability inclusion awareness assessed where relevant
[ ] Confidentiality understanding assessed
[ ] Conflict of interest checked
[ ] Candidate willingness to sign Code of Conduct confirmed
[ ] Safeguarding concerns or red flags documented

6. Reference and Background Checks

[ ] Identity verified
[ ] Academic/professional documents reviewed
[ ] Reference check 1 completed
[ ] Reference check 2 completed
[ ] Previous conduct/safeguarding questions asked
[ ] Police/criminal/background check completed where legally available and role-relevant
[ ] Safeguarding declaration completed where required
[ ] No concerning information found
[ ] Concerning information reviewed by authorized management

7. Appointment Controls

[ ] Offer letter/contract includes safeguarding obligations
[ ] Code of Conduct signed before deployment
[ ] Policy acknowledgement signed
[ ] Safeguarding and PSEA induction completed
[ ] Probation or supervision plan agreed
[ ] Access to sensitive data restricted until orientation completed
[ ] High-risk role approved by management
[ ] Recruitment records stored confidentially

8. Concerns or Red Flags

Describe any concern, red flag, or additional safeguard required:

_____
_____
_____
_____
_____

9. Approval

HR/Admin Confirmation

Full Name	
Position / Role	
Organization / Department	
Signature	
Date	

Hiring Manager Approval

Full Name	
Position / Role	
Organization / Department	
Signature	

Date	

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Annex 9: Safeguarding Risk Assessment Template

Approved Date: 9 July 2023

1. Purpose of this Template

This Safeguarding Risk Assessment Template is used to identify, rate, reduce, monitor, and review safeguarding risks in EAO programs and activities, including risks related to PSEA, child protection, vulnerable adults, disability inclusion, harassment, discrimination, unsafe communication, data protection, distributions, transport, referrals, partnerships, and third-party engagement.

2. Project / Activity Information

Project / Activity Name	
Location	
Department / Program	
Target Group(s)	
Activity Description	
Assessment Date	
Prepared by	
Reviewed by	

3. Participants and Groups Potentially at Risk

[ ] Children	[ ] Women and girls
[ ] Men and boys	[ ] Persons with disabilities
[ ] Older persons	[ ] Vulnerable adults
[ ] Survivors of violence	[ ] Refugees
[ ] Internally displaced persons	[ ] Host community members
[ ] Staff / volunteers	[ ] Partners / contractors
[ ] Other: _____	

4. Safeguarding Risk Matrix

Identified Risk	Who May Be Affected	Likelihood L/M/H	Impact L/M/H	Existing Controls	Additional Mitigation Measures	Responsible Person & Deadline

5. Risk Areas to Consider

[ ] Sexual exploitation and abuse
[ ] Sexual harassment

[ ] Child abuse or unsafe child participation
[ ] Abuse or neglect of vulnerable adults
[ ] Disability exclusion or inaccessible services
[ ] GBV risk
[ ] Harassment, bullying, or discrimination
[ ] Retaliation risk
[ ] Misuse of power, resources, or beneficiary selection
[ ] Fraud, corruption, or aid diversion linked to safeguarding
[ ] Unsafe recruitment or weak supervision
[ ] Unsafe transport, accommodation, or field travel
[ ] Lack of accessible complaint channels
[ ] Weak referral pathway
[ ] Unsafe photos, videos, stories, or social media
[ ] Breach of confidentiality or data protection
[ ] Partner/contractor/supplier misconduct
[ ] Community pressure or informal settlement of serious cases

6. Overall Risk Rating

[ ] Low - existing controls sufficient
[ ] Medium - additional controls required
[ ] High - strong controls and management approval required
[ ] Critical - activity must be redesigned, postponed, or cancelled until risk is reduced

7. Approval for High-Risk Activities

High-risk approval required?	[ ] Yes [ ] No
Approved by	
Position	
Signature	
Date	
Conditions for approval	

8. Review and Follow-Up

Review Date	
Findings	
Additional Actions Needed	
Responsible Person	
Status	

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Annex 10: Training Attendance Sheet

Approved Date: 9 July 2023

1. Purpose of this Sheet

This Training Attendance Sheet documents participation in safeguarding, PSEA, Code of Conduct, child protection, disability inclusion, complaints and feedback, data protection, safe communication, partner safeguarding, or related training. It supports compliance, learning, and future training planning.

