



CHILD SAFEGUARDING POLICY

VERSION #2 - JULY 2019

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WE ARE HUMAN AFTER ALL

HAA - A TECHNICAL AND CREATIVE AGENCY
FOR THE RIGHTS OF THE CHILD

SECTION 1) Introduction and Key Background Information

HAA is a technical and creative agency for the Rights of the Child and as such it has a responsibility to ensure that children are safe whenever they are a part of initiatives that HAA is working on - directly or indirectly. We are committed to defining and upholding the highest standards of child safeguarding and child protection at all times.

Through our work, we aim to ensure that all those who come into contact with children, families and communities are aware of the need to protect children, families and all community members and know how to do this effectively.

HAA's Child Safeguarding Policy is a statement of intent that outlines the organization's commitment to safeguard children, and all vulnerable persons, from harm and makes clear to all what is required in relation to their protection. Through the implementation of this Child Safeguarding Policy, HAA is committed to ensuring that its staff, volunteers, interns and others working on behalf of the organization prioritise children's protection and safeguard the best interests of the child at all times.

This policy does not extend to child protection mechanisms in communities where HAA works as we recognise that our partners are best placed to address the risks of harm that exist within children's own communities. However, HAA works closely with partners to ensure that they develop safe organizations and deliver programmes which protect and promote the well-being of the children they work with.

This policy can never be used as justification for condoning any instance of child abuse.

This policy document is inspired from the ChildHope 2016 Child Safeguarding Policy. In this policy, ChildHope acknowledges the following organisations from which they have drawn materials from: CREATE, Sense International, Setting the Standard/ Keeping Children Safe Coalition, Hope and Homes for Children, Learning for Life, Tearfund, World Vision, SCF UK, Anti Slavery, WarChild, ECPAT Australia, 3rd World Liaison Committee of Development NGOs to the EU.

1.1) Definitions

Child

Although we recognise that the legal definition of a child varies in different countries, for the purpose of this policy children are defined as all those under 18 years of age in accordance with the UN Convention on the Rights of the Child. An individual aged 18-25 years is considered to be a "young person".

Vulnerable persons

Many programmes include work with adults, who could themselves be very vulnerable. A vulnerable person, for purposes of this policy, is any adult who may be at additional risk or in need of support due to their social background, mental health problems, learning disability, physical disability or other reasons which put them at increased risk of harm and abuse. Our Child Safeguarding Policy aims to be inclusive of both children and all vulnerable persons.

Safeguarding

Child safeguarding is defined as guidelines, procedures, practices to ensure HAA is a safe organisation, responsible for protecting children, and all vulnerable persons, from the risk of intentional and non intentional harm and abuse caused by representatives of HAA or activities of HAA.

Child safeguarding aims at

- Protecting children, and more largely all community members, from harm, violence, exploitation and neglect
- Establishing proactive actions to prevent harm, violence, exploitation and neglect and ensure safe environments

Child Protection

Child protection is a specific element of safeguarding relating to the actions taken to protect a child who is suffering or is likely to suffer. Child Protection are programs implemented by HAA or through its partners to prevent and respond to “all forms of physical or mental violence, injury and abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual violence,” as outlined in the Convention on the Rights of the Child (UN CRC), Article 19, 1989.

Child Abuse

According to the World Health Organization “child abuse” or “maltreatment” constitutes “all forms of physical and/or emotional ill-treatment, sexual abuse, neglect or negligent treatment or commercial or other exploitation, resulting in actual or potential harm to the child’s health, survival, development or dignity in the context of a relationship of responsibility, trust or power.’ (WHO, 1999 Report of the Consultation on Child Abuse Prevention)

Child Harm

Safeguarding children demands attention to all actions which may cause harm to children. This extends beyond actual abuse or violence, to include all action which may cause harm to a child, either intentionally or unintentionally, directly or indirectly.

Harm to children is a complex phenomena and does not fit easily into set parameters. However, there are a number of agreed categories of harm that form the basis of this policy and the procedures therein. These are:

- **Physical Harm** - Actual or attempted physical injury of a child, inflicted intentionally or knowingly not prevented. This includes, but is not restricted to, punching, slapping, biting, burning, strangling, poisoning, drowning and smothering.
- **Sexual Harm** - The involvement of a child in sexual activity that he or she does not fully comprehend, or for which the child is not developmentally prepared for and is unable to give informed consent to. This includes direct sexual contact through kissing, touching and penetration as well as encouraging children to witness pornography or intercourse. It also includes the sexual exploitation of children through prostitution, trafficking and grooming with harmful intentions.
- **Emotional abuse** - The persistent failure to provide for the child’s basic emotional needs to such a severe extent that it is harmful to the emotional development of the child. This includes repeatedly ignoring or rejecting a child, causing the child to feel frightened and in danger, isolating the child from social contact and degrading and humiliating treatment.
- **Neglect** - The persistent failure to provide for the child’s essential needs to the extent that impairment to the child’s physical health and development is likely. This includes the failure to provide appropriate clothing, food or shelter; failure to adequately supervise a child and protect them from harm; failure to access appropriate medical care or treatment.
- **Exploitation** - Refers to the use of a child in work or in other activities for the benefit of others. Child sexual exploitation is a form of exploitation and sexual abuse that involves children being engaged in any sexual activity in exchange for money, gifts, food, accommodation or any other material needs (e.g. child prostitution, the trafficking of children for sexual abuse and the creation, distribution or sharing of child abuse images).

Those different forms of violence and abuse in many instance take place both in real life and online.

Direct contact with children

Being in the physical presence of a child or children in the context of the organisation’s work, whether contact is occasional or regular, short or long term.

Indirect contact with children

Includes, but is not limited to, having access to information on children in the context of the organisation's work, such as children's names, locations (addresses of individuals or projects), photographs, videos and case studies.

Best Interests of Children

Article 3 of the UN Convention on the Rights of the Child establishes the best interests of a child as a primary consideration in all actions affecting children. Decisions that affect children should be made based on consideration of their physical and psychological well-being and the need to prevent harm to them or other children. In assessing what is a child's best interests, the child's views must be given due consideration in accordance with their age and understanding. (See Appendix 6 for guidance on how to assess best interests).

Informed Consent

Ensuring informed consent involves providing children with the facts, implications and future consequences of any action affecting them. This should be done in a manner appropriate to the child's age and understanding. This includes, but is not restricted to, ensuring that children understand the ways that their personal information and/or photographs and videos will be used and that they give consent to be involved in project activities (See page 21 for more information on gaining informed consent). Particular care needs to be taken when obtaining consent from children with disabilities to ensure their full understanding.

1.2) Core Principles and Values

The following principles underlie all HAA's policies and procedures in relation to safeguarding:

Child Rights Based Approach: All actions should take into account and respect the right of the child, as set out in the UN Convention on the Rights of the Child

Non-Discrimination: All children have an equal right to protection irrespective of gender, religion, sexual orientation, disability, language or social background

Participation: HAA views all children as principal actors in their own development and pro-actively seeks to create spaces where children can voice their opinions and make choices. We recognise the resilience and creativity of children and we believe that the best way to protect children is to empower them to protect themselves

Ownership: Everyone has a responsibility to prevent harm and promote the well-being of children, even though overseeing policy implementation may be assigned to particular individuals.

Confidentiality: Children have the right to privacy and, where there are concerns, only those who need to know are informed

Transparency: Creation of an aware culture where concerns can be raised openly is critical to preventing abuse and protecting children from harm.

Sensitivity: Harm to children can provoke feelings of discomfort, embarrassment and distress. All issues must be dealt with sensitively, with both staff and children receiving adequate support in the management of concerns.

Systemic: Every child exists within a wider ecological system which includes their family, peers, community, teachers, NGOs, police and other state agencies. Children are best protected by

recognising and increasing the strengths and capabilities at every layer of this system rather than working with the child in isolation of their context.

1.3) Why we need a Safeguarding Policy

- **The Legal Basis** - [UN Convention of the Rights of the Child](#) provides a comprehensive framework for the protection, provision and participation of all children. In France and in most other countries, this convention has been converted into law and places a legal obligation on individuals and organizations to take proactive measure to protect and promote the welfare of children.
- **The Moral Basis** - The children with whom we work may be especially vulnerable to abuse and exploitation. Any organisation or individual working for the benefit of children must pay particular attention to the safeguards that are in place to make sure that they do not put any child at risk or cause them harm.
- **Prevention** - Child abusers seek out organisations with weak communication structures and thrive where secrecy and shame prevail. This can be averted by creating an aware culture where staff, volunteers, contractors and visitors clearly understand the risks that exist to children, are provided with training and support to identify and raise safeguarding concerns and where the potential for abuse can be discussed openly and transparently.
- **Professional Reputation:** Organisations without safeguarding policies and procedures are more vulnerable to false or malicious accusations of abuse. Such allegations, whether founded or unfounded, can destroy an organisation's reputation and could undermine our entire portfolio of work as well as damaging the reputation of the sector as a whole. For this reason, the Charity Commission require all organizations working with children to implement safeguards, include a child protection or safeguarding policy.

