

Supplemental Guidance on Safeguarding Annex 1

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1. Purpose of this Supplemental Guidance

Unitaid is committed to working with all its partners, including grantees and other recipients of Unitaid funding, to improve safeguarding standards across the global public health response.

This commitment involves ensuring that all recipients of Unitaid funding are aware of their responsibility to take all reasonable steps to prevent harm, particularly sexual exploitation, abuse and harassment¹ (collectively, "sexual misconduct"), from occurring; to protect people from that harm, especially children and other vulnerable people, and to respond appropriately when harm or allegations of harm occur.

Unitaid's Guidelines on the Prevention, Reporting and Management of Wrongdoing provide guidance with respect to a range of potential misconduct and dishonest behaviour falling within the definition of wrongdoing, including sexual misconduct. This Annex provides additional, more specific clarifications concerning Unitaid's expectations and requirements on safeguarding and should be read together with the Guidelines. Unitaid will monitor compliance with this Guidance through its grantee capacity assessments and additional verifications, together with its grantee reporting requirements.

For the purposes of this Guidance, a child is defined as someone under the age of 18, regardless of the age of majority or consent in the country concerned.

¹ Sexual exploitation: The actual or attempted abuse of 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.

Sexual abuse: The actual or threatened physical intrusion of a sexual nature, whether by force or under unequal or coercive conditions. Sexual harassment: Any conduct of a sexual nature that might reasonably be expected or be perceived to cause offence or humiliation,

when such conduct interferes with work, is made a condition of employment or creates an intimidating, hostile or offensive work environment.

2. Principles of safeguarding

In the context of the global public health response, safeguarding refers to preventing and responding to harm caused by sexual misconduct or abusive conduct², such as bullying/harassment.³

Unitaid aims to minimise the likelihood and impact of such actions on people working in the sector and those intended to benefit from Unitaid's work. Children and other vulnerable people within the communities where interventions and projects funded by Unitaid are implemented may be particularly at risk of abuse and harm.

Unitaid is committed to the key safeguarding principles below, which we expect the recipients of our funds to also apply, both with respect to their own organizations and cascaded down the delivery chain to any third parties who receive Unitaid funding indirectly.

The principles are as follows:

- **Do no harm:** All organizations and individuals involved in the implementation of Unitaid funded projects and initiatives must consider the potential unintended consequences of their decisions and actions.
- Act with integrity, be transparent, and be accountable.
- **Responsibility lies with both organizations and individuals:** Everyone has responsibility for safeguarding. Unitaid, its grantees and other third-party organizations receiving Unitaid funds indirectly, all have a safeguarding duty of care to their staff, consultants and volunteers, as well as the beneficiaries of their projects. However, this does not obviate the responsibility of individuals to also speak out and act swiftly to report any safeguarding concerns of which they become aware.

² **Abusive conduct** includes harassment, abuse of authority, and discrimination. **Abuse of authority** is the improper use of a position of influence, power, or authority by an individual towards others. **Discrimination** is any unfair treatment or arbitrary distinction in the workplace, on the basis of gender, gender expression, gender identity, race, religion or belief, nationality, ethnic or social origin, age, sexual orientation, marital status, disability, language, or other aspects of personal status.

³ **Harassment:** Any behaviour that (i) is directed at another person and has the effect of offending, humiliating, or intimidating that person; (ii) the person engaging in the behaviour knows or reasonably ought to know would offend, humiliate, or intimidate that other person; and (iii) interferes with that other person's ability to carry out her or his functions at work and/or creates an intimidating or hostile work environment.

- All activity must be carried out in a way that protects the best interests of children and other vulnerable people that might be directly or indirectly impacted by Unitaid's funding projects or activities: Children and other vulnerable people in the community may be at greater risk of being subject to sexual misconduct or abusive conduct, even when they are not direct beneficiaries of the Unitaid-funded projects and initiatives.
- Non-discrimination: All people, including children, must be treated equally, and not be subjected to any unfair treatment or arbitrary distinction on the basis of gender, gender expression or gender identity, race, religion, political belief/conviction, nationality, citizenship, ethnic or social origin, age, marital status, sexual orientation, disability, language or other aspects of personal status.
- **Protection and empowerment:** Steps should be taken to protect individuals from sexual misconduct and abusive conduct, especially those identified as being at high risk, together with victims/survivors and reporters/whistle-blowers. Preventive measures should be taken to reduce the risks of sexual misconduct and abusive conduct before it occurs. Both victims/survivors and reporters/whistleblowers must have the right to make a report anonymously and confidentially. In taking action in response to a report, organizations should take a victim/survivor-centred approach. In their interactions with victims/survivors, organizations should prioritize listening to them, avoiding retraumatization, and systemically focusing on their safety, rights, wellbeing, expressed needs and choices, thereby giving back as much control as feasible and focussing on an empathetic and sensitive delivery of services and accompaniment in a non-judgmental manner. Additionally, organizations must safeguard confidentiality throughout the process to the greatest extent possible, meaning that information must be disclosed only to persons who have a legitimate "need to know" and only to the extent required for the organization to take the action required to address the situation. Clear information must be available informing victims/survivors and reporters/whistleblowers of their right to confidentiality to the greatest extent possible and of any measures to protect them against retaliation.

