

Safeguarding Policy and Code of Conduct

Policy no: 041 Version 2

Approved on: 27 April 2023

Approved by: Health Equity Matters Board

1. Purpose

Health Equity Matters respects, protects and promotes the dignity and human rights of all people and communities it works with, as outlined in its values. Aligned with these values and its commitment to 'do no harm', Health Equity Matters is committed to safeguarding all children and adults with whom it works, or comes into contact with, across all programs and areas of operation in Australia and overseas.

Safeguarding is a broad term that encompasses the range of measures that Health Equity Matters takes to create and maintain safe environments that protect people that it works with and alongside from exploitation, harm and abuse of all kinds. It specifically covers the prevention of sexual exploitation, abuse and harassment (SEAH) of adults and child abuse and exploitation (CAE).

This policy outlines the range of measures that Health Equity Matters has implemented to prevent harm, and to respond appropriately when people are harmed, including through the coordinated provision of support and care. It outlines the mandatory expectations and requirements of Health Equity Matters Personnel and Health Equity Matters Partners aimed at safeguarding children and adults and preventing CAE and SEAH in Health Equity Matters activities. Health Equity Matters acknowledges that preventing and addressing SEAH and CAE begins by acknowledging that 'it can happen here'.

2. Scope

This policy applies to all personnel working with or representing Health Equity Matters in all program and operational activities in its Australian and international operations, including:

- a. Health Equity Matters Personnel, including Board and Committees members, staff employed in Australia and by the AFAO Foundation, volunteers, contractors and consultants; and
- b. Health Equity Matters Partners, including implementing partner organisations contracted by Health Equity Matters domestically or internationally in the delivery of a Health Equity Matters program or project, including their Board members, staff, volunteers, contractors, consultants and partners.

The policy applies both during, and outside, normal work hours. Actions taken by Health Equity Matters Personnel and Health Equity Matters Partners outside of working hours that are seen to contradict this policy will be seen as a violation of this policy.



3. Definitions

Term	Definition			
Child	Any person under the age of 18, irrespective of local country definitions of when a child reaches adulthood.			
Child abuse and exploitation (CAE)	Any form of physical abuse, sexual abuse, sexual harassment, sexual exploitation, emotional abuse or neglect towards a child. It can involve one of more of the following:			
	<u>Physical abuse</u> : When a person purposefully injures or threatens to injure a child. This may for instance, take the form of slapping, hitting, punching, shaking, kicking, beating, burning, shoving or grabbing. Physical abuse can be a single or repeated act. It does not always leave visible marks or injuries.			
	<u>Emotional abuse</u> : Where inappropriate verbal or symbolic acts are carried out towards a child, or where there is a pattern of failure over time to provide a child or adult with adequate non-physical emotional support. Such acts are likely to damage self-esteem or social competence and include ridiculing, intimidating, threatening or isolating the child.			
	<u>Neglect</u> : The failure to provide a child (where able to do so) with the conditions that are culturally accepted as being essential for their physical and emotional development and well-being.			
	<u>Sexual Misconduct</u> : Any form of sexual activity with a child. It is evidenced by an activity between a child and an adult or another child who by age or development is in a relationship of responsibility, trust or power, the activity being intended to gratify or satisfy the needs of the other person. It may include, but is not limited to, contact or non-contact activities, the inducement or coercion of a child to engage in any sexual activity, the use of a child in transactional sex or other sexual practices, exposing a child to online sexual exploitation material, the use of children in pornographic performances and materials, or taking sexually exploitative images of children.			
Contact with children	Working on an activity or in a position that involves or may involve contact with children, either under a position description or due to the nature of the work environment.			
Fraternisation	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.			
Safeguarding	The measures taken and duty of care exercised by Health Equity Matters Personnel and Health Equity Matters Partners who are in positions of power, authority, trust and responsibility to safeguard all children and adults they come into contact with from the risk of harm, abuse, exploitation and harassment, which may be caused by their behaviour during Health Equity Matters activities and programs.			
Sexual exploitation, abuse, or harassment (SEAH)	Any form of physical abuse, sexual abuse, sexual harassment or sexual exploitation towards a vulnerable adult or other community member not considered to be CAE.			
Sexual abuse	The actual or threatened physical intrusion of a sexual nature, whether by force or under unequal or coercive conditions. This covers sexual offences including but not limited to 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, state or territory, whichever is greater) constitutes sexual abuse.
Sexual exploitation	Any actual or attempted abuse of a position of differential power, trust or vulnerability for sexual purposes. This includes profiting monetarily, socially, or politically from the sexual exploitation of another.
Sexual harassment	Unwelcome sexual advances, requests for sexual favours, or other conduct of a sexual nature, in circumstances 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 program beneficiaries including community members and citizens, as well as against Health Equity Matters Personnel and Health Equity Matters.
Survivor/Victim	A person who is, or has been, sexually exploited, harassed or abused.
Transactional sex	Engage in transactional sex where there is an exchange of employment, goods or services relating to a Health Equity Matters activity for sex or sexual favours, including exchanging assistance that is due to program participants for sex.
Working with children	Being engaged in an activity with a child where the contact would reasonably be expected as a normal part of the activity and the contact is not incidental to the activity. Working includes volunteering or other unpaid work.
Zero-tolerance	Health Equity Matters will investigate all reports and allegations, and appropriate disciplinary measures or contractual remedies will be applied where allegations are substantiated.

