

**A Report on the Assessment of
For Equality Safeguarding Policy and
Its Procedures (November, 2023)**

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Acronyms

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| ARC | : Action Reflection Cycle |
| CBO | : Community Based Organisation |
| CEDAW | : Convention on the Elimination of all forms of Discrimination Against Women |
| CRC | : Convention on the Rights of the Child |
| FE | : For Equality |
| GBV | : Gender Based Violence |
| GEA | : Gender Equality Act |
| ICCPR | : International Covenant on Economic, Social and Cultural Rights |
| ICESCR | : International Covenant on Economic, Social and Cultural Rights |
| SADC | : Southern African Development Community |
| UDHR | : UNIVERSAL Declaration of Human Rights |

Executive Summary

For Equality (FE) is a Pan-African women's rights organisation working to accelerate progress towards gender equality. This organisation commissioned an assignment on assessment of its safeguarding policy and procedures between the months of August and November, 2023. This assignment sought to establish the extent to which previous cases of sexual harassment were handled by the institution, evaluating the current state of safeguarding policy for this institution, and recommend on how the organization's safeguarding policy and its reporting mechanisms could be strengthened to adhere to best practices.

The consultants undertook the assignment using consultative and participatory approach at every stage of the assignment to ensure collectiveness, consensus, and ownership of the process and outcomes. The consultants also used the action-reflection cycle (ARC) which is basically a research method which promotes reflection followed by action which leads to additional reflection until final direction is reached. Interviews and discussions were conducted with both former and current board members, staff, volunteers, partners and beneficiaries. A one-day workshop with staff and board members to assess the functionality of the existing safeguarding policy and its procedures was also organized.

The assessment established that there have been two main incidents of safeguarding that came to the attention of the organisation in 2021 and 2023 respectively. The assessment while commending the two respective FE boards in responding to the complaints that were lodged, also found that there were certain limitations in the final outcomes of the two separate incidents. Opportunities should have been explored to pursue further to identify the limitations/weaknesses and gaps that led to the incidents and devise ways of how to strengthen the identified areas as well as closing the identified gaps.

The assessment found that the comprehensiveness of the existing policy and its procedures were generally adequate but requires improvements in both content and implementation of the same. In this regard, the specific recommendations of the assessment are as follows:

- The 2023 draft revised safeguarding policy, much as it is an improved policy, should be further strengthened in the following areas: the target beneficiaries should also be underlined in the purposes of this revised policy; the roles and responsibilities of Board Members and Executive Director should be highlighted separately in relation to their oversight roles; remove details about reporting channels and investigative procedures since these are more technical and need be covered in separate documents; Finally, develop one more annex that would touch on guidelines on working with implementing partners such as CBOs with respect to integrating safeguarding in programming.
- Ensure that both existing Board members and all staff undergo police checks to minimize safeguarding risks for the organisation
- Ensure that all beneficiaries are oriented on their safeguarding policy and code of conduct and an awareness and education implementation plan should be developed that clearly indicates when and how project beneficiaries will be sensitized on the policy.
- Reporting and feedback mechanisms should be developed and shared with target beneficiaries outlining clear reporting pathways from the community for both criminal and non-criminal cases

- Continue undertaking risk assessment in all the organisation's activities in general, and all activities targeting girls and young women in particular to ensure that safety measures in the form of the mitigation measures are enhanced
- Some selected board members and staff should be trained on how to carry out investigations on safeguarding breaches to ensure that they are always survivor centred and in compliance with local statutory requirements.
- Once the revised policy has been adopted, its short key messages and code of conduct will have to be translated in the local language for dissemination purposes.

1.0 Introduction

An assignment on assessment of For Equality (FE) safeguarding policy and its procedures was commissioned by the said institution which is a Pan-African women's rights organization working to accelerate progress towards attaining gender equality. The organization's vision is toward a gender-equal and just Africa. Every day, women and girls around the world face violence and discrimination. Sexual exploitation, violence, harmful cultural practices, and systemic inequalities violate their human rights and prevent them from reaching their potential. For equality sees these gender inequalities as threats to the actualization of empowering girls and women and seeks to strengthen the individual and collective agency of Pan-African women to dismantle systems of oppression and attain gender equality.

The commissioning of this assignment was against the background that FE had encountered instances of safeguarding incidents and issues in recent years, posing a challenge for the organization in terms of how they handled and dealt with these matters. To address these concerns and ensure that the organization is in line with best practices, FE sought the expertise of Safeguarding Consultants. The consultants' role involved assessing the extent to which previous cases of sexual harassment were handled, evaluating the current state of safeguarding policy for FE, and recommend on how the organization's safeguarding policy and its reporting mechanisms could adhere to best practices.

2.0 Overall Objective of the Assignment

The overall objective of the assignment was to conduct a comprehensive assessment of how the previous cases of sexual harassment at FE were handled; evaluate the effectiveness of current safeguarding measures, and review the organization's current safeguarding policy aimed at providing recommendations on how to strengthen FE's safeguarding framework including how to enhance reporting mechanisms.

2.1 Specific Objectives

The specific objectives of the assignment were inter-alia to:

- Assess the implementation and effectiveness of the measures taken to address prior sexual harassment incidents.
- Evaluate the current safeguarding protocols and procedures in place, including policies, reporting mechanisms, and training programs.
- Assess the organizational culture and awareness of safeguarding issues among staff and board members.
- Review FE's safeguarding policy and recommend how it could be strengthened to be aligned with best practices, clearly outlining reporting mechanisms, and providing guidance for staff and stakeholders and protecting the victims.

