

POLICY



Protection from Sexual Exploitation and Abuse and Harassment Policy

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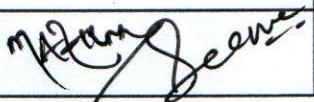
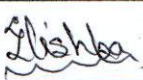
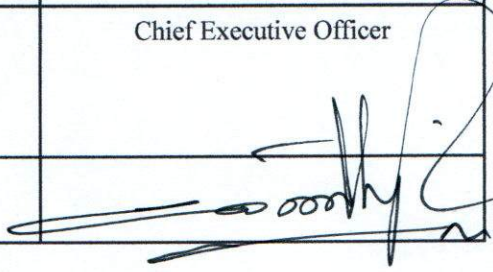
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1. Introduction

1.1.1 Overview:

The Sindh Integrated Emergency and Health Services (SIEHS) Policy on Preventing Sexual Exploitation and Abuse (PSEAH) is a comprehensive framework designed to uphold the highest standards of safety, integrity, and respect within the organization. This policy articulates a zero-tolerance stance on SEAH, outlining the responsibilities of all members—from leadership to front-line staff—in preventing, reporting, and addressing any instances of exploitation and abuse. It incorporates best practices aligned with international standards, including mandatory training, a clear code of conduct, accessible reporting mechanisms, and stringent investigative procedures. The policy also emphasizes survivor support, accountability measures, and the creation of a culture that actively opposes SEAH. Through regular audits and community engagement, SIEHS ensures ongoing commitment to a safe environment for staff, beneficiaries, and the broader community.

1.1.2 Importance Of SEAH Prevention and Response:

Preventing and responding to sexual exploitation and abuse (SEAH) is essential for maintaining the trust and safety of SIEHS's beneficiaries, staff, and partners. SEAH inflicts significant harm on individuals and undermines the organization's integrity and reputation, particularly in the healthcare sector where trust is crucial to effectively carrying out SIEHS's mission. Addressing SEAH is not merely a legal or ethical obligation but a core aspect of human rights, ensuring that all individuals feel secure, respected, and valued. By instituting comprehensive SEAH prevention measures and providing clear, accessible channels for reporting and responding to incidents, SIEHS affirms its commitment to upholding the dignity and rights of every person it serves, thereby fostering a safe and respectful environment.

1.1.3 Sexual Abuse:

Sexual abuse is defined as the actual or threatened physical intrusion of a sexual nature, whether through force or under conditions of unequal power or coercion. This encompasses a wide range of behaviors, from non-consensual physical acts of a sexual nature to forced sexual activities. Such actions violate an individual's dignity, autonomy, and physical integrity and are unequivocally prohibited under the SIEHS PSEAH Framework. Sexual abuse can occur regardless of gender, age, or social status, and it typically involves a significant power imbalance between the perpetrator and the survivor. The organization is committed to enforcing strict measures to prevent and address sexual abuse, ensuring a safe and respectful environment for all individuals.

2. Policy Objectives

The objective of this Sexual Misconduct and Harassment Policy at SIEHS is to foster a safe, respectful, and inclusive work environment for all employees. This policy aims to:

1. **Prevent Misconduct:** Establish clear guidelines and standards to prevent occurrences of sexual misconduct and harassment within the organization.
2. **Provide a Framework:** Offer a structured framework for reporting, investigating, and resolving allegations of sexual misconduct and harassment in a fair and transparent manner.
3. **Support Victims:** Ensure that victims of sexual misconduct and harassment receive appropriate support, protection, and resources to address and resolve their concerns.
4. **Promote Accountability:** Hold all employees accountable for their actions and reinforce the organization's commitment to upholding the highest standards of conduct.
5. **Enhance Awareness:** Educate employees about their rights and responsibilities under this policy and the procedures for reporting and addressing incidents of misconduct and harassment.

Through the implementation of this policy, SIEHS seeks to maintain a work environment that is free from harassment and misconduct, where all employees feel valued and respected.

3. Implementation of SEAH Guidelines:

The SIEHS PSEAH Framework aims to prevent and address Sexual Exploitation and Abuse (SEAH) by establishing clear reporting protocols, mandating staff training, and integrating SEAH prevention into all organizational operations. It emphasizes confidentiality, fairness, and a survivor-centered approach. The framework is designed to reduce SEAH risks and ensure swift, effective responses, with provisions for regular updates based on best practices and stakeholder feedback.

3.1.1 Creating a Secure Environment:

A key goal of the PSEAH Framework is to create a secure environment by fostering a culture of respect, dignity, and zero tolerance for SEAH within SIEHS. All staff, volunteers, and partners are expected to uphold the organization's code of conduct and engage in ongoing training and awareness programs to support this environment. A secure environment at SIEHS ensures that everyone can report concerns or incidents of SEAH without fear of retaliation or stigma. To achieve this, SIEHS provides multiple confidential reporting channels, including in-person, online, and through dedicated hotlines or email addresses. The organization also ensures that survivors have access to essential support services, including medical care, counseling, and legal assistance.

3.1.2 Establishing a SEAH Prevention and Response Framework

The PSEAH Framework at SIEHS aims to prevent and effectively address Sexual Exploitation and Abuse (SEAH) by educating and empowering the community through training and awareness campaigns and integrating SEAH prevention into all policies. It ensures serious and careful handling of SEAH allegations, defining clear roles for the Complaint Review Committee and other bodies in investigations. The framework prioritizes a survivor-centered approach, providing confidential reporting options, ensuring the survivor's safety and well-being, and enforcing appropriate disciplinary actions against perpetrators.

4. Scope of application

4.1.1 Who the Policy Applies To?

Scope of the PSEAH Policy:

The Protection from Sexual Exploitation and Abuse (PSEAH) policy applies to all individuals associated with the organization, including:

- **All Staff Members:** Full-time, part-time, and temporary employees, as well as consultants, interns, and volunteers.
- **Related Personnel:** Individuals indirectly associated with the organization, such as contractors, suppliers, and partners, including those involved in funded projects.
- **Beneficiaries and Community Members:** Individuals receiving the organization's services, including patients, clients, and community members in operational areas.
- **Stakeholders:** Board members, donors, and others involved in the organization's activities or decision-making processes.

5. Policy Statement

5.1.1 Zero Tolerance Policy

The organization implements a Zero Tolerance Policy for Sexual Exploitation and Abuse (SEAH), which mandates:

- **Strict Consequences:** Any individual found to be involved in SEAH will face severe disciplinary actions, including termination of employment or contracts, and may be subject to legal action.
- **Non-Negotiable Stance:** SEAH is unequivocally prohibited, with no exceptions or excuses accepted.
- **Reporting and Accountability:** The organization actively encourages the reporting of SEAH incidents, and ensures all reports are taken seriously, thoroughly investigated, and handled with full confidentiality and respect for the victims.

5.1.2 SEAH as Serious Misconduct

Policy on Sexual Exploitation and Abuse (SEAH) as Serious Misconduct

Sexual Exploitation and Abuse (SEAH) are classified as Serious Misconduct within the organization. This policy stipulates:

- **Breach of Trust and Ethics:** SEAH is a grave violation of the organization's ethical standards and undermines the integrity of its mission.
- **Severe Disciplinary Measures:** Any involvement in SEAH will result in immediate dismissal and may also lead to legal action. The organization is committed to taking swift and decisive action against those found guilty.
- **Mandatory Reporting:** All staff and related personnel are required to report any suspected or actual SEAH. And incase if the incidence is reported falsely and based on distorted facts and figures, will be considered complicity and will result in disciplinary action as per zero tolerance policy. (All the cases that will be highlighted will be reported to UNICEF's relevant stakeholders.

5.1.3 Rights-Based Approach to SEAH

The organization implements a Rights-Based Approach to Addressing Sexual Exploitation and Abuse (SEAH) as follows:

- **Respect for Victims' Rights:** The organization is committed to respecting the rights of victims, including their rights to safety, dignity, privacy, and access to justice.
- **Victim-Centered Support:** The organization will provide comprehensive support services and help them to guide them through about the procedures to taking relevant services be it, legal, psychological, financial, medical, and social.
- **Empowerment and Participation:** The organization will empower victims to participate in the SEAH response process, involving them in decisions that affect their lives and ensuring their voices are heard and respected.

6. Commitment to PSEAH

6.1.1 Commitment to a Safe Environment

Policy on Maintaining a Safe Environment Free from Sexual Exploitation and Abuse (SEAH)

The organization is dedicated to maintaining a Safe Environment free from Sexual Exploitation and Abuse (SEAH). This policy outlines:

- **Preventive Measures:** The organization will implement comprehensive preventive measures, including mandatory training, awareness campaigns, and risk assessments, to proactively address and mitigate SEAH risks.
- **Safe Reporting Mechanisms:** The organization will establish and maintain clear, accessible, and confidential reporting mechanisms, allowing individuals to report SEAH incidents without fear of retribution or stigma.
- **Protective Policies:** The organization will continuously review and update its policies and procedures to ensure they effectively prevent and address SEAH, reflecting current best practices and incorporating lessons learned

6.1.2 Alignment With Global Standards and Principles:

The organization's PSEAH policy is aligned with Global Standards and Principles, including:

- **United Nations (UN) Standards:** Adhering to the standards set by the UN Secretary-General's Bulletin on Special Measures for Protection from Sexual Exploitation and Sexual Abuse.
- **International Humanitarian Law and Human Rights:** Ensuring that the policy is consistent with international humanitarian law and human rights principles, particularly those related to the protection of vulnerable populations.
- **Sector-Specific Guidelines:** Aligning with sector-specific guidelines and best practices, such as those provided by the Inter-Agency Standing Committee (IASC) on PSEAH.

7. Six core principles:

The **Six Core Principles** represent the fundamental guidelines that underpin the Protection from Sexual Exploitation and Abuse (PSEAH) policy. These principles are essential for creating a safe, respectful, and abuse-free environment for both staff and beneficiaries. Below is a detailed explanation of each principle:

1. Zero Tolerance for SEAH Misconduct

This principle signifies that the organization does not tolerate any form of sexual exploitation and abuse (SEAH) under any circumstances. Any act of SEAH by staff, contractors, or associated personnel is a serious violation of the organization's ethical standards and will result in immediate disciplinary action, including potential termination of employment and legal consequences. Zero tolerance means that all reported cases will be taken seriously, thoroughly investigated, and addressed in accordance with the organization's policies and legal obligations. It also implies a commitment to building an organizational culture where SEAH is actively prevented, and where staff feel empowered to report concerns without fear of retaliation.

2. Prohibition of Sexual Activity with Children

Sexual activity with children (individuals under the age of 18) is strictly forbidden, regardless of the local age of consent. This principle emphasizes that there are no exceptions or mitigating circumstances that can justify such actions. The organization holds all personnel accountable to ensure they do not engage in any form of sexual activity with minors. Any breach of this prohibition is considered an act of sexual exploitation and abuse, warranting immediate disciplinary action, including dismissal and legal prosecution. This principle also includes a responsibility to report any suspected or confirmed cases of child sexual abuse to the appropriate authorities.

3. Prohibition of Exchange of Assistance for Sex

Personnel are strictly prohibited from engaging in any form of sexual activity in exchange for goods, services, money, or any other form of assistance. This principle ensures that aid and services are provided solely based on need and without any form of coercion, manipulation, or exploitation.

Such behavior is considered a severe abuse of power and exploitation of vulnerable individuals, and it undermines the integrity of the organization's mission. Violations of this principle will result in immediate disciplinary measures, including termination and potential legal action.

4. Prohibition of Sexual Relationships with Beneficiaries

Personnel are prohibited from entering into sexual relationships with beneficiaries of the organization's services, as these relationships are based on unequal power dynamics and can easily lead to exploitation and abuse. Such relationships, even if they appear to be consensual, are inherently exploitative due to the power imbalance between staff and beneficiaries. This principle is in place to protect the dignity and rights of beneficiaries and to prevent any conflicts of interest or perceptions of bias. Violations of this prohibition will be treated as a serious breach of conduct and will be subject to disciplinary action.