It is important to note that the existence of a Child Safeguarding Policy is not sufficient to keep children safe. The implementation of the procedures and practices contained in this document must be constantly monitored and the organization must constantly review and develop its practice in this area. HAA is committed to constantly reviewing its practice and details of the standards and indicators that are used can be found in Section 3.

1.4) HAA risk assessment matrix

<u>HAA Child safeguarding risk assessment - JUNE 2019 (self assessment by HAA)</u>				
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Red	IMPACT x LIKELIHOOD is 9 and above - this situation is likely to happen and has a significant impact on children			
Orange	IMPACT x LIKELIHOOD is 5 and above - this situation is either likely to happen or has a significant impact on children			
Yellow	IMPACT x LIKELIHOOD is 4 and below - this situation is not likely to happen and has a limited impact on children			
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-	<u>Potential situations of Violence against Children</u>	IMPACT on children (1 to 5)	LIKELIHOOD (1 to 5)	Strategy to minimize and prevent situations of VaC
12	SHORT TERM COLLABORATORS WITOUT PROPER TRAINING ABUSE CHILDREN - Collaborators insult a child, restrain a child during an activity because of his/her behaviour or share images of a child on social media - risk particularly high with short term collaborators in contact with children (for instance study enumerators)	3	4	Code of Conduct User friendly version of code of conduct is shared on Day 1 Safeguarding training for all collaborators to include risk assessment based on specific position of each collaborator Safeguarding training to include case studies
9	COMMUNITY MEMBERS ABUSE CHILDREN BECAUSE OF THEIR PARTICIPATION IN ACTIVITIES PERCEIVED AS GIVING A NEGATIVE IMAGE OF THEIR COMMUNITY OR OF SOME COMMUNITY MEMBERS- Local stakeholders or community members threaten, deny education access or emotionnaly abuse children or VYA who participated to a study, project evaluation or an advocacy activity supported by HAA.	3	3	Child safeguarding risk assessment is set up prior to every community based activity together with local partners Projet results systematically shared with local communities in a manner that does not allow for participants to be blamed for results

<u>10</u>	SEXUAL ABUSE OF CHILDREN BY HAA REPRESENTATIVES - HAA representatives sexually exploit or abuse beneficiaries of a HAA led activity (for instance a study or workshop with the participation of children and VYA)	5	2	Code of Conduct HAA core principles and safeguarding procedures explained to all children and VYA participating to a HAA led activity, to the personnel of partner organisations, and whenever possible to their caregivers. A specific CS risk assessment is designed for every situation where children or VYA participate to a HAA led activity (study, workshop, FGD etc) HAA never supports children to stay overnight outside of their usual residence (participation to workshops over several days). If overnight stays of children however cannot be avoided during an activity, arrangements for care and lodging of children are discussed in great details.
<u>9</u>	CONFIDENTIAL DATA IS ACCESSIBLE - Confidential and sensitive data (photo/video/written) are mishandled and are accessible	3	3	Photo / video data storage guidelines Communication guidelines to minimize collection of confidential data to information required as per "best interest of the child" principle
<u>8</u>	CHILD ABUSE SUSPICIONS NOT ADDRESSED - Claims of child abuse are not addressed - because the The HAA director is also the CSO and claims would harm the company's reputation	4	2	HAA basic compulsory training promotes role of Nominated External Contact for child safeguarding and ethical issues and provides links to external resources to report safeguarding concerns. Whistleblowing system (report@haagence.com) allows to report abuse in any language HAA core principles and safeguarding procedures explained to all children and VYA participating to a HAA led activity, to the personnel of partner organisations, and whenever possible to their caregivers.
<u>6</u>	DISCRIMINATORY SELECTION OF PARTICIPANTS OR BENEFICIARIES - HAA representative discriminates a child because of his / her ethnicity, sexual orientation, religious beliefs, social background etc - for instance child cannot access to a creative workshop	3	2	Code of Conduct HAA core principles and safeguarding procedures explained to all children and VYA participating to a HAA led activity, to the personnel of partner organisations, and whenever possible to their caregivers.
<u>4</u>	ONLINE GROOMING OF BENEFICIARIES - children and vulnerable young adults participating to activities regularly request social media contacts with HAA representatives. Those connections create spaces for potential online grooming.	2	2	Revised version of code of Conduct indicates no use of personal social media with beneficiaries. Related case study situation to included in basic compulsory training

1.5) Who is bound by the policy?

HAA's CSP applies to all HAA representatives, whether they are in direct or indirect contact with children:

- All staff
- All trustees
- All volunteers and interns
- All those acting on behalf of HAA, such as consultants and trainers

It also applies to all those who visit partners' programmes in the name of HAA, such as patrons, donors, corporate sponsors, journalists, supporters.

- All the individuals cited above will be expected to read HAA's Safeguarding Policy and sign a commitment to adhere to its principles and procedures at all times. In the case of employed staff, this is contained within their contract of employment.

1.6) Work with Local Partner Organizations

HAA's Child Safeguarding Policy does **not** apply to partner organisations as we expect all partners to have their own safeguarding policies and procedures which reflect the local context and legal framework. We do, however, expect partners to be aware of our policy and to collaborate closely with HAA in all aspects of safeguarding.

The promotion of safe organizations and adequate child protection procedures is one of the main pillars of HAA's development approach. We expect all partners to develop their own child protection and safeguarding policies and procedures and this is a requirement within HAA's Partnership Agreements. Where partners do not have their own procedures, HAA will support them to develop these.

HAA will remain in dialogue with partners regarding their child protection and safeguarding procedures and practice. This will allow HAA and the partner to identify areas in which HAA can offer support and capacity building. Progress will be documented in the Partner Development Journey completed during HAA's monitoring visits. In addition, all partners will be asked to provide HAA with copies on their latest Child Protection Policies and an annual report regarding child protection cases that have been dealt with during the year.

In the event of persistent poor practice or abuse within a particular organisation, HAA may decide to terminate the partnership relationship. However, we will always aim to work alongside partners to improve practice and address concerns before considering a termination of the partnership relationship.

SECTION 2) Recruitment, Training and Support of Personnel

2.1) Recruitment

HAA is committed to good practice in recruitment. We seek to recruit staff who respect and value children and who are committed to the highest standard of personal and professional conduct. This goes beyond simply complying with protocols and legislation, but extends to attempts to ensure that individuals have an appropriate set of personal and professional values and are committed to promoting the safety and well-being of children.

Prior to Interview

- All posts have job descriptions and key selection criteria to improve the likelihood of attracting the right person for the job
- A person specification accompanies each job description and applicants are judged against these criteria to ensure the best candidate for the job is selected
- When advertising vacancies, we inform candidates of our Safeguarding Policy and that commitment to this policy is a condition of employment
- All candidates must fully declare on the application form whether they have any criminal convictions, spent or unspent. A false declaration that results in employment will render the person liable for dismissal without notice.
- Candidates must explain any gaps in employment history

During the Interview:

- Specific questions on safeguarding and child protection will be included in the interview

Offers of Employment:

- A conditional offer of employment will only be made upon receipt of two satisfactory written references. Acceptable references exclude family members and those who have known the applicant personally for under 2 years. Referees will be made aware that employees may have contact with children and will be asked to draw attention to any child protection concerns they may have. Where concerns are indicated HAA may also contact referees by telephone for further clarification.
- Once the offer of employment has been accepted and references received, a police background check will be initiated. Only the Director or the person assigned in written to this task by the Director will know the findings of the police background check and only relevant convictions will be taken into account
- Staff will not be allowed to be in direct or indirect contact with children until a satisfactory background check is received.
- Signing a commitment to the HAA's Child Safeguarding Policy is a contractual obligation.
- In the case of citizens where police background checks cannot be obtained, HAA reserves the right to call referees to seek further information in relation to the candidate's practice in relation to children

2.2) Education and Training

HAA promotes an environment which encourages opportunities for questioning and learning about child safeguarding issues. This includes:

- Within 1 week of taking up their position, all staff, volunteers and interns will receive a brief introduction to HAA's Safeguarding Policy and procedures from a member of the management team
- Child Safeguarding training detailing a number of risks associated to each person's position will be given to all staff, volunteers and interns within 1 month of taking up their position.
- Safeguarding issues will be discussed in staff appraisals to gauge whether further training, support or supervision is needed
- Trustees and staff should receive update on child safeguarding at least once a year.
- It is recognised that the topic of child abuse is sensitive and may raise personal issues. HAA will provide information on a confidential telephone support service that staff can access for support
- Staff training needs will be monitored and evaluated regularly by the Designated Safeguarding Officer (DSO) and the Child Safeguarding Working Group (not established yet at date of writing this document)

A specific shortened version of Child Safeguarding training will be designed for HAA representatives who have no direct and no indirect contact with children (as defined in the definitions section 1.1), and whose collaboration with HAA is less than 15 days per year on average. Those HAA representatives are likely to be comedians participating to the production of educational and advocacy materials, graphic designers or translators of technical or strategic documents.