Guiding Principles

Promoting a culture of dignity and respect and safeguarding the rights and safety of children and adults in the workplaces and communities in which Health Equity Matters operates is critical to maintaining the high regard in which Health Equity Matters is held and the trusting relationships on which its work is founded. Health Equity Matters recognises that at times Health Equity Matters Personnel and Health Equity Matters Partners hold a privileged position of power and trust in relation to the people it works with. When carrying out Health Equity Matters work, they must understand it is important not to abuse unequal power relationships in any way.

To ensure that safeguarding is embedded across all Health Equity Matters activities, the following principles inform Health Equity Matters decision-making, operational, project and risk management activities:

Zero-tolerance approach

Health Equity Matters has zero-tolerance for any form of SEAH and CAE and for any breach of this Safeguarding Policy and Code of Conduct. Every allegation of CAE and SEAH will be acted upon in a timely, fair and reasonable way with due regard for procedural fairness.



Health Equity Matters Personnel and Health Equity Matters Partners have an obligation to take all possible steps to ensure the safety of all people that it works with and to minimise the risks of CAE and SEAH incidents, and where those incidents occur, to respond effectively, including through the coordination of support and care for survivors/victims.

Health Equity Matters will not knowingly engage anyone who poses an unacceptable risk to the safety or wellbeing of children or adults. Health Equity Matters will not fund any individual or partner organisation that is not committed to meeting its safeguarding obligations in their operations and program activities.

Prevention of SEAH and CAE is everyone's responsibility

Health Equity Matters is committed to building its own capacity to deal sensitively and effectively with SEAH and CAE that may occur in the course of its work. All Health Equity Matters Personnel and Health Equity Matters Partners have a role to play in taking responsibility for creating SEAH and CAE-free workplaces and ensuring that Health Equity Matters activities 'do no harm', both in terms of their own personal behaviour and by being 'active bystanders'. People are encouraged to speak up and be active bystanders if they witness or hear about behaviours that are, or may be, in breach of this policy.

Strong leadership promotes the prevention of SEAH and CAE

Health Equity Matters will promote and maintain a safe organisational culture for all people who work for and with Health Equity Matters, including its partners and communities in Australia and in all the countries where it works. Health Equity Matters leaders have a specific responsibility to promote Health Equity Matters commitment to equality, diversity and respect for others and create an environment where it is safe to address sexual exploitation, abuse and harassment, and child abuse, without fear of intimidation or reprisal. Health Equity Matters will ensure high-level oversight and accountability around its safeguarding efforts.

Survivor-centred approach and recognition of the best interests of the child or adult

Health Equity Matters prioritises the safety, rights, wishes and interests of survivors above all other considerations, while ensuring procedural fairness to all parties. Health Equity Matters will treat the survivor/victim with dignity and respect by involving them in the decision-making process, providing them with comprehensive information regarding Health Equity Matters response to the incident, protecting their privacy and confidentiality, employing a non-discriminatory approach, and considering the survivor/victim's need for counselling and health services to assist with their recovery.

Australia is a signatory to the United Nations Convention on the Rights of the Child, and Health Equity Matters is committed to upholding the rights of the child and Australia's obligations under this Convention. In all actions concerning children, Health Equity Matters will ensure that the best interests of the child are the primary consideration.

Procedural fairness

When responding to concerns or allegations of SEAH or CAE, Health Equity Matters abides by the principle of procedural fairness. All those accused will be given a fair hearing and afforded natural justice. Unbiased decisions will be made in response to all incidents, based on the evidence.



Assessing and managing SEAH and CAE risks and impact

As part of Health Equity Matters enterprise risk framework, Health Equity Matters will consider the SEAH and CAE risks posed by its Australian and international operations, and work to actively mitigate those risks. The focus is on ensuring that the risk approach is fit for different local and partner contexts.

Safeguarding incidents will be managed through a timely and confidential incident management and reporting system that ensures incidents are investigated and where allegations are true, that proportional sanctions are issued, up to and including termination of employment, Directorships, and relationships with partners.

5. Health Equity Matters Safeguarding Approach

Health Equity Matters employs a range a measures to ensure adherence to the Safeguarding Guiding Principles.

5.1 Clear communication about the Safeguarding Policy and Code of Conduct and related obligations

All Health Equity Matters Personnel and Health Equity Matters Partners will receive a copy of the Health Equity Matters Safeguarding Policy and Code of Conduct when they commence employment or engagement with Health Equity Matters.

The Health Equity Matters Safeguarding Code of Conduct at **Annex 1** of this Policy and provides clear guidance to Health Equity Matters Personnel and Health Equity Matters Partners about the standards of behaviour and practice required of them when working with, or coming into contact, with children and adults, during their work with Health Equity Matters. Prior to engagement, Health Equity Matters Personnel and Health Equity Matters Partners are required to read, understand and sign the Safeguarding Code of Conduct.

A signed Safeguarding Code of Conduct is valid for three years. Signed copies of the Child Safeguarding Code of Conduct will be kept by Health Equity Matters in an online personnel file.

The Safeguarding Policy will be reviewed every three years at a minimum, or more regularly to respond to changes in the external environment including changes in safeguarding standards and legislation. Health Equity Matters Personnel and Health Equity Matters Partners will be required to read the Safeguarding Policy and re-sign the Safeguarding Code of Conduct when these documents are updated.

5.2 Provision of regular safeguarding training

Health Equity Matters is committed to providing regular safeguarding training to Health Equity Matters Personnel and Health Equity Matters Partners to ensure that all personnel are fully aware of their responsibilities to protect children and adults and know how to report concerns or allegations about SEAH, CAE and policy non-compliance.

Safeguarding training will be provided to Health Equity Matters Personnel and Health Equity Matters Partners and will:

- include initial training during orientation or initial engagement with Health Equity Matters. It will outline individuals' responsibilities to prevent, detect and report all safeguarding incidents and explain the processes to support them to do this;
- include refresher training, provided on an annual basis; and
- be documented in a Training Register.



5.3 Robust recruitment and screening processes

Health Equity Matters is committed to using robust safeguarding recruitment, selection and screening practices in line with its **Recruitment and Selection Policy and Procedure**, with the aim of recruiting the most trustworthy, suitable people to work with Health Equity Matters in its programs and activities.

Health Equity Matters will not knowingly employ, engage or work with anyone who poses an unacceptable risk to children and adults.

Health Equity Matters employment contracts and volunteer agreements contain provisions for suspension or transfer to other duties of any employee or volunteer who is under investigation, and provisions to dismiss any employee or volunteer after an investigation, if found guilty of breaching this policy.

Health Equity Matters Partners must also require their personnel to abide by the Safeguarding Policy and Code of Conduct and include sanctions if personnel are found to have breached this policy.

The following safeguarding recruitment and screening procedures are used:

Police Checks

A criminal record check must be obtained for any individual working with, or on behalf of Health Equity Matters, regardless of whether their role is deemed to be working with children or not.

A criminal record check must be obtained from an individual's:

- · country of citizenship; and
- country of residence; and
- any country an individual has lived for a period of 12 months or more in the last five years.

