

# RET International

## Protection from Sexual Exploitation and Abuse and Sexual Harassment (PSEASH) Policy and Procedures

### Introduction & Statement

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RET is fully committed to protecting people in all its operations and has **Zero Tolerance** to Sexual Exploitation and Abuse (SEA) and Sexual Harassment (SH), which constitute a gross violation of human rights. RET prohibits staff, partners, suppliers, sub-contractors, consultants, agents, service providers and any other person bounded to RET to engage in any form of SEA or SH. SEA and SH are a ground for termination of employment and also be a criminal act. Every transgression will be acted upon.

This is particularly relevant as for RET “be accountable” is not simply a token gesture, but it is a key commitment to its vision of providing a trusted, respectful, and inclusive environment where the people we serve and those who work for the organization feel safe, heard, equipped and empowered to speak up for themselves and others and to take robust and visible action, as appropriate, to eradicate SEA and SH.

This policy is anchored to the Inter-Agency Standing Committee’s (IASC) Six Core Principles on Protection from Sexual Exploitation and Sexual Abuse (PSEA)<sup>1</sup>, and follows the spirit of the United Nations Secretary-General’s Bulletin on Special measures for protection from sexual exploitation and sexual abuse (ST/SGB/2003/13), the UN Protocol on Allegations of SEA involving Implementing Partners and the United Nations Protocol on the Provision of Assistance to Victims of Sexual Exploitation and Abuse. RET’s PSEASH<sup>2</sup> Policy is also linked to RET Code of Conduct, RET Accountability to Affected Populations Framework and RET Whistle-blowing Policy.

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<sup>1</sup> Link: [IASC PSEA Minimum Operating Standards.pdf](#)

<sup>2</sup> Protection against Sexual Exploitation and Abuse and Sexual Harassment

## Scope

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RET's Protection from Sexual Exploitation and Abuse and Sexual Harassment (PSEASH) Policy and Procedures apply to all persons working for RET or on behalf of RET, including employees at all levels, directors, officers, agency workers, seconded workers, volunteers, interns, agents, contractors, external consultants, third-party representatives, suppliers, service providers and business partners. The PSEASH Policy and Procedures apply during and outside working hours.

## Terms

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### **Sexual Abuse**

Actual, attempted or threatened physical intrusion of a sexual nature, whether by force or under unequal or coercive conditions.

*“Sexual abuse” is a broad term, which includes, but is not limited to, a number of acts, including “rape”, “sexual assault”, and “any sexual activity with a child”. For RET, a child means a human being below the age of eighteen (18) years. RET considers sexual activity with commercial sex workers as sexual abuse in countries where RET operates, whether or not prostitution is legal in the operating context.*

### **Sexual Exploitation**

Any actual or attempted abuse of a position of vulnerability, differential power, or trust, for sexual purposes, including, but not limited to, profiting monetarily, socially or politically from the sexual exploitation of another.<sup>3</sup>

### **Sexual Harassment**

Sexual harassment affects personnel and is defined as any unwelcome conduct of a sexual nature that might reasonably be expected or be perceived to cause offence or humiliation. Sexual harassment can take various forms, from looks and words to physical contact of a sexual nature. Sexual harassment may occur in the workplace or in connection with work. While typically involving a pattern of conduct, sexual harassment may take the form of a single incident.

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<sup>3</sup> “Sexual exploitation” is a broad term, which includes a number of acts described below, including “transactional sex”, “solicitation of transactional sex” and “exploitative relationship”.

## **Difference between Sexual Exploitation and Abuse (SEA) and Sexual Harassment (SH)**

- In the case of SEA, the victim is a person of concern, a beneficiary, or a member of the local or host community.
- In the case of SH: the victim is a staff member, a fellow humanitarian/development worker, a volunteer, an intern, a consultant, a provider, a contractor, or a partner.
- In both cases, the perpetrator is a fellow worker, legally bound with RET and/or with a partner organisation.

Both forms of misconduct, SEA and SH, are unacceptable. RET is committed to eradicating them from its operations and providing to the victims a proper and timely assistance. The procedure for reporting a case of SH is the same as for reporting a case of SEA.

### **Zero Tolerance**

Sexual abuse and exploitation are prohibited and every transgression will be acted upon.

### **Retaliation**

Any direct or indirect detrimental action, recommended, threatened, or taken for the purpose of punishing, intimidating, or injuring an individual.

