



Prevention of Sexual Exploitation, Abuse & Harassment Policy

Details

Policy & Procedure Owner	CEO Office/ERFA Board	
Approved by	ERFA Board of Directors	
Date Approved	Date of Last Revision	Next Review
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Abbreviations

ACFID	Australian Council for International Development
ERFA	Edmund Rice Foundation Australia
PSEAH	Prevention of Sexual Exploitation, Abuse & Harassment
SEAH	Sexual Exploitation, Abuse & Harassment
SO	Safeguarding Officer
CHP	Complaints Handling Policy

Definitions

Associate	Anyone in the community who interacts with ERFA Staff and Partners
ACFID Member	A not-for-profit organisation that has obtained accreditation with ACFID
Donor	Members of the public including individuals or organisations who contribute to ERFA in cash or in kind
Partner	Any organisation which has an MOU / contract with / or receives funding from ERFA
Program	Programs are overarching development approaches and initiatives that set priorities and guide project outcomes, results and activities. Programs can comprise ministries or entities
Project	Projects are the development activities of a Program supported by ERFA
Beneficiary	Children and adults who participate in and benefit from ERFA-funded programs
Staff	Employees, contractors, subcontractors, outworkers, apprentices and trainees, work experience students, volunteers, employers and any other person who performs work for ERFA or ERFK

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Attached documents

- Safeguarding Incident Reporting Form
- ERFA Code of Conduct

Related policies

- Child Protection Policy
- Complaints Handling Policy

- Gender Equality & Female Empowerment Policy
- Whistleblowing Policy

Implementation plan

- Included as part of staff induction
- Included as part of briefing documents for all excursions and programs where staff/volunteers and contractors of ERFA are involved
- Specific reference to X in partnership agreements/funding contracts
- Incorporated in Program Design and Funding Application forms
- Specific reference in quarterly monitoring report templates and annual acquittal forms.
- All Staff involved in the handling, acceptance and management of donations, or involved in the organisation and delivery of fundraising activities on behalf of ERFA are to be instructed and supported in the implementation of this policy.

Compliance

This policy applies to all staff and associates that act for, represent or visit ERFA and ERFA funded programs. Failure by ERFA funded partners to fully comply with any aspect of this policy could result in immediate termination of funding.

Organisational overview

The Edmund Rice Foundation Australia (ERFA) believes education is the key to sustainable change. We are an international development organisation that focuses on sustainable and transformational education. We operate in some of the poorest communities in the world, including Africa, East Timor, the Philippines, and Papua New Guinea. We also run domestic programs in Australia. ERFA's goal is to design and implement high impact education programs that will enable our beneficiaries to stand independently and break free from the cycle of poverty. ERFA-funded education programs range from kindergartens to advanced microfinance projects and are designed with the needs of the community at their core.

Legal definitions

Edmund Rice Foundation (Australia) is a company limited by guarantee. The objects of the company are set out in clause 3 of ERFA's constitution. Clause 3 (f) reads as follows:

To develop partnerships with overseas aid agencies or formal arrangements with other delivery agents related to the Company but resident in Developing Countries for the implementation of the objects in paragraph (a).

One of ERFA's roles is to act as trustee of the Edmund Rice Overseas Aid Fund.

Throughout its policies and official documentation ERFA uses the term **Partners** for those organisations with which it has formed alliances in developing countries for the receipt of overseas aid funding for the in-country delivery of education programs. Whilst ERFA has an active, engaged and qualitative role with these programs, working to build capacity and maximise the impact of best practice development outcomes, these are not partnerships in the legal sense. Rather they are alliances that ERFA has formed with in-country organisations with whom ERFA has communicated its vision, mission, values, policies and expectations with respect to sustainable development and whose own vision, mission, values, policies and development goals are congruent with those of ERFA. The in-country organisations implement the programs and ERFA supports them.

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1.0 Policy overview

Edmund Rice Foundation (Australia) (ERFA) has zero tolerance for sexual exploitation, abuse and harassment (SEAH) and is committed to its prevention in ERFA workplaces and the sites where supported projects operate. All people have a right to live their lives free from SEAH, regardless of race, religion, ethnicity, indigeneity, disability, age, displacement, caste, gender, gender identity, sexuality, sexual orientation, poverty, class or socio-economic status. ERFA

The main objective of this prevention of sexual exploitation, abuse and harassment (PSEAH) Policy is to ensure the safeguarding of all people, especially vulnerable adults and children, both in preventing and responding to incidents of SEAH that affect domestic and international stakeholders. This PSEAH policy aims to:

- educate Staff, Partners and Associates about SEAH and promote a culture where everyone is committed to the prevention of SEAH;
- create an open and aware environment where concerns of SEAH can be raised and managed in a fair and just manner that protect the rights of all;
- provide guidance on how to respond to concerns and allegations of SEAH;
- adhere to local and international laws that prohibit SEAH.