In Australia, an Australian Federal Police (AFP) National Police Check (NPC) clearance certificate must be obtained. A criminal record check is considered valid for screening purposes for three years from the date of issue. A valid criminal record check is required at all times and must be updated every three years.

All information relating to criminal record checks must be handled in accordance with the Health Equity Matters Privacy Policy.

Health Equity Matters will review these checks when personnel have a change in circumstances, for example where their role requires them to work with communities, and/or where they will be working alongside vulnerable people and children.

Interviews

Safeguarding behaviour-based questions will be asked of all individuals who apply for Health Equity Matters positions.

Reference Checks

Health Equity Matters Personnel who are conducting recruitment are required to conduct character reference checks that include safeguarding questions. This is mandatory for all potential employees who are being considered for



employment. These checks will include questions relating to any concerns about the candidates conduct in relation to child safety and SEAH.

Disclosures

All Health Equity Matters Personnel and Health Equity Matters Partners are requested to disclose whether they have been charged with any SEAH or CAE offences and commit to do that as part of signing the Safeguarding Code of Conduct.

5.4 Effective, ethical partnership management

Health Equity Matters ensures that, when engaging in partnerships, its Partnership Agreements reference Health Equity Matters Safeguarding Policy and require Health Equity Matters Partners to abide by this policy by signing the Health Equity Matters Safeguarding Code of Conduct.

Health Equity Matters will work collaboratively with international program partners to assess partner safeguarding capacity and where gaps are identified, work with those partners to strengthen their safeguarding capacity and systems.

5.5 Effective, ethical program and project management

Prior to approving any international Health Equity Matters program, Health Equity Matters and/or the relevant Health Equity Matters partner will:

- conduct and document a safeguarding risk assessment of the proposed Health Equity Matters program or activity and include mitigation strategies that fit the local context and partners; and
- ensure that this safeguarding risk assessment informs the program design and that risks highlighted are effectively mitigated and monitored.

During international program field visits, Health Equity Matters Personnel may meet children and vulnerable adults that are stigmatised, criminalised, and who experience discrimination and exclusion. Health Equity Matters ensures reasonable precautions are taken to protect against CAE and SEAH. Only Health Equity Matters Personnel and Health Equity Matters Partners that have completed Safeguarding training are permitted to visit project sites.

6. Reporting and Responding to Incidents

The process for reporting, investigating, and resolving complaints of CAE or SEAH is as follows and the process is diagrammatically summarised in *Annex 2*.

This process is the same for everyone lodging a report or complaint to Health Equity Matters, whether in Australia or in another country where Health Equity Matters works.

6.1 What sort of concerns should be reported and by whom?

It is mandatory for all those within scope of this policy to promptly report any witnessed, suspected or alleged incidents of SEAH or CAE by a person engaged by Health Equity Matters to contribute to, or work, on any Health Equity Matters activities. It is their responsibility to report any allegations, NOT to investigate. Individuals do not need to have proof of their concerns or answers to all questions to make a report.



Reports can be raised by anyone, including but not limited to program participants, children, parents, guardians, carers, parents, community members, Health Equity Matters Personnel and Health Equity Matters Partners.

All complaints regarding SEAH and CAE issues will be treated seriously, confidentially, and immediately with due regard for the rights of the alleged survivor/victim, the notifier and the accused person/people.

6.2 When should concerns be reported?

Reports of a SEAH or CAE concern or incident must be made immediately, or as soon as practically possible. All Health Equity Matters Personnel must immediately report (without individual investigation) any reasonably suspected breach of this policy. Immediately in this context means within two working days of becoming aware of any alleged incident. If there is any doubt, the incident should be reported in line with Health Equity Matters zero tolerance principle. Individuals who do not report reasonably suspected breaches of this policy will be viewed as non-compliant.

All reports will be taken seriously and treated with sensitivity respect and confidentially in accordance with Health Equity Matters Privacy Policy. Anyone who makes a report can do so without fear of retaliation and their identity and that of the alleged perpetrator will be protected.

