

How-to note

What to consider when implementing the safeguarding cycle

The term "safeguarding cycle" is increasingly being used in international development, humanitarian and peacekeeping to describe the sequential steps and actions required to build robust, responsive and contextually relevant safeguarding systems. As the name suggests, it is a cycle, meaning that learning continuously feeds back to strengthen safeguarding capability over time. This how-to note provides organisations with a framework for intentional action on safeguarding. Wherever they are in their safeguarding journeys, it highlights the key components required to keep staff, other personnel and project participants safe, to plan and allocate time and resources for this appropriately, and to ensure that everyone does their part to help meet the various global safeguarding standards. It is important to be aware of this before submitting a proposal as the steps below may have budget implications.

Key concepts and terms

Safeguarding refers to the measures an organisation puts in place to keep people who come into contact with it or its associates' personnel, programmes and operations safe from harm. Safeguarding is considered an **ethical as well as practical approach** to delivering humanitarian and development assistance and is driven by **international safeguarding standards**. This means that safeguarding is not just about what organisations do, but how they do it.

Risk of harm is inherent in aid work due to the power imbalances between those who provide assistance and those who receive it, as well as between personnel with more power and stature than others. Safeguarding risks are especially heightened during humanitarian responses. This might be because systems do not initially exist, or because normal checks and balances that may have held perpetrators to account – like the police and justice system or even within organisations and communities – are likely to have eroded. This situation means perpetrators can act with impunity. It is also because any pre-existing differences in power are usually made deeper by the crisis, or generated by it, meaning more opportunity for abusive behaviours.

It is important to note that **safeguarding and protection are not the same**, even if they have some of the same root causes. Protection issues – e.g., Gender-Based Violence (GBV), sex trafficking or child labour – may exist in a society, whether an organisation is present or not. Programmes may be designed to respond to protection issues. By contrast, all programmes, regardless of the sector or nature of work, must integrate safeguarding in order to uphold international standards and the commitment for organisations delivering assistance to "do no

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harm." Such standards are essential because organisations can cause harm through the people they employ or partner with, the activities they implement, and the communications they undertake, whether intended or unintended. Click for more information on **safeguarding and GBV intersectionality and differences**.

Intersectionality helps to understand how different identity characteristics – e.g., race, gender, disability, class and so on – overlap and intersect to create power and privilege for some individuals and groups, while marginalising and disempowering others in a particular context. Intersectionality can help us to know who is most at risk, and that vulnerability is dynamic and can change over time or in different settings. It reminds us that staff at organisations are products of the belief systems, norms and social hierarchies of their context, so the vulnerabilities and power dynamics that play out in society may be mirrored in workplaces and workspaces. It also draws attention to the fact that organisations can increase or decrease the vulnerability of their staff and those they serve – both adults and children – through their behaviour, attitudes and beliefs, their programmes and their organisation's policies, procedures and practices. Click for more information on <u>intersectionality and</u> <u>safeguarding</u>.

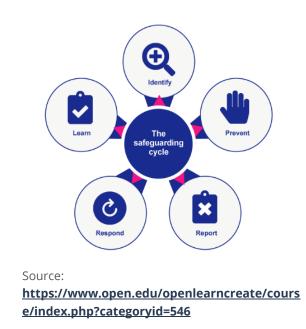
Vulnerability describes when a person is more at risk compared to others because – whether temporarily or permanently – they have lower capacity to exercise their basic rights, provide for themselves, access resources, support and services, and protect themselves from harm. Vulnerability is not static; it depends not just on the individual and their characteristics, but also the risk factors around them, which can change over time (e.g., the presence of armed groups, being part of protractive crisis, lack of water sources, mobile populations who have no protective networks and so on). In places where aid is being provided, everyone is to some degree or another vulnerable. However, it is important to be mindful of patriarchal, colonial, ableist or other narratives that may incorrectly suggest that, for example, *all* women, or *all* people from one part of the world, or *all* people with disabilities are at risk. The only way to truly understand vulnerability is to consult communities and individuals sensitively to understand what risks they face and how vulnerable they feel as the experts of themselves. It is also important to challenge our own biases and be open to the idea that some people from typically marginalised groups may actually hold a lot of power – e.g., a prominent and respected disability rights activist – and not consider themselves vulnerable at all.