2. Training Information

Training Title	
Training Topic(s)	
Date	
Location	
Facilitator / Trainer	
Organization / Department	
Training Duration	
Language of Training	

3. Topics Covered

[ ] Safeguarding and PSEA Policy Manual	[ ] Code of Conduct
[ ] PSEA definitions and prohibited conduct	[ ] Child safeguarding
[ ] Protection of vulnerable adults	[ ] Disability inclusion and accessibility
[ ] Anti-harassment, bullying, and anti-discrimination	[ ] Safe recruitment
[ ] Complaint and feedback mechanism	[ ] Whistleblowing and confidential reporting
[ ] Incident reporting and response	[ ] Survivor-centered referral pathway
[ ] Data protection and confidentiality	[ ] Safe communication, photos, videos, and storytelling
[ ] Partnership and contractor safeguarding	[ ] Other:

4. Attendance List

No.	Participant Name	Position / Role	Organization / Dept.	Sex/Gender Optional	Phone/Email Optional	Signature	Remarks
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							

15							
16							
17							
18							
19							
20							

5. Training Evaluation Summary

[ ] Participants understood key safeguarding responsibilities
[ ] Participants understood duty to report
[ ] Participants understood confidentiality requirements
[ ] Participants requested further training
[ ] Follow-up action needed
[ ] No follow-up action needed

Trainer comments / follow-up needs:

_____
_____
_____
_____

6. Facilitator Confirmation

Full Name	
Position / Role	
Organization / Department	
Signature	
Date	

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Annex 11: Policy Acknowledgement and Signature Form

Approved Date: 9 July 2023

1. Purpose of this Form

This Policy Acknowledgement and Signature Form confirms that the person named below has received, read or had explained, understood, and agrees to comply with the EAO Safeguarding and PSEA Policy Manual, including the Code of Conduct, reporting obligations, confidentiality requirements, protection from retaliation, and consequences for violations.

2. Personal / Organizational Information

Full Name	
Position / Role	
Organization / Department	
Duty Station / Location	
Phone / Email	
Date of Receipt of Policy	

3. Acknowledgement Statements

[ ] I have received or been given access to the EAO Safeguarding and PSEA Policy Manual.
[ ] The policy has been explained to me in a language or format I understand.
[ ] I understand EAO zero-tolerance commitment to SEA, child abuse, harassment, discrimination, retaliation, and safeguarding misconduct.
[ ] I understand my duty to report safeguarding concerns immediately through approved channels.
[ ] I understand that I must protect confidentiality and personal data.
[ ] I understand that retaliation against reporters, survivors, witnesses, or whistleblowers is prohibited.
[ ] I understand that I must comply with safe communication, consent, and data protection rules.
[ ] I understand that violation of this policy may result in disciplinary, contractual, administrative, legal, or corrective action.

4. Questions or Clarifications Requested

Please note any section that requires further explanation or support:

_____

_____

_____

_____

5. Declaration and Signature

I confirm that I understand and agree to comply with the EAO Safeguarding and PSEA Policy Manual and all related safeguarding responsibilities.

Person Signing

Full Name	
Position / Role	
Organization / Department	

Signature	
Date	

EAO Witness / Supervisor

Full Name	
Position / Role	
Organization / Department	
Signature	
Date	

6. Office Use Only

[ ] Policy copy provided	[ ] Policy orientation completed
[ ] Code of Conduct signed	[ ] Safeguarding induction completed
[ ] Additional clarification required	[ ] Filed in personnel/partner record

Filed by	
Date filed	
Remarks	

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Annex 12: Partner/Contractor Safeguarding Commitment Form

Approved Date: 9 July 2023

1. Purpose of this Form

This Partner/Contractor Safeguarding Commitment Form is used for partners, consortium members, contractors, suppliers, consultants, service providers, vendors, and other third parties working with or on behalf of EAO. It confirms commitment to safeguarding, PSEA, child protection, disability inclusion, safe conduct, confidentiality, reporting, cooperation with reviews, and corrective action.