6.3 Who should concerns be reported to and how?

<u>All</u> concerns and incidents should be reported immediately and verbally to:

- the Health Equity Matters Safeguarding Focal Point: Ph: +61 9557 9399 E: reporting@healthequitymatters.org.au; or
- the Health Equity Matters Complaints and Whistleblower Protection Officer: Ph: +61 2 9557 9399 E: complaints@healthequitymatters.org.au; and
- the local Health Equity Matters Partner via their reporting mechanism, in the case of in an incident occurring
 overseas in a partner community or at a program site. Partners must report all incidents to the Health Equity
 Matters contacts above.

Reports should then be detailed in a <u>Safeguarding Concern Reporting Form</u> and submitted to <u>reporting@healthequitymatters.org.au</u>. This form is also provided at *Annex 3*.

6.4 What will happen next?

Once Health Equity Matters is notified of an alleged SEAH of CAE incident:

- the CEO is notified immediately, and then notifies the Board President;
- Health Equity Matters immediately reports any allegations of CAE to the police (whether in Australia or the country of the Health Equity Matters activity), whether or not the child or their guardian consented to do so;
- Health Equity Matters reports any allegation of SEAH concerning an adult survivor/victim to the police (whether
 in Australia or another country where Health Equity Matters works); where the alleged survivor/victim consents
 to that happening;
- the incident is documented in a de-identified way on the Health Equity Matters Incident Register and all associated reports held in a secure way in accordance with the Privacy Policy; and
- Health Equity Matters reports the matter immediately to the donor(s), where it occurs within a Health Equity Matters program.



Should Health Equity Matters receive a report of suspected CAE or SEAH that does not involve Health Equity Matters Personnel or Health Equity Matters Partners, Health Equity Matters will assist the complainant in making a report to the appropriate authorities.

6.5 What support will Health Equity Matters provide to the survivor/victim?

Health Equity Matters is committed to ensuring the survivor/victim receives full and appropriate support or assistance, subject to their wishes, and will:

- determine whether there are immediate safety needs of the survivor/victim. This will include health or psychological assistance, or immediate treatment;
- offer medical, social, legal, or financial support for services, or referrals; and
- ensure that the necessary means for the child (including the child's family) or the survivor/victim's protection and relevant rehabilitation are provided.

6.6 Investigating an incident

Health Equity Matters will investigate all reported cases of CAE or SEAH. Investigations will be conducted in a sensitive, prompt and confidential manner with primary concern for the survivor/victim. After being notified of a report Health Equity Matters will initiate an investigation as soon as possible.

The following measures will be taken, as appropriate:

- Health Equity Matters will seek assistance from internal or external experts, including a child protection agency, as required to aid with investigations;
- the individual whom the complaint has been made against will be removed from Health Equity Matters activities while the investigation is undertaken;
- investigations will not be disclosed or discussed with anyone other than those who have a legitimate need to know the situation. Investigation reports and outcomes are to be marked confidential and will not be released to any third party other than law enforcement agencies, should their assistance be required with investigations;
- the survivor/victim (or guardians of the child) will be kept informed and advised of the proposed action; and
- all documentation relating to the report, investigation and subsequent response will be marked confidential and stored securely.

Once all appropriate and necessary information has been gathered, the Health Equity Matters CEO or President will decide whether the allegations are substantiated. An outline will be provided as to what action will be taken. The Health Equity Matters Board of Directors will be kept informed of the outcome of any investigation.

7. Consequences of Policy Breaches

Breaches of the Safeguarding Policy and Code of Conduct constitute gross misconduct and are grounds for termination. Depending on the nature and severity of the breach, disciplinary action for breaches of this policy may include:

- suspension from work, pending an investigation;
- Health Equity Matters internal investigation or an external investigation;
- formal warning and monitoring;
- referral to law enforcement where behaviour constitutes a criminal offence;



- termination of employment, volunteer arrangement, or Directorship; and
- termination of a program partnership.

8. Document Management and Confidentiality

All confidential documents and sensitive information will be handled in accordance with the Privacy Policy. They will be securely stored online in restricted access areas of Health Equity Matters network. Confidential and sensitive safeguarding documentation includes all information relating to police checks, verbal referee checks, and any information in relation to a safeguarding incident.