### **Confidentiality**

An ethical principle that restricts access to and dissemination of information. In investigations on sexual exploitation and abuse, it requires that information is limited to “need to know” basis, and available only to a limited number of authorised people for the purpose of concluding the investigation.

### **Victim-Centred Approach:**

A way of engaging with victims that prioritizes listening, avoids re-traumatization, and systematically focuses on their safety, rights, well-being, expressed needs and choices. The purpose is to give back as much control to victims as feasible and ensure empathetic delivery of services in a non-judgmental manner.

## RET's Standards

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RET adheres to the IASC's six core principles and expects its employees and partners to meet the highest standards:

1. Sexual exploitation and abuse by humanitarian workers constitute acts of gross misconduct and are therefore grounds for termination of employment.
2. Sexual activity with children (persons under the age of 18) is prohibited regardless of the age of majority or age of consent locally. Mistaken belief regarding the age of a child is not a defence.
3. Exchange of money, employment, goods, or services for sex, including sexual favours or other forms of humiliating, degrading or exploitative behaviour is prohibited. This includes exchange of assistance that is due to beneficiaries.
4. Any sexual relationship between those providing humanitarian assistance and protection and a person benefitting from such humanitarian assistance and protection that involves improper use of rank or position is prohibited. Such relationships undermine the credibility and integrity of humanitarian aid work.
5. Where a humanitarian worker develops concerns or suspicions regarding sexual abuse or exploitation by a fellow worker, whether in the same agency or not, he or she must report such concerns via established agency reporting mechanisms.
6. Humanitarian workers are obliged to create and maintain an environment which prevents sexual exploitation and abuse and promotes the implementation of their code of conduct. Managers at all levels have particular responsibilities to support and develop systems which maintain this environment.

RET's PSEASH Policy & Procedures sets standards for all programmes and activities highlighting its commitment to eradicate Sexual Exploitation and Abuse and Sexual Harassment (SEASH). In order to prevent, report of and respond to SEA properly and in a timely manner, RET implements an Action Plan, which consists of four pillars:

1. **Management:** Roles and responsibilities
2. **Awareness and Prevention**, including: a) training; b) PSEASH Country Action Plan.
3. **Reporting**
4. **Response**, which includes a) investigation & disciplinary actions; b) protection from retaliation; c) assistance to victims of SEA

## Management: Roles and Responsibilities

### **RET Senior Management (President & CEO and Chiefs)**

- Actively promotes and reinforces a "speak up, speak out" culture.
- Takes responsibility for ensuring PSEASH measures are implemented.
- Assigns Senior PSEASH Focal Point (HQ), who coordinates the development and implementation of PSEASH policy and procedures.
- Discusses progress and challenges related to the implementation of the PSEASH policy and country-level PSEASH implementation plans.
- Presents a progress report on implementing the PSEASH policy on an annual basis.

### **RET Management (Directors and Programme Managers)**

- Ensures PSEASH measures are implemented within their area of responsibility.
- Assigns PSEASH Focal Points who coordinate the development and implementation of PSEASH policy and procedures at country levels.
- Ensures all new employees receive the PSEASH policy training as part of their induction.
- Refreshes staff on RET's values and norms, including the PSEASH policy, in annual all-staff meetings/trainings.
- Follows up and addresses SEASH issues appropriately.

### **Senior PSEASH Focal Point (HQ)**

- Overall responsibility for the development and implementation of the RET's PSEASH policy and activities, including ensuring that all the staff participate in relevant training regarding PSEASH and that they are

aware about RET's Code of Conduct, PSEASH Policy and Procedures, and reporting mechanisms.

- Supports the Country PSEASH Focal Points to design awareness-raising tools and facilitates events for community members with an emphasis on their rights, what SEA and staff reporting obligations are, and options for reporting sensitive complaints and victim assistance services.
- Raises awareness of the Focal Points' identity and contact details throughout RET and the PSEASH network.
- Works with regional/country-wide PSEASH Network for the proper implementation of Inter-Agency Community-Based Complaint Mechanism, incorporating RET's existing AAP policy and in line with PSEASH and GBV good practices.
- Represents RET at global and regional meetings of inter-agency networks and coordinates with Country PSEASH Focal Points for the proper representation of RET at country level. Follow-up on PSEASH documentation and updates in the relevant networks.
- Takes the lead in documenting PSEASH related documentation. Regularly reports to Senior Management on PSEASH issues and progress.
- Leads and coordinates the development and monitoring of country-level action plans to mainstream PSEASH throughout RET's departments and programming, informed by community engagement and SEA trends in the country in accordance with global and/or regional PSEASH Action Plans.
- Ensures close collaboration and coordination with the Country PSEASH Focal Points.
- Provides guidance on assistance to victims of SEA and/or SH.