Specific communication materials are provided to all communities where HAA representatives are working in direct contact with children and communities allowing them to understand the HAA representatives follow a strict code of conduct and to be able to report any concerns they might have about the HAA representatives or the activities they are conducting. When working as part of an assignment for or with an experienced partner having their own set of child safeguarding procedures already in place and known by the community, the HAA representatives comply with the partner's child safeguarding procedures. The DSO is to be informed immediately when HAA representatives comply with the child safeguarding procedures of a partner.

2.3) Management Structure

Ensuring a safe organization requires openness and a constant monitoring and oversight of practice.

The management structure within HAA will support this by:

- All representatives participate to yearly appraisals that include feedback from staff on whether they feel they need training, support or advice on child protection issues.
- Child Safeguarding will be a standing agenda item at project management meetings
- Safeguarding will be included within the development of projects and included in the monitoring visits conducted by HAA's programme managers

In addition, a Designated Safeguarding Officer (DSO) will be appointed who will be responsible for:

- Promoting awareness and implementation of the policy throughout the organisation.
- Monitoring implementation of the policy and reporting on developments at the Senior Management Team (SMT) meetings and Staff Meetings.
- The development of child protection training resources as required.
- Maintaining knowledge of best practice and statutory requirements.
- Acting as a source of support and information for staff on safeguarding issues

The HAA DSO is Tamo Wagener (tamo@haagence.com, +33 6 30068538), the HAA Executive Director. Whenever the HAA DSO is changed, this policy is to be reviewed.

The name and contact details of the DSO will clearly be displayed in the HAA office, the HAA website and in any office where a HAA staff or affiliate is working for more than 5 days in a row and new staff will be made aware of the role.

The DSO will be supported by the Child Safeguarding Working Group (CSWG). This group is not established at date of updating this policy. This group is to be established by end 2019 and will meet yearly. It will be responsible for:

- Promoting awareness and implementation of the policy and procedures throughout the organization
- Monitoring implementation of child safeguarding policy and procedures
- Reporting on developments to the collaborators and partners
- Conducting an annual review of safeguarding issues and including findings in the annual report

3. Behaviour Protocol (the HAA code)

A key element of our CSP is HAA's Code of Conduct. This applies to HAA staff and anyone acting on behalf of HAA. The guidelines are to be interpreted in the spirit of common sense, with the best interest of the child as the primary consideration.

This Code of Conduct will be prominently displayed in HAA's office, on the HAA website, and shared with all organisation representatives and HAA's partners.

Be Prepared

DO:

- Read the Child Protection or Safeguarding Protocol of the local partner organization before arriving on a visit
- Ensure that you know who the Designated Safeguarding Officer is within the partner organization and if this role does not exist, who you should go to with any concerns
- Make an attempt to understand local norms, particularly those around contact between children and adults
- Discuss activity plans with the partner organization and take their advice about where, when and how to conduct the activities in a safe manner and in a way that puts the children at ease.
- Ensure that you take clothing that is appropriate to the local culture and respects local norms

Avoid being in a risky situation

DO:

- Plan and organize your work, taking in to account and minimizing potential risks
- Always ensure that a second representative of HAA or a representative of a HAA partner is present when you are with children

DO NOT:

- Condone or participate in behaviour that is illegal and/or unsafe
- Believe "it could never happen to me"
- Be alone with a child where no-one else can see what you are doing
- Take a child to your home, hotel or to other private spaces

Develop safe Interactions with Children and adults

DO:

- Treat children and adults (partners and community members) equally, respectfully and without discrimination on the basis of age, gender, disability, faith, sexuality etc
- Be aware of the power balance between adult and child and avoid actions which exploit this
- Explain clearly what you intend to do at the start of any activity and explain exactly what you plan to do with any information shared
- Give children and adults the opportunity to talk at their own pace.
- Ensure that children and adults are aware of their right NOT to participate or to withdraw from the activity at any time

Your Behaviour

DO:

- Always provide an example of the good conduct which you wish others to follow
- If you are taking notes or recording the session, explain to the group what you are doing and how the information will be used
- Take pictures of children only with informed consent, with a professional objective and in full respect of the HAA communication guidelines.
- Raise any concerns or suspicions you have regarding the safety or well-being of children to the HAA DSO or to relevant national authorities or organizations (such as national child helplines or local child protection organizations).

DO NOT:

- Act in a way that is, or could be interpreted as, inappropriate, threatening or sexually provocative
- Develop or encourage close attachments with individual children
- Show favouritism or spend excessive time with one child
- Offer gifts to individual children. If providing a gift is appropriate, it should be given to the group and with the prior agreement of the partner organization
- Initiate physical contact with a child. Hugging, holding a child on your lap, or even tapping a child on the shoulder may be considered inappropriate depending on the circumstances
- Give assistance in aspects of personal care to a child (e.g. dressing, bathing etc.). If a child part of a HAA project cannot care for themselves, ask a female representative from the partner organization responsible for caring after children to do so.
- Raise expectations by discussing, offering, or agreeing to support a child or a family.
- Share or exchange any personal contact details with children or young people, such as address, phone number, social media details, or email address
- Take images of naked, or in appropriate positions or situations, children or children in distress in any circumstances
- Ask children to pose for photographs in exchange for money, food or gifts
- Hit or punish a child (including using physical restraint to contain behavior)
- Engage in or allow sexually provocative games with children
- Act, use language or take photos/videos which could in any way shame, humiliate or degrade a child

Personal Use of internet and Social Networks

DO

- Remember that you are personally responsible for the content that you share. Always think twice about what you post/share and what implications this will have for children, communities and HAA.
- If you use social networks or blogs for personal use and you have indicated in any way your place of work you must add a disclaimer stating that your opinions on this site are your own. i.e. 'My tweets are my own and not of the organisation I am connected with.'
- Share information that has been posted on HAA and its partners on social media platforms and shared/retweeted by individuals.
- Inform the Designated Safeguarding Officer or any other relevant person if you observe or read uploaded content from another HAA representative which breaches the safeguarding policy

DO NOT

- Ask for or accept 'friend' requests on social media from children or any project beneficiary.
- Never post images or stories about beneficiaries via personal social media accounts. Consent is given to HAA or its partner as an organisation and not to any individual for personal use
- Never visit, upload, post or share any defamatory, obscene, abusive or harmful content.

Note about Overnight stays of children participating to HAA led activities

HAA actively promotes the participation of CYP and believes that, in general, children's participation is best developed by working with children within their own environments where they have their own social support structures rather than being confined to one-off events and consultations. Any decision to invite children to attend events outside of their usual place of residence **should be avoided as much as possible, should be highly exceptional** and must be based on the best interests of the child with serious consideration given to the impact (both positive and negative) on the child.

If HAA undertakes or participates to any initiative (whether in a funding or facilitating role) to bring children from their usual residence to another place, HAA as well as the individuals entrusted with the direct care of the children will be responsible for ensuring their welfare. **A specific child safeguarding risk assessment should take place every time children or other vulnerable persons are taken away from their usual place of residence.**

The child / children will be accompanied by a designated chaperone at all times. This individual must:

- Be an employee of the partner organization and have undergone the relevant recruitment checks (references, police checks etc). It is HAA's responsibility to check this with the partner organization prior to the visit
- Sign a Statement of Commitment to HAA's policy
- Receive a specific briefing - in relation to the exact circumstances of the project - from HAA's DSO or relevant Partnerships and Programme Manager
- Discuss any additional support they may need during the visit and the partner representative must ensure that this support is provided as far as reasonably possible
- Be provided with contact details for 24 hour emergency support within the organisation for the duration of the child / children's visit, as well as external emergency contact details (e.g. medical).

4. Reporting and Reaction Protocol

HAA works with and through partner organisations and, consequently, the specific reporting and reaction protocols will depend on the particular situation in which the concern arises. Effective response and reaction protocols will depend on the collaboration and shared understanding between HAA and their partner organizations. For this reason, it is important that local procedures are reviewed prior to visits so reporting protocols are clear and that action can be taken promptly.

The HAA DSO is Tamo Wagener, the HAA Executive Director.