9. Roles and Responsibilities

Who	Responsibility		
Board	Cultivate and maintain a culture of zero tolerance towards SEAH and CAE		
	 Oversee and assure the robustness of Health Equity Matters safeguarding system Approve this policy and any updates 		
Finance and Audit	 Review all safeguarding incidents as part of reviewing the Complaints and Incidents 		
Committee	Registers, assure integrity of organisational safeguarding systems, and ensure that matters are being effectively managed		
CEO	 Ensure the application and accountability of this policy is established within Health Equity Matters operations 		
	 Report all safeguarding matters to the President and matters of relevance to the Board 		
	Handle matters requiring investigation		
	 Ensure policy is regularly reviewed every three years 		
Safeguarding Focal Point	 Promote safeguarding through strengthening communications, training, and day-to-day compliance with the Safeguarding Policy and Code of Conduct. 		
	 Act as a key contact for safeguarding complaints and allegations 		
Complaints and Whistleblower Protection Officer	 Act as a key contact for safeguarding complaints and allegations 		
Managers	 Raise awareness of, and train Health Equity Matters Personnel regarding the application of this policy across all Health Equity Matters programs and projects and ensure a safe environment for all 		
	 Ensure Health Equity Matters Partners are aware of this policy and have appropriate safeguarding mechanisms in place 		
All Health Equity Matters Personnel	 All Health Equity Matters Personnel share the responsibility for the prevention, detection, and reporting of suspected CAE and SEAH, as per this policy 		



10. Related Policies and Documents

Policy	Title and Hyperlink		
006	Code of Conduct Policy		
042	Complaints Handling and Whistleblower Policy		
038	Communications Policy		
001	Delegations of Authority Policy		
029	Partnership Policy		
012	<u>Privacy Policy</u>		
022	Recruitment and Selection Policy and Procedure		
Templates/Tools			
	Safeguarding Concern Reporting Form		
	Complaints Register		
	Incidents Register		
	Compliance and Training Register		
	Due Diligence Pre-Screening Checklist		
	Partner Capacity Assessment and Development Plan		

11. Policy History

Date of update	Version	Key changes	Endorsed by	Approved by	Next review
April 2023	2	Consolidated and updated the two formerly separate policies: Child Protection Policy; and Prevention of Sexual Exploitation, Abuse and Harassment Policy.	Finance and Audit Committee	Board	April 2026
May 2020	1	Establishment of inaugural Prevention of Sexual Exploitation Abuse and Harassment Policy	Management Team	Board	May 2022
June 2020	1	Establishment of inaugural Child Protection Policy	Management Team	Board	June 2022



ANNEX 1 - Safeguarding Code of Conduct

Health Equity Matters capacity to achieve its vision and mission and live its values, depends upon the individual and collaborative efforts of all Health Equity Matters Personnel and Health Equity Matters Partners. To this end, all Health Equity Matters Personnel and Health Equity Matters Partners must uphold and promote the highest standards of ethical and professional conduct and abide by Health Equity Matters policies.

The Safeguarding Policy and Code of Conduct defines the safeguarding conduct to be followed to protect anyone from sexual harassment, exploitation and abuse, and child abuse by Health Equity Matters Personnel and Health Equity Matters Partners. It also aims to protect those working at or with Health Equity Matters from misunderstandings by providing clear behavioural guidelines and expectations that assist in establishing and maintaining clear professional boundaries when working or having contact with children and adults.

Any violation of this Safeguarding Code of Conduct is a serious concern and may result in disciplinary action, up to and including dismissal, in accordance with the disciplinary procedures of Health Equity Matters and applicable laws. All those covered are required to read and sign this Safeguarding Code of Conduct to indicate their agreement to adhere to the Code while performing their duties on Health Equity Matters activities.

I, ______ [insert name] acknowledge that I have read and understood Health Equity Matters Safeguarding Policy and agree to abide by its Safeguarding Policy and Code of Conduct.

I agree that while performing my duties with Health Equity Matters, I must:

- 1. create and maintain a safe and equitable organisational culture that prevents and opposes sexual exploitation, abuse and harassment, and child abuse.
- 2. treat everyone with dignity and respect and challenge attitudes and behaviours that contravene the Health Equity Matters Safeguarding Policy and Code of Conduct.
- 3. immediately report any concerns I have regarding possible violations of the Health Equity Matters Safeguarding Policy and Code of Conduct, by Health Equity Matters Personnel or Health Equity Matters Partners. I understand that failure to report any concerns may lead to disciplinary action. I will ensure I am aware of the options available to me to report and that when I report a concern or allegation, I will do so confidentially.
- 4. share sensitive information that I may be aware of, that relates to concerns of sexual exploitation, abuse and harassment, or child abuse, whether involving staff, program participants or others in the communities where Health Equity Matters works, through the reporting options available to me. I understand that for the respect, dignity and safety of everyone involved, it is essential that I maintain confidentiality about any concerns or information I am aware of and only share information with staff of the appropriate function who need to know such information. I am aware that breach of this policy may put others at risk and will therefore result in disciplinary procedures.
- 5. disclose to Health Equity Matters any civil judgment or criminal conviction that relates to allegations made against me of sexual exploitation, abuse and harassment or child exploitation and abuse.
- 6. always ensure that I have another adult present when working with children.
- 7. always ensure that for work-related purposes when I photograph or film a child, I:
 - comply with local traditions or restrictions for reproducing personal images;
 - obtain informed consent from the child and parent or guardian of the child, before photographing or filming a child, explaining how the photograph or film will be used;



- ensure photographs, films, videos and DVDs present children in a dignified and respectful manner and not in a vulnerable or submissive manner;
- ensure children are adequately clothed and not in poses that could be seen as sexually suggestive;
- ensure images are honest representations of the context and the facts; and
- ensure file labels do not reveal identifying information about a child, for example, name and exact location.
- 8. protect, manage and use Health Equity Matters resources appropriately and never use Health Equity Matters resources, including computers, cameras, mobile phones or social media, to exploit, groom or harass participants of Health Equity Matters programs, children or others in the communities in which Health Equity Matters works. I am aware that it is prohibited for staff to access, display or transmit offensive material on any Health Equity Matters-provided or subsidised electronic device (e.g. computer, tablet, phone) at any time, or on any personal electronic device on a Health Equity Matters network in the workplace.

As a member of Health Equity Matters Personnel or a Health Equity Matters Partner, I will not:

- 1. sexually exploit, abuse or harass anyone and understand that these behaviours constitute acts of gross misconduct and are therefore grounds for disciplinary action, up to and including dismissal.
- engage in any form of sexual activity or develop physical/sexual relationships with children (persons under the age of 18) regardless of the age of consent locally. I understand that ignorance or mistaken belief in the age of a child is not a defence.
- 3. engage in transactional sex where I exchange employment, goods, or services relating to a Health Equity Matters activity for sex or sexual favours. I understand this means I must not exchange assistance that is due to program participants for sex.
- 4. fraternise with or engage in any sexual activity or sexual relationship with program participants. I am aware that such relationships are prohibited. I understand that such relationships are based on an improper use of my position and inherently unequal power dynamics and may undermine the credibility and integrity of Health Equity Matters work. I understand I must declare any previously existing relationships with program participants to my line manager.
- 5. request any service or sexual favour from participants of Health Equity Matters programs, children or others in the communities in which Health Equity Matters works, nor engage in sexually exploitative, abusive or harassing relationships.
- 6. support or take part in any form of sexually exploitative or abusive activities, including, for example, child pornography, trafficking of human beings or child marriage.
- 7. hire children for domestic or other labour which is inappropriate given their age or developmental stage, which interferes with their time available for education and recreational activities or which places them at significant risk of injury or exploitation.
- 8. use language or behave towards children in inappropriate, harassing, abusive, sexually provocative, demeaning or culturally inappropriate ways.
- 9. invite children into my private residence or hotel, nor sleep close to unsupervised children.

Commitment to abiding by the Safeguarding Code of Conduct

I understand that the onus is on me, as a person working on Health Equity Matters activities, to abide by this code of conduct and all relevant Australian and local laws and avoid actions or behaviours which may be construed as sexual exploitation, abuse and harassment, or child exploitation and abuse.



I commit to adhere to the Health Equity Matters Safeguarding Code of Conduct. I have read and understood the Code and will uphold it to the best of my ability.

