

Communications Policy

Policy no: 038 Version 2 Approved on: 22 June 2023 Approved by: Health Equity Matters Board

1. Purpose

Health Equity Matters is committed to being open, honest, transparent and ethical in all its communications activities. Health Equity Matters communicates its views and about its activities and programs for advocacy, promotional and reporting purposes. We do this through publications, social media, websites and print, radio and television media.

This policy outlines Health Equity Matters' approach to public and stakeholder communications, including those associated with its advocacy, media engagement and programs. It aims to ensure that images and stories collected by Health Equity Matters Personnel are collected, sourced and used honestly and ethically, in accordance with Health Equity Matters values, and safeguarding and compliance obligations. All stories and images collected and used must portray the people and communities with whom Health Equity Matters works with respect and dignity. This policy is part of Health Equity Matters' accountability to its stakeholders and all that benefit from its activities, to ensure that their rights, safety, dignity, privacy, cultural and religious beliefs are respected and protected.

2. Scope

This policy applies to all Health Equity Matters Personnel, including Board and Committees members, staff employed in Australia and by the AFAO Foundation, volunteers, contractors and consultants.

It covers both still (photographs) and moving (video) imagery and recorded, transcribed or written interviews and direct quotes, collected by Health Equity Matters Personnel. It applies to information, stories and images collected for research, evaluation, donor, supporter and public engagement purposes and all material published by Health Equity Matters about its activities regardless of format.

3. Definitions

Term	Definition
Child	Any person under the age of 18, irrespective of local country definitions of when a child reaches adulthood.
Content Videos, photos, stories and interviews that may be used to illustrate any aspect of Equity Matters' programs and activities.	

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Free and informed consent	A person understands why their image, story and/or personal details are being collected; where and how they will be used and over what period of time; that their participation is entirely voluntary; the potential risks and consequences of their image, name and words being published; and then agrees to Health Equity Matters collecting the content. The person feels free to say 'no' to their image or story being collected and understands that this will not negatively impact on the benefit they derive from participating in a Health Equity Matters program or activity.
Images	Still (photographs and illustrations) and moving (video and animation).
Stories	The direct quotes, facts and personal details obtained during an interview and used in messaging, case studies, reports, audio recordings and other modes of communication.

4. Policy Statement

Health Equity Matters acts with openness, honesty, transparency and integrity in its public and stakeholder communications. It strives to ensure that its communications are ethical, truthful and accurate at all times. Health Equity Matters' transparency forms part of its accountability to donors, stakeholders and communities that it works alongside, represents and supports.

Health Equity Matters values cultural and social diversity and is inclusive and respectful of all people in its communications. Health Equity Matters is recognised as a credible and trustworthy organisation and works hard to protect this reputation by maintaining the highest communications standards.

All Health Equity Matters communications comply with local laws, donor requirements and the Australian Council for International Development Code of Conduct.

4.1 Advocacy

Health Equity Matters provides a voice for its members and communities domestically and in its regional and international work.

Health Equity Matters' advocacy and campaigns are grounded in evidence. Health Equity Matters seeks to build and promote evidence-based approaches to policy, advocacy and health promotion, guided by the Ottawa Charter.

Advocacy and campaign materials reflect the perspectives of Health Equity Matters' communities and will not harm or increase risks facing the communities it works with. Health Equity Matters consults closely with members, affiliates and communities to ensure its advocacy positions and messages reflect the needs and aspirations of those it serves.

Public material, such as policy submissions, publications and media statements, will undergo fact-checking and review process by Health Equity Matters managers, and include input from external content specialists, as required.

4.2 Collection, Use and Storage of Images and Stories

Health Equity Matters aims to empower the communities it works with through its storytelling and communications content. It strives to empower and protect the people who share their stories. Health Equity Matters is committed to depicting



people and contexts authentically and truthfully. Health Equity Matters values the importance of self-determination and is committed to working with all stakeholders in a way that upholds their dignity.

Before stories and photos are collected, Health Equity Matters Personnel will obtain informed consent from people being photographed, filmed or interviewed using the <u>Informed Consent Form</u> at *Annex 1*. For children, consent must be obtained from the child's parent and guardian. Where appropriate and possible, consent must also be obtained from the child. The consent process will be translated into local language where English is not well understood, and also verbally explained in the local language of the person whose consent is being obtained, to ensure that their consent (if provided) is informed. Informed consent must be acknowledged in writing by the subjects if possible, and where not possible in writing by Health Equity Matters Personnel to indicate that verbal informed consent has been received.

Health Equity Matters will respect a person's right to refuse to be interviewed, photographed or filmed, and where any reluctance is observed, not proceed. Health Equity Matters will not provide payment or compensation to people in exchange for their photograph or film to be taken or their information collected, and story told.

Health Equity Matters will ensure that the content being used, and the associated permissions, are current and consistent with the terms of consent provided. Health Equity Matters will stop using content when requested by the subjects to remove the content from circulation.

All images will be securely stored, and only approved content published. All stories and images that are collected by Health Equity Matters Personnel will be handed over to Health Equity Matters at the end of a program activity and all information and images deleted from non-Health Equity Matters devices on which they are stored. Health Equity Matters Personnel will exercise judgement when sharing stories and images gained during a Health Equity Matters program or Health Equity Matters activity on social media or in public presentations.

In addition, when collecting stories or images of children, Health Equity Matters Personnel must adhere to standards outlined in the Safeguarding Policy to ensure children are portrayed in a respectful and appropriate manner at all times. Health Equity Matters is especially mindful of the interests and safety of children. All staff and volunteers will comply with Health Equity Matters' Code of Conduct and Safeguarding Policy and Code of Conduct in relation to the photographing and filming of children. Health Equity Matters will ensure that file labels, meta data or text descriptions do not reveal identifying information about a child (such as a child's name, or village/town) when sending images electronically or publishing images in any form.

4.3 Authorities, Including Media Spokespeople

Public and stakeholder communications, including policy submissions, publications and media statements, must be approved consistent with the Delegations of Authority Policy.

Where the Delegations of Authority Policy is silent, communications may be approved by a staff member or volunteer consistent with the scope of their portfolio and authority and subject to the exercise of judgement.

Health Equity Matters' CEO, their nominees, and the President are the only spokespeople authorised to speak on Health Equity Matters' behalf to media. No other Health Equity Matters staff member or volunteer is authorised to speak to media on Health Equity Matters' behalf, unless expressly delegated in accordance with the Delegations of Authority Policy.



4.4 References to Members, Partners and Stakeholders

Health Equity Matters respects the autonomy of its members, partners and stakeholders. When referring to others in its public communications, Health Equity Matters will consider whether these members, partners and stakeholders would reasonably expect that their permission is sought or that they are otherwise advised of the communication in advance.

Consistent with the Australian Council for International Development's (ACFID) Code of Conduct, Health Equity Matters will not make statements about other ACFID Members with the intention of creating a reputational or other advantage to itself.

4.5 Privacy

Health Equity Matters' Privacy Policy sets out Health Equity Matters' approach to protect the privacy of personal information that Health Equity Matters collects, holds and administers.

Health Equity Matters complies with the Privacy Act 1988 in handling personal information.

4.6 Website and Social Media

Health Equity Matters' website includes Terms and Copyright conditions, including in relation to the use of information provided on the website. This can be accessed at <u>https://healthequitymatters.org.au/terms-and-copyright/</u>

Health Equity Matters' Social Media Policy aims to support the fostering of a constructive and respectful online environment.

Health Equity Matters' guidelines about Health Equity Matters Personnel use of social media is outlined in the Social Media Policy.

4.7 Annual Report

Health Equity Matters' Annual Report is prepared in accordance with statutory and regulatory requirements and the ACFID Code of Conduct.

Health Equity Matters is committed to being open, accountable and transparent to its members, the communities in Australia and overseas that it serves and supports, its partners, donors and other key stakeholders. The Annual Report provides an opportunity to showcase Health Equity Matters' advocacy and programs in Australia, Asia and the Pacific and update stakeholders and members of the public on the results that are being achieved. It also includes Health Equity Matters' annual audited financial statement.

The Annual Report is presented to all members at the Health Equity Matters Annual General Meeting.

5. Transparency

Health Equity Matters is committed to disclosing timely, relevant and accurate information in an accessible format.



Health Equity Matters' website provides information about Health Equity Matters' legal status, purpose and governance, programs, policy papers, media statements, strategic documents, research and corporate policies.

Health Equity Matters is committed to transparency and integrity in its financial management, in accordance with its Finance Policy. This is demonstrated by external auditing of Health Equity Matters' finances by a registered company auditor.

A request for information from Health Equity Matters can be made by:

Email: <u>enquiries@healthequitymatters.org.au</u> Phone: +61 (2) 9557 9399 In writing to: Level 3, 414 Elizabeth St, Surry Hills, NSW, 2010, Australia.

Health Equity Matters will respond in a timely manner to requests for information.

6. Framework

Health Equity Matters' communications decision-making will be guided by an <u>Ethical Communications Framework</u>. The Framework will be used to guide Health Equity Matters Personnel when they are creating and publishing communications content. The Framework is intended to empower communities supported by Health Equity Matters through its communications approach, while also minimising any risks to the organisation and people whose images and stories are collected, shared, and stored through those communications activities.

