A. Purpose Statement

International Medical Corps is a global non-profit humanitarian organization with the mission of saving lives, easing suffering, and building self-reliance. International Medical Corps has a strong commitment to the safeguarding and protection of all people. We strive to ensure that our presence does no harm in the communities where we work, with a particular focus on protecting those people who may be most vulnerable to exploitation and/or abuse. This includes safeguarding from the following conduct by our personnel or implementing partners:1 sexual exploitation and abuse; exploitation, neglect, or abuse of children and adults at risk; and/or any form of trafficking in persons.

International Medical Corps expects its personnel and implementing partners to conduct themselves and International Medical Corps’ business in a manner that upholds our organization’s mission and core values, which prioritize safeguarding of the populations with whom we work. The organization has a zero-tolerance policy for inaction in response to safeguarding allegations or violations. International Medical Corps believes that populations with whom we work have the right to be protected from safeguarding violations and to expect that we will prioritize protection measures in our work.

The purpose of this document is to outline International Medical Corps’ Safeguarding Policy and provide guidance and direction to its personnel and implementing partners on safeguarding, including policies on child safeguarding, protection from sexual exploitation and abuse (PSEA), safeguarding adults at risk, and trafficking in persons (TIP) prevention. The Safeguarding Policy will be widely distributed to facilitate broad understanding about and the adoption of the specific policies and guiding principles of International Medical Corps in relation to safeguarding matters and to reinforce the importance of safeguarding to our personnel and implementing partners, including the obligation to report concerns about safeguarding violations. The Safeguarding Policy is closely related to the following organizational policies, which should be considered when applying this policy:

- Code of Conduct & Ethics
- Whistleblower Policy
- Conflicts of Interest Policy
- Protection from Harassment, Bullying, and Sexual Misconduct in the Workplace Policy
- Misconduct Disclosure Scheme Policy

1 Personnel: directors, officers, employees, consultants, volunteers, interns, agents, or any other type of worker or representative of International Medical Corps; Implementing partners: vendors, service providers, contractors, subrecipients, or other partners with whom we contract.
B. Scope and Applicability

This section outlines the scope and applicability of International Medical Corps’ Safeguarding Policy.

1. The Safeguarding Policy addresses conduct by International Medical Corps personnel in relation to populations with whom we work and other vulnerable populations. While International Medical Corps believes exploitation and abuse are never acceptable, the scope of this policy does not apply to conduct between International Medical Corps’ personnel. International Medical Corps’ Protection from Harassment, Bullying, and Sexual Misconduct in the Workplace Policy addresses and shall be applied in relation to sexual misconduct, bullying, and/or harassment between International Medical Corps’ personnel.

2. The Safeguarding Policy applies to all personnel of International Medical Corps, including members of the Board of Directors, employees, consultants, volunteers, interns, agents, or any other type of worker or representative of International Medical Corps. The Safeguarding Policy applies to all personnel at the point of engagement (e.g., date of hire or comparable) and for the entire period of their engagement with International Medical Corps. The Safeguarding Policy is applicable at all times (i.e., work time and non-work time) and in all locations (i.e., work locations and non-work locations). International Medical Corps personnel who fail to comply with this policy may be subject to disciplinary action, up to and including termination, in accordance with relevant employment policies and/or contractual obligations.2

3. The Safeguarding Policy and/or our safeguarding principles apply to our implementing partners (e.g., vendors, service providers, contractors, subrecipients, other partners with whom we contract) as outlined in the contractual document between International Medical Corps and the implementing partner. International Medical Corps will promote and, as applicable, require that safeguarding mechanisms are in place with implementