

What is safe programming and what steps need to be taken?

Questions and Answers

The questions below were posed by participants during the webinar on 24th November 2021. 14 questions were answered by the panellists. A summary of their responses are described here.

1. How can safeguarding issues be integrated in Market Based Program?

Safe programming is integrating safeguards into your market-based programme design and delivery. What this means to your market based program include, 1) assess the context in which the Market Based Program is being delivered – so you understand patterns of harm and abuse that your programme might exacerbate, 2) you need to conduct a robust risk assessment to identify safeguarding risks that may arise in the program and put in place mitigation strategies (identifying the most effective and least intrusive intervention), 3) You also need to think through the resources you will need (e.g. funds, staff, training etc) that will enable you act on your mitigation strategies, 4) ensure that there are ways in which program participants can tell you when the program, or staff working on the program, are causing harm, 5) monitor and evaluate how safely the Market Based Program is being delivered.

2. During war, women and girls are sexually harassed, how can they protect themselves and voice out their concerns?

In armed conflict, as in other situations, violence affects women, men, girls, and boys differently. During conflict/emergency settings, there is exacerbation of harm in an area and unfortunately often an increase in sexual violations which can become a common occurrence and can include random acts of sexual assault by both enemy and “friendly” forces, or mass rape as a deliberate strategy of genocide. Our safeguarding responsibilities are to prevent our staff and the work we do to sexually abuse or exploit women and girls, and others in the communities. To prevent and respond to Sexual Exploitation Abuse, and Harassment (SEAH) by our own staff, the following can be done:

- Humanitarian organizations should promote Zero Tolerance to SEAH and ensure staff, volunteers and other representatives sign the Code of Conduct and are constantly sensitized on how to prevent SEAH
- Aid workers should work with communities to set up ways of speaking out that work for different groups in the community. This requires safe spaces to have these discussions and safe means of raising concerns or making reports which assure safety of victims and promote confidentiality

- Enshrine a Survivor centred approach in responding to reported cases, whether these are safeguarding issues or GBV cases within families and communities: victims of sexual violence must be treated with humanity, fully respecting their privacy, and maintaining the strictest confidentiality when responding to their needs.
- Understand that sexual violence is a medical emergency, potentially resulting in severe physical and psychological health consequences for victims. It is crucial that they have unimpeded access to safe, quality, and timely medical care within 72 hours where possible.

3. Which one of these is safe programming; a. programs designed to protect vulnerable groups of people; b. the active efforts an organisation makes to ensure that it delivers its programs safely without causing unnecessary harm or abuse

There is a difference between protection programming and safe programming. Protection programs are programs designed to address harm within families and communities that requires community, local and national 'protection' systems to be in place and fully effective. Protection programs will often include supporting community-based protection mechanisms, capacity building national protection systems or e.g., GBV services. Safe programming on the other hand is about systematically embedding safeguards into the design and delivery of all programs whether these be protection programs or education, health etc. to ensure the organization is not causing harm to the program participants or exacerbating existing patterns of harm and abuse in the communities where it works. Please see the [presentation for more information](#).

4. Could you also share an example when a community member raised a safeguarding concern related to a programme design and implementation and how did you respond to this concern? Thank you :)

There is a food in-kind project in the north eastern part of Nigeria, my organization is implementing. We had a total caseload of 54,179 beneficiaries. However, our donors reduce the caseload to 21,202 beneficiaries and the food ration of each beneficiary from 100% to 70%. Pre distribution sensitization was conducted for all communities and letters were given to traditional and government stakeholders. Some of the beneficiaries affected by the caseload reduction felt it is the fault of their community leaders that they were removed from the intervention and reported the leaders to my organization. To address this a re-sensitization was conducted onsite, through community outreaches and feedback meetings and key stakeholders in the community to discuss with the affected population to ensure the affected community members understand this is coming from the donor and we are sorry for the inconvenience the reduction of caseload and food ration has caused them. There are other examples where organisations are supporting girls to speak out and increase their agency and position within the family and community. This can sometimes result in backlash for the girl from family or community members. To address this organisation, need to work with families and communities on why increasing girls agency is important and how the project will run to engage family and community support.

5. I would like to know the aspect of the capacity building that community members are involved. Thank you.

We train and sensitize community members to the concept of GBV generally, then we have interactive sessions around acceptable and non-acceptable behaviours from us (our staff and associates; volunteers or consultants) to them (beneficiaries and communities) and vice versa, which is where we make the link between GBV and our responsibilities for safeguarding and Do No Harm. Once these are established, we also chat on how to report cases of safeguarding concerns using established channels.

We have Bimonthly community outreach with the various groups in the community (women, girls, men and boys) on Prevention of Sexual Exploitation Abuse (PSEA)/GBV Child Protection, Gender, Disability inclusion etc. There are also monthly community consultations and feedback meetings, community volunteers training on safeguarding against SEA, fraud and bribery

6. Can you provide clarification on Safe programming beyond prevention, I need guidance on the response and rehabilitation?

To ensure a successful rehabilitation, you would need to conduct a mapping of vetted services within the community where you work. This will give you an overview of rehabilitation services available where you can signpost/refer cases to. Depending on the guidelines in your safeguarding policy and your organizational focus, you may need to go through a period of follow up and support until the case has been closed. If, of course, the harm has arisen because of the organization then the organization would need to investigate the issue, as well as ensuring the survivor has access to services.

7. Hello, could you provide practical example of how communities are involved in the process?

There are various ways to involve community members in safe programming. When conducting your situational assessment, you can facilitate FGDs/KIIs with them to get information needed, when developing your risk register, you can brainstorm with them to identify risks and possible mitigation strategies. Feedback mechanisms (e.g., drop box, phone numbers) should be set up through community consultation so they have the mechanisms they need to give you feedback on what is working and what can be improved. This process also applies to your implementation and closure phase.

We developed a five-year organizational strategic plan, some persons from the affected population were part of the team for the design.



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8. @Tina, I would like to know how you are collaborating with other organisations in operating the Community Feedback Mechanisms and how do you handle complaints concerning staff from other organisations?

My organization is part of Local Coordination Group (LCG) a coordination group made up of local responders in a locality and during monthly LCG meetings and state coordination meetings reports are shared of activities, successes and challenges within the month. Reports received from Community Feedback Mechanism are discussed but without identifiers and when it involves another organization, this is moved to the organization responsible.

For Complaints concerning staff from other organisations, I have the obligation to report to a management staff who is my line manager, and the management staff will follow the organizational internal procedures to escalate the complaint and get feedback.

9. Have you had a situation where survivor did not see anything wrong with what you may term as safeguarding issue? If yes, how did handle it to make the community understand that such act is an exploitation or abuse of power?

This is a very tricky one and unfortunately happens often, especially when culture and attitudes clash with what we term as a safeguarding issue. Because attitudes and culture are deep seated and not easily changed, what we did was to have multiple conversations with the survivor and key community members on why we term the issue a safeguarding one and the long-term effects if it is not handled as such. In the end, because we handle safeguarding issues from a survivor centred approach (where the survivor has the right to choose the course of action, privacy, and confidentiality, we had to step back. We did share a referral list should they need to get support in the future and then we closed the case.

10. Looking at the safeguarding and safe programming processes, it requires a substantial amount of funding. What is your advice to organizations with limited funding?

This is where collaboration with other CSO/NGOs comes in. You can conduct a rapid scan/ assessment of the organisations that operate in your state: what they do, their focus and expertise. Once you have this, have a conversation with them and agree on a MOU that promotes partnership and leverages expertise that they may have, and you don't and vice versa.

You can mainstream aspects of safeguarding and safe programming without funds. If you have an active project where safeguarding was not factored in, ensure in every contact with the affected population for other activities you conduct few minutes sensitization on safeguarding and Complaints and Feedback Mechanism. To learn how to integrate safeguarding into subsequent proposals [click here](#).

11. How does the Safeguarding Hub support some small organizations that have no capacity to investigate allegations of Safeguarding issues?

RSH has the Ask an Expert service where CSOs can ask for a specific request from RSH, [click here](#).

12. How can the grass root members be involved in safeguarding?

I believe capacity programmes or awareness programmes on safeguarding should first be done in communities so that individuals can safely spot cases of such and report appropriately- this is especially good for accountability. Also, depending on the type and scope of the projects or programmes being executed in the communities, implementing organizations can collaborate with community members to set up community reporting channels.

13. At what stage do you inform your donors of a safeguarding concern/allegation?

This depends on your safeguarding policy and the contract/agreement signed with the donor. Whatever is agreed or stipulated in your policy, you would need to adhere to it. Remember, only designated persons should handle issues of safeguarding and information provided to donors should not enable the donor to identify individuals concerned.

14. How will you respond to an organization that did not prioritize safeguarding and what advice will you give them for them to overcome the challenges.

If you do not prioritise safeguarding, you are not delivering good quality work. You cannot argue that you are supporting people effectively if the very services and programs etc. you deliver are harming them. Every organization should prioritize safeguarding, not as a compliance tick box but because it is the right thing to do and will mean that your organization is safe, accountable and can deliver good quality services and programs.