5. Obligation to Report SEAH Concerns

All personnel are obligated to report any concerns, suspicions, or incidents of SEAH that they become aware of, either directly or indirectly. This reporting obligation applies regardless of whether the concern involves a colleague, contractor, partner, or other associated personnel. The organization is committed to providing safe, confidential, and accessible reporting mechanisms, including the option to report through Microsoft Teams, email, or other designated channels. Failure to report known or suspected SEAH is itself a violation of the PSEAH policy and may result in disciplinary action. The organization ensures that all reports will be handled with the utmost confidentiality and will be investigated promptly and thoroughly.

6. Responsibility to Maintain an SEAH-Free Environment

Every individual within the organization has a responsibility to contribute to and maintain a work environment that is free from sexual exploitation and abuse. This includes promoting a culture of respect, dignity, and safety for all staff and beneficiaries, adhering to the PSEAH policy and code of conduct, participating in PSEAH training, and being vigilant in identifying and addressing potential risks of SEAH. Personnel are encouraged to model appropriate behavior and to support colleagues in upholding these standards. Maintaining a SEAH-free environment is a collective effort that requires active participation and commitment from everyone within the organization.

8. Reporting and Investigation Framework

The policy is designed to ensure that all complaints are handled with the utmost confidentiality, fairness, and professionalism. It provides multiple reporting channels, including a dedicated Microsoft Teams form and an email-based reporting system, to facilitate the safe and anonymous submission of complaints. The policy also details the steps involved in the investigation process, from the initial assessment of complaints to the final review by the Complaint Review Committee.

Reporting Channels Setups:

The organization has established multiple reporting channels to ensure accessibility and confidentiality. This includes an online reporting form embedded within Microsoft Teams and a dedicated email address. These channels will be available to all stakeholders, including staff, volunteers, contractors, and beneficiaries. Each channel will be managed by designated SEAH focal points trained to handle sensitive information securely and appropriately.

8.1.1 Microsoft Form:

This platform will allow staff, beneficiaries, and related personnel to report any incidents or suspicions of SEAH confidentially and efficiently. The reporting system is designed to ensure anonymity, protect the identity of the complainant, and guarantee that all reports are handled with the utmost seriousness and confidentiality.

7. Form Title: SIEHS SEAH Reporting Form

8.1.1.1 Introductory Statement

This form is intended to provide a secure and confidential way to report any incidents of Sexual Exploitation and Abuse (SEAH) within our organization. All information provided will be treated with the utmost confidentiality, and your identity will be protected. If you are uncomfortable providing your name, you may submit this form anonymously."

8.1.1.2 Personal Information

- **Name:** (Mandatory)
- **Position/Role:** (Mandatory)

- **Department/Location:** (Mandatory)
- **Preferred Contact Method:** (Email/Phone) (Mandatory)

8.1.1.3 Date and Time of Incident

- **Content:** A section to capture when the incident occurred.
- **Fields:**
 - **Date of Incident:** [Date Picker]
 - **Time of Incident:** [Time Picker]

8.1.1.4 Location of Incident

- **Content:** Where the incident took place.
- **Fields:**
 - **Specific Location:** (e.g., office, field site, virtual meeting, etc.)

8.1.1.5 Type of Incident

- **Content:** A checklist to categorize the nature of the incident.
- **Fields:**
 - **Type of SEAH Incident:** (Check all that apply)
 - Sexual Harassment
 - Sexual Exploitation
 - Sexual Abuse
 - Inappropriate Behavior
 - Other (Please Specify)

8.1.1.6 Description of the Incident

- **Content:** A detailed description of the incident.
- **Field:**

- **Description:** [Text Box] "Please provide a detailed account of the incident, including the sequence of events, any individuals involved, and any relevant details."

8.1.1.7 Individuals Involved

- **Content:** Details about the individuals involved in the incident.
- **Fields:**
 - **Name(s) of Individual(s) Involved:** (Optional)
 - **Role/Position:** (Optional)
 - **Relationship to the Reporter:** (e.g., supervisor, colleague, contractor, etc.) (Optional)

8.1.1.8 Witnesses (If Any)

- **Content:** Information about any witnesses to the incident.
- **Fields:**
 - **Name(s) of Witness(es):** (Optional)
 - **Contact Information:** (Optional)

8.1.1.9 Evidence (If Available)

- **Content:** Option to upload or describe any evidence related to the incident.
- **Fields:**
 - **Upload Evidence:** (Document/Image Upload)
 - **Description of Evidence:** [Text Box]

8.1.1.10 Reporting History

- **Content:** To determine if the incident has been previously reported.
- **Fields:**
 - **Has this incident been reported before?** [Yes/No]
 - **If yes, to whom and when?** [Text Box]

8.1.1.11 *Desired Outcome*

- **Content:** Understanding what the reporter hopes to achieve by submitting this form.
- **Fields:**
 - **What outcome are you seeking?** [Text Box] (e.g., investigation, mediation, counseling support, etc.)

8.1.1.12 *Anonymity Preference*

- **Content:** Allows the reporter to express their preference for anonymity.
- **Fields:**
 - **Do you wish to remain anonymous?** [Yes/No]
 - **Do you consent to be contacted for further information?** [Yes/No]

8.1.1.13 *Declaration and Consent*

- **Content:** A statement confirming the accuracy of the information provided and consent for the organization to take appropriate action.
- **Fields:**
 - **Declaration:** [Checkbox] "I confirm that the information provided is accurate to the best of my knowledge."
 - **Consent:** [Checkbox] "I consent to the information provided being used to investigate this incident."

8.1.1.14 *Submission Button*

- **Content:** Finalize the form submission.
- **Button:** "Submit Report"

8.1.2 *Designated Reporting Email Address:*

A dedicated and secure email address, SEAH complaints@siehs.org, has been established for receiving complaints related to SEAH focal persons. to ensure that all complaints are handled appropriately and confidentially.

8.1.3 Complaint Review Process:

The Complaint Review Process at our organization is designed to handle SEAH complaints with the utmost care, ensuring that every case is reviewed comprehensively and impartially. By involving key stakeholders, maintaining confidentiality, and adhering to international standards, we strive to create a safe and supportive environment for all members of our community. The process not only aims to resolve complaints but also to strengthen our commitment to preventing SEAH and upholding the dignity and rights of all individuals.

The following steps outline our complaint review process:

8.1.4 Initial Assessment:

- o Once a complaint is received, the Complaint Review Committee (CRC) conducts an initial assessment to determine the severity and urgency of the matter. This includes reviewing the nature of the allegations, the identities of the involved parties, and any immediate risks to individuals or the organization.
- o The CRC is composed of key stakeholders including the HR Head, Operations Head, Admin, and Security Head, who bring diverse perspectives to the review process.
- o

8.1.5 Investigation Process:

- o A comprehensive investigation is conducted, involving interviews with relevant parties, collection of evidence, and consultation with legal and ethical guidelines. The investigation team maintains strict confidentiality and neutrality throughout the process.
- o The SEAH Focal Point play a crucial role in ensuring that the investigation adheres to the organization's PSEAH policy and international standards.

8.1.6 Review of Findings:

- o Upon completion of the investigation, the findings are reviewed by the CRC. The committee evaluates the evidence, assesses the credibility of the information, and determines whether the complaint is substantiated.

- o The CRC ensures that the review is conducted fairly, with a focus on maintaining the rights and dignity of all parties involved.

8.1.7 Decision Making:

- o Based on the investigation findings, the CRC decides on the appropriate course of action. This may include disciplinary measures, policy changes, or referral to external authorities if necessary.
- o The decision-making process is guided by the principles of fairness, justice, and the organization's commitment to a zero-tolerance policy for SEAH.