7. Breach of Policy

Health Equity Matters Personnel who are found to have breached this policy may be subject to disciplinary action, up to and including termination of employment or volunteer engagement.

8. Roles and Responsibilities

Who	Responsibility	
Board	• Cultivate an open, transparent culture.	
	 Approve this policy and any updates. 	
CEO/Deputy CEO	 Reinforce sound communication practices across all Health Equity Matters' advocacy, programming and other Health Equity Matters activities. 	
	• Ensure this policy is reviewed every three years, or more often as required.	
Managers	 Reinforce the need for good communication practices across all Health Equity Matters' areas of operation, including the need for documented informed consent from individuals from whom we collect images and stories. 	
Health Equity Matters Personnel	Adhere to the requirements in this Policy.	



9. Related Policies and Documents

Policy	Title and Hyperlink		
006	Code of Conduct		
012	Privacy Policy		
041	Safeguarding Policy and Code of Conduct		
016	Social Media Policy		
Templates/Tools			
	Ethical Communications Framework		
	Informed Consent Form		

10. Policy History

Date of update	Version	Key changes	Endorsed by	Approved by	Next review
22 June 2023	2	Updated to align with updated Safeguarding Policy and Code of Conduct, strengthen informed consent process and template, clarify roles and responsibilities, and elevate approval from CEO to the Board.	International Advisory Committee	Health Equity Matters Board	June 2026
6 May 2020	1	Establishment of inaugural Communications Policy	Quality Principal	CEO	May 2022



Informed Consent Form

ANNEX 1

Health Equity Matters requires your written permission to take and use your, or your child's personal information and photographic or filmed image to promote our work.

In line with our Communications Policy we use images and stories of people that we work with and support for promotional and reporting purposes including through our:

- publications and communication materials;
- website;
- social media platforms; and
- television and radio interviews or podcasts.

We strive to portray children and adults whose stories and images we use, in a way that respects their dignity, privacy, cultural and religious beliefs and lived experience.

SEEKING YOUR INFORMED WRITTEN CONSENT

Prior to Health Equity Matters collecting my/my child's personal information and taking any images, I have been given an explanation about the purpose and potential uses of my/their story, personal information and images and had an opportunity to ask questions and discuss any concerns.

I fully understand:

- what I am giving my consent for;
- that I do not have to give my consent and if I say 'no', this will not negatively impact on my future working collaboration Health Equity Matters;
- that I can withdraw consent for the use of my/my child's story and/or images at any time and this will be respected;
- that I can ask that consent be automatically withdrawn, in the event of my/my child's death;
- that a relative can later request that consent be withdrawn, in the event of my/my child's death
- that I can ask to view my/my child's images after they have been collected and advise Health Equity Matters of the ones I feel happy to be publicly shared; and
- that the images may be stored on an Images Library on a secure server, only accessible by Health Equity Matters staff. All images will be handled in accordance with the Health Equity Matters <u>Privacy Policy</u>.

INFORMED WRITTEN CONSENT PROVIDED (by adults over the age of 18 years)

I give my unconditional permission to Health Equity Matters to use my story and personal information, and/or photographic/filmed image for the purposes explained to me and outlined above.

I am over 18 years of age.		
Name:		
Organisation (if applicable):		
Date:	Signature:	



INFORMED WRITTEN CONSENT PROVIDED (by children under the age of 18 year)

For persons under the age of 18, the permission of a parent or guardian is required as well as the permission of a child (where that is appropriate and possible).

I give my unconditional permission to Health Equity Matters to use this child's story and personal information, and/or photographic/filmed image for the purposes explained to me and outlined above.

١a	m under 18 years of age.	
Ch	ild's name:	
Ch	ild's age:	Child's signature:
(N	here child is old enough and pro	ovision of consent is appropriate and possible).
<u>Nc</u>	<u>te:</u> Health Equity Matters will no	ot publish your child's name in any content developed and published.
Ιc	ertify that I am over 18 years of a	age and I am the parent/guardian of the above-named child.
Na	me:	
Da	te:	Signature:
	EDGEMENT OF INFORMED VER	BAL CONSENT PROVIDED: orm has to be read to the person/parent/legal guardian.
	I this consent form in full to the	person/parent/guardian whose signature appears above.
Name of H	ealth Equity Matters staff memb	pers obtaining informed consent:
Signature o	of Health Equity Matters staff me	ember:
Was the co	onsent process explained in the I	ocal language and/or the form provided in the local language (Please explain):