This PSEAH Policy has been developed with a survivor-centred approach to SEAH.

1.2 Scope

This policy applies to all ERFA Staff, which includes all employees, contractors, subcontractors, outworkers, apprentices and trainees, work experience students, volunteers, employers and any other person who performs work for ERFA or ERFK. It also extends to the Programs that ERFA supports in developing countries and their associated management, staff, volunteers, contractors and governing authorities. Where necessary, this policy makes a distinction between internal processes that concern ERFA and ERFK Staff and external processes that concern ERFA's implementing Partners.

1.2 Links to other ERFA policies

There are two means via which a SEAH breach may come to the attention of ERFA:

- through the independent detection of ERFA or Program Staff;
- through the lodgement of a complaint that notifies ERFA of an observed or suspected safeguarding breach. Such a complaint could derive from within or outside the organisation (see Section 9.0).

For SEAH breaches that are brought to the attention of ERFA via the means of a complaint, this PSEAH Policy is to be read in conjunction with ERFA's Complaints Handling Policy (CHP). ERFA's CHP serves as the first point of contact for all formal complaints submitted to ERFA. A complaint deemed to concern a case of SEAH is to be categorised as a "high-risk" complaint. In line with the complaints handling process set out in the CHP, the CEO is to refer to this policy for guidance on how to proceed. For guidance on ERFA's complaints handling principles, the roles and responsibilities of ERFA Staff and Partners, and the complaints handling process of lodging, triaging, registering, responding to, and finalising complaints, please refer to ERFA's Complaints Handling Policy. For guidance on ERFA's approach to processing internal complaints lodged by an ERFA Staff member, please refer to ERFA's Whistleblowing Policy.

2.0 ACFID context

The ACFID Code of Conduct requires that members have in place a PSEAH Policy that satisfies the following conditions as a minimum:

- 1.5.1 demonstrate an organisational commitment to the prevention of sexual exploitation and abuse, through a survivor-centred approach;
- 2.3.1 demonstrate an organisational commitment to gender equality and equity;

- 4.2.2 assess and manage risk in development and humanitarian initiatives;
- 5.1.2 undertake due diligence and capacity assessments of Partners;
- 7.3.3 enable stakeholders to make complaints in a safe and confidential manner;
- 7.4.4 governing body is informed of, and responds to serious incidents in accordance with their mandate and responsibilities;
- 9.3.1 fair, transparent and non-discriminatory in management of staff and volunteers;
- 9.3.3 manage the performance and grievances of staff and volunteers in a fair and transparent manner;
- 9.4.1 specify the expectation of professional conduct of all staff and volunteers.

This PSEAH Policy completely satisfies these conditions.

3.0 Defining SEAH

3.1 Sexual harassment

A person sexually harasses another person if the person makes an unwelcome sexual advance or an unwelcome request for sexual favours, or engages in other unwelcome conduct of a sexual nature, in circumstances in which a reasonable person, having regard to all the circumstances, would have anticipated the possibility that the person harassed would be offended, humiliated or intimidated. Sexual harassment can take various forms. It can be obvious or indirect, physical or verbal, repeated or one-off and perpetrated by any person of any gender towards any person of any gender. Sexual harassment can be perpetrated against beneficiaries, community members, citizens, as well as staff and personnel.

3.2 Sexual exploitation

Any actual or attempted abuse of a position of vulnerability, differential power, or trust for sexual purposes. It includes profiting monetarily, socially, or politically from sexual exploitation of another.

3.3 Sexual abuse

The actual or threatened physical intrusion of a sexual nature, whether by force or under unequal or coercive conditions. It covers sexual offences including but not limited to: attempted rape (which includes attempts to force someone to perform oral sex); and sexual assault (which includes non-consensual kissing and touching). All sexual activity with someone under the age of consent (in the law of the host country or under Australian Capital Territory law [16 years], whichever is greater) is considered to be sexual abuse.

3.4 Child sexual abuse

When a child is used by another child, adolescent or adult for their own sexual stimulation or gratification. Sexual abuse involves contact and non-contact activities which encompasses all forms of sexual activity involving children, including exposing a child to online child sexual exploitation material, or taking sexually exploitative images of children (see ERFA's Child Protection Policy for more information).

3.5 Transactional sex

The exchange of money, employment, goods or services for sex, including sexual favours.

3.6 Fraternalisation

Any relationship that involves, or appears to involve, partiality, preferential treatment or improper use of rank or position including but not limited to voluntary sexual behaviour. It could include sexual behaviour not amounting to intercourse, a close and emotional relationship involving public displays of affection or private intimacy and the public expression of intimate relations.

3.7 Adults

Individuals over the age of 18.

3.8 Survivor

A person who is the alleged subject of sexual harassment, abuse or exploitation.

4.0 Guiding principles

ERFA's guiding principles that govern this PSEAH Policy are as follows:

zero tolerance of SEAH and zero tolerance of inaction towards incidents of SEAH;

- shared responsibility;
- gender equality;
- accountability and transparency;
- survivor-centred approach.

4.1 Legislation

This PSEAH Policy adheres to the following guiding principles and Commonwealth Legislation:

- Criminal Code Act 1995. An Australia citizen or resident can be prosecuted for a sexual offence against a child in another country under laws that have extra-territorial application.
 - Division 272 (child sex offences outside Australia)
 - Division 273 (offences involving child pornography material or child abuse material)
- Criminal Act 1914. This law sets out the laws that govern the way legal proceedings under the Criminal Code Act 1995 are conducted including the conduct of investigations and the protection of children involved in proceedings for sexual offences.
- Combatting Child Sexual Exploitation Legislation Amendment Act 2019.
- Sex Discrimination Act 1984 (Division 3). This law sets out what constitutes sexual harassment and the Criminal Code applies to all offences against the Sex Discrimination Act.
- The Convention on the Elimination of All Discrimination Against Women states women's rights from sexual exploitation (article 6).

5.0 Roles and responsibilities

This policy designates the difference between the roles of ERFA Staff and the Safeguarding Officer (SO). The responsibilities of the SO differ from regular Staff in important ways. Generally, the SO is responsible for creating their own Program-specific PSEAH Policy and educating their Staff member's compliance with it. Each Project that funds must designate at least one SO.

5.1 Responsibilities of ERFA Staff

The responsibilities of ERFA Staff are as follows:

- sign ERFA's Code of Conduct;
- adhere to ERFA's PSEAH Policy;
- complete PSEAH training as instructed by the ERFA SO;
- report any witnessed, suspected or alleged incidents of SEAH in accordance with the Safeguarding Incident Reporting Form;
- comply with the relevant criminal record checks as part of the employee screening process.

5.2 Responsibilities of Partner Staff

The responsibilities of Partner Staff are as follows:

- adhere to their Program-specific PSEAH Policy;
- complete PSEAH training as instructed by their Project's SO;
- report any witnessed, suspected or alleged incidents of SEAH in accordance with their designated reporting form;
- comply with criminal record checks as part of the employee screening process.

5.3 Responsibilities of the ERFA SO

The responsibilities of the ERFA SO are the same as for ERFA Staff as well as the following:

- monitor their Staff's compliance towards ERFA's PSEAH Policy;
- apply employee screening processes to Staff (see Section 6.0);
- provide regular PSEAH training for their Staff;
- consult the ERFA Board about reported or detected SEAH incidents.

5.4 Responsibilities of Partner CPOs

The responsibilities of Partner CPOs are the same as for Partner Staff as well as the following:

- create a Program-specific PSEAH Policy and update it when necessary;
- monitor their Staff's compliance towards the policy;
- apply employee screening processes to Staff (see Section 6.0);
- provide regular PSEAH training for their staff;
- report to their Governing Authority and the ERFA CEO within 24 hours any witnessed suspected or alleged incident of SEAH (see Section 9.0);
- comply with ongoing PSEAH monitoring by ERFA.

Section 1: Preventing SEAH incidents

6.0 Staff employment procedures

Job applicants wishing to work at ERFA directly, or in one of our domestic or overseas Partner organisations, either in the capacity as an employee, contractor, subcontractor, outworker, apprentice or trainee, work experience student, volunteer, or any other position which helps ERFA and its network deliver organisational services, are required to undergo relevant referee and criminal record screenings.