8.1.8 Communication of Outcome:

- o The complainant and other relevant parties are informed of the outcome of the review in a timely and sensitive manner. The communication includes a summary of the findings, the decision made, and any follow-up actions required.
- o

8.1.9 Follow-up and Monitoring:

- o After the resolution of a complaint, the organization continues to monitor the situation to ensure that the actions taken are effective and that there is no recurrence of the issue. Feedback from the complainant is also gathered to improve the process.
- o The CRC reviews the overall handling of the case to identify any lessons learned and make necessary improvements to the PSEAH policy.

9. Decision-Making and Action Implementation Process:

After a thorough review of complaints related to Sexual Exploitation and Abuse (SEAH), our organization undertakes a decisive and structured approach to make informed decisions and implement appropriate actions. This process is guided by our commitment to uphold the principles of justice, accountability, and zero tolerance for SEAH.

Our organization's approach to decision-making and action implementation in SEAH cases is designed to be fair, thorough, and aligned with our commitment to zero tolerance for misconduct.

By involving key stakeholders, conducting risk assessments, and ensuring transparency in communication, we strive to make decisions that uphold justice and accountability. The implementation of actions is closely monitored to ensure their effectiveness, and continuous support is provided to all affected parties. Through this process, we reinforce our dedication to creating a safe and respectful environment for all.

9.1.1 Evaluation of Investigation Findings:

- o The Complaint Review Committee (CRC), comprising the P & C focal person, and a specific representative of the department, and thirdly the other person would be chosen from the different departments to maintain neutrality and they would carefully evaluate the findings from the investigation. This evaluation focuses on the credibility, reliability, and relevance of the evidence gathered during the investigation.
- o The CRC considers all aspects of the complaint, including the context, the severity of the alleged misconduct, and the impact on the individuals and the organization

9.1.2 Risk Assessment:

- Before making a decision, the CRC conducts a risk assessment to determine the potential consequences of various actions. This includes assessing the risk of further harm to the complainant, the risk to the organization's reputation, and the risk of setting precedents for future cases. +
- The risk assessment helps the CRC make decisions that are not only just but also aligned with the organization's long-term goals and ethical standards.

9.1.3 Decision-Making:

- o Based on the investigation findings and the risk assessment, the CRC makes a decision on the appropriate course of action. Decisions may range from disciplinary actions, such as suspension or termination, to corrective measures, such as policy revisions or additional training.

- o The decision is made collectively by the CRC, ensuring that it reflects a balanced and fair judgment. The process is guided by our organization's commitment to a zero-tolerance policy for SEAH and adherence to international standards.

9.1.4 Communication of Decision:

- o Once a decision is made, the CRC communicates the outcome to all relevant parties, including the complainant, the accused, and any other stakeholders involved. The communication is conducted in a timely, transparent, and sensitive manner, respecting the privacy and dignity of all individuals.
- o The communication includes a summary of the investigation findings, the decision made, the rationale behind the decision, and the next steps for implementation.

9.1.5 Implementation of Actions:

- o Following the decision, the CRC oversees the implementation of the necessary actions. This may involve enforcing disciplinary measures, such as termination or suspension, or initiating corrective actions, such as policy updates, training programs, or enhanced monitoring.
- o The implementation process is closely monitored to ensure that the actions are carried out effectively and that they address the root causes of the issue. The organization takes swift action to prevent any recurrence of the misconduct.

9.1.6 Support for Affected Parties:

- o Throughout the decision-making and implementation process, our organization ensures that support is provided to all affected parties, particularly the complainant. This support may include counseling services, legal advice, and other resources to help them recover from the incident.
- o The organization is committed to providing a safe and supportive environment, ensuring that the implementation of actions does not result in further harm or distress to the complainant or any other involved parties.

9.1.7 Documentation and Record-Keeping:

- o All decisions and actions taken are thoroughly documented to maintain a clear and transparent record of the process. This documentation includes the investigation findings, the decision rationale, and details of the implementation steps.
- o The records are securely stored, and access is restricted to authorized personnel only. This ensures confidentiality and integrity in handling SEAH-related cases.

9.1.8 Continuous Monitoring and Evaluation:

- o After the implementation of actions, the CRC continues to monitor the situation to ensure that the measures taken are effective in addressing the issue. Regular follow-ups will be conducted through vigilant observation and thorough case studies will be conducted of the incidents to assess the impact of the actions and to identify any further improvements needed.