The Nominated external Contact for Safeguarding is Lucie Eches.

Whenever the HAA DSO and Nominated External Contact for Safeguarding are changed, this policy is to be reviewed.

Irrespective of the location in which the concerns arise, HAA's representatives are obligated to report any concerns about alleged or suspected harm to the DSO or Director immediately, depending on the nature of the concern (see procedure below). In the event that the concerns relate to the Director (who is also the DSO), the report must be made directly to national authorities, to any relevant organisation with a child safeguarding mandate or to the Nominated External Contact for Safeguarding. Reporting of concerns should take place within 24 hours, allowing for time differences in different countries. ***Failure to report any observations / reports you have received, however uncertain, could result in disciplinary action.***

All allegations should be recorded using the safeguarding reporting form on the HAA website. This safeguarding reporting form should indicate that reports can be made in any language and that HAA has a responsibility to ensure translation of all reports in its working languages (English or French). In the absence of such a mail box it has to be sent to the DSO Director. These records be stored securely with access limited to the DSO and Director. General safeguarding queries can also be sent to this address and a record will be kept of issues raised and action taken.

4.1 Alleged harm caused, or likely to be caused to a child by a partner organisation's representative, observed by or reported to a HAA representative

If you observe or receive reports that a representative of a partner organization is behaving in a way that is or is likely to cause harm to a child, this must be reported immediately to the local partner organisation's Designated Safeguarding Officer. If this post does not exist, your concerns must be reported to the Director or the highest available representative of the organization.

In such instances, it is not appropriate for HAA to respond directly. Suspected harm caused by local staff or representatives must be investigated in the context of local laws, customs and knowledge of the individual. However, HAA retains a responsibility to promote effective handling of child protection issues within our partner organizations and as such concerns should also be reported to the DSO in HAA to inform our work with partners. Details of follow up actions and final outcomes must be monitored by the Programme Manager to ensure an appropriate conclusion.

If it is a child that reports concerns to you, you should:

- I. Reassure the child that they were right to report the behaviour. Keep calm and act normally.
- II. Explain that you must share the information to protect their safety and that of other children but that you will take into account how they wish the information to be shared
- III. Ask them if they would feel comfortable talking to the partner organisation's Designated Safeguarding Officer (if any) or a senior representative of the organization.
- IV. If the child does not feel comfortable with either individual, you should explore who they trust to share this information with and give this full consideration. If the report is made to anyone other than the DSO or Director, you must ensure that the report is also shared immediately with these individuals
- V. Accompany the child to meet with the relevant person within the partner organisation and ask them if they would like you to remain with them or not.
- VI. If they are unable to identify any individual of trust who the child is willing to talk to directly, you must follow these steps:
 - a. Do not promise secrecy to the child. Explain that you have to share the information they have provided to keep them and other children safe
 - b. Listen carefully and calmly to them. Ask open questions and be careful to not influence what they are saying by asking leading questions.
 - c. Clarify your understanding throughout so that you will be able to later report the incident correctly. Accuracy is paramount in this stage of the procedure so, if necessary, repeat back to the child what you think they have said, to verify accuracy. However, try not to repeat the same questions to the child, as this gives the child the impression that they did not give correct information the first time and that they are not fully believed.
 - d. Ask the child what would help them feel safe. Include this within any discussion with the partner organization and together, take proper steps to ensure the safety of the child.
 - e. Let the child know what you are going to do next and that you will let them know what happens.
 - f. Do not permit personal doubt to prevent you from reporting the allegation
- VII. Provide a written and verbal report to the partner organisation's Safeguarding Officer/Director and agree the immediate steps to be taken to ensure the safety and well-being of the child.
- VIII. Provide a written and verbal report to HAA's Designated Safeguarding Officer, using the Safeguarding Incident Report form (See Appendix 2)

- IX. The Programme and Partnership Manager must Monitor and follow up the case, reporting the outcome to HAA's DSO for monitoring and development purposes. It should also inform the support that is offered in developing and implementing good safeguarding practice.

4.2 Alleged harm caused, or likely to be caused to a child by a HAA representative

If a partner organisation alerts you to alleged harm caused or likely to be caused by a HAA representative, you should report this to HAA's Director who will provide guidance as to the action to be taken.

It is important to remember that the responsibility for safeguarding lies with the organization and should not be the decision of one individual.

In deciding how to respond, the HAA's Director will:

- I. First establish what steps have been taken to ensure the physical and psychological safety of the child and protect the child and others from further harm. This must be the paramount consideration.
- II. Discuss the concerns with the partner organization to agree next steps. Any actions must take into account the local procedures and protocols as well as the mechanisms they have available for ensuring the safety of the child. Legal obligations to inform the police and other agencies in-country must be considered depending on the nature of the concerns.
- III. The Director must contact the HAA representative immediately to discuss the allegations against them.
- IV. If the HAA representative is in a different country than the Director, the Director will normally instruct the individual to terminate their visit to protect themselves and any others involved. Arrangements will be made for their return to their country of residence. The HAA Director will conduct a debriefing immediately when the HAA's representative has returned (within 1 working day).
- V. If a criminal act has been alleged, the police may require the member of staff to remain in country while a full investigation is completed. In this instance, agreements must be made with the Director of the partner organization in regards to liaising and supporting the staff member whilst in country.
- VI. The Nominated External Contact for Safeguarding within HAA must be made aware of the allegations and the actions being taken to safeguard the welfare of the child and conduct appropriate investigations
- VII. All the relevant information and actions must be recorded using HAA's Safeguarding Incident Report form.
- VIII. If the incident is considered to be a serious breach of safeguarding protocols, the representative will be suspended pending an investigation. It will be clearly explained that this is not a presumption of guilt but a measure to protect the individual and all others involved.
- IX. The Director from HAA will collaborate with the partner organization to ensure that a full investigation is conducted. The organization who assumes lead responsibility for the investigation will depend on the nature of the concerns, local procedures and legal obligations. If the incident is particularly serious, the HAA Director should consider visiting the local partner organisation.
- X. It is imperative that investigations are conducted promptly. Where HAA is the lead organization, the Director will submit an investigation report to the Nominated External Contact within 1 working week. If it is not possible to conclude the investigation within 1 week due to the complexities of the allegation or the distance, the process should not exceed 10 working days

- XI. Where another organization leads the investigation, HAA's Director will keep the Nominated External Contact updated in regards to progress and will provide them with a copy of the investigation report that has been produced along with recommendations for actions from HAA.
- XII. The HAA Director will act as the point of contact for the suspended individual. Contact with other staff or those associated with the organization will not be permitted and they will not be allowed access to organizational data whilst suspended.
- XIII. The Nominated External Contact will decide any further action to be taken by HAA (Refer to Ramifications of Misconduct below)

4.3 Support to staff

Arrangements will be made to provide counselling support to those HAA representatives who witnessed alleged abuse, are handling the investigation or are the subject of the allegations. All HAA staff who have passed their probationary period are automatically signed up to the HAA Employee Assistance Programme and are able to make contact on a confidential basis.

4.4 Anonymous allegations

Anonymous allegations are very difficult to act upon as there may be little or no corroborating evidence. HAA does not encourage anonymous reporting. If repeated anonymous allegations are received from more than one source, or where the concerns raised are of serious nature, HAA has a legal and moral obligation to act and the concern will be investigated.

4.5 Ramifications of Misconduct

If an allegation of harm to a child or of a serious violation of safeguarding procedures is received in relation to an employee or representative of HAA, the individual will be suspended on full pay (staff member) or suspended from all activity / association with HAA (trustee, intern, volunteer) pending the outcome of the investigation by the Director. The decision to suspend must be taken by the Director or Nominated External Contact for Safeguarding and is not open to challenge.

Suspension is not a presumption of guilt and as such the matter should remain confidential whilst an investigation is conducted. If a staff member is suspended, personnel within HAA will simply be informed that the member of staff is unable to attend work without giving any further details. If the investigation results in dismissal, staff will be informed of that a breach of safeguarding protocols occurred but no further details will be given to protect the confidentiality of the child or children concerned.

The investigation completed by the Director will be submitted to the Nominated External Contact for Safeguarding who will come to a decision about action to be taken. Decisions from any investigation will be confirmed in writing to the individual concerned.

If it comes to light that acts were committed - whether within or outside the context of HAA's work - which grossly infringes children's rights, or seriously breaches Safeguarding protocols HAA will take immediate disciplinary action which may include:

- Staff - disciplinary action
- Trustees - termination of Board membership (currently HAA has no board of Trustees)
- Volunteers and interns - ending the relationship with HAA
- Consultants/ Contractors - termination of contract
- Partners - withdrawal of funding/support and ending of the relationship

Acts of a criminal nature will be referred to the police and/or Children's Services and may result in a criminal investigation and conviction. Where this occurs the police will also notify the relevant national authorities and the individual may be barred from future work with children.