### **Country PSEASH Focal Points**

- In coordination with Human Resources, ensure that all staff sign a Code of Conduct that clearly prohibits SEASH, obliges reporting of such acts, and enforces these clauses when breached.
- Under the supervision of the Senior PSEASH Focal Point, develop and monitor a Work Plan to mainstream PSEASH throughout RET's departments and programming, taking into account community engagement and SEA trends in the country, in line with global and/or regional PSEA action plans.
- Take the lead on collaborating with Human Resources to ensure all new hires receive induction on PSEASH.
- Provide mandatory trainings for staff and field personnel on PSEASH and RET's Code of Conduct and mechanisms for reporting SEA, in close coordination with the Senior PSEASH Focal Point.
- Act as a channel to receive allegations of SEA and coordinate the response with the Senior PSEASH Focal Point and Human Resources.

- Report and, where relevant, refer allegations to the organisation whose personnel are implicated, and survivors to assistance in line with internal procedure and available pathways.
- Guarantee confidentiality limiting sharing of sensitive complaint information to a “need to know” basis, in line with data protection principles and a victim-centred approach.
- Participate in joint reporting mechanisms or inter-agency community-based complaint referral mechanisms
- In coordination with the M&E teams, support the country management to strengthen and/or establish safe, accessible, and contextually appropriate channels to receive sensitive allegations, informed by good practice and community consultations.
- Participate in RET’s community of practice to receive up-to-date information on PSEASH policy and guidelines, share good practices, and discuss the challenges faced when planning and implementing PSEASH activities.
- Actively promote and reinforce a “speak up, speak out” culture and actively engages in understanding the attitudes, cultures and power dynamics that drive under-reporting.
- Raises awareness of partners’ on RET’s Code of Conduct and mechanisms for reporting allegations of SEA or SH.

## Human Resources

- Document standardization of procedures for all RET personnel regarding PSEASH.
- Ensures that RET’s PSEASH policy is implemented throughout the recruitment processes; that reference check templates include the check for sexual misconduct, including references from previous employers and self-declaration; requiring job candidates to self-declare prior involvement in sexual misconduct and consent to the disclosure of any such information by former employers during the verification of references.
- Ensures all new employees receive a copy of the PSEASH policy and code of conduct, prior to, or at the time of, issuing an employment contract. Ensures through HR policies that the Code of Conduct still applies even to the staff who have for any reason not signed it.
- Writes PSEASH responsibilities into job descriptions and includes them in performance management/appraisal discussions.
- Ensures that all personnel contracts include a prohibition on PSEASH and mandatory adherence to the code of conduct and PSEASH policy.
- Ensures signed copies must be placed in personnel files.
- Oversees internal process for reviewing allegations, management of investigations, and follow-up.



**All staff, volunteers, partners and associated personnel, including consultants, suppliers and service providers**

- Sign RET's Code of Conduct and RET's PSEASH Policy and Procedures.
- Adhere to RET's Code of Conduct and PSEASH Policy and Procedures.
- Be aware of their obligation to report SEASH/misconduct
- Be aware of RET's Whistle-blower Policy.
- Take the PSEASH Training and complete yearly refresher training.
- Report complaints if misconduct or suspicion of misconduct occur.

**Communities, Beneficiaries/Participants**

- Be aware of the behaviour expected of RET's staff and associated personnel, including RET's commitments to prevent sexual exploitation and abuse.
- Be actively engaged in PSEASH implementation through contextualized mechanisms established by PSEASH Focal Points.
- Report complaints if commitments are not met and/or if violations/misconduct (or suspicion of misconduct) occur.

## Awareness & Prevention

### **Training**

RET considers mandatory staff trainings as a part of its approach and vision to raise awareness in order to prevent, report, and respond to SEASH concerns, and applies the following standards:

1. Each newly recruited staff member on all levels (HQ, Administrative Centres and country of operations) has to participate in a thorough induction about the RET's Code of Conduct and the RET's PSEASH mechanisms. The induction will be facilitated by PSEASH Focal Points.
2. The Code of Conduct and PSEASH Policy have to be signed by the new RET employee. The Code of Conduct and PSEASH Policy will have been read, explained and approved at the start of employment.
3. Every year, all the RET staff members have to participate in a training session about PSEASH at all levels. The aim of this session is to recall RET's Code of Conduct, PSEASH Policy and Procedures and Whistle-blower Policy, and enhance the staff members' understanding of SEASH issues and RET's protection mechanism. It will also provide an opportunity for staff to share experiences, and for protection mechanisms to be adjusted, when considered necessary.



4. To plan and carry out the training, HQ's Head of Operations shall receive a timetable from each Country Director at the beginning of the year, indicating when, where and how the training will be held. The Head of Operations shall submit the training programme to the HQ Senior PSEASH Focal Point and the Global Human Resources Director.
5. The Global Human Resources Director, who reports to the Chief of Staff, is responsible to organise PSEASH training for HQ and Administrative Centre staff.
6. The training should be contextualized and at a minimum include: (i) a definition of SEASH (that is aligned with the UN's definition); (ii) an explanation of the prohibition of SEASH; (iii) actions that personnel are required to take (i.e., prompt reporting of allegations and referral of victims) and (iv) RET's reporting mechanisms, including RET Whistle-blowing Policy.; and adhere to the extensive guidelines developed by UNHCR and IASC.
7. All staff participating in these mandatory trainings must receive PSEASH training certificates and these certificates should be stored in personal files by RET's HR Management.
8. The trainings provided to field staff should be documented<sup>4</sup> including a training agenda, training report, attendance records and training certificates.
9. In case of amendments to RET's Code of Conduct or PSEASH Policy and Procedures, a special training will be held with all the RET staff members. Each staff member will then be asked to sign the amended document.
10. When RET works with an Implementing Partner (IP), the Code of Conduct must be an integral part of the signed working agreement between RET and its IP. According to the signed agreement, the IP will have the overall responsibility to enforce the RET's Code of Conduct, including the PSEASH Policy and Procedures, and train its staff accordingly.

## **PSEASH Country Action Plan**

Country Directors should develop a Protection from Sexual Abuse and Exploitation (PSEA) and Sexual Harassment (SH) Action Plan at country level, with the technical advice of Senior PSEASH Focal Point and Country PSEASH Focal Points, and present it to HQ's Head of Operations. The PSEASH Country Action Plan aims to ensure that PSEASH is integrated in all programmes and projects in the country. It must include, at least:

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<sup>4</sup> For example: [https://psea.interagencystandingcommittee.org/sites/default/files/2021-09/PSEA%20training%20report\\_%20April%20\\_2021\\_JO.pdf](https://psea.interagencystandingcommittee.org/sites/default/files/2021-09/PSEA%20training%20report_%20April%20_2021_JO.pdf)

- (i) Mandatory PSEASH training timetable (for staff and for communities/beneficiaries),
- (ii) PSEASH awareness-raising plan,
- (iii) Description of reporting mechanisms/channels at country level (for staff, partners and beneficiaries/communities) - *at least one channel must allow anonymous reporting*;
- (iv) Guidelines on victim assistance, following a survivor-centred approach, and including a mapping of relevant services in the country.
- (v) Description of referral pathways, including mapping of relevant national authorities for criminal prosecution, if any.
- (vi) Referral form for survivors of SEA/SH.

In order to promote the use of feedback and reporting mechanisms, RET encourages Country Offices to involve beneficiaries and communities to participate in roundtable sessions at the beginning of the project to develop and define the feedback and reporting mechanisms with them. This not only ensures that the feedback mechanisms are clearly understood by the beneficiaries, but also that they use the beneficiaries' preferred mechanisms and are easily accessible, according to the specific context in the country/area concerned. Finally, it is recommended that all RET offices, at all levels, always allocate resources for PSEASH and safeguarding in project budgets where possible.

## Reporting

RET aims to create an environment in which individuals, communities, RET personnel, and partners feel safe to report SEASH-related violations/misconduct (see reporting mechanisms below) and trust that immediate and decisive action will be taken against perpetrators. Deliberately filing a false or malicious allegation may constitute grounds for disciplinary measures.

All staff, regardless of their position or contract type, partners, and all beneficiaries having concerns or suspicions about a possible case of SEASH by a RET, United Nations or a partner NGO staff member must report such concerns. Concerns that must be reported include, but are not limited to:

- A practice or behaviour suggesting that a staff member has abused the power invested in him/her, by virtue of his/her post, to sexually exploit or abuse a beneficiary;
- An allegation that a staff member has breached RET's policy and rule regarding sexual exploitation and abuse outside the work environment (e.g., by engaging in a sexual relationship with a person under the age of 18);
- Concerns that cover a wide range of issues involving the exploitation of women and or children ranging from inappropriate behaviour to possible criminal offences;
- Concerns regarding the past behaviour of a staff member;
- Concerns expressed by a government partner, UN agency, NGO or INGO about the behaviour of staff members.