The safeguarding cycle

There are 5 phases of the safeguarding cycle: Identify, Prevent, Report, Respond and Learn.

Safeguarding incidents may happen at any point during, or outside, the project cycle. When these incidents occur, the safeguarding cycle should be activated as shown by the diagram. However, some of the tasks in the various phases of the safeguarding cycle have strong links with tasks during phases of the project cycle. The following section takes a deeper look at each of these phases and asks when during the project cycle that safeguarding phase applies, what the priorities for that phase are, and what questions organisations should be asking to ensure that they have systems in place that meet international safeguarding standards. It is expected that in asking these questions, organisations will be able to assess what is missing and therefore what prevention and response action needs to be taken to strengthen safeguarding.

It will become apparent that each phase contains tasks that are programmatic,



operational and organisational. This highlights that safeguarding is everyone's responsibility within an organisation, and that all skill sets are required to ensure that the safeguarding cycle operates smoothly. The safeguarding cycle also shows how safeguarding is a continuous and iterative journey, where learning constantly informs all other phases.

Different organisations label the various phases of the project cycle slightly differently. For the purposes of this document, they will be described as: 1) Project identification and design, 2) Setup and planning, 3) Implementation, 4) Monitoring and evaluation and 5) End-of-project transition phase.

1. Identify

This phase invites organisations to carry out a risk assessment with staff and communities to understand who is at risk of what, and by whom. Organisations are strongly advised to use an intersectional lens (see above definition) when assessing risk levels for different groups. Click for guidance on **how to conduct a risk assessment**.

This phase is an opportunity to reflect on the level of safeguarding risk of various programme activities so that adjustments can be made to reduce or eliminate risks altogether. The consultations that happen in this phase provide additional benefits: a) the most appropriate communication and reporting mechanisms, including reporting entry points, for the context, b) a better understanding of the local culture, gender considerations, harmful practices and existing initiatives and protection systems, and c) consultation – if done safely, by and with the right people – can forge important relationships and establish information flows that later will support prevention work by becoming both a protective mechanism and also a trusted reporting network should safeguarding issues arise. Ample budget, time and resources should therefore be earmarked for the Identify phase as it pays off later in terms of reduced cases and better-quality, smoother programming.

When? Identification of safeguarding risks should happen as early as possible once the contract has started. Safeguarding risk identification should ideally be built into wider risk identification and mitigation planning processes and is usually more cost effective. Doing this well at the start of a project means the safeguarding cycle will not need to be activated as often during the project cycle.

Safeguarding risks can, however, be identified at any moment during the project cycle. This is because safeguarding misconduct is not determined by where a project is in terms of its delivery phase, and incidents may still happen due to the uneven power dynamic of the aid-recipient relationship and the nature of the broader aid delivery environment which can create opportunity for exploitation and abuse. Safeguarding misconduct may also occur if the dynamics in a setting change rapidly, especially in emergencies, and new opportunities for safeguarding misconduct present themselves; note that this may be at the end-of-project transition, when staffing levels are scaled back following the end of implementation and potential perpetrators of safeguarding misconduct can operate without much scrutiny.

Has your organisation:

• Put in place a risk management framework that explains how risks will be assessed, registered, mitigated and monitored, or eliminated?

<u>**Risk assessments**</u> must be safely conducted with staff, partners and community members to understand internal and external risks, including those that are unintended, whether presented by staff, processes and procedures or activities themselves. Remember to complete a <u>**risk register**</u> to house the identified risks, their mitigations and monitoring of those risks, and review it ideally every quarter.

• Conducted an analysis of the external risk factors that can increase vulnerability?

Are there characteristics that make people more at risk, or environments that people are in that place them more closely to the sources of harm?

Where there is capacity, a gender- and social-inclusion analysis maybe conducted to look at these factors in depth. Click for **guidance**.

• Analysed the internal risk factors within the organisation and/or partner organisations?

Conducting an analysis may consider the power dynamics between all personnel involved in a project. For more information and guidance on understanding who has power, see **<u>Power</u>** <u>**cube**</u>.

Click for guidance on **how to review organisational culture and create a healthy safeguarding culture** or for **guidance on building safer partnerships**. • Considered each of the proposed project activities and their delivery mechanisms through a safeguarding lens?

Do any of the planned activities or approaches create specific safeguarding risks that require rethinking? Do the proposed activities reach the most vulnerable in the right ways?

• Engaged project participants and staff to cross-check identified risks and mitigations, and the appropriateness of project activities and planned approaches?

Once project staff have been recruited and project participants selected it is important to consult them on the risk register that was built during the Identify stage to check that it is comprehensive and that the planned mitigations and monitoring strategies are appropriate. These staff will likely have specialised and local knowledge. It does not have to be extensive, but do not skip this verification stage.

While communities may be unfamiliar with safeguarding as a concept, they are the experts of the dynamics within and around their communities. Work in close partnership with communities throughout the project cycle to review risks, ensure that aid workers are behaving appropriately and confirm that all safeguarding systems put in place are working as expected. This will prevent the safeguarding cycle from having to be activated often.

Click for guidance on safe programming.

Review the approach to <u>staff wellbeing</u> and <u>duty of care</u>.

Emergency response or longer-term work in protracted crises can lead to staff exhaustion and potentially burn out; this might increase safeguarding risk as staff are more likely to engage in harmful behaviour and less likely to notice and report safeguarding concerns. Will local staff be drawn from a pool of people who have experienced trauma already, or be taken from previous projects that have closed out recently? If so, what provisions currently exist to safely recruit and/or support them to succeed and be safe at work?

• Reviewed the diversity and representativeness of staff in relation to the local population being served through the planned project?

Are any groups under- or overrepresented and does this need to be addressed?

Earmark budget for safeguarding work,

whether this is for staff or community consultations, setting up systems, training staff and partners, handling reports, communicating with communities, conducting monitoring, evaluation and learning (MEL), conducting investigations.

2. Prevent

Following the internal and external analyses described above, it should be clear who needs to be especially safeguarded from whom, against what, in which spaces in the project, during which activities, and how they will be safeguarded. The below explains the various prevention strategies that can help everyone, but especially those most at risk, to stay safe, and importantly, prevent potential perpetrators from entering the organisation in the first place.

This phase is about building the safeguarding architecture that will keep staff and project participants safe for the duration of either the project or over the lifetime of the organisation's presence. Key to this phase is the building of a safeguarding framework – an essential document that houses all information regarding an organisation's approach to safeguarding, describing the safeguarding policies, practices, processes and systems it has in place to prevent, receive and respond to safeguarding cases in a timely manner. Leadership should be at the front and centre of all prevention work, setting the tone, keeping safeguarding on everyone's agenda, and modelling the principles and standards expected of everyone in the organisation.

When? Most prevention work should be done during the Setup and planning phase of a project, including during any inception phase, and early on in the Implementation phase once staff have been recruited and partnerships established. These systems are then activated and operationalised throughout Implementation and Monitoring and evaluation phases of the project cycle, right through until the End-of-project transition. Again, however, prevention has to be responsive to new dynamics that can reveal themselves at any point during the project cycle, especially in emergencies, and so prevention work may be carried out during any phase of the project cycle as new risks emerge. Project managers should therefore remain vigilant throughout and not assume that once systems are put in place during the Prevent phase of the safeguarding cycle that this is sufficient.

Has your organisation:

• Created a robust safeguarding framework that sets out the organisation's approach to safeguarding?

Key features of a safeguarding framework should be a commitment to zero tolerance to inaction in response to safeguarding reports; adherence to survivor-centred and <u>trauma-informed approaches</u> to safeguarding and programming/operations more broadly; recognition of the safeguarding principles (confidentiality, safety, responsiveness and objectivity); and a description of all the <u>safeguarding policies</u> and procedures that the organisation has in place.

There may be one <u>code of conduct</u> and one all-encompassing <u>safeguarding policy</u> at minimum, or there may be specific policies on, for example, <u>whistleblowing</u>; <u>child-</u> <u>safeguarding</u>; Sexual Exploitation, Abuse and Sexual Harassment (SEAH); <u>digital</u> <u>safeguarding</u> – it does not matter as long as the contents reflect the various <u>international</u> <u>safeguarding standards</u>.