When investigating concerns or complaints, the process should always be fair and, where complaints are upheld, the individual will have the right to appeal this decision. In such instances, the individual must write to the Chair of Trustees within 1 week of receiving written confirmation of the complaint outcome, explaining their grounds for appeal. The Chair of Trustees will consider the appeal which will include re-examining the evidence and reports and may include talking directly to staff and others involved. The Chair of Trustees will come to a final decision which will be confirmed in writing. The decision from the appeals process is final.

The media will be dealt with by the Director, guided in their response by the Board of Trustees.

SECTION 5) Monitoring of Safeguarding Policy & Practice

The monitoring of the CSP will be coordinated by the DSO, guided by the monitoring framework below and progress will be reviewed in the 3 monthly meetings of the CS Working Group. Learning from monitoring of CS practice will be shared internally following these meetings. In the spirit of openness and transparency, key lessons from the implementation and monitoring of HAA's CSP and procedures will be shared with others working on implementing CS good practice.

Elements of CPP / overall impact	Objectives	Indicator	Who should take the responsibility for measuring this	How should we monitor/collect the relevant information?
Overall				
	Written CS policy publicised, promoted and widely distributed	Policy is visible in HAA offices and on website Full policy is available in English and French	DSO	Observation
	Safeguarding Policy reviewed every three years at a minimum	Review process written up Evidence of consultation amongst staff and others	DSO	Meeting with staff, feedback in staff appraisals
Recruitment	Reference checks have been conducted satisfactorily before post has been offered and are maintained/up to date.	Completed documents are on file	DSO	Review of personnel files
	Job adverts and ToRs for provision of services include a statement informing applicants of CSP	Job advert	DSO	Review job Ad
	Relevant JDs or ToR for provision of services contain specific reference to the responsibilities of the post holder for implementing and safeguarding policy and procedures	JD	DSO	Review JDs
	Every representative has signed a commitment to the CSP in their contract	Contract	DSO	Review Contracts
Education and Training				
	Staff, interns, volunteers, consultants and trustees receive an induction covering safeguarding	Representatives can explain how they would respond if a child disclosed abuse to them and the reporting procedure.	DSO	Feedback from staff, staff appraisals

	issues within 1 month of joining HAA.	Staff understand their responsibilities in terms of behaviour towards children and communication about them		
	Staff are acting in accordance with behaviour and communication guidelines	Staff are clear on CSP and feel confident in its implementation Observation & feedback regarding staff	DSO	Staff Evaluations
	Programme budgets include costs for training and mentoring on safeguarding	Project budgets reflect costs	DSO	Review Budgets
Management Structure	There is a designated DSO in the organisation responsible for implementing the policy	All representatives and children know who is the DSO	DSO	Regular staff survey
	Child Safeguarding Working Group is coordinating Policy implementation.	There is no Child Safeguarding Working Group at the moment.		
	Staff training and awareness is incorporated into project and organisational evaluation and review and staff appraisals	Evaluation reports, staff appraisal records	DSO	Evaluation TOR, Staff appraisal document
	Safeguarding considered within project meetings where issues arise		DSO	Meeting minutes
	Safeguarding issues are collated and reviewed annually by Director & core team		DSO	Annual Report, Trustee Meeting Minutes
Behaviour protocols	Representatives abide by HAA's Behaviour code of conduct which is displayed openly	Representatives are clear about appropriate behaviour and have attended training. BCC on office wall.	DSO	Feedback in staff appraisals, feedback from partners
	Staff and children understand the consequences of breaching the code	Staff are able to explain about the organisation's disciplinary procedures.	DSO	Feedback from staff
Communication	Children's 'informed consent' is obtained when being asked for information about them or their photos are taken	Informed consent forms. Children are able to say "No"	All staff, overseen by DSO	Forms collected
	The organisation's publications, written materials, website does not label, degrade or victimise children and does not enable them to be easily identified	Publications, printed material, website follow communications guidelines	DSO	Review of materials
	Signed Statement of Commitment for Journalists and other project visitors visiting a HAA project are obtained	Statements of Commitment	DSO	Forms collected
Reporting and Reaction	Reporting and reaction processes are available to all representatives and include reporting and storing information	These processes are clearly documented and understood by all staff, trustees, interns, volunteers, consultants etc.	DSO	Reporting flow chart and format displayed in the office and on website Reporting flow charts adapted in

				user friendly versions for every project (example in annex X)
	All reporting and investigation procedures are clearly documented	Relevant documentation	DSO	Secured digital file managed by DSO
Ramifications of misconduct	The organisation has clear disciplinary guidelines	Disciplinary guidelines	DSO	Review Disciplinary guidelines
	Investigations are prompt and follow standardised procedures	Investigation notes are recorded	DSO	Review investigation notes
	DSO documents disciplinary action	HR documentation	DSO	Review of HR documentation

6 HAA Communications Guidelines

This document sets out the principles HAA employs when designing educational and advocacy materials that include images and when communicating about our work and the work of our partners. It contains general principles for ensuring girls and boys are kept safe at all times, as well as specific guidelines which must be followed by HAA representatives as well as external photographers, film crews and journalists visiting programmes through HAA. Different countries may have specific laws, protocols or cultural norms which should be understood and adhered to as appropriate.

6.1 General Guidelines

Case studies and photos are very important tool for raising awareness and help us convey the impact of our work. It must be recognised, however, that harm may be caused to children through the use of words, images and stories. The rights and dignity of the child must be respected at all times and the best interest of the child maintained as the paramount concern.

In communications about children, the following principles apply:

Dignity: The child's dignity must be preserved at all times. Language must not degrade, victimise or shame the child. In images, children should always be dressed appropriately and should never be depicted in any poses that could be interpreted as sexually provocative.

Accuracy: The portrayal of children must not be manipulated or sensationalised in any way. Images and stories should provide a balanced depiction of the child's life and circumstances, balancing negatives with empowering images or showing the progress that children are making.

Communications should avoid making generalisations which do not accurately reflect the nature of the situation and pictures should not be taken and used out of context. Wherever possible, individuals including children, should be able to give their own accounts allowing them to take control of the information and details that are highlighted.

Informed Consent: Permission will always be sought from the child/children before taking photographs, using their stories or conducting interviews. More detailed information about gaining consent is detailed below.

Privacy: Any information that could be used to identify a child or put them at risk will not be used. HAA will ensure that:

- Children’s real names will never be used and limited information provided about location to protect children’s privacy.. External materials must state “*Names of the children have been changed and photographs/video images are not those of the children written about. All children have given permission for HAA to use and share their images and stories*”
- Where anonymity is needed to protect the rights and dignity of the child (for example, in demonstrating work with commercially sexually exploited children), faces and all identifying information will be omitted.
- We will not use the image of the child which corresponds to the case study , unless the story is already in the public domain with the child’s consent (e.g. a child nominated for an award)
- Information about a child/children’s life and photographs of children (including information stored on PC, memory cards, external drives, cloud based drives) will be kept in secure files. Access to these should be limited to those that need to use them during the course of their work.
- Images and audio guidelines are followed (see section 6.4)

Equality and Diversity: Whenever possible we will seek to gather images that show an equal amount of boys and girls, within a spread of ages, abilities and backgrounds. When taking images of children, we will be aware of the stereotypes and issues affecting them and will ensure we do not reinforce or contribute to stereotypes associated with gender, age, ability or background.

Best Interest of the Child: In all decisions about the use of images and other media, the best interests of the child will be the paramount consideration.

6.2 Use of personal social networks

HAA understands that increasingly individuals use social networks in their personal lives and that individuals may feel a desire to share their experiences on social media, especially when visiting a project. Social networks refers to any personal online platform including but not restricted to; Facebook, Twitter, Instagram, personal blogs or vlogs, YouTube, Flickr etc.

Sharing photos or stories online can have an impact on how HAA is viewed externally and for the children in the images and safeguards need to be put in place, to ensure that any social networking activity reflects our commitment to Child Safeguarding. A specific section on the use of personal social networks is included in the HAA Code.

6.3 Case studies and interviews

Case studies play an important role in illustrating the challenges faced by children and the impact of HAA and its partner’s work. Equally, many beneficiaries are keen to share stories about the positive changes that have taken place in their lives and it is important to share these successes whilst also protecting the best interests of the child.

Whenever HAA wishes to use case studies, the following safeguards will be in place:

General

Written consent will be obtained from the child and their parent/caregiver for the use of their stories and/or any images. If it is not possible to gain consent from the parent/caregiver (for separated or orphaned children), a representative from the partner organisation may counter-sign the consent form. See section 6.5 on informed consent.