3. What's expected of Unitaid-funded partners?

a. Standards, policies and processes

Unitaid funds a wide range of projects and interventions which vary significantly and involve implementation by a diverse range of Unitaid-funded partner organizations, from NGOs, to academia and private sector companies. Given this diversity, Unitaid recognises that exposure to safeguarding risks is not consistent across its project portfolio and will depend on the nature of the projects, together with the institutional roles and mandates of the organizations involved.

Particular attention is necessary when the implementation of Unitaid-funded interventions creates power imbalances and provides opportunities for some individuals to exercise power over more vulnerable people. For example, there is a power imbalance when individuals involved in the implementation of a Unitaid-funded project are required to determine whether other more vulnerable people have access to scarce health products through, for instance, their enrolment in an observational trial taking place in a low-resource setting. Such scenarios could potentially be leveraged to provide an opportunity for abusive behaviour and the safeguarding risks should therefore be carefully managed, reported, and mitigated through a transparent and accountable process.

On the other hand, not all projects funded by Unitaid involve providing health products to children or other vulnerable people, so the safeguarding risks will be lower in some cases. Unitaid therefore accepts that its grantees and other recipients of its funding will take a proportionate approach to safeguarding, reflecting the level of risk associated with their activities.

Nevertheless, Unitaid requires that all organizations meet a number of minimum standards relating to preventing and responding to incidents of sexual misconduct or abusive conduct, which are set out below. Accountabilities for safeguarding measures should be clearly attributed within each organization, with overall responsibility for safeguarding clearly resting with the Board of the organization.

i. Organizational policies

Unitaid requires all Unitaid-funded partner organizations to have codes or policies for their workforce (staff, consultants, volunteers, etc.) that address essential standards of conduct. These include policies that address the prevention of and response to sexual misconduct and abusive conduct, both internally and externally. Internal rules and guidance may be part of the HR policies, although Unitaid also encourages its implementing partners to develop overarching safeguarding policies and codes of ethical conduct if these are not already in place. In addition, any organization funded by Unitaid to work with children or other vulnerable people must have policies in place specifically addressing the protection of these groups. Copies of these codes or policies must be easily accessible and organizations must ensure that these documents are read, understood, and acknowledged by all members of their workforce, including volunteers.

ii. Organizational Management

Partner organizations must have mechanisms to ensure their sub-contractors are also taking adequate measures to prevent sexual misconduct and abusive conduct and are responding appropriately to reports or incidents. Organizations' contracts and partnership agreements must include standard clauses requiring sub-contractors to adopt policies that prohibit such conduct and to take measures to prevent and respond to it. Additionally, organizations are expected to have mechanisms to monitor sub-contractors' compliance with these clauses.

iii. Human Resources Systems

Partner organizations should assess the safeguarding risk for each role they recruit and should ensure that their recruitment processes are designed to identify candidates with competences that best respond to these risks. Partner organizations are expected to have in place a systematic vetting procedure for job candidates through proper screening. This must include, at minimum, reference checks for sexual misconduct and other wrongdoing and a self-declaration by the job candidate requesting that they confirm that they have never been subject to sanctions (disciplinary, administrative or criminal) arising from an investigation in relation to wrongdoing, including sexual misconduct, or left employment pending investigation and refused to cooperate in such an investigation. Particular care should be taken when recruiting staff, consultants or volunteers to work with children or other vulnerable people, and screenings for these roles should include the verification of criminal records.

iv. Mandatory Training

Partner organizations must hold mandatory trainings (in-person or online) for all members of their workforce, including staff, consultants and volunteers, regarding the organizations' policies and processes on sexual misconduct and abusive conduct.

The training must include 1) definitions of sexual misconduct and abusive conduct (that are aligned with WHO's definitions), 2) explanations on the prohibition of sexual misconduct and abusive conduct and 3) actions that members of the workforce are required to take (i.e., prompt reporting of allegations and referral of victims/survivors to support). Trainings are expected to be provided when members of the workforce are first recruited, and this should be followed up with regular refresher courses. Organizations should have a mechanism to monitor completion of trainings for each individual.

Online training on safeguarding is available, such as:

- "Safeguarding in the International Aid Sector", found at <u>https://www.open.edu/openlearncreate/course/</u>.
- "What is sexual exploitation and abuse?" found at <u>https://openwho.org</u>.

Additional online courses, many offered in multiple languages, may be found at Open University⁴ and Open WHO⁵, as well as other educational websites.

v. Reporting

Partner organizations must have clear mechanisms and procedures for their workforce, contractors, beneficiaries and communities to report allegations of sexual misconduct or abusive conduct, or to raise related concerns. The processes must be widely understood and accessible by all members of the organization's workforce and, additionally, Unitaid-funded project implementers operating in the field must ensure that local contractors, local volunteers and members of the community, including children, are also clearly informed of the existence and accessibility of these reporting mechanisms. Organizations must also provide an alternative channel to allow for complaints or concerns to be raised about the individuals who manage the reporting mechanisms.