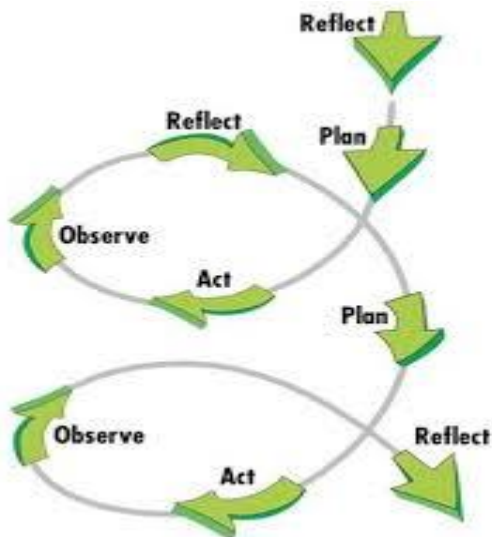
- Provide recommendations for strengthening FE's safeguarding framework, improving reporting mechanisms, and enhancing staff awareness and accountability.

3.0 Methodology

The consultants undertook the assignment using consultative and participatory approach at every stage of the assignment to ensure collectiveness, consensus, and ownership of the process and outcomes. A participatory approach is the process which ensures that everyone who has a stake in the organization has a voice, either in person or by representation. The consultants also used the action-reflection cycle (ARC) which is basically a research method which promotes reflection followed by action which leads to additional reflection until final direction is reached. The ARC fostered engagement and integration, deepened experiential learning and promoted adaptive problem solving.

Illustration 1 below further explains the ARC methodology:

Illustration 1: Action-Reflection Cycle



Through the action-reflection cycle, the consultants worked closely with stakeholders to review emerging findings, identified further avenues of enquiry and validated conclusions based on triangulating several sources of information: In this regard, Interviews and discussions were conducted with both former and current board members, staff, volunteers and beneficiaries. Some of the questionnaires were administered by face to face while others through email and phone communication. Focus group discussions with volunteers and beneficiaries were also done.

Furthermore, a one-day workshop with staff and board members to assess the functionality of the existing safeguarding policy and its procedures was organized. It was organized in such a manner that there were general discussions first on various thematic areas such as comprehensiveness of the existing policy, safe recruitment of board members and staff; code of conduct availability, orientation and training of staff and board members on the policy and its procedures; safe programme implementation and reporting and responding to cases. The consultants also conducted a desk review of the existing safeguarding policy, documentation

related to the sexual harassment complaints, investigation reports of previous sexual harassment cases and disciplinary measures that were instituted by For Equality. Some international and national laws and policies governing child and vulnerable adults' protection were also reviewed. Some of the national laws and policies that were reviewed included the Malawi Gender Equality Act (2013), the Child Care, Protection and Justice Act (2010), the National Policy on Orphans and other Vulnerable Children (2003) and Trafficking in Persons Act (2015). The review of the international, regional and national laws and policies was aimed at establishing the extent to which FE safeguarding policy and its procedures were aligned to the international, regional and national context. Through desk review and key informant interviews, the consultants also assessed the following components of the organization to appreciate how safeguarding measures were applied: (i) recruitment (ii) Programme delivery (iii) Engagement with beneficiaries (iv) risk management (v) leadership and media engagement.

3.1 Limitations of the assessment

(i) The investigation reports of the previous safeguarding cases were not made available to the investigations team. Some documents related to the initial safeguarding case done by the previous Board were made available but they did not include the actual investigation reports that might among others recommended for the disciplinary processes to be instituted.

(ii) Members of the previous board were not readily available for interviews. However, the consultants managed to have discussions with 2 of the previous board members

(iii) Consultants were not able to get any feedback from FE donors on the FE safeguarding policy and reporting mechanisms despite making several attempts and reminders.

(iv) Mobilization for beneficiaries was faced with some hiccups to the extent that only 15 girls and young women from Mtandire were engaged.

4.0 Literature review

A safeguarding policy is by and large created by an organisation to make it clear what the organisation will do to keep children, youth and or any programme participants such as adults at risk safe. The policy should include the organisation's commitment to protecting all children, youth or and all project participants. It should be backed by its procedures in order for it serve its purposes of providing protection and responding to concerns when they arise. The¹ IASC on safeguarding states that Keeping Children Safe represents a commitment by those working in this sector to ensure that their organisations "do no harm" and that they meet the responsibilities set out in the UN Convention on the Rights of the Child to protect children from all forms of abuse, neglect, exploitation and violence. The International Agency Standing Committee standards on safeguarding covers the four areas:

Standard 1: Policy- The organisation develops a policy that describes how it is committed to preventing and responding appropriately to, harm to children.

Standard 2 People- The organisation places clear responsibilities and expectations on its staff and associates and supports them to understand and act in line with these

¹ IASC Safeguarding Standards

Standard 3 Procedures -The organisation creates a child-safe environment through implementing child safeguarding procedures that are applied across the organisation.