ERFA is committed to safe recruitment, selection and screening practices. The practices aim to recruit the safest and most suitable people to work in our programs. Our employment practices include:

- promoting our commitment to PSEAH on our website, in promotional materials and in all job advertisements;
- providing job applicants with a copy of ERFA's PSEAH Policy and ensuring they are aware of ERFA's screening requirements for job applicants;
- providing a comprehensive job description that includes PSEAH selection criteria for all Staff positions;
- incorporating issues relevant to PSEAH in staff performance reviews;
- subjecting all Staff to a probationary period depending on the length of their contract;
- providing training on SEAH to Staff;
- refusing or terminating the employment of any Staff who pose a risk.

7.0 Standards of Behaviour

All ERFA representatives and implementing partner personnel are responsible for establishing and maintaining clear professional boundaries that serve to protect all persons from misunderstandings or a violation of professional relationships.

7.1 Prohibited Behaviours

All ERFA Staff and Partners must refrain from:

- discussing sexual topics with personnel;
- physically touching personnel in a manner that is inappropriate or sexually suggestive;
- taking photographs of personnel without their free and informed consent;
- engaging in transactional or exploitative sex, regardless of the local or national laws;
- engaging in fraternisation
- engaging in any relationship between any combination of ERFA personnel, Partners, stakeholders or beneficiaries;
- engaging in sexually abusive or exploitative relationships;
- using language or behaviour that is inappropriate, harassing, abusive, sexually provocative, demeaning or culturally inappropriate;
- sharing personal contact details with ERFA beneficiaries;
- failing to take action to prevent and/or manage risk of suspected or known SEAH incidents
- using ERFA IT systems or devices to access, store, send or publish: pornographic, sexually exploitative images or texts of any nature;

7.2 Proactive Behaviours

Separate from the explicit responsibilities that all ERFA Staff and Partners must adhere to, the following recommended behaviours are intended to build a strong culture that precludes the possibility of SEAH occurring.

Many of these behaviours are developed from the belief that SEAH often develops subtly. More conspicuous forms of sexual exploitation and abuse will likely grow out of acts of unchecked sexual harassment. The following proactive behaviours are intended to terminate more inconspicuous forms of sexual harassment or intimidation when they first occur and to prevent them from escalating.

All ERFA Staff and Partners should:

- listen to the views of the people within the communities they work;
- inform and educate communities of their rights
- inform communities of the behavioural conduct they should expect from ERFA personnel;
- be conscious of various types of power imbalances, including but not limited to gender, age, ability, authority and economic;
- prevent any stakeholder from abusing a power imbalance over someone else;

ERFA Staff and Partners should avoid:

- commenting on people's physical appearance;
- entering peoples' close personal space;
- providing or soliciting favours from personnel;
- forming online relationships with personnel (especially children).

Section 2: Detecting SEAH incidents

8.0 Monitoring Partner compliance

ERFA works continuously with its Partners to proactively recognise, assess and manage PSEAH risks. ERFA commits to strengthening its Partners' ability to safeguard adults, children and vulnerable individuals by investing in targeted capacity building, training and awareness raising on PSEAH. This is achieved by examining each program and its potential risk on an ongoing basis. ERFA reserves the right to terminate funding with a Partner if they breach this PSEAH Policy.

8.1 Initial PSEAH risk assessment

ERFA conducts an initial CP risk assessment for every program as part of their funding application. As contained in our Funding Application Form, applicants are required to:

- upload their Program-specific PSEAH Policy. Programs without an active policy will not be approved for ERFA support;
- specify the date of their most recent policy review;
- specify the date of their most recent PSEAH training;
- indicate that they have read and are familiar with ERFA's PSEAH Policy.

8.2 Quarterly PSEAH risk assessment

In addition, ERFA monitors the PSEAH compliance of its funded Partners on a quarterly basis. As contained in our Quarterly Report, Partners are required to:

- indicate whether a SEAH incident occurred during the quarter;
- specify the actions taken if a SEAH incident occurred. Indicate whether ERFA was informed of the incident within 24 hours in accordance with ERFA's Safeguarding Reporting Form;
- indicate whether PSEAH training was conducted during the quarter;
- if training was conducted, upload the materials used and other certification that specifies the date the training was conducted, the names of participant and the credentials of trainers or the facilitating organisation;
- indicate whether any updates have been made to their PSEAH policy and to provide ERFA with the updated version.