10. Monitoring and Follow-Up Process

10.1.1 Monitoring and Follow-Up Process

Following the implementation of remedial actions in response to complaints of Sexual Exploitation and Abuse (SEAH), our organization engages in a rigorous monitoring and follow-up process. This process is vital for ensuring the efficacy of implemented measures, safeguarding all involved parties, and fostering continuous improvement within our SEAH framework. The primary objectives of this process are to uphold accountability, prevent recurrence of SEAH incidents, and enhance the overall SEAH framework through systematic evaluation and feedback mechanisms.

10.1.2 Follow-Up with Complainant and Accused

Regular follow-up interactions with both the complainant and the accused are conducted to ensure that their concerns are adequately addressed and any additional needs or issues are identified and resolved. For the complainant, follow-ups involve:

- Assessing their well-being.
- Evaluating the adequacy of support services.

- Identifying further assistance requirements.

For the accused, follow-ups focus on:

- Monitoring adherence to disciplinary measures.
- Providing necessary support for compliance with organizational requirements.
- We would this with HR and based on the severity of the case we would decide and document either would should send the accused straightaway for their termination or keep them to work from home on pay for some considerable period of time till the time investigation do not get completed.

10.1.3 Addressing Recurring Issues

If monitoring identifies recurring issues or new concerns related to the original complaint, additional measures are implemented to address these problems. This may involve:

- Revising policies.
- Enhancing training programs.
- Taking further disciplinary actions.

The organization is committed to promptly addressing persistent problems to prevent further harm and ensure continuous improvement in the SEAH framework.

10.1.4 Documentation and Reporting

All monitoring and follow-up activities are meticulously documented, including:

- Observations.
- Feedback received.
- Actions taken.

This documentation provides a transparent record of the follow-up process and supports accountability. Regular reports are generated and reviewed by senior management to keep them informed about the follow-up status and any issues requiring their attention.

10.1.5 Feedback Mechanism

A feedback mechanism is established for the complainant and other stakeholders to report their experiences with the follow-up process. This system includes:

- Anonymous surveys.
- Direct communication.
- Suggestion boxes.

Feedback is utilized to identify gaps or areas for improvement in the follow-up process, contributing to its refinement and overall effectiveness.

10.1.6 Review of Policies and Procedures

The monitoring and follow-up process includes periodic reviews of the organization's SEAH policies and procedures to ensure they remain effective and up-to-date. This review process is informed by:

- Outcomes of monitoring activities.
- Feedback from all involved parties.

Policy revisions are made as necessary to address identified weaknesses or emerging issues, ensuring that the SEAH framework remains robust and responsive.

10.1.7 Training and Capacity Building

Based on findings from monitoring and follow-up, additional training and capacity-building initiatives are implemented. This includes:

- Providing staff with updated training on any changes in policies.
- Addressing specific issues identified during follow-up.
- Reinforcing the organization's commitment to preventing SEAH.

Training sessions are designed to ensure that all personnel are aware of their responsibilities and equipped to contribute to a safe and respectful work environment.

11. PSEAH Framework

The Protection from Sexual Exploitation and Abuse (PSEAH) Framework is a comprehensive strategy designed to prevent and respond to SEAH incidents within our organization and the communities we serve. The framework integrates PSEAH principles into all organizational operations, from recruitment and management to awareness-raising and victim support. It ensures that all staff are trained and informed of their responsibilities, that effective reporting mechanisms are in place, and that findings are used to continually improve our approach.

- **Integration of PSEAH into Planning, Programming, and Operational Processes**

The PSEAH Framework is embedded into the core planning, programming, and operational activities of the organization. This integration ensures that PSEAH considerations are incorporated into every decision-making process, including:

- Risk assessments to identify and mitigate SEAH risks.
- Inclusion of PSEAH standards in project plans, budgets, and monitoring frameworks.

Embedding PSEAH into all organizational processes fosters a culture of zero tolerance for SEAH that permeates every level of the organization.

- **Recruitment**

To ensure thorough vetting of candidates and adherence to the sexual misconduct policy, the following procedure will be implemented:

1. **Background Checks:** A comprehensive background check will be conducted on all candidates, including a review of their past records to assess any prior issues or patterns of behaviour.
2. **Professional References:** Written statements will be obtained from the two most recent professional referees provided by the candidate to gain insights into their professional conduct.

3. **Interviews:** Candidates will undergo separate interviews where they will be asked to review and counter-sign the organization's sexual misconduct policy document, affirming their understanding and agreement to abide by it.
4. **Policy Disclosure:** The sexual misconduct policy will be prominently displayed on the SIEHS website. This ensures that all potential candidates are informed about the policy before applying, allowing them to understand the organization's commitment to maintaining a safe and respectful work environment from the outset.

This procedure aims to uphold the integrity of the hiring process and ensure that all candidates are aware of and agree to the organization's policies regarding sexual misconduct

- **Organizational Management - Cooperation Agreements**

Organizational management will ensure that all cooperation agreements, partnerships, and contracts with external entities include explicit PSEAH clauses. These agreements will mandate compliance with the PSEAH framework, requiring partners to adopt similar standards. Regular assessments will be conducted to verify adherence, with non-compliance leading to sanctions or termination of agreements, thereby extending the PSEAH framework's influence beyond the organization.

- **Awareness of Personnel, Including Mandatory Training**

Mandatory training on the PSEAH framework will be provided to all personnel, including staff, volunteers, and contractors. This training will cover:

- Definitions of SEAH.
- Organizational policies and procedures.
- Reporting mechanisms.
- Consequences of violating PSEAH principles.

Continuous training and refresher courses will be provided to maintain awareness and reinforce the importance of a safe and respectful workplace. Personnel will be encouraged to discuss and raise concerns about SEAH in a supportive environment.

- **Assistance to SEAH Victims/Survivors**

In the event that evidence substantiates a claim of sexual misconduct, SIEHS is committed to supporting the victim through several measures. The organization will ensure the safety of the victim to both within and outside the workplace by implementing appropriate security measures. Additionally, the organization will provide all essential professional help to the victim that would require for them for their professional career.

- **Investigations**

To address allegations of sexual misconduct, a three-member committee will be established to conduct an impartial investigation, ensuring no conflicts of interest. The committee will interview both the accuser and the accused, review all evidence, and prepare a detailed report. This report will be submitted to the Head of HR, who will consult with relevant department heads and review the individuals' track records. The department heads will then meet with both parties to assess the severity of the case. If deemed severe, the matter will be escalated to the CEO, who will make the final decision, which could include disciplinary actions up to expulsion. All findings and decisions will be documented and communicated to both parties involved.

12. Conclusive Remarks:

In conclusion, the Sindh Integrated Emergency and Health Services (SIEHS) is committed to fostering a workplace environment where all individuals are treated with dignity and respect. Our Sexual Harassment and Violence Policy serves as a cornerstone in our dedication to ensuring a safe and supportive atmosphere for everyone within our organization.

By establishing clear procedures for reporting, investigating, and addressing incidents of sexual harassment and violence, we aim to uphold the principles of justice and accountability. This policy underscores our commitment to protecting the rights of all internal and external interested parties and maintaining an environment free from harassment and violence.

We recognize that the effectiveness of this policy relies on the active participation and engagement of every member of our organization. It is our collective responsibility to uphold the standards set

forth and to contribute to a culture of respect and inclusivity. We encourage all employees to familiarize themselves with the policy, utilize the resources available, and report any concerns promptly.

Through continued education, open communication, and unwavering dedication, we will work together to prevent and address any instances of sexual harassment and violence. Our goal is to ensure that SIEHS remains a place where everyone feels safe, respected, and valued.

13. Policy revision cycle

HR will review as per updates on PSEA international guidelines and in addition, this policy will be reviewed as per market practice every alternate year if the change is justified it will be approved by CEO.

14. Modification and interpretation of the policy

This policy will be administered and interpreted by the Head of Human Resources whose interpretation will be final. In special cases company's CEO can make exceptions to this policy.