Standard 4 Accountability- The organisation monitors and reviews its safeguarding measures

The key documents that have to be in place for an organisation in relation to safeguarding includes the following :

- **Safeguarding Policy** : A safeguarding policy that provides guidelines for dealing with issues of violence against project participants needs to fit in, where appropriate, with the specific cultural context and legal requirements of the country's law.
- Reporting Procedures
- Code of Conduct
- Risk register

The safeguarding policy structure should at least include the following elements:

- (i) **Policy statement/commitments/values** : outlining why the policy has been issued and what it aims to achieve. For instance the organisation should make a policy statement to keep project participants such as children and youth safe from harm and, where appropriate, to promote their well-being and development. The statement should also refer to the organisation's overall mission.
- (ii) **An applicability and scope statement**, describing who and what are affected by the policy. An effective date, indicating when the policy comes into force is also very relevant.
- (iii) **A set of objectives or purposes**, aligned with the overall goals and context of the organization
- (iv) **What the organisation intends to do about it**: This is the main part of the policy. A selection of policy tools, strategies and actions to implement the policy needs to include the following:
 - **Risk assessment**: This basically ensures that risks in all areas are identified and controls or mitigation measures put in place. It among others for example establishes how the level of contact between staff and associates on one part with children and young people on the other hand to make sure that safety is guaranteed. It further looks at whether staff and others have appropriate knowledge skills and attitude to work safely with girls, boys and young people in all their diversity inclusively and respectfully? It also assesses if relevant stakeholders are able to recognise indicators of abuse, (and how these are different for girls, boys and young people in all their diversity), understand what to do if a girl, boy or young person tells them of abuse, how to maintain safety and their obligations to report and processes on the same? Consider the specific risks associated with the type of programme/influence work being delivered. Individual projects and programmes will need to be risk assessed to ensure the activities can be delivered as safely as possible.
 - **Safe recruitment** : adopting measures and actions to prevent those who abuse or may be a risk to children and programme participants from becoming involved with the organisation and taking stringent measures against any staff, associate or visitor who abuse a child or programme participants
 - **Code of conduct/behaviour protocols** to which organisation staff and associates have to abide with. It is important that both the safeguarding policy and its associated documents such as code of conduct are shared and understood by all staff and associates
 - **Education/training** : this creates a culture of awareness that among g others ensures the socialisation of the policy, taking it from paper to practice and

ensures that staff and managers are appropriately skilled, confident and supported in meeting their gender responsive safeguarding responsibilities. Ensuring capacity building is cascaded down to partners and associates as appropriate.

- **Safe programme delivery:** need for mainstreaming safeguarding via use of standards. Having standards in place to embed and implement safeguarding is probably one of the most important tools for creating a safe organisation. Standards: helps make explicit what is expected in relation to implementing the policy, provide a benchmark and a basis for accountability and provide targets to aim towards and most importantly they help minimise risks to children, programme participants, staff and the organisation
- **Management responsibilities:** Ensuring managerial and designated safeguarding focal point staff responsibilities for creating safe environments, implementing the policy and ensuring protection measures in place are operating effectively
- **Reporting and response:** Ensuring that staff and associates are clear on what steps to take where concerns arise and that the organisation can respond effectively to these concerns
- **Implementation and review:** This includes delivery of the policy and its procedures on the ground that will involve evaluating their effectiveness and undertaking safeguarding review/ audits. In addition, undertaking staff surveys to monitor attitude towards and awareness on safeguarding children and programme participants.

(V) Monitoring mechanism: The organisation has in place measures and mechanisms for monitoring and review of safeguarding measures and to ensure both upward and downward accountability in relation to safeguarding.

It should also be underlined that a safeguarding policy refers to relevant international and regional treaties and national laws. With regard to feminist discourse, Malawi is a state party to various international instruments that promote and protect rights for women and children, including persons with disabilities, among others. Some of the key human rights instruments Malawi has ratified include the Convention on the Elimination of all forms of Discrimination Against Women (CEDAW), Convention on the Rights of the Child (CRC), the Protocol to the Africa Charter on Human and Peoples Rights on the Rights of Women in Africa, the Universal Declaration of Human Rights (UDHR), the International Covenant on Civil and Political Rights (ICCPR), the International Covenant on Economic, Social and Cultural Rights (ICESCR), the African Charter on Human and Peoples Rights, and the African Charter on Child Rights, among others, and relevant Southern African Development Community (SADC) treaties such as the SADC Gender protocol. Malawi has adopted some provisions of these international instruments into some of its national laws, although it continues to make reservations on other crucial provisions such as some elements of article 14(2)² of the Maputo Protocol and others. Through the Gender Equality Act (GEA), some aspects of article 14(2) of the Protocol were adopted, e.g. family planning and women's choice on the number of children, and other provisions. The GEA also criminalises harmful practices and sets out obligations for the realisation of gender equality.

Malawi also has commitments under the Sustainable Development Goals (SDGs), Goal 5 of which provides for *achieving gender equality and empowering all women and girls* and recognises the elimination of all harmful practices, such as child, early and forced marriage,

² Article 14 (2) (c) of the Maputo Protocol calls upon State Parties to take all appropriate measures to “protect the reproductive rights of women by authorizing medical abortion in cases of sexual assault, rape, incest, and where the continued pregnancy endangers the mental and physical health of the mother ...”

as a key priority. Goal 16, *promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels*, also calls for a significant reduction of all forms of VAWG.

In addition to the Constitution, over time Malawi has promulgated several gender related laws that address GBV issues as civil or criminal matters. Some of the key statutes include: the Prevention of Domestic Violence Act (2006), the Gender Equality Act (2013), the Child Care Protection and Justice Act (2010), the Penal Code, the Employment Act, the Disability Act, the Family Relations, Marriage and Divorce Act, the Deceased Estates (Wills and Inheritance Act), the Trafficking in Persons Act, and the HIV and AIDS (Prevention and Management) Act. Some provisions that support prohibition of sexual violence includes section 6-7 of the Malawi Gender Equality Act of 2013 of the laws of Malawi that provides that a person commits an act of sexual harassment if he or she engages in any form of unwanted verbal or physical conduct of a sexual nature in circumstances in which a reasonable person would have anticipated that the other person would be offended, humiliated or intimidated. Such a person will thus be liable to a fine of MWK1,000,000 (one million Malawi Kwacha) or up to five years of imprisonment with hard labour.