Name	
Signature	
Date	

Please e-mail this signed form to: amy.zeng@healthequitymatters.org.au



ANNEX 2 – Safeguarding Reporting and Response Process

WHO CAN REPORT?



Anyone (child, parent, guardian, carer, adult, Health Equity Matters staff, volunteers, Board and Committee members, partners, members of the public, etc.)

WHAT SHOULD BE REPORTED?



Behaviour that is suspected of being sexual exploitation, abuse and harassment and/or child abuse and exploitation (including possession of child exploitation material) or Safeguarding Policy and Code of Conduct non-compliance.

WHO TO REPORT TO?



(1) Safeguarding Focal Point

Ph: +61 9557 9399; E: reporting@healthequitymatters.org.au

(2) Complaints and Whistleblower Officer

Ph: 61 (2) 95579399, E: complaints@healthequitymatters.org.au

If overseas, also report to the local partner using local partner reporting mechanism.

WHEN SHOULD IT BE REPORTED?



All concerns must be made immediately, or as soon as practically possible

WHAT WILL HAPPEN?



Upon receipt of a report the Safeguarding Focal Point and Complaints and Whistleblower Protection Officer, in consultation with the CEO, will discuss the nature of the allegation, report the matter to donors and the Board, and decide upon the next steps. This many include:

- undertaking an internal investigation;
- immediately suspending involvement in the project and/or Health Equity Matters activities;
- notifying relevant local authorities and child protection authorities and support services as required.

WHAT ARE THE POSSIBLE OUTCOMES?



The outcome of any report will depend on its nature and circumstances, but could include up to one or more of the following:

- suspension, pending investigation;
- reprimand with warning or censure;
- termination of employment, Directorship, partnership or supplier relationship
- training;
- additional supervision; or
- no follow up case unfounded.



ANNEX 3 – Safeguarding Concern Reporting Form

ALL INFORMATION IN THIS FORM WILL BE TREATED CONFIDENTIALLY

Health Equity Matters Personnel and Health Equity Matters Partners must report any suspected safeguarding concern, including a breach or potential breach of the Safeguarding Policy and Code of Conduct. This form can be lodged by emailing: reporting@healthequitymatters.org.au. Alternatively, you can call +61 2 9557 9399.

Please note that all safeguarding concerns must be reported <u>immediately</u>. It is your responsibility to report any allegations NOT to investigate. You do not need to have proof of your concerns to complete this form.

Information about you (*optional – any information provided will be treated confidentially)			
Name			
Position at Health Equity Matters or relationship to Health Equity Matters			
Date of completing form			
Email			
Phone			
Information about the suspected safeguarding incident	t .		
Description of the suspected safeguarding incident. Specify whether it involved: sexual exploitation, abuse and harassment, child abuse and exploitation, a breach of Health Equity Matters' Safeguarding Policy and Code of Conduct, other a related matter.			
Specific details of the incident (date, location, any witnesses)			
How you became aware of the suspected safeguarding incident			
Details of any supporting evidence you can share (attach if appropriate)			
Has this allegation been reported to anyone – a partner organisation? Local police? Other local authorities If yes, please provide details			



Details of Person(s) against whom the allegation has been made (IF KNOWN)			
Family Name:			
Given Name:			
Sex:			
Date of birth:			
Nationality:			
Contact details:			
Employer\Program: (Please highlight or circle most appropriate descriptor(s).)	Health Equity Matters Personnel (Board, Committee members, staff, consultants, contractors, volunteers)	Health Equity Matters Partners (Partner organisations' personnel- Board members, staff, consultants, contractors, volunteers, and partners)	Other
Position: (If applicable)			
Details of Survivor/\	Victim(s) (IF KNOWN)		
Family Name:			
Given Name:			
Sex:			
Date of birth:			
Nationality:			
Contact details:			
Age of child or adult at	t time of alleged incident:		
Have any injuries beer	observed or reported?		
	n danger of sexual exploitation t, or child abuse and exploitation?		



Follow up Reflection/Action	
What could have been done to prevent this? Is a change of policy or practice recommended?	

Reported by	Signature	Date
[Insert name of person reporting]		

Signed off by	Signature	Date
[Insert name of manager]		