The mechanisms and procedures must comply with standards for reporting, including those relating to safety, confidentiality, transparency and accessibility. As noted in Section 2 above, all reporters/whistleblowers must have a clear option to maintain their anonymity and it must be explicit in all cases that there can be no retaliation against the reporter/whistleblower. Organizations also have a duty to safeguard confidentiality throughout the process to the greatest extent possible.

⁴ <u>https://www.open.edu/openlearncreate/.</u>

⁵ <u>https://openwho.org/.</u>

vi. Assistance and Referrals

Partner organizations are expected to have in place a system to refer victims/survivors affected by sexual misconduct to support services available locally, based on their needs and consent. Support services may include, but are not limited to, medical care, psychosocial support and legal assistance.

vii. Investigations

Partner organizations must have a process for the timely and impartial investigation of allegations of sexual misconduct and abusive conduct. Where an organization does not have an internal investigation function, it may have in place a referral system for investigations by an external entity.

viii. Corrective Action

Partner organizations are required to take appropriate corrective action when they become aware of any allegation of sexual misconduct or abusive conduct. Such actions are expected to include, after consultation with the victim/survivor where appropriate, the initiation of the investigation process, provision of support to the victim/survivor, implementation of protective measures such as placing the suspected perpetrator on administrative leave, and, where the wrongdoing has been proven, appropriate action against the perpetrator, such as termination of their contract. Additionally, organization- or office-wide measures may also be required, such as capacity building of the workforce or measures to identify and reduce risks arising within programme delivery.

b. Capacity assessment and risk management in projects

Unitaid conducts capacity and risk assessments before agreeing to fund projects and a risk matrix is prepared for each project. This enables mitigation and capacity building measures to be agreed and facilitates monitoring, with regular reassessment of the identified risks throughout grant implementation. Any specific safeguarding risks should be identified and included in the project risk matrix, to facilitate tracking and regular review. Additional controls may be required by Unitaid to mitigate the identified risks.

In addition, Unitaid-funded partner organizations should have their own institutional risk management framework, setting out their approach to risk, together with their risk appetite to guide risk identification and the assessment of safeguarding risks. If the organization is working with children or other vulnerable people, safeguarding should be a separate category on the organizational risk register. There should also be a designated risk owner and a clear pathway for the escalation of safeguarding risks.

4. What's expected of downstream partners?

All directly-funded Unitaid partner organizations are responsible for ensuring that the safeguarding principles and standards outlined in this Guidance are cascaded down the delivery chain to any third parties who receive Unitaid funding indirectly – e.g., through the inclusion of requirements in contractual arrangements.

Unitaid also expects direct recipients of its funding to conduct capacity and risk assessments before providing Unitaid funding to third-party implementers and any specific safeguarding risks should be identified and addressed, in line with the approach described in Section 3 above.

Whilst responsibility for addressing safeguarding matters with third-party downstream partners remains with the partner organizations funded directly by Unitaid, Unitaid may request copies of capacity and risk assessments, together with evidence that the standards have been shared, understood and agreed to by the third-party implementing partners concerned. Unitaid may also introduce reporting requirements to ensure compliance with respect to these matters.

Unitaid partners are welcome to use or adapt any part of this document for the purposes of informing third-party implementing partners about required standards, if they choose to do so.

5. Reporting of safeguarding concerns

All directly-funded Unitaid partner organizations are required to promptly inform Unitaid if there are any suspected or confirmed cases of wrongdoing within the context of a Unitaid-funded project, in line with Section 6 of Unitaid's Guidelines on the Prevention, Reporting and Management of Wrongdoing.

Any incidents or credible allegations of sexual misconduct or abusive conduct should therefore be promptly reported. The available reporting channels are described in Section 6.2 of the Guidelines.

Partner organizations funded directly by Unitaid are responsible for ensuring that equivalent reporting requirements are cascaded down to third parties funded indirectly by Unitaid.

The approach to the investigation and management of safeguarding cases is explained in Section 7 of the Guidelines. Unitaid has zero tolerance for any abuse and must be in agreement with the proposed course of action if abuse is established. In this context, it is particularly important to provide support to those affected and to take account of the local context, noting that in some cases, reporting to the authorities may raise a risk of further harm to the victims/survivors concerned.



Unitaid Secretariat

Unitaid — Global Health Campus Chemin du Pommier 40, 5th floor 1218 Grand-Saconnex Geneva, Switzerland

T +41 22 791 12 00

unitaid.org

Unitaid is a hosted partnership of the World Health Organization.

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About Unitaid:

We save lives by making new health products available and affordable for people in low- and middle-income countries. We work with partners to identify innovative treatments, tests and tools, help tackle the market barriers that are holding them back, and get them to the people who need them most – fast. Since we were created in 2006, we have unlocked access to more than 100 groundbreaking health products to help address the world's biggest health challenges, including HIV, TB, and malaria; women's and children's health; and pandemic prevention, preparedness and response. Every year, more than 300 million people benefit from the products we've helped roll out.