It is recommended that an institutional safeguarding policy sits side by side with a written specific policy against sexual harassment in the workplace. This policy should define sexual harassment. It should be published in the employee handbook and posted conspicuously at the workplace. However, In the absence of a written policy, an employer has no chance of defending against a claim of hostile-environment sexual harassment by a supervisor against a subordinate. There is need to include in the policy various means by which an employee can complain about sexual harassment. The complaint route should not be limited to the employee's immediate supervisor, since he or she may be the harasser. There is need to consider installing an anonymous hotline or an interactive website for employees to report harassment and other types of workplace problems. Conduct regular training seminars on sexual harassment and require mandatory attendance. Keep careful records of who attended each training session and what material was presented. Plan in advance who will be in charge of investigating complaints of sexual harassment and how the investigation will be conducted. Making those determinations after a complaint is received could result in delays and in the harassment policy being ruled unreasonable or ineffective.

5.0 Findings and analysis of measures taken to address prior sexual harassment incidents and assessment of current FE safeguarding protocols and procedures

This piece brings out findings and analysis of two main areas viz: measures taken to address prior sexual harassment incidents and evaluation of the functionality of the current FE safeguarding measures.

5.1 Findings and analysis of measures to address prior sexual harassment incidents

Consultations with both some previous and current board members and staff have indicated that there have been two main incidents of safeguarding that came to the attention of the organisation in 2021 and 2023 respectively. The first incident was reported in 2021 to the previous board and it bordered on sexual harassment that was allegedly perpetrated by a senior member of staff against an intern who had been engaged by the organisation. It was

reported through whistle blowing by a complainant that opted for anonymity. The perpetrator was alleged to have approached the survivor/victim for a sexual relationship. The previous board took a decisive step in instituting an investigation into the complaint and the incriminating evidence obtained establish that the complaint was founded with certainty. The alleged perpetrator was brought before a disciplinary committee on charges of inappropriate and unethical conduct at the workplace to which he assented. He was given a warning letter and suspended by the board for 6 months.

The arrangement of the disciplinary proceedings was in line with the rules of natural justice as the perpetrator was given adequate time of preparations and given the opportunity to be accompanied by a legal representative of his choice. However, consultants of this assignment were not furnished with the full report of the investigations to appreciate the nature of the proceedings, the promptness of the investigations, and whether the safeguarding policy existed at that time in general and the provisions that were contravened within the safeguarding policy in particular. However, the analysis of the available information indicates that Section 6-7 of the Malawi Gender Equality Act of 2013 of the laws of Malawi were contravened. These sections as cited above in 3.0 among others provide that a person commits an act of sexual harassment if he or she engages in any form of unwanted verbal or physical conduct of a sexual nature in circumstances in which a reasonable person would have anticipated that the other person would be offended, humiliated or intimidated. It is not clear whether the institution had a written sexual harassment policy at that material time. Notwithstanding the absence of a written policy, according to the Society for Human Resource management (SHRM), an employer has no chance of defending against a claim of hostile-environment sexual harassment by a supervisor against a subordinate. The analysis finds that the penalty that was melted out to the harasser was lenient considering that the inappropriate and unethical conduct created unhealthy working environment for the survivor or victim as it constituted an imbalance of power between a member of senior management and an intern engaged by the institution and more so that the inappropriate actions were in breach of the core values of the organization that are supposed to be promoted by senior management. It could be argued that the inappropriate action above according to what is provided for in the Gender Equality Act as cited above must have reached a threshold of sexual harassment. The analysis was tempted to conclude that the inappropriate action established should have resulted in the dismissal of the employee.

After serving the suspension period, he got oriented on safeguarding and resumed his duties but after a few months, he moved on to another organisation that had offered him a new role. He however, found his way back to into his previous FE organisation after his previous role in FE was vacated. He managed to go through the appropriate channels of attending set interviews. According to one of the Board members consulted, it was indicated that during interviews, he was among others asked about his records with respect to his past engagement with the institution particularly on issues of safeguarding that had warranted his suspension. He, however managed to convince the interview board members that his inappropriate actions at that time had not reached the threshold of sexual harassment, and that he was a changed person as he had also extended apologies to the survivor or victim at that material time. He was eventually taken on board again in his previous role. This assessment found that there was an oversight by the board to engage this person again into the organisation.

The second safeguarding complaint came to the attention of the existing board members. There were allegations of sexual harassment at the workplace being perpetrated by the senior member of management. Coincidentally, the allegations were against the same person that was reengaged in the institution as explained above. The existing board commissioned an investigation into the complaint. But as it was about to be started, the alleged perpetrator decided to resign on his own accord due to his own personal reasons. It is claimed that he had not heard that there was an investigation that had been commissioned against him, then.