A safeguarding framework should be reviewed every 1 to 3 years ideally, or whenever circumstances and safeguarding risks have significantly changed.

• Appointed a Safeguarding Focal Point?

Safeguarding Focal Points (SFPs) promote safeguarding messaging within and beyond organisations. They are the primary point of contact for safeguarding concerns and are required as one of the international safeguarding standards. For more information on their responsibilities and as an example, see <u>HelpAge International's SFP Terms of Reference</u> (TOR).

• Ensured that all recruitment processes have been thorough in terms of safeguarding?

This includes all steps, from the contents and locations of vacancy notices to application forms, interview questions and tests, to police and reference checks, probation reviews and so on. For more information see **safe recruitment**.

• Communicated with staff and communities on the approach to safeguarding and expected standards?

Information should be made visible in workplaces and workspaces, and <u>accessible</u>. (Click for more information on <u>how to meet the inclusion needs of staff</u>.)

Community members should know what is acceptable behaviour for aid workers and **what should be reported** and how. (For more on reporting mechanisms, see the Report phase below.)

Click for <u>communications resources aimed at frontline aid workers and partners</u> from International Organization for Migration (IOM) and World Food Programme (WFP), and for <u>materials to raise community awareness</u> from Interaction.

• Provided safeguarding training and guidance for staff and partners?

Training should be provided to all staff and associated personnel including non-technical staff. This should cover what safeguarding is, whose responsibility it is, what zero tolerance to inaction and duty of care mean, how to receive a report/disclosure, and safeguarding reporting systems.

RSH offer 5 modules of *e-learning*, available in multiple languages.

• Ensured that any communications being undertaken about the project or organisation are safe?

It is possible that grave harm can be done through communications. Organisations must pay attention to how safely information is collected, avoiding revealing personally identifying information, making good judgments on image choices, how people's stories are conveyed, taking great care to depict them with dignity and keep them safe.

For more information, see this **<u>safe media and communications infographic</u>**. See this resource where programme activities have a **<u>digital element</u>**.

• Provided a clear steer from leadership to all employees and partners on the organisation's direction and culture around safeguarding?

Apart from the safeguarding framework, which acts as a document that holds leadership to account, leadership should – through their own actions and behaviours – model the expectations they have of staff. They should also aim to keep safeguarding on the agenda, in all aspects of work, and lead by example. Click for more guidance on **how leadership can promote safeguarding** in the work place. Click for guidance on **how to support organisational culture change**.

3. Report

Safeguarding incidents may be reduced if the recommendations at the Identify and Prevent phases of the safeguarding cycle are actioned. However, given the uneven power dynamics inherent in aid work and the nature of the context aid is being delivered in, incidents will still occur. In this case organisations need to be ready to receive reports in a timely, safe and quality manner.

This phase is all about ensuring preparedness for receiving and responding to reports of safeguarding misconduct. It includes both the setting up of reporting mechanisms and the initial receipt of a report of suspected or actual safeguarding misconduct.

When? The Report phase of the safeguarding cycle covers the whole project cycle. This is because all activities across the project cycle have inherent safeguarding risk and – should a safeguarding incident occur – at minimum the project and its staff must be ready to respond without delay. However, it is most likely that reports will be received during the Project implementation phase, when activities are underway, and staff have the highest level of contact with each other and with project participants.

Remember! It is not the responsibility of victims/survivors – whether adults or children – to disclose their story.

The onus is on the organisation to be vigilant around safeguarding misconduct and to be able to recognise the signs and symptoms of abuse so that action can be taken before others are harmed.

Has your organisation:

• Set up safe, inclusive, accessible and appropriate <u>community response</u> <u>mechanisms</u> (CRMs)?

Community response mechanisms can be described in different ways: community feedback mechanisms, complaints mechanisms and so on. Internally in an organisation they may be called grievance mechanisms. As far as safeguarding is concerned, they all perform the same function – to enable a person who has been harmed by the project, a staff member or the organisation to report it safely and in a way appropriate for them. This means that when a CRM is set up (or indeed an internal mechanism for staff), it is important to consult the people who will be both using the CRM and those maintaining it to ensure that it is well contextualised. Click to watch a short clip on <u>setting up CRMs</u>.