Where the case study details sensitive information about abuse, violence or trauma - whether in the past or in the present - the content of the case study will be discussed with the DSO to ensure all necessary safeguards are in place

Narrative Information

Names of children and their families will always be changed. The only exception to the above would be if the story is already in the public domain with the child's consent (e.g. a child nominated for an award)

Only limited information about the location will be provided in the case study e.g. the region or city but without mentioning the specific village or district

Interviewing Children

Interviewing children requires skills and certain basic principles should be followed to ensure their dignity and their rights of the individual are respected.

Before Interview:

- **Informed Consent:** In relation to interviews, informed consent extends beyond how the information may be used. It includes explaining what subjects are likely to be covered in the interview and clarifying the child's right to withdraw their consent at any point.

It is preferable that initial consent is gained before the interview and is requested by a member of staff who is known to the child without the interviewer being present. This will enable the child to feel more confident to say no. The interviewer should review the child's understanding of consent at the start of the interview and a consent form must be completed.

- **Provision of support:** There should be someone else present during the interview who the child is familiar with. Wherever possible, the child should be given a choice regarding who supports them during the interview.
- **Respecting the right to say NO:** Be clear before you start the interview that the child only has to talk if they are comfortable doing so, and they can stop and withdraw their consent at any point.
- **Sensitivity:** If you are likely to talk about potentially unsettling or emotional issues, the child must be aware of and consent given for these subjects being raised. The interviewer needs to pay close attention to the child's body language and responses and offer to stop the interview if the child appears to be uncomfortable or upset at any point.
- **Gender:** Consider the different needs of boys and girls and whether they would be more comfortable to talk to a man or a woman. Gender must also be considered when deciding what topics may be discussed.
- **Respecting the right to information:** If you are going to take notes, or record the interview in another way, you must explain this to the child and verbally ask their permission to do so.

During the interview:

- **Respect Agreements:** It is not appropriate to delve into new areas that the child has not agreed to talk about. This is a breach of trust and may be harmful to the child.
- **Body language:** Try and ensure that your body language helps to put the child at ease - position yourself on the same level to address power imbalances; make eye contact but don't stare; smile.

Also be aware of the child's body language and acknowledge that they may be finding things a little difficult or strange - this shows that you are listening and are sensitive to their needs.

- **Style of questioning:** Ask non-leading open ended questions, do not make assumptions or fill in words, or finish sentences. Clarify your understanding if you are not clear and don't make assumptions.
- **Non Judgemental:** Do not make value judgements regarding children's responses or impose your values and understanding of the world on children. Be aware that judgements can be conveyed non-verbally and attempt to manage your reactions carefully.

6.4 Images

-It is important that any images accompanying a case study, an interview, advocacy or educational materials accurately reflect the context and do not put children at risk by identifying their location, name or any landmarks or other detail that may be used to identify their location.

- The child's image may accompany the case story where consent is obtained and the story illustrates positive success and achievements in the child's life.

- Where the case study or interview details sensitive information about abuse, violence or trauma - whether in the past or in the present - no images of the concerned child or family will be used.

Technicalities for anonymous images

- Framing of photos and video images is specifically taken so that the concerned persons cannot be recognized because of their face or of physical characteristics

- Blurring effects are to be used whenever needed

- Audio effects should be used to transform the voice whenever needed

- Specific sets of clothe can be provided to children for shooting of interviews

- jewelleries and specific accessories (hair clips for instance) should be taken out before the interview
Those considerations are not exhaustive and any other considerations allowing to ensure anonymity of the children and communities should be discussed with the DSO before being used.



Selection of images

Images taken during the course of a project are stored on a HAA mobile external hard drive that is password locked.

Within 7 days from returning from any trips or events, a minimum two HAA representatives must review all images to check that they comply with the communications guidelines and are of a good standard for use in publications. Any inappropriate images will be deleted. Where images have been deleted because they show inappropriate images of children, the DSO will be informed so that appropriate action may be taken to address this.

The best images from those provided will be selected and shared with the partner organization.

Only those photos and videos with written consent will be published.

Storing of images

HAA holds a close inventory of the images that are taken through its action.

All images are stored in specific locations online or offline that are discussed and approved prior to any project.

Images can only be stored on hard drives that belong to HAA, are labelled as HAA and on professional Cloud folders administered by HAA. DropBox is the cloud system used by HAA.

Every year in January all the HAA hard drives are checked and all images that are not being use for a HAA project still active, or that are not 100% anonymous and for which no written consent form is available, are deleted. HAA has a list of the content of each hard drive.

The HAA photo database, on external hard drives and on the Dropbox drive, are secured with dedicated logins that are password protected. The DSO has a login account and password of all folders - this ensures our photos are securely held and will not fall in the hands of people who would want to misuse the photos of children we have. Please do not share your login or password details with anybody outside our organisation!

Disclosure of these photographs can be made only with relevant parties.

Sharing of Images

Only those photos and videos with written consent will be shared. In the exceptional case of an exceptional situation where HAA and its partners wish to publish images for which no written consent was recorded, the decision to publish those images should be recorded in written minutes and approved by the DSO.

Whenever possible a weblink showing the images that have been publicized will be shared with the children included in the images. This provides an additional opportunity to confirm how the photos will be used and thank the child for allowing HAA to use their images.

HAA is happy for partner organizations to use images that have consent for their fundraising and communications purposes.

6.5 Informed Consent

Verbal or written consent before taking photos / videos or collecting personal information

Informed consent must always be sought before taking any photos/videos or requesting personal information about children's lives that may then be used in materials produced by HAA. Informed consent means that children, and caregivers whenever possible, are told how HAA may use the

information or images and that they are under no obligation to agree to its use. They should also be re-assured that the names, locations and other identifying information will be changed.

Whenever children are in a situation allowing them to provide a written consent, it must always be supported by signed written consent (Appendix 3).

Ideally, local staff should lead on asking for consent, a few days before images or information are collected, as children and families may feel more comfortable to refuse consent when asked by someone that they already know and trust. This avoids putting the child “on the spot” when an image/information is taken and when the member of HAA is already present.

Written consent before the use of photos / videos and personal information should be obtained from children and parents / caregivers

In all cases, written consent from children and their caregivers will be required before images or stories can be used. Normally this will be obtained at a later date once images have been selected, videos edited, stories written, and the concerned child, and his / her caregiver, have seen the images that would be shared or publicized.

In specific situations where children aged 15 and over do not wish for their caregivers to provide informed consent or where the caregivers cannot be accessed, the informed consent form can be signed by the project officer from the local partner responsible for the project. This has to be clearly notified on the consent form.

This provides time for the child to reflect and gives them an additional opportunity to withdraw their consent should they wish to do so. However, if obtaining consent at a later date is likely to be difficult (e.g. due to the distant location or limited contact with the child/caregiver), the Programme Manager should organise for written consent to be obtained at the time of taking the images.

Written Consent form

The written consent form (annex 3) has to be translated in the local language and great attention has to be given to the user friendliness of the translation, as it happens frequently that children will not be literate and the form will have to be read aloud to them. It must explicitly state that the photos/information may be used by HAA as the child should understand that the photos may be used by an organisation they do not know and who works at an international level.

Once photos have been selected, or videos have been edited, the image will be sent to the partner organisation who will be asked share with the concerned children to scan and send a copy of the written consent form for HAA’s records. The image may not be used until the written consent has been received.

Duration of Consent

Any photos with written consent will be saved in a secure folder for use by HAA staff for marketing, publications, social media, reports and other literature. Photos will be kept in this folder for a period of 4 years.

6.6 Visits by external photographers, film crews, and other media

Additional care must be taken when organising visits for external photographers, filming crews, journalists or visitors. In addition to adhering to the above guidelines, the following also applies:

- Journalists, photographers/film crews must be fully briefed before their departure, be given HAA's Safeguarding policy and sign their commitment to adhere to the policy
- Photographers/film crews will be accompanied by a local staff member at all times - the partner will be informed in writing that this is HAA's policy and the written agreement to follow this policy will be secured from the partner
- Children, parents and guardians must be informed about how the film, photograph or story will be used and consent for this obtained. It should be made clear that this is distinct to the consent they have given for use of materials by the local NGO or by HAA
- Copies of images, film and story should be sent to the partner organization to be passed on to the children and community.
- In order to protect the confidentiality and privacy of our beneficiaries, HAA must be notified as to how the photographer intends to use the images or stories. HAA reserves the right to refuse use if it is felt that, in doing so, we are in breach of our or our partner's child safeguarding policy.
- If an image is to be used by another organisation, approval must be sought from HAA prior to use and where possible the image must be credited to HAA/ Photographer's Name with an appropriate caption.