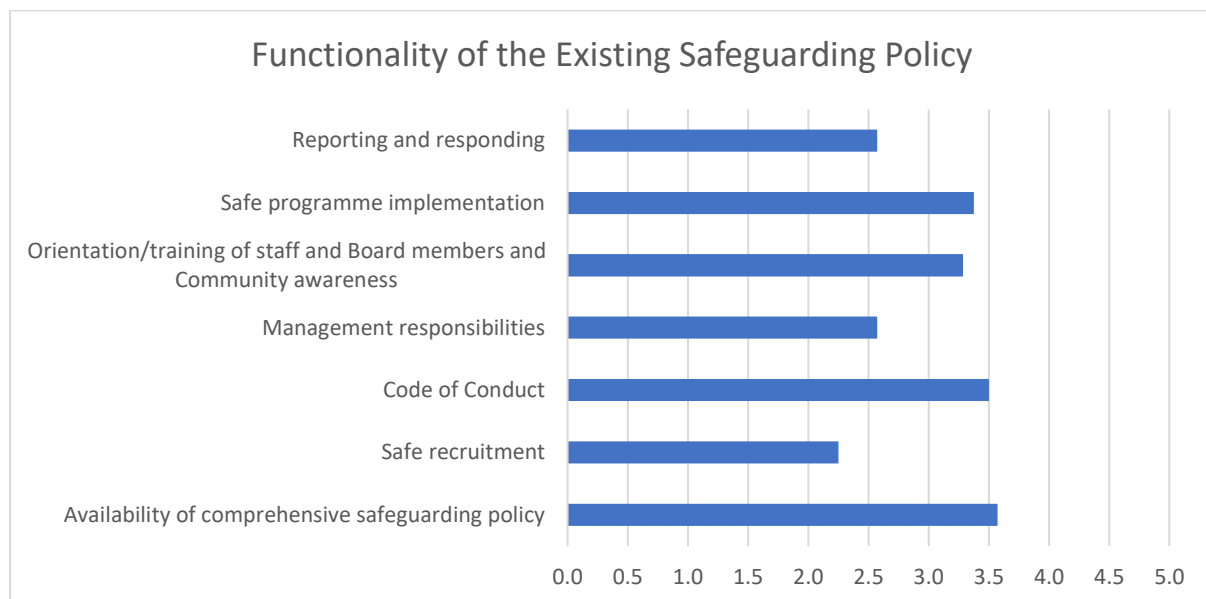
This investigation was not pursued any further as the alleged perpetrator had already left the organisation. This assessment recommends that organization needed to still have continued with the investigation to identify the limitations/weaknesses and gaps that led to the incident and devise ways of how to strengthen the identified areas as well as closing the identified gaps. Investigations help to foster continuous learning within the organization and improvement on future case management.

There have been no any other safeguarding incidents that have been reported to the organisation.

5.2 Assessment of the functionality of the Existing FE Safeguarding Policy

The assessment of the functionality of the comprehensiveness of the safeguarding policy and its various elements was done using scores that ranged from 1 to five where 5 was the optimal achievement. Below is a bar- graph that shows the levels of functionality of the various elements of the policy that were assessed:

Fig 2 Showing functionality of the elements of the FE Existing Safeguarding Policy



Key:

- 1.0 : The capacity area being assessed is totally lacking and needs urgent attention
- 2.0 : Some elements of the area being assessed are present but not satisfactorily and requires substantial attention
- 3.0 : The capacity area being assessed exists but needs to be improved to give the organization optimal results
- 5.0 : The capacity area being assessed exists and serves the organisation well but needs some minor adjustment
- 5.0 : The capacity area being assessed exists and serves the organisational optimally. Systems exist and are utilized in the best way possible.

The consultations found that the first safeguarding policy for FE was developed and adopted in 2020. This policy is currently under review of which revised policy for 2023 is at an advanced level. FE Staff

and Board members consulted on the comprehensiveness of the existing policy put it at the range of a score of 3.02 (in the range of 1 to 5 where 5 is optimal results) representing adequate content but requiring improvements. The existing policy covers most important elements including the purposes and principles guiding the implementation of this policy and the roles and responsibilities of the various categories of people to which it applies.

A revised 2023 safeguarding policy has been drafted and it is at an advanced level. Strengths of the draft 2023 safeguarding policy visa-vis the current policy of 2020 include the following:

- (i) The need of risk assessment that ensures that risks across all areas are identified and mitigation measures put in place to curb or reduce harm to beneficiaries has been integrated in the draft policy in question.
 - (ii) The referral of the institution's sexual harassment policy in the scope and purposes of the draft policy is a plus as it provides clear and explicit stance on the institution's commitment on preventing sexual harassment, exploitation and abuse among all its staff.
 - (iii) Monitoring and review: There is an inclusion of the implementation of the policy and its procedures on the ground that will embrace evaluating their effectiveness and undertaking safeguarding review/ audits.
 - (iv) There is express commitment towards implementation of sanctions against breaches of the safeguarding policy
- However, there are certain areas that need to be strengthened in the draft safeguarding policy. Firstly, target beneficiaries (project participants) of this draft policy should also be underlined in the purposes of this policy. The introductory part suggests that this policy will religiously protect and respond to violence against children and young people but this is not coming strongly in the purposes of the policy as it speaks to the general protection of all from violence. Secondly, the roles and responsibilities of Board Members and Executive Director should also be highlighted separately in relation to their oversight roles. Realizing that the contents of this policy needs to be concise, there is need to develop separate procedures, regulations or other regulatory documents that enable compliance of the policy by its staff and associates. As such, the draft policy should consider to remove details about reporting channels and mechanisms and investigative procedures since these are more technical and should be covered in separate documents. However, reference about their development and enforcement should be the aspects to be emphasized in the draft revised policy. develop one more annex that would touch on guidelines on working with implementing partners such as CBOs with respect to integrating safeguarding in programming. Finally, once the revised policy has been adopted, it or its short key messages will have to be translated in the local language for dissemination purposes.

5.2.1 Safe Recruitment

The assessment placed safe recruitment as done by the institution at 2.25 demonstrating that it needed much more strengthening. On a positive note, it was established that the organisation has a designated focal point officer on safeguarding whose roles and responsibilities have been defined. They include those of championing and supporting the effective operation of the safeguarding policy. However, minimal measures or actions are currently done to prevent those who might be at risk to abusing children and programme participants from being involved with the organisation. Consultations with staff and Board members reviewed that some questions during recruitment interviews of potential candidates such as those for the former Executive Director included aspects that sought to establish some levels of safeguarding competencies. But this was not usually the case

with interviews for other members of staff at the other levels. A clear gap established was that no pre-employment or police checks were carried out with respect to all previous and existing board members and staff. Police checks are important as it would ensure that those at risk are not engaged by the organisation. It would be good going forward for the institution to carry out police checks starting with both existing Board members and staff members.