• Carried out a detailed mapping of support services?

This should cover legal, medical, psychological, protection and any other specialist services for women, people with disabilities, refugees and so on. If there is a protection cluster operating in the area, they will likely have the most up-to-date referral services directory. This will be accompanied by a referral map instructing how to report a case.

Even if a generic directory of local referral services exists, it is best practice to understand the distance and cost from your project so that you can advise victims/survivors appropriately. In some cases, it may be required to provide transportation; doing this mapping work in advance can help improve the quality of the Response phase.

Click for guidance on mapping referral services.

Assigned key roles and responsibilities?

It is essential that once the system has been designed and both communities and staff have given their inputs, there is clarity about who should do what, and when, from the moment a report or disclosure is received right the way through to a case being closed. This is essential as in the case of Sexual Exploitation and Abuse (SEA), where there is risk of sexually transmitted infections (STIs), HIV and/or pregnancy, there is a very narrow 72-hour window for prophylactic treatment to be administered. These services are not always nearby, therefore action must be taken swiftly but carefully in order to do no further harm. This means having the right personnel with the right qualifications and capacities assigned at the right moments and that everyone engaged understands their role. (In some cases, pregnancy prophylactics that can prevent pregnancy up to 5 days following an incident may be available, but this is rarely so, so it is best to consider 72 hours as a rule). Donors and headquarters will also usually expect to be notified within 24 hours of a report or disclosure. This will normally be done by a Need-to-Know Committee, explained further below.

Established who will triage reports and how?

Reports/feedback are normally triaged by a Safeguarding Focal Point. This means that they are classified as sensitive and non-sensitive. Sensitive reports could be subdivided into 2 further categories: non-SEAH/non-safeguarding (e.g., gross misconduct such as fraud) and SEAH/safeguarding (e.g., sexual abuse). The handling of sensitive reports is different from non-sensitive handling because SEAH reports require very specific and urgent response times in order to protect victims/survivors. Non-sensitive reports are usually feedback and complaints that can be handled more openly by project or MEL staff and so will just be handled over. Click for more on typical **case handling** pathways.

• Decided on how data will be collected during a report and how it will be stored safely?

When reports are made or disclosures are received, data must be collected. This data is sensitive and can do serious harm if it makes its way into the wider public domain, beyond the Safeguarding Focal Point and the Need-to-Know Committee. Click for a **safeguarding incident reporting (SIR) form template**.

Each organisation must consider what systems make sense for them to ensure that no further harm is caused by this information being seen by others or by being stored insecurely. Any spreadsheets with information about cases should be password protected with the password known only to a select few on the Need-to-Know Committee.

Written personally identifying data (names, addresses etc.) should be avoided as far as possible with in-person or telephone communication preferrable.

• Trained staff on how to receive a disclosure and make a report safely?

Every staff member in an organisation must be trained and ready to receive a disclosure and also to make a report should they experience or suspect safeguarding misconduct. If this has not already been included in broader basic training, then it needs to be provided as a standalone training. Click to learn more about **handling and managing reports of SEAH**.

Established appropriate communications messages and mechanisms?

This is essential for staff and communities to understand what should be reported and not, what behaviour should be expected from aid workers and fellow colleagues, what "zero tolerance to inaction" means, and what your organisation's duty of care is towards its staff and project participants. Accessibility in terms of literacy levels, languages, age-appropriateness, disability and the locations and means of messaging should be intentionally reflected upon.

4. Respond

Once a report is received and has been triaged, a response is always required. Some safeguarding cases will not require an investigation as the incident has been well understood and evidenced. It may also be that a case that has been reported through the CRM system did not involve either a staff member or a project participant, and so the duty of care requirement would simply be to refer to the relevant local authorities or service providers and follow up. In all cases, there is zero tolerance to inaction. While the victim/survivor is always central, it is especially important that the Response phase is survivor-centred and, as much as possible, survivor-led.

This phase is about making sure that once a report is received, the survivor's journey through the system towards assistance, recovery and justice (if sought) is supported and that their needs, wishes and rights are upheld and respected.