APPENDIX 1: Recognising Signs of Abuse

Recognising indications of potential abuse is complex and there is no simple checklist which allows easy recognition. There are potential warning signs that you can be alert to but they should be assessed with care. It should not be automatically assumed that abuse is occurring. Equally, however, it is important not to dismiss your concerns or ignore any signs of abuse - these should be discussed with the DSO as soon as possible to help decide the most appropriate course of action.

<p>Possible signs of physical abuse:</p> <ul style="list-style-type: none"> • Bruises, burns, sprains, dislocations, bites, cuts • Improbable excuses given to explain injuries • Refusal to discuss injuries • Withdrawal from physical contact • Arms and legs kept covered in hot weather • Unwillingness to participate in physical activities that may involve undressing, e.g. sports • Fear of returning home or of parents being contacted • Showing wariness or distrust of adults • Self-destructive tendencies • Being aggressive towards others • Being very passive and compliant • Chronic running away 	<p>Possible signs of neglect:</p> <ul style="list-style-type: none"> • Frequent hunger • Taking scraps of food from bins or plates, or stealing food • Poor personal hygiene • Constant tiredness • Inappropriate clothing, e.g. summer clothes in winter • Frequent lateness or non-attendance at school • Untreated medical problems • Low self-esteem • Poor social relationships • Compulsive stealing • Drug or alcohol abuse
<p>Possible signs of emotional abuse:</p> <ul style="list-style-type: none"> • Physical, cognitive or emotional development is delayed • Highly anxious • Showing delayed speech or sudden speech disorder • Fear of new situations • Low self-esteem • Inappropriate emotional responses to situations • Extreme passivity or aggression • Drug or alcohol abuse • Chronic running away • Compulsive stealing 	<p>Possible signs of sexual abuse:</p> <ul style="list-style-type: none"> • Age inappropriate sexualised behaviour or highly sexualised language • Bed wetting or soiling • Anal or genital soreness • Sleep problems • Fear of being with adults • Promiscuity • Extreme risk taking in adolescents

Possible signs of concern regarding adult behaviour:

- A person in whose presence the behaviour of a child significantly changes such as becoming withdrawn, fearful, distressed or agitated
- Asking a child to lie or keep secrets
- Breaches of the organisation's Code of Conduct / behavioural protocols
- Initiating private contact with a child, in person or by e-mail or telephone

APPENDIX 2: Safeguarding Report Form

If you have knowledge that a child might be at risk of harm, please complete this form to the best of your knowledge. Please note that child protection concerns must be reported directly to the DSO immediately (preferably within the same working day) - depending on the urgency, you may wish to complete this form *before* contacting the DSO *or* you may wish to complete the report *afterwards*. For confidentiality reasons, the report should be written and signed solely by you. It should only be sent *only* to the DSO. It will be held in a safe and secure place and treated in the strictest confidence.

1. About You

Your name: _____

Your job title: _____

Workplace: _____

Nature of your contact with the child: _____

Contact details: Tel: _____

E-mail: _____

2. About the Child

Child's name: _____

Child's gender: _____

Child's age: _____

Child's address: _____

Child's guardians: _____

3. About your Concern

Was the abuse:

Observed by you Suspected Disclosed by someone else

If the concern was shared by someone else, please state who and their relationship to the child:

Date of the alleged incident: _____

Time of the alleged incident: _____

Location of the alleged incident: _____

Name of alleged perpetrator: _____

Nature of the allegation: _____

Your personal observations (*visible injuries, child's emotional state, etc.*) [N.B. Make a clear distinction between what is fact and what is opinion or hearsay]

Exactly what the child or other source said to you [if relevant] and how you responded to him or her: [Do not lead the child. Record actual details]

Any other information not previously covered:

Were there any other children/people involved in the alleged incident? _____

Are any other children at risk of harm? _____

Action Taken by You:

Signed: _____

Date: _____

APPENDIX 3: Consent Forms for use of information and photos

Texte à lire à voix haute et en langue appropriée aux personnes concernées

Statement of consent for use of information and photos

I have received a clear explanation of the work of HAA and how it may use information and photographs of children and families around the world to raise awareness and promote its work to promote and protect the Rights of the Child.

I, (name of child) and (name of guardian):

agree that **my child's story / information about my child's life** can be used by HAA in its reports, website and other materials that it uses to raise awareness of the issues faced by children around the world

agree that **my child's photograph(s) / video(s)** can be used by HAA in its reports, website and other materials that it uses to raise awareness of the issues faced by children around the world.

understand that HAA will ask me for my (verbal) consent again before taking any photos/video(s) or information and I **may refuse or withdraw consent** at that time

understand that HAA will change **my child's name and any other details** to protect their privacy

understand that I will **not receive any benefit** for my participation or my child's participation to this project.

Signed (parent / legal guardian)	_____
Print Name	_____
Date	_____
Location	_____

Signed (child)	_____
Print Name	_____
Date	_____
Location	_____

Signed (on behalf of HAA)	_____
Print Name	_____
Date	_____
Location	_____

ONE COPY TO BE KEPT BY GUARDIAN / PARENT/ CHILD
ONE COPY TO BE KEPT BY PARTNER ORGANIZATION & SHARED WITH HAA UPON REQUEST

HAA Representative's Statement of Commitment to Safeguarding

"I, _____ [name] _____, have read and understood the standards and guidelines outlined in this Child Safeguarding Policy. I agree with the principles contained therein and agree to implement and promote the procedures and practices contained within this document while working or associated with HAA.

(Print name)

(Job title / role)

(Signature)

(Date)

APPENDIX 5: Guiding Questions for determining the Best Interests of Children

- **What immediate actions should be taken to prevent further harm?**
 - If the child is left in the same environment, will they be exposed to risk of further harm? (e.g. further abuse or harm, persecution by staff or children who feel loyal to the alleged abuser, condemned by parents who think it has brought shame / will lead to loss of benefits, potential for child to self harm without adequate supervision)
 - Can additional safeguards be put in place to maintain the child in the current environment whilst protecting their safety and well being? (e.g. increased supervision, removal of abuser, creation of emergency action plans. Police protection)
 - How can the child be protected from contact with the alleged abuser
 - What harm may be caused to the child through removing them from their current environment? (e.g. emotional distress, damage to relationships, stigma within the family or community, safety/potential risks in alternative environments being considered)
 - What capacity is there to provide alternative accommodation or additional services (e.g. temporary shelter to a street child, increased supervision within a centre, more frequent visits to child living in the community)?

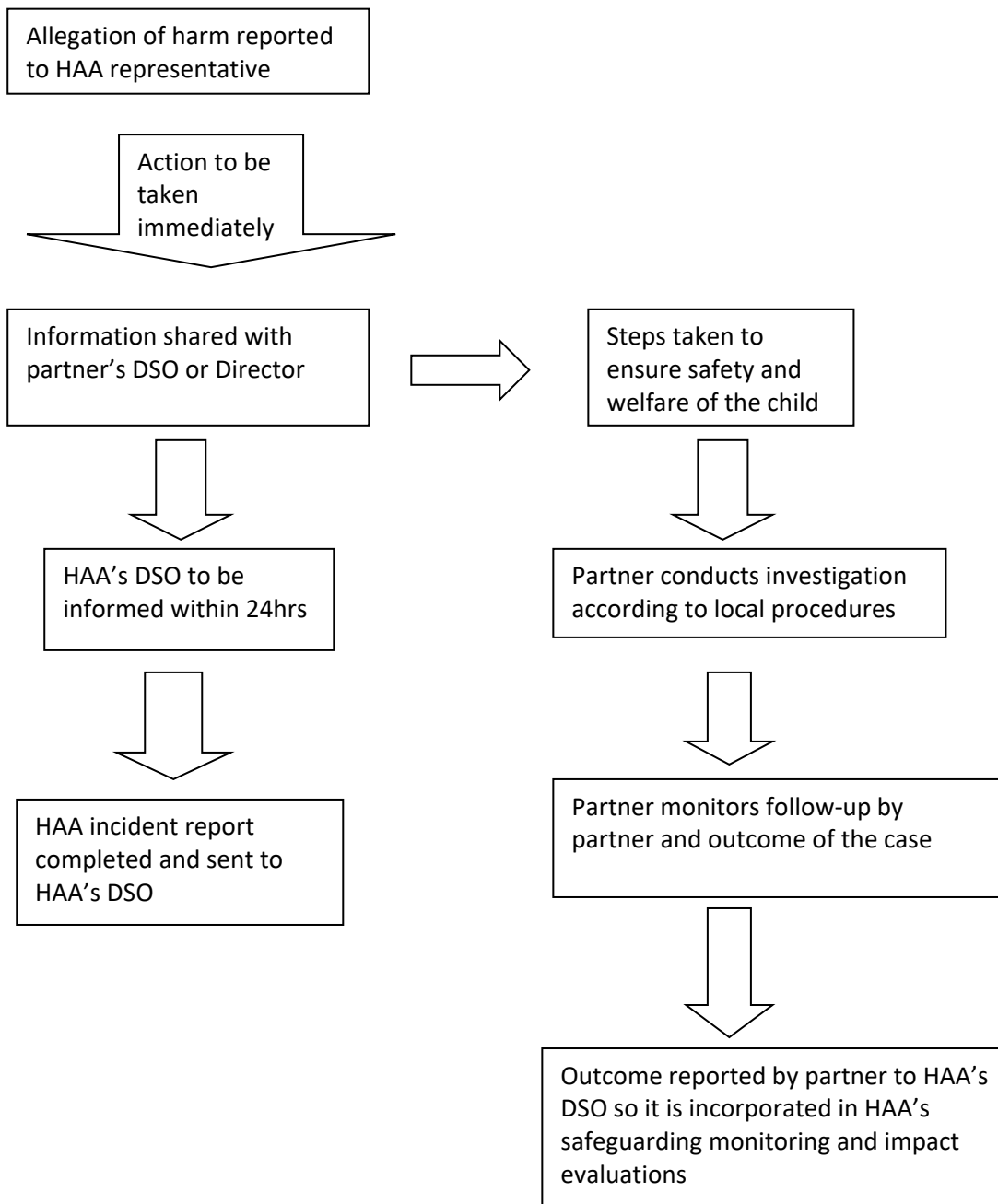
- **To what extent should actions be determined by the wishes of the child, based on the concept of evolving capacities?**
 - Does the child currently have the ability to fully understand what has happened and the risks to their safety that may exist?
 - Can the child understand alternatives choices of action, express a preference, articulate concerns and ask relevant questions?
 - Does the child currently have the ability to assess the potential for benefit, risk and harm of different courses of action, in the short and long term?
 - Is the child able to think through the issues for themselves and make choices without coercion or manipulation from others?

- **Who else should be notified?**
 - If the incident is reported to the police, will the child be exposed to risk of further harm? (e.g. stigmatised, exploited because heightened vulnerability, undignified treatment by police who lack knowledge and attitude to respond appropriately to sexual and gender - based violence cases, loss of control over child's wellbeing once police involved etc)
 - What are the legal requirements regarding reporting and reaction to this form of abuse? If the organization does not report to the police, does this put at risk their other operations which aim to protect children?
 - Is the child under the care of a parent or guardian in the community? Can this person offer protection and support to the child or would their reaction present greater risk to the child? How can these risks be minimised?
 - Are there members of the extended family who can provide support/protection?
 - What referrals should be made to additional support services and to ensure that the child receives appropriate medical treatment, including counselling?

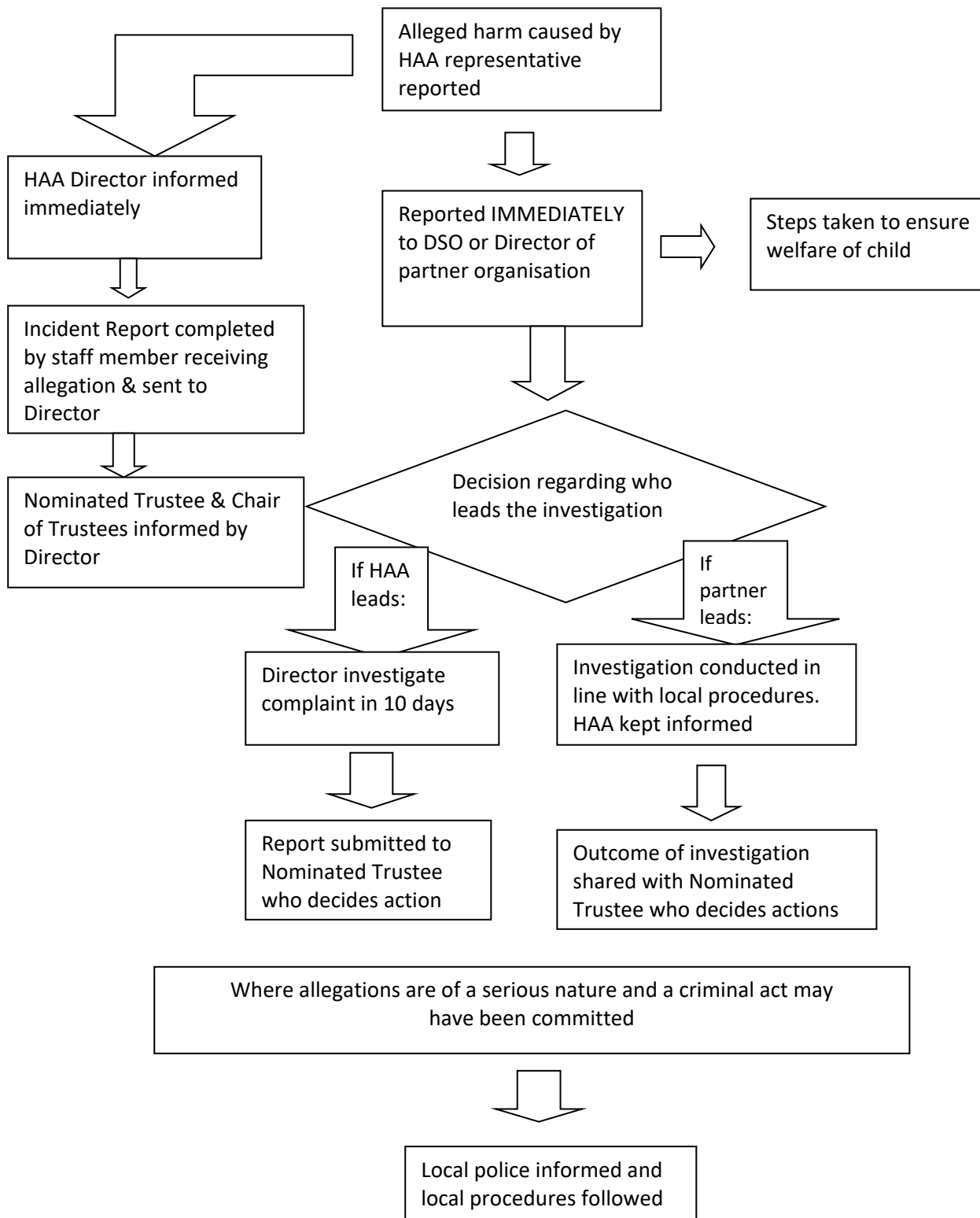
- **What actions should be taken to prevent future harm?**
 - What can be done to maintain normal healthy routines for the child? (e.g. continue to be among peers and family, continue to access education, continue to play)
 - What steps need to be taken to keep the information confidential and maintain child's anonymity as far as possible?
 - What support does the child, their parents, family or other concerned adults (e.g. teachers) need in order to ensure the child's safety and well-being?
 - Do other representatives of the organisation need training / re-training on safeguarding and appropriate conduct?
 - Do children need sensitising on how to protect themselves and how to report concerns?

APPENDIX 6: Reporting Flowchart

4.1 – Alleged harm caused, or likely to be caused to a child by a partner organisation’s representative, observed by or reported to a HAA representative



4.2 – Alleged harm caused, or likely to be caused to a child by a HAA representative



APPENDIX 7: KEY CONTACT INFORMATION

HAA

DESIGNATED SAFEGUARDING OFFICER

Tamo Wagener

Mobile: +33630068538

E-mail: tamo@haagence.com

E-mail for Confidential Safeguarding Matters: NOT AVAILABLE. If needed please contact nominated external contact or national authorities of concerned country (see list of national hotlines on ChildSafe movement website)

DIRECTOR

Tamo Wagener

Mobile: +33630068538

E-mail: tamo@haagence.com

NOMINATED EXTERNAL CONTACT FOR SAFEGUARDING AND ETHICAL QUESTIONS

Lucie Eches

Whatsapp: +33 6 87 51 56 96

E-mail: lucie.eches@gmail.com

EXTERNAL AGENCIES

French National CHILDLINE

French National confidential counselling and advice for children

Tel: 119

Website: www.allo119.gouv.fr

KEEPING CHILDREN SAFE COALITION

HAA may contact KCS for advice over aspects of our procedures

Tel: 0207 250 8325

Nominated Trustee: Aneeta Williams

CHILDSAFE MOVEMENT HOTLINE

HAA is a member of the ChildSafe Movement and may contact the ChildSafe movement for advice or for contacts of national hotlines

childsafefriends@friends-international.org

www.thinkchildsafemovement.org