5.2.2 Code of Conduct/Behavioural Conducts and the need for orientation and training on safeguarding policy documents

There is a code of conduct annexed to the 2020 safeguarding policy that FE Board members, staff, and associates have to abide with. This code of conduct has also formed part of the revised draft safeguarding policy. It is required that the organization builds the capacity of the community structures on safeguarding policy, code of conduct and its associated procedures. Consultations with FE staff reveal that it was mainly in the year 2023 that they got oriented on both the policy and its associated code of conduct. The board members on the other hand have not yet been oriented on the safeguarding policy and its associated procedures by the institution. Some members of the board were generally conversant with safeguarding policy in general from their respective related assignments with other similar institutions. Focus group discussions with 15 girls and young women around Mtandire area in Lilongwe indicated that they were not aware of both the FE safeguarding policy and its associated code of conduct. Some girls had this to say *“The trainings and awareness we have undergone so far with For Equality mostly speaks into general issues of abuse that we may face in the community like child marriage and negative comments by health personnel when we go to access SRHR services”* The focus group discussion further revealed that though FE teaches them about abuse they have not been oriented on the risk of abuse that they may be subjected to as they participate in FE activities. For instance, the girls had no idea of what support they can get from FE in case they are involved in an accident on their way to FE office where some of the activities take place considering that most times they use public transport. Though they were able to state that they were given contact details for staff at FE who they can report to any abuse, it was not clear if the contact details were for the safeguarding focal point person or just project staff that oversee issues of abuse within the project.

Some donors for FE such as Hewlett Indicated that FE had not furnished them with its safeguarding policy, reporting mechanisms and code of conduct let alone any investigations reports around safeguarding complaints it may have carried out during the course of their partnership. As such, the donors consulted were not in a position to share their reflections on the FE existing safeguarding policy.

5.2.3 Safe programming

This requires that standards that enhance safeguarding are integrated in programming processes and implemented. This includes risk assessment of all activities being implemented with a view of putting in place mitigation measures. It is also essential in this regard to carry out local mapping exercises that analyse the legal, social welfare and protection arrangements in the context in which work is being done. An assessment with FE board members and staff gave a score of 3.38 demonstrating that it was slightly above average. It was pleasing to note that recently the organisation has begun to undertake some risk assessment of its activities. There still remains room for improvements such as undertaking mapping of its legal, social welfare and other protection arrangements in a bid to strengthen safeguarding measures.

5.2.4 Management responsibilities

It was great to establish that the existing safeguarding policy had captured the roles and responsibilities of various categories of staff including managers and board members. However, the roles and responsibilities of Board Members and Executive Director should also be highlighted separately in relation to their oversight roles.

5.2.5 Reporting and responding:

The assessment exercises on the theme of reporting and responding registered 2.57 as demonstrated in figure 2 above, implying that more improvements need to be made. While commending that the FE board in the first safeguarding case was proactive in investigating an anonymous complaint, there is still need to review complaints and reporting and feedback mechanisms in consultation with the young women that the organisation works with to ensure that they are relevant, safe, and user friendly. Respond to all safeguarding concerns by ensuring that responses are safe and survivor centred. For instance, the needs of the survivor of the incident are prioritized. In this regard, the assessment recommends that some selected board members and staff should be trained on how to carry out investigations on safeguarding breaches.

6.0 Recommendations

This assessment of the FE safeguarding policy and its associated procedures makes the following recommendations for FE's consideration:

- Notwithstanding that the alleged perpetrator against the safeguarding complaint that was lodged in 2023 left the organisation, the investigations into the complaints should still proceed to identify the limitations/weaknesses and gaps that led to the incident and devise ways of how to strengthen the identified areas as well as closing the identified gaps as investigations help to foster continuous learning within the organization and improvement on future case management.
- The 2023 draft revised safeguarding policy, much as it is an improved policy, should be further strengthened in the following areas: the target beneficiaries should also be underlined in the purposes of this revised policy; the roles and responsibilities of Board Members and Executive Director should be highlighted separately in relation to their oversight roles; remove details about reporting channels and investigative procedures since these are more technical and need be covered in separate documents; Finally, develop one more annex that would touch on guidelines on working with implementing partners such as CBOs with respect to integrating safeguarding in programming.
- Ensure that both existing Board members and all staff undergo police checks to minimize safeguarding risks for the organisation
- Ensure that all beneficiaries are oriented on their safeguarding policy and code of conduct and an awareness and education implementation plan should be developed that clearly indicates when and how project beneficiaries will be sensitized on the policy.
- Reporting and feedback mechanisms should be developed and shared with target beneficiaries outlining clear reporting pathways from the community for both criminal and non-criminal cases
- Continue undertaking risk assessment in all the organisation's activities in general, and all activities targeting girls and young women in particular to ensure that safety

measures in the form of the mitigation measures are enhanced e.g provision of safe transport to and from events

- Some selected board members and staff should be trained on how to carry out investigations on safeguarding breaches to ensure that they are always survivor centred and in compliance with local statutory requirements.
- Once the revised policy has been adopted, its short key messages and code of conduct will have to be translated in the local language for dissemination purposes.