If a Project Partner has indicated that a SEAH incident occurred in their Quarterly Report submission, an ERFA assessor will verify ERFA's internal records to verify whether a record of the SEAH incident exists and whether it was reported in accordance with ERFA's Safeguarding Incident Reporting Form. If there is an error in the incident reporting process, such as a lack of detail in the form, an inconsistency between ERFA's internal records and the Partner's Quarterly Report submission, an uncompleted step in the Reporting Process or any other insufficiency that raises the concern of the assessor or breaches this PSEAH Policy, the assessor will contact the Partner advising as such and submit a notice of the error to ERFA's Board of Advisors. In the event of a major error in a Partner's PSEAH incident reporting, for example, a failure to notify ERFA within 24 hours of a reported SEAH incident, ERFA may have to terminate funding with the Partner.

8.3 Field monitoring

ERFA conducts in-person monitoring visits of its Partners. In-person monitoring assesses Partners on their Program-specific PSEAH Policy; incident reporting process; risk assessment and management; recruitment, screening and employment; and privacy. Field monitoring is conducted on a random basis so Partners don't have time to prepare in advance.

9.0 Receiving complaints of SEAH safeguarding incidents

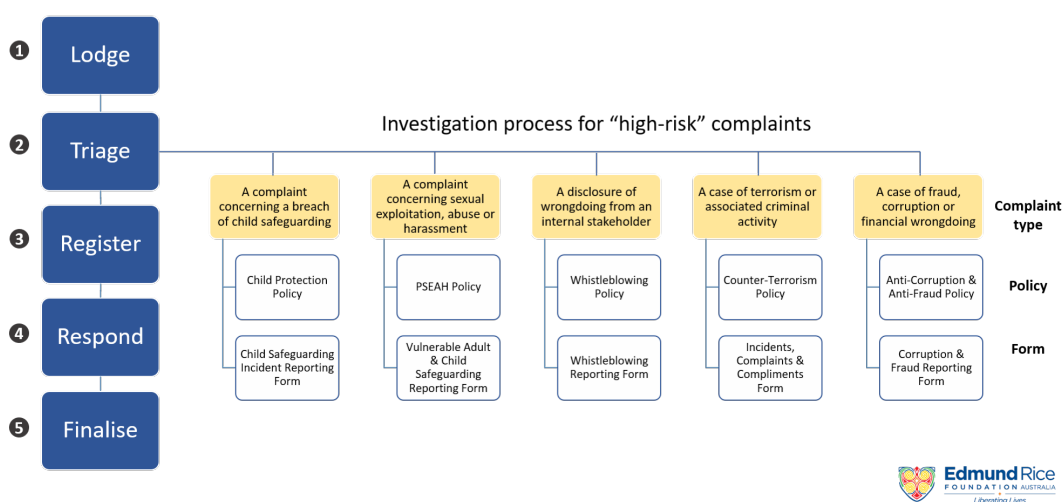
9.1 Links with ERFA’s Complaints Handling Policy

ERFA’s Complaints Handling Policy (CHP) is the first point of contact for all formal complaints submitted to ERFA regarding its domestic operations or those of its partner programs. ERFA’s CHP specifies 5 stages through which complaints are processed: 1. Lodge, 2. Triage, 3. Register, 4. Respond and 5. Finalise. During the second “Triage” stage, a complaint will be classified as “high-risk” if it concerns, among other matters, a child safeguarding incident. Once this classification is made, the ERFA CEO is required to refer to this PSEAH Policy for guidance on how to proceed with registering, responding to and finalising the complaint.

The process by which the ERFA CEO first consults ERFA’s CHP in the first 2 steps of the Complaints Handling Process, and then escalates the complaint to a “high risk” category is illustrated below.

Complaints Handling Process Flowchart:

Complaints handling flowchart



9.2 Registering SEAH safeguarding complaints

The reporting document is the Safeguarding Incident Reporting Form. It is a requirement that a record be made within 24 hours of receiving a complaint concerning SEAH. This is to be done using Section 1 of the Safeguarding Incident Reporting Form: Initial Incident Report (see Section 11.0). It is the responsibility of the CEO, the Programs Director and the Programs, Policy & Risk Officer to oversee and manage the completion of the Safeguarding Incident Reporting Form. A record of the case is also to be made in the PSEAH Incident section of the Incidents, Complaints and Compliments Register (ICCR) as required (see Section 12.0). It is the responsibility of the CEO and the Programs Director to record SEAH in the ICCR and to ensure the record is continuously updated throughout the course of an investigation process.

9.3 Protecting complainants

ERFA takes particular care to protect the rights, needs and wishes of complainants. Reports of a suspected SEAH incident will be handled confidentially and the identity of the person making the report will not be revealed to the accused without their consent. Nor will any person making such report be penalised in any way. A complainant reserves the right to request that they remain anonymous during an investigation.

9.4 Responding to SEAH safeguarding complaints

The complainant will be informed that their complaint is being handled. If the complainant has provided their contact details, ERFA will provide them with regular updates throughout the

investigation procedure. The frequency and timeframe of such updates will vary depending on the subject matter of the disclosure.

For ERFA's process in handling the substance of SEAH incidents, including those detected internally or externally, see Section 3: Responding to SEAH incidents.

9.5 Finalising SEAH complaints

A report will be prepared for the Board when the investigation is complete and the case closed. This is to be done using Section 3 of the Child Safeguarding Incident Reporting Form: Remediation Procedures and Lessons Learned (see Section 14.0). It is the responsibility of the CEO and the Programs Director to oversee and manage the completion of the Safeguarding Incident Reporting Form. The report will be provided to the complainant, including, if necessary, any applicable confidential stipulations.

Section 3: Responding to SEAH incidents

10.0 Escalating SEAH safeguarding incidents

There are 2 identified means through which a SEAH incident may come to the attention of ERFA and/or its implementing Partners:

- through independent detection and monitoring;
- through the lodgement of a complaint that notifies of an observed or suspected SEAH safeguarding incident.

In either of these circumstances, the appropriate escalation procedures are to be followed and the Safeguarding Incident Reporting Form is to be filled out. It is a requirement that ERFA and Program Staff report all witnessed or suspected incidents of child safeguarding. This includes but is not limited to:

- any disclosure or allegation regarding SEAH;
- any observation or concerning behaviour that breaches ERFA's Code of Conduct & Self-Declaration Form;
- Staff engaging in suspicious behaviour that could be associated with sexual exploitation or human trafficking.

10.1 Escalating SEAH incidents domestically

- The first point of contact that ERFA Staff must report SEAH incidents to is the ERFA CEO who serves the position of Safeguarding Officer. ERFA Staff do not reserve the right to dismiss potential SEAH incidents. From the point an ERFA Staff member first becomes aware of a SEAH incident, they have 24 hours to report the matter to the ERFA CEO.
- The ERFA CEO, in consultation with the ERFA Board of Directors will determine how to ensure the immediate wellbeing of the survivor, whether an investigation into the incident is necessary, and if so, how to proceed with an investigation (see Sections 13.0, 14.0 and 15.0).

10.2 Escalating SEAH incidents internationally

- The first point of contact that Partner Staff must report SEAH incidents to is their Project's SO. Partner Staff do not reserve the right to dismiss potential SEAH incidents. From the point a Partner Staff member first becomes aware of a SEAH incident, they must immediately report the matter to their Project CPO.
- The SO is obliged to report the incident to their Governing Authority and the ERFA CEO within 24 hours of the incident having first been detected, as all SEAH incidents, whether confirmed or alleged, are "high-risk" incidents. Partner SOs do not reserve the right to dismiss potential SEAH incidents.
- The ERFA CEO, in consultation with the Governing Authority, Project Manager and SO of the relevant Project, will determine how to ensure the immediate wellbeing of the survivor, whether an investigation into the incident is necessary, and if so, how to proceed with an investigation (see Sections 13.0, 14.0 and 15.0).

10.3 Escalating SEAH incidents to DFAT

Where a SEAH incident is raised concerning an ERFA Project that uses DFAT funds, DFAT are to be notified of the incident by the ERFA CEO within 24 hours of the ERFA CEO becoming aware of the incident.

11.0 Reporting SEAH incidents

Formal reporting is to be completed by filling out the Safeguarding Incident Reporting Form and submitting it to ERFA at ceo@erf.org.au. It is the responsibility of the ERFA CEO/ the ERFA SO and the Program's Director, together with the cooperation of the ERFA Board of Directors, to manage and oversee the completion of all sections of the form (See Section 5.0).

Transparent, structured reporting is crucial for cases of SEAH which can change rapidly. This is especially important for instances where ERFA decides to conduct their own internal investigation into a case, for example, if new information comes to light, or if the ERFA CEO is not satisfied with the external investigation conducted by an overseas Governing Body. In these instances, a secondary investigation process can build off the foundations already created by early reporting.

11.1 Section 1 – initial report

Section 1 – initial report is to be submitted within 24 hours of a SEAH incident first being detected. It is used to record basic facts about the witnessed or suspected incident.

It is a requirement that Section 1 – incident report of the Safeguarding Incident Reporting Form be completed for all SEAH incidents. This is regardless of the decision reached from deliberations with the ERFA CEO, the ERFA Board of Directors and implementing Partners.

If there are multiple credible witnesses or sources of knowledge about a SEAH incident, multiple incident forms are to be completed. For domestic cases, it is the responsibility of the ERFA CEO to oversee the completion of the incident report by the relevant Staff member. For international cases, it is the responsibility of the CPO to oversee the completion of the incident report by the relevant Project Staff member.

The ERFA CEO reserves the right to fill out an initial report that consolidates all known information or that is based on the testimonies of multiple sources.

11.2 Section 2 – investigation

Section 2 – investigation is to be filled out throughout the course of an investigation as required, for example, as new information comes to light.

11.3 Section 3 – remediation procedures and learnings

Section 3 – remediation procedures and learnings is to be completed when an investigation into an incident of child safeguarding has been closed and ERFA deems the case finalised.

12.0 Survivor-centred approach

ERFA uses a survivor-centred approach to SEAH, to prioritise the rights, needs, wishes and empowerment of the survivors of SEAH in both the prevention of and response to SEAH.

12.1 Responding to a disclosure by a survivor

ERFA appreciates that responding to a SEAH incident may be a difficult and sensitive situation. To assist ERFA and Partners Staff to correctly adhere to reporting procedures, the following helpful steps have been provided:

When a person's discloses they are being harmed you can show your care and concern for them person by:

- listening carefully;
- telling the person you believe them;
- telling the person it is not their fault and they are not responsible for the SEAH;
- telling the person you are pleased they told you.

You will not be helping the survivor if you:

- make promises you cannot keep, such as promising that you will not tell anyone;
- push the person into giving details of the abuse. Your role is to listen to what the person wants to tell you and not to conduct an investigation (beware of asking ^[1]_{SEP} any leading questions as this may prejudice any subsequent investigation);
- indiscriminately discuss the circumstances of the person with others not directly involved.

Try to obtain some details such as:

- where the SEAH is taking place: at school, home, work etc.;
- whether it is currently occurring or did occur in the past;
- the name of the perpetrator.

It is possible that some people will make a disclosure and then ask you not to tell anyone. If you are not already performing one of these positions it is important that you seek guidance from your SO, Program Manager or equivalent and/or the ERFA Chief Executive Officer in Australia to discuss how the person can be supported and the disclosure managed.

12.2 Ensuring the survivor's wellbeing

Once an allegation is made there should be an immediate response that protects the survivor from further potential abuse or victimisation. The person may require medical assistance or counselling support. Where possible the survivor should remain in their place of residence or relevant program. Exceptions may be made where the survivor is deemed to be at risk of victimisation by peers because of the allegation or because the alleged abuse has occurred in home-based care. If the person is in immediate danger, you should make arrangements for them to go to a safe place.

12.3 Preliminary remedial actions

The best interest of the survivor may warrant the standing down of a Staff member. The Program Manager should advise their course of action in writing to the ERFA CEO. Any staff member stood down in this manner continues to receive full pay; this measure recognises that that the member is entitled to a just process that does not pre-judge guilt or innocence. Any volunteers who are stood down should similarly receive any reasonable reimbursement of costs.

13.0 Registering SEAH safeguarding incidents

13.1 Incidents, Complaints and Compliments Register

A record of cases of SEAH misconduct are also to be made in the SEAH section of the Incidents, Complaints and Compliments Register (ICCR). It is the responsibility of the CEO and the Programs Director to record cases of SEAH in the ICCR and to ensure the record is continuously updated throughout the course of an investigation process. Fields required to be filled out by the person managing the ICCR record include:

- whether it is currently occurring or did occur in the past;
- date received;
- date of incident;
- program name;
- project name;
- person(s) to whom allegations are being made;
- summary of incident;
- involved parties;
- completion of Safeguarding Reporting Form section 1;
- estimation of financial losses;
- information to collect in an investigation;
- externally referred;
- completion of Safeguarding Reporting Form section 2;
- remediation procedures undertaken;
- outstanding issues;
- date closed;
- location of case in Sharefile;
- completion of Safeguarding Reporting Form section 3.