Confidentiality and the interests of survivors will be considered before and during all cases. Anonymous complaints will be accepted to the extent that their content will be handled by the related mechanisms and effort will be exerted to substantiate the allegations. If the provided information do not suffice to conduct a thorough investigation and the anonymous complainant would not cooperate despite the commitment for confidentiality or the anonymous channel do not respond through the contacted email, then the case can only be set aside by the decision of the related work ethics and disciplinary committee. Protections from retaliation will be offered. RET will keep parties appropriately updated on the process and informed of available support.

## Reporting Mechanisms

- All RET staff must report internally any concerns, including both specific complaints and rumours, regarding possible sexual exploitation or abuse by a RET staff and/or other external persons. Failure to report information through the proper channel could result in disciplinary action. Complaints should be reported, even when the institutional affiliation of the perpetrator is unknown.
- Each office of RET designs and develops its own channels to report SEASH complaints. There should be various channels for reporting SEASH and one of them should allow for anonymous complaints. At least, each office should provide a suggestion box and a PSEASH email address.

- Community-based complaint mechanisms should be set up in each community where RET is active.
- Clear, accessible, safe and confidential internal and external reporting mechanisms exist and are known by the beneficiaries, participants, communities, staff members and other related individuals.
- If possible, reporting mechanisms are developed with those who are likely to use them: staff for internal mechanisms, beneficiaries for external mechanisms.
- The SEASH-related complaint/concern/report must be reported directly to the Country PSEASH Focal Point or through RET's reporting channels.
- The PSEASH Focal Point must report the complaint to the Senior PSEASH Focal Point, the Chief of Staff and to the President & CEO.
- All PSEASH concerns/reports are managed swiftly and sensitively applying a survivor/victim-centred approach.
- If the complainant believes this reporting route to be compromised - for example, that s/he would be victimised, or if s/he has no confidence in the country-level management structure, or when the focal point itself has been accused of SEASH -, then the complaint should be raised directly to HQ level.
- It is suggested that the complaint should be recorded, either verbally or written.
- The complaint should be handled strictly confidential. The primary focal point must ensure that the individual who makes a complaint is informed of the confidentiality of the process. However, the complainant must also be informed that even if the identity of the complainant would not be disclosed, 100% confidentiality cannot be guaranteed during the handling process due to external factors/reasons beyond control, especially if the process involves a thorough investigation. The focal point must obtain written consent from the complainant for the information to be made available to others outside the complaint-reporting mechanism.
- The primary focal point must immediately take all necessary and appropriate measures to ensure that the safety of the complainant is guaranteed (for example via a change in working arrangements, or a temporary suspension).
- Staff members should be reassured that there will be no action taken against any member of staff who reports in good faith information indicating a violation of the RET's Code of Conduct and/or PSEASH Policy and Procedures and which, following investigation, proves unfounded. However, if a staff member knowingly and wilfully reports

false or malicious information regarding another member of staff, such false reports will lead to disciplinary action.

## Response

### Investigation

- The Senior PSEASH Focal Point must report the complaints to either RET HQ Work Ethics and Disciplinary Committee or Country Work Ethics and Disciplinary Committee depending on the context. In case of irresolution and/or sensitivity, the Senior PSEASH Focal Point shall report the complaint to RET's HQ Work Ethics and Disciplinary Committee.
- Work Ethics and Disciplinary Committee refers to two different levels of Committees as per the Grievance Handling, Work Ethics Principles and Disciplinary Procedure and should be composed as shown below:
  - a. RET Headquarters (HQ) Work Ethics and Disciplinary Committee: The Committee of RET HQ handles the grievance, work ethics and disciplinary processes, as well as the processes described in this Policy, Whistle-Blower Policy and other RET policies (where referred to) of the HQ and Administrative Centre Staff and the Area and Country Director positions. The Committee consists of the Chief of Staff (Chair), Global HR Director, Chief Finance Officer and the Head of Operations for RET's EMEAA or LAC Bureaux. In case of necessity, the Committee may decide to add additional committee members with the approval of the President & CEO.
  - b. Country Work Ethics and Disciplinary Committee: Country Committees handle the grievance, work ethics and disciplinary processes, as well as the processes described in this Policy, Whistle-Blower Policy and other RET policies (where referred to) of the local staff. The Committee consists of the Local Manager responsible for HR, the Legal Advisor/Lawyer, the Departmental Head of the related staff and the Area/Country Director who would act as the Chair. In case of necessity, the Committee may decide to add additional committee members with the approval of the Head of Operations for RET's EMEAA or LAC Bureaux.
- If the complaint/report is related to a member of the Committee, or the content of the complaint/report constitutes a conflict of interest with a member of the Committee, that/those committee members must be excluded from Committee meetings and handling process of the concerned case.