Annexes:

1.0 List of Board members and staff that attended the consultative workshop

- (i) Brian Longwe : Board member
- (ii) Tadala Vanessa Boti : Head of Programmes/Interim Director
- (iii) Alex Kambicho : Office Assistant
- (iv) Shadreck Kilembe : Finance and Administration Intern
- (v) Violet Banda : Monitoring, Evaluation, Accountability and Learning Officer
- (vi) Yamikani Msokhanani : Head of Finance and Administration
- (vii) Zaithwa Kateka : Communications, engagement and Campaigns officer
- (viii) Lala Kondowe : (Completed questionnaires online)

2.0 List of Board members interviewed

- (i) Ms Margret Mwale
- (ii) Ms Chisomo Kaufulu
- (iii) Ms Umba

3.0 List of Local organisations consulted

- (i) Family Health Services
- (ii) Malawi Girl Guide Association
- (iii) YFN

4.0 List of donors consulted

- (i) Hewlett Foundation
- (ii) ARASSA

5.0 Safeguarding capacity assessment tool

Organization Capacity Assessment (OCA) on Safeguarding Area

Name of organization:

Organization type:

(C.BO; F.B.O; Local/international NGO etc.)

Date of

Assessment.....

| Indicative Rating Scale | |
|-------------------------|---|
| N/A | The particular capacity area being discussed is not applicable to the organization being assessed. |
| X | The individual rating this capacity area does not have sufficient information to assess the area |
| 1 | The capacity area being assessed is totally lacking and needs urgent attention |
| 2 | Some elements of the area being assessed are present but not satisfactorily and requires substantial attention |
| 3 | The capacity area being assessed exists but needs to be improved to give the organization optimal results |
| 4 | The capacity area being assessed exists and serves the organization well but needs some minor adjustment. |
| 5 | The capacity area being assessed exists and serves the organizational optimally. Systems exist and are utilized in the best way possible. |

| SAFEGUARDING POLICY AND ITS PROCEDURES | | | | | | | |
|---|-----|---|---|---|---|---|---|
| (i) Policy Availability and Use | | | | | | | |
| a) The organization has comprehensive Safeguarding policy that well articulated, clear and translated in the local language | N/A | X | 1 | 2 | 3 | 4 | 5 |
| b) The Safeguarding policy and its associated documents such as code of conduct are shared and understood by all staff | N/A | X | 1 | 2 | 3 | 4 | 5 |
| c) All members of staff adhere & comply with Safeguarding policy and its procedures | N/A | X | 1 | 2 | 3 | 4 | 5 |
| d) All partners & stakeholders adhere & comply with the Safeguarding policy and its procedures. | N/A | X | 1 | 2 | 3 | 4 | 5 |
| e) The organisation makes clear that ultimate responsibility for ensuring the safety of project participants rests with senior executives (Board and Executive Director) and managers | N/A | x | 1 | 2 | 3 | 4 | 5 |
| f) The organisation designates key people at different levels as “focal points” with clear defined responsibilities, to champion, support and communicate on safeguarding and for effective operation of the safeguarding policy. | N/A | x | 1 | 2 | 3 | 4 | 5 |
| g) The organisation requires local mapping exercises to be carried out that analyse the legal, social welfare and protection arrangements in the context in which it works. | N/A | x | 1 | 2 | 3 | 4 | 5 |
| ii) Community Engagement | | | | | | | |
| a) The organization engages the community (parents, or caregivers and traditional leaders) on issues related to Safeguarding policies and its procedures | N/A | X | 1 | 2 | 3 | 4 | 5 |
| b) The organization builds the capacity of the community structures on Safeguarding policies and its associated procedures | N/A | X | 1 | 2 | 3 | 4 | 5 |
| c) The organization includes the community members during planning and implementation of safeguarding policy. | N/A | X | 1 | 2 | 3 | 4 | 5 |
| d) All members of staff, volunteers and associates have training on safeguarding policy and its procedures which includes an introduction to the | | | | | | | |

| | | | | | | | |
|---|-----|---|---|---|---|---|---|
| organisation's safeguarding policy and procedures and learning on how to recognise and respond to concerns about safeguarding issues | | | | | | | |
| iii) Case Management | | | | | | | |
| a) The organization handles cases related to Safeguarding issues and processes with confidentiality. | N/A | X | 1 | 2 | 3 | 4 | 5 |
| b) The organization responds timely to cases like child abuse/ abuse of young people | N/A | X | 1 | 2 | 3 | 4 | 5 |
| c) The organization documents the cases that arise and is able to share the outcomes to its staff and partners with confidentiality | N/A | X | 1 | 2 | 3 | 4 | 5 |
| d) The organization coordinates with all actors necessary as per case – local leaders, secret mothers e.t.c | N/A | X | 1 | 2 | 3 | 4 | 5 |
| e) The organisation has a directory of referral services in the community that can help children and young people who experience violence including gender-based violence /child exploitation/ abuse / neglect and who may need care and services | N/A | X | 1 | 2 | 3 | 4 | 5 |
| f) There is an appropriate process for reporting and responding to safeguarding incidents and concerns that fits with the local systems for dealing with incidents of abuse (as identified in the mapping exercise). | N/A | X | 1 | 2 | 3 | 4 | 5 |
| g) The organisation is satisfied with the processes of investigation of cases and subsequent outcomes | N/A | X | 1 | 2 | 3 | 4 | 5 |
| | | | | | | | |

6.0 A Safeguarding Assessment Questionnaire

A Questionnaire On Assessment of Safeguarding Policy and its Procedures (Developed on 3rd October, 2023)

Hello, greetings! My name is.....[Name of Interviewer], and I am a consultant engaged by For Equality to assess the effectiveness of the institutional safeguarding policy of this institution and come up with any other recommendation to strengthen the same. You are among those selected to participate in this study as such your your responses and opinions are very important. Everything that you tell us will remain private and the information obtained from you will be used for the purposes of this study only. Your specific names will not be included in the report of this study.

Your participation in this survey is based on your own consent and willingness and never forceful or with expectation to receive any benefit directly, but to the advancement of the institutional safeguarding policy. Similarly, you are at liberty not to participate in this interview. However, your participation will be highly appreciated.

.....

1.0 For Equality has a written safeguarding policy, approved by the relevant management body, to which all staff and associates including partners are required to adhere.

- (i) In place ()
- (ii) Partially done ()
- (iii) Not in place ()

2.0 If in place in 1.0 above, mention those that are protected by the policy?.....
.....

3.0 The policy is written in a way that is clear and easily understandable and is publicised, promoted and distributed widely to all relevant stakeholders, including children.

- (i) In place () Elaborate
- (ii) Partially in place () Elaborate.....
- (iii) Not Sure ()

4.0 The organisation makes clear that ultimate responsibility for ensuring the safety of project participants rests with senior executives (Board and Executive Director) and managers

- (i) In place () Defend your response.....
- (ii) Partially done () Explain.....
- (iii) Not in place ()

5.0 There are written guidelines for behaviour (Code of Conduct) that provide guidance on appropriate/expected standards of behaviour towards project participants and staff

- (i) In place () Do staff & partners sign for it?.....
- (ii) Partially done () Explain.....
- (iii) Not in place ()

6.0 How are staff recruited in relation to safeguarding policy?

.....
.....

7.0 Is proper reference and police checks on staff done before engagement?

.....

8.0 All members of staff, volunteers and associates have training on safeguarding policy and its procedures which includes an introduction to the organisation's safeguarding policy and procedures and learning on how to recognise and respond to concerns about safeguarding issues.

- (i) In place () When is it done?.....
- (ii) Partially done () Elaborate.....
- (iii) Not in place ()

9.0 The organisation is open and aware when it comes to safeguarding matters such that issues can be easily identified, raised and discussed. Staff, partners and associates need to have access to

advice and support where concerns or incidents arise. These staff will also need to be able to identify sources of support for project participants?

- (i) In place () Elaborate.....
- (ii) Partially done () Elaborate.....
- (iii) Not in place ()

10.0 Project participants are made aware of their right to be safe from abuse and provided with advice and support on keeping themselves safe including information for project participants and where to go for help.

- (i) In place () Qualify your response.....
- (ii) Partially done () Elaborate.....
- (iii) Not in place ()

11.0 The organisation designates key people at different levels (including Director level) as “focal points” with clear defined responsibilities, to champion, support and communicate on safeguarding and for effective operation of the safeguarding policy.

- (i) In place () Explain.....
- (ii) Partially done () Explain.....
- (iii) Not in place ()

12.0 Partner organisations are required and supported to develop minimum safeguarding measure appropriate to their organisation

- (i) In place () Explain
- (ii) Partially done () Explain.....
- (iii) Not in place ()

13.0 The organisation requires local mapping exercises to be carried out that analyse the legal, social welfare and protection arrangements in the context in which it works.

- (i) In place () Explain.....
- (ii) Partially done () Explain.....
- (iii) Not in place ()

14.0 There is an appropriate process for reporting and responding to safeguarding incidents and concerns that fits with the local systems for dealing with incidents of abuse (as identified in the mapping exercise).

- (i) In place () Give examples without mentioning names
.....
- (ii) Partially done () Explain.....
- (iii) Not in place ()

14 b. Do you have a whistle blowing policy? Yes () No () If yes, have any ever used it ?and how many times

.....

15.0 The identification and mitigation of safeguarding risks is incorporated into risk assessment processes at all levels.

- (i) In place () Explain
- (ii) Partially done () Explain
- (iii) Not in place ()

16.0 There are clear procedures in place that provide step-by-step guidance on how to report safely which are linked to the organisations disciplinary policy and procedures.

- (i) In place ()
Explain.....
- (ii) Partially done () Explain.....
- (iii) Not in place ()

17. When reports of violation of safeguarding policy are done, who does the investigation?

.....
.....

18.0 Are you aware of any other cases that were investigated by the organisation ? do not mention names . If possible mention how many and what were the incidents about?

.....
.....

19. If your answer is in the affirmative, what were the conclusion of those cases ? **At liberty to tick more than one below.**

- (i) Founded with certainty. () How many?.....
- (ii) Founded on a balance of probability. ()How many?
- (iii) unfounded with certainty () How many?
- (iv) Unfounded on the balance of probability () How many?.....
- (v) Not sure ()

19b. Is the organisation satisfied with the processes of reporting and investigations?

.....
.....
.....

20 . Arrangements are in place to monitor compliance with and implementation of the safeguarding policies and procedures through specific measures and/or integration into existing systems for quality assurance, risk management, audit, monitoring and review.

- (i) In place ()Explain
-
- (ii) Partially done () Explain
- (iii) Not in place ()

21.0 There is a system of regular reporting to key management forums, including Director level, to track progress and performance on safeguarding issues (Do not mention names.)

- (i) In place () Give examples.....
- (ii) Partially done () Give examples
- (iii) Not in place ()

22.0 External or independent bodies such as Board of Trustees, oversight committees are used to monitor performance in this area and hold senior executives to account in relation to safeguarding policy.

- (i) In place () Elaborate.....
.....
- (ii) Partially done () Explain
- (iii) Not in place ()

23.0 Policies and practices are reviewed at regular intervals and formally evaluated at interval.

- (i) In place () Explain interval period
- (ii) Partially done () Explain.....
- (iii) Not in place ()

24.0 What images and information on children does your organisation use? B) How is this information stored and presented, to whom? C) What ICT does your organisation employ, for whom?

.....
.....

25. Do you have any other suggestions on how safeguarding policy for your institution could be strengthened?

.....
.....
.....