13.2 Filing of documentation

Together with the formal reporting mechanisms of Safeguarding Incident Reporting Form and the Incidents, Complaints and Compliments Register, informal documentation regarding a case, including emails, meeting minutes with Program Governing Bodies, meeting minutes with the ERFA Board of Directors and witness reports, are to be filed in ERFA's designated database, Sharefile. It is the responsibility of the CEO to file documentation relevant to a case of SEAH. They reserve the right to delegate this task to the Programs Director or the Programs, Policy & Risk Officer (see Section 5.0).

14.0 Investigating SEAH safeguarding incidents

- The ERFA CEO will consult with the Program Manager and SO of the Program concerned to ascertain the details of the incident.
- The ERFA CEO will liaise with the ERFA Board to determine a course of action.
- The ERFA CEO will contact the Governing Body of the Program to request they conduct an investigation into the incident. The ERFA CEO will provide guidance to the Program's Governing Body as required to assist with an investigation.
- The ERFA CEO will continue to liaise with the Governing Body on a regular basis to discuss outcomes of the investigation.
- The ERFA CEO will file all relevant documentation regarding the case, including emails, meeting minutes with the Program's Governing Body, meeting minutes with the ERFA Board of Directors in ERFA's designated database, Sharefile.
- At the completion of the investigation conducted by the Program's Governing Body, if the ERFA Board of Directors is dissatisfied with any aspect of the investigation, including its conduct and recommended remediation procedures, they reserve the right to initiate a separate investigation.

The investigation processes will depend on the unique context of the case involved. Below are some recommended steps to be undertaken during a SEAH incident investigation:

- temporarily standing down Staff members involved in an investigation;
- interviewing the person/persons who made the allegations or other witnesses to gather more information with which to make a decision about the allegation;
- reporting to local police when it is suspected or becomes clear that a crime has been committed, subjected to the wishes of the survivor;
- handling the concern internally if it is not a criminal matter;
- providing ongoing support to all stakeholders (including the reporter) as necessary.

14.1 Confidentiality

Confidentiality is a key principle of reporting and managing child protection concerns. The details of a SEAH incident or investigation must only be shared with the designated Program Manager Program SO, Province Leader, Province SO, ERFA CEO, ERFA Programs Director and ERFA Programs, Policy & Risk Officer. The names of people involved in a case will remain confidential knowledge held only by the Program Manager and Program SO. This identifying information will be divulged only on a "need to know" basis, or when required by Australian or overseas law, or when a report to police or child protection authorities is made.

ERFA will treat all concerns raised seriously and ensure all parties are treated fairly per the principles of natural justice. All reports will be handled professionally, confidentially and expediently. All reports made in good faith will be viewed as being made in the best interests of the survivor, regardless of the outcome. ERFA will protect the interests of anyone reporting SEAH in good faith. The rights and welfare of the survivor are of prime importance. Every effort will be made to protect the rights and safety of the survivor throughout the investigation.

15.0 Remedial actions

Disciplinary action will be taken against any Staff member who is discovered to:

- have failed to report a SEAH concern;
- have intentionally made a false allegation;
- have made a serious breach of the PSEAH Policy (minor breaches may result in action such as refresher ^[1]_{SEP} training or increased supervision).

Disciplinary action may include the following sanctions:

- ERFA personnel: disciplinary action/dismissal;
- ERFA Partners: up to and including termination of all relations, including contractual and partnership agreements with ERFA;
- Associates: termination of an ongoing relationship;
- where relevant and with survivors' consent: reporting to authorities.

16.0 PSEAH education

ERFA is committed to educating Staff about this PSEAH Policy, in particular, how to reduce risks and prevent SEAH. ERFA is committed to undertaking capacity building and training in PSEAH with all Partners who work with us, with specific regard to ERFA's Gender Equality and Female Empowerment Policy. ERFA also seeks to instil PSEAH practices at every level of its organisation: this includes providing information about PSEAH in the communities of ERFA programs.

17.0 Policy review

ERFA's PSEAH Policy will be reviewed every three years. ERFA's CEO will manage the review of the PSEAH Policy. Any changes made to the Policy will be signed off by ERFA management and the Board.

ERFA will review the individual PSEAH Policy of its Partners each year upon the submission of their Program Design and Funding Application. How a Partner implements its PSEAH Policy will be monitored on a quarterly basis through scheduled acquittal reporting. Field monitoring and program visits will take place on a random basis as an additional measure to ensure PSEAH Policy compliance.