When? This phase occurs every time a report is received, no matter when in the project cycle. The majority of reports will occur, however, when implementation is beginning or underway as this is when project participants and staff interact the most; during the delivery of activities; and where aid workers may have more leverage to exploit project participants by withholding assistance or threatening to exclude them from the project.

Has your organisation:

• Set up a Need-to-Know Committee?

Due to the sensitivities, safety concerns and security risks around safeguarding cases – not just for victims/survivors but also for those reporting (if different) and any alleged perpetrator(s) –, all cases must be handled by a small group of selected personnel referred to as the Need-to-Know Committee. This will usually involve country directors/managers, a Human Resources (HR) staff member and any Safeguarding Focal Point. This team must have a terms of reference and a clear set of processes they follow to respond to each case fairly and in a timely and quality manner. They must also be well trained on the more advanced aspects of safeguarding. This committee would usually involve those with decision making around policy, practice and procedure, and so their direct experience on cases is useful in informing improved practice.

• Reinforced the message that there is zero tolerance to inaction on safeguarding misconduct?

While efforts in the Identify and Prevent phases are aimed at significantly reducing the risk of safeguarding misconduct, there is always a chance, given the uneven power dynamics involved in the delivery of development and humanitarian aid, and the lack of security and/or police and judicial systems that may deter potential perpetrators, that it may occur and need to be responded to. Zero tolerance does not mean that those delivering aid are expected to stop every safeguarding incident as this would be impossible, but it does mean that when incidents happen, proper action is taken. Whether a report is received from a project participant in the community or from a staff member, swift and meaningful action must be taken. Click to learn more about **managing sexual violence against aid workers**, **engaging with victims/survivors of SEAH**, **trauma-informed approaches** and **receiving and**

• Put in place the required elements to make appropriate referrals?

Aside from the completion of a contextualised referral services directory and the existence of a clear referrals pathway or map as mentioned previously, it is important that staff understand the full process in **case handling** and what a quality and timely response looks like.

Additionally, **consent and assent** must be fully understood in order for a survivor-centred response – a core principle in responding to SEAH and other safeguarding misconduct – to be possible. In the vast majority of cases, the needs and wants of the victim/survivor is prioritised and respected, however, very rarely, consent may need to be overridden where it is clear that an adult may lack the cognitive or intellectual capacity to make safe and healthy choices for themselves, possibly due to trauma, or where they or any others may be in imminent and grave harm if a report to authorities or other services is not made. Otherwise, ensuring that the victim/survivor has as much control as possible and can make their own informed choices having received as much information as possible to do so – i.e., being survivor led - is key. For

children, it is best practice to ask for their assent, but the main priority is to work in the best interests of the child at all times.

It is also important to know **what to do when no Gender-Based Violence (GBV) actor is available** to refer to.

• Ensured that some safeguarding investigations capacity is in place?

This may be internal or external to your organisation but must be set up and ready to utilise if an investigation it required. In some cases, there is no investigations capacity locally, and this may need to be sought from abroad and remotely. In some contexts, lawyers have been known to provide their services for free or at low cost to organisations.

Click for a **safeguarding investigation terms of reference template** and also for the **CHS Investigator Training Qualification Scheme** should your organisation wish to have this expertise in-house.

5. Learn

This phase is about taking all experiences, especially from the cases, and generating generic learning that can improve the whole safeguarding cycle. In some cases, this anonymised learning can be shared – if done safely – with community members and/or staff so the organisation is able to hold itself to account and earn the trust (back) from its stakeholders.

When? This phase may happen at the End-of-project transition phase, or after evaluations and particular monitoring events, or it may need to happen after a known-about safeguarding incident.

Has your organisation:

• Set a routine timeframe for leadership and core safeguarding staff to review all elements of the safeguarding framework?

Does the policy cover all necessary aspects of safeguarding in the context? Are the risks sufficiently documented and mitigated appropriately? Are the procedures and protocols satisfactory? Have victims/survivors provided their feedback and has this been incorporated?

• Reflected on what the cases revealed about the operating environment and the programming?

Do programmes need to be rethought or certain activities removed moving forward? Are staff with specific skill sets required, or do partners need to be vetted or coordinated with better?