2. Partner / Contractor Information

Name of Organization / Individual	
Type of Engagement	[ ] Partner [ ] Consortium member [ ] Contractor [ ] Supplier [ ] Consultant [ ] Service provider [ ] Vendor [ ] Other
Contact Person	
Position	
Phone / Email	
Address / Location	
Project / Contract Reference	
Duration of Engagement	

3. Safeguarding Commitment

The partner/contractor confirms that it will ensure its personnel, representatives, subcontractors, and agents comply with EAO safeguarding expectations while working with or on behalf of EAO.

[ ] Prevent sexual exploitation and abuse and sexual harassment.
[ ] Protect children from abuse, exploitation, neglect, unsafe contact, and harmful communication.
[ ] Protect vulnerable adults and persons with disabilities from abuse, exploitation, neglect, discrimination, and exclusion.
[ ] Treat all people with dignity, respect, fairness, and non-discrimination.
[ ] Ensure assistance, services, employment, transport, referrals, and project benefits are never exchanged for sex, money, favors, loyalty, silence, or personal benefit.
[ ] Maintain professional boundaries with beneficiaries, children, vulnerable adults, staff, and communities.
[ ] Protect confidential information, personal data, complaint records, photos, videos, stories, and safeguarding information.
[ ] Report safeguarding and PSEA concerns promptly through agreed channels.
[ ] Protect complainants, survivors, witnesses, and whistleblowers from retaliation.
[ ] Cooperate with safeguarding reviews, incident response, investigations, corrective action, donor reporting, and legal obligations where required and safe.
[ ] Ensure relevant staff or representatives receive safeguarding briefing before community contact.
[ ] Comply with EAO safe communication and consent requirements before collecting or using photos, videos, or stories.

4. Minimum Conduct Rules

[ ] No SEA or sexual harassment

[ ] No sexual activity with children under 18
[ ] No abuse or neglect of children or vulnerable adults
[ ] No discrimination or harassment
[ ] No retaliation against reporters
[ ] No unauthorized sharing of confidential data
[ ] No use of EAO resources or authority for personal gain
[ ] No informal settlement or concealment of serious safeguarding concerns
[ ] No refusal to cooperate with authorized safeguarding processes

5. Reporting Contact and Procedure

EAO safeguarding/reporting contact	
Partner/contractor safeguarding contact	
Agreed reporting timeframe for serious concerns	Immediately / as soon as safely possible
Confidential reporting method	

6. Breach and Corrective Action

The partner/contractor understands that breach of safeguarding or PSEA standards may result in written warning, corrective action plan, mandatory training, increased monitoring, restriction of activities, suspension, removal of unsafe personnel, suspension of payment or funding where contractually justified, termination of agreement, donor notification, referral to authorities where required and safe, or exclusion from future engagement.

7. Declaration

I confirm that I am authorized to sign this commitment on behalf of the organization/individual named above. I confirm that we understand and agree to comply with EAO safeguarding and PSEA expectations.

Authorized Partner / Contractor Representative

Full Name	
Position / Role	
Organization / Department	
Signature	
Date	

EAO Representative

Full Name	
Position / Role	
Organization / Department	
Signature	
Date	

8. Office Use Only

[ ] Safeguarding clauses included in agreement/contract	[ ] Safeguarding briefing completed
[ ] Code of Conduct or commitment signed	[ ] Risk level assessed
[ ] Additional monitoring required	[ ] No additional monitoring required
[ ] Filed in procurement/partnership record	

EAO responsible officer	
Date filed	
Remarks	