- The related Work Ethics and Disciplinary Committee shall consider the appropriate steps to take, including the initiation of a preliminary investigation or a thorough investigation managed by the Global Human Resources Director.
- Any investigation that is undertaken must be completed, regardless of whether the alleged perpetrator is still a RET staff member. In the event that a complaint does not warrant a full investigation, the related Head of Department at the HQ level or the Country Director at the local level may nonetheless be asked to take a number of steps to address concerns in other ways (for example, addressing any poor practice with additional training, adjusting working arrangements or procedures).
- If the complaint involves staff of the UN or other agencies, NGO partners, military personnel or non-staff personnel, such agencies, organizations or parties must be informed of the complaint via appropriate mechanisms, including local mechanisms such as police office or protection related ministry or local authorities.
- The investigation of complaints will be conducted with due regard to a number of key principles including, but not limited to, confidentiality, safety, impartiality, objectivity, thoroughness, timeliness and accuracy as well as safeguarding the due process rights of the alleged perpetrator. All individuals concerned, including the subject of the complaint, have the right to be treated with respect and dignity and to be kept informed of the progress of the investigation.
- The Global Human Resources Director will be responsible for ensuring that an investigation is undertaken according to the principles of confidentiality, safety, impartiality, objectivity, thoroughness, timeliness and accuracy.
- The general principle of confidentiality is such that the disclosure of the identity of complainants, witnesses, victims/survivors, the subject of the complaint and any others involved in an investigation, is restricted and is permitted only on an authorised or “need-to-know” basis, and only in certain exceptional circumstances. A breach of confidentiality may lead to disciplinary action.
- Interviews must be conducted in a safe and supportive environment and in accordance with the principles of good practice.
- Witnesses will always be interviewed in the language of his/her choice. If an interpreter is needed, s/he will follow strict rules of confidentiality.
- Once the investigation is completed, the investigator must deliver a full written report, which includes conclusions and recommendations. The report must be produced in an appropriate time frame.

## Disciplinary Actions

- The investigation report must be submitted to the related Work Ethics and Disciplinary Committee including the Chief of Staff and President & CEO, to decide upon an appropriate course of action.
- Should the investigation indicate that misconduct has not occurred, the case will be closed.
- Should the investigation indicate that misconduct has occurred, disciplinary action must be taken, including possible summarily dismissal, pursuant to RET HR Policies and Procedures Manual.
- If, after proper investigation, there is evidence to support allegations of sexual exploitation or sexual abuse, or sexual harassment, which may contravene national laws, in consultation with the complainant and where appropriate with the adult victim(s), these cases may, upon consultation with the appropriate internal legal advisors, be referred to national authorities for criminal prosecution.

## Protection from Retaliation

All staff, regardless of their position or contract type, and all beneficiaries or partners having concerns or suspicions about a possible case of SEASH must report such concerns. All RET personnel have a duty to report wrongdoing/misconduct<sup>5</sup> and to cooperate fully with any authorized fact-finding activity<sup>6</sup>. Those who do so in good faith have the right to be protected from retaliation. It is, thus, the policy of RET to foster a work environment free from retaliation and to take swift and appropriate action in cases where retaliation has occurred. Retaliation against individuals who have reported misconduct or who have cooperated with audits or investigations violates the fundamental obligation of all staff members to uphold the highest standards of efficiency, competence and integrity and to discharge their functions and regulate their conduct in the best interests of RET in view. Protection against

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<sup>5</sup> Wrongdoing” is defined by RET as failure to comply with RET’s Code of Conduct and PSEASH Policy and Procedures. The term includes proscribed practices; corrupt, fraudulent, collusive, coercive, obstructive and unethical practices. It includes SEA and SH.

<sup>6</sup> “Fact-finding activity” within this policy means any authorized audit, investigation, inspection, programme evaluation, or management evaluation



retaliation applies to any staff member regardless of the type of appointment or its duration. Protection against retaliation also applies to any beneficiary receiving support from RET and/or relevant partners (volunteers, interns, consultants, staff of a partner organization, service providers, and suppliers, with whom RET is contractually bound).

Individuals who believe that retaliatory action has been taken against them should submit a request for protection against retaliation to RET's related Work Ethics and Disciplinary Committee. If the request for protection against retaliation is submitted to a RET PSEASH Focal Point, s/he should report the request to the HQ Senior PSEASH Focal Point and the related Work Ethics and Disciplinary Committee. The requester should submit all information and documentation available to her/him to support her/his complaint to the Committee as soon as possible. Requests for protection against retaliation must be submitted no later than one week after the date on which the individual knew that the alleged retaliatory action was taken.

PSEASH Focal Points who receive any report, complaint, concerns or suspicions of retaliation related to SEASH from any source, including from the local referral complaint mechanism must submit a duly completed Confidential report of retaliation to the HQ Senior PSEASH Focal Point and the related Work Ethics and Disciplinary Committee.

### **Reporting Retaliation through External Mechanisms**

Individuals who believe that retaliatory action has been taken against them should follow the internal reporting mechanisms outlined in the remainder of this chapter. However, protection against retaliation will be extended to an individual who reports misconduct to an entity or individual outside of the established internal mechanisms within the knowledge of the Chief of Staff and/or President & CEO, where the criteria A, B and C are satisfied:

A. Such reporting is necessary to avoid:

- A significant threat to public health or safety; or
- Substantive damage to RET's operations and reputation;

B. Violations of national or international law; and use of internal mechanisms are not possible because:

- At the time the report is made, the individual has grounds to believe that they will be subjected to retaliation by the person(s) they should report to pursuant to the established internal mechanism; or
  - The individual has previously reported the same information through the established internal mechanism, but that mechanism failed to inform the individual in writing of the status of the matter within six months of such a report;
- C. The individual does not accept payment or any other benefit from any party for reporting misconduct.

### Reporting Misconduct through the Internal Mechanism

#### *Preliminary Review by the Work Ethics and Disciplinary Committee*

Upon receipt of a complaint of retaliation or threat of retaliation, the Work Ethics and Disciplinary Committee will conduct a preliminary review of the complaint to determine: (a) whether the complainant engaged in a protected activity; and (b) there is a *prima facie* case that the protected activity was a contributing factor in causing the alleged retaliation or threat of retaliation.

The Committee shall maintain the confidentiality of all communications received from complainants who request protection against retaliation, and from all relevant third parties. Complainants may authorize the Committee to contact any office or staff member to obtain additional information and records related to their request for protection. However, the Committee may be required to cooperate with requests for information from United Nations oversight bodies or from the United Nations Dispute Tribunal or the United Nations Appeals Tribunal in the course of their official functions.

The Committee will seek to complete its preliminary review within 30 days of receiving all requested information concerning a complaint of retaliation. If the Committee determines that there is no *prima facie* case of retaliation or threat of retaliation, it shall notify the complainant in writing.

### ***Actions If A Prima Facie Case Exists***

Should the Work Ethics and Disciplinary Committee determine in such cases that there is an interpersonal problem within a particular office, it may additionally advise the complainant of the existence of other informal mechanisms of conflict resolution services in the Organization. If the Committee determines that there is no *prima facie* case of retaliation or threat of retaliation but considers there to be a managerial problem relating to a particular department or office, it will advise the direct supervisor of the parties involved.

If the Committee considers that there is a credible case of retaliation or threat of retaliation, it will refer the matter in writing to the Enquiry Officer for investigation and will immediately notify in writing the complainant that the matter has been so referred. The Enquiry Officer will seek to complete its investigation and submit its report to the Committee within 120 days.

Pending completion of the investigation, the Committee may recommend that the Global HR Director or the local HR Manager take appropriate measures to safeguard the interests of the complainant, including, but not limited to, temporary suspension of the implementation of the action reported as retaliatory; with the consent of the complainant, temporary reassignment of the complainant and/or change of reporting lines; or, for staff members, placement of the complainant on special leave with full pay. For individual contractors or consultants, such interim measures shall not include reinstatement or extension of an engagement beyond its original date of completion.

If the Committee considers that there has been retaliation against a complainant, it may, after taking into account any recommendations made by the Enquiry Officer or the Global HR Director or the local HR Manager or other concerned officers or manager(s), and after consultation with the complainant, recommend measures aimed at correcting negative consequences suffered as a result of the retaliatory action and protecting the complainant from any further retaliation, including, but not limited to: the rescission of the retaliatory decision, including reinstatement, or, if requested by the complainant, transfer to another office and/or function and/or change of reporting lines.

Subject to all relevant due process rights, including rights under RET's HR Manual and Staff Rules, recommended measures may also include dismissal or transfer of the person who allegedly engaged in retaliation.

The Committee shall provide a written decision to the complainant on the recommendations within 30 days of the last Committee hearing. The decision must respect the confidentiality rights of the person who allegedly engaged in retaliation in relation to any ongoing disciplinary process.

Complainants will be informed on a confidential basis of any disciplinary sanctions imposed for the retaliatory action.

### ***Review of the Determination***

If following a determination by the Work Ethics and Disciplinary Committee that there is no *prima facie* case of retaliation or threat of retaliation, the complainant wishes to have the matter reviewed further, s/he may, within 30 days of notification of the determination, refer the matter, in writing, to the President & CEO in case the process was handled by the HQ Work Ethics and Disciplinary Committee. If the process was handled by the Country level Committee, the complainant may refer the matter in writing to the Chair of the HQ-level Work Ethics and Disciplinary Committee, who is the Chief of Staff.

When the case is referred to the President & CEO, after examination of the decision of the Work Ethics and Disciplinary Committee, the President & CEO may approve the decision or launch a further initial inquiry or investigation by assigning an Enquiry Officer. It is in her/his discretion to appoint the previous Enquiry Officer or to select a different person who meets the qualifications for conducting such an investigation. The Enquiry Officer who is assigned by the President & CEO will seek comments from the complainant on the request for review and undertake her/his own independent review of the matter, which shall include a review of the action previously taken and a determination of any additional action required, including whether referral for investigation is warranted. The Enquiry Officer who is assigned by the President & CEO, following the completion of her/his review, will submit her/his recommendations to the President & CEO. The final decision of the President & CEO will be communicated in writing with the complainant and the HQ-level Work Ethics and Disciplinary Committee for implementation.

Local-level Committee decisions shall be appealed to the Chair of the HQ-level Work Ethics and Disciplinary Committee, namely the Chief of Staff, who may, after examination of the situation forward the case to the HQ-level Committee or approve the decision of the local level Committee.

## Assistance to victims of SEASH

RET adheres to the principles outlined in the [UN Protocol on the Provision of Assistance to Victims of Sexual Exploitation and Abuse](#) and places a strong emphasis on victim-centred and rights-based approach in provision of support and assistance to the victims of SEASH.

The assistance and support provided to victims of SEASH perpetrated by RET staff or associates will be provided through existing service providers mapped through PSEASH Networks or/and RET's programming. Referrals for assistance will be based on the existing services and programmes, such as the established gender-based violence and child protection referral pathways in each country. All Country Offices of RET and its implementing partners will have a defined and articulated procedure for prompt referral to qualified service providers within the programme locations in which they operate and for having personnel trained on the standard operating procedures for referring victims for assistance in line with confidentiality and do not harm principles. Victims of SEASH will be referred to RET's available internal services or external specialized services. The mapping of these services will be clearly defined and articulated in PSEASH Country or Regional Action Plans.

RET will coordinate with PSEASH and Interagency Networks in order to ensure that assistance and support for victims of SEASH is provided in a holistic and integrated manner. In line with the UN Protocol on the Provision of Assistance to Victims of Sexual Exploitation and Abuse, the victims will be referred to relevant organizations/authorities to benefit from the following services: (i) **Safety and protection** entailing the development of an immediate safety and protection plan addressing risks of retaliation and further violence against the victim and guaranteeing confidentiality; (ii) **Medical care** entailing the provision of necessary treatment for conditions directly arising from SEASH, including the referral to relevant services, and informing victims about the importance of seeking medical care within 72 hours in case of sexual abuse; (iii) **Psychosocial support** entailing psychological first aid and psychosocial counselling to assist victims, in addition to referral to specialized MHPSS<sup>7</sup> services; (iv) **Education, livelihood support and basic material assistance** entailing the provision of food, clothing, shelter, school re-integration and livelihood support particularly for victims in the most vulnerable situations to address their immediate needs;

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<sup>7</sup> Mental Health and Psychosocial Support (MHPSS)

(v) **Legal services** entailing the referral to providers of legal assistance if desired by the victim.

### See also

- Framework on Accountability to Affected Populations and Protection from Sexual Exploitation and Abuse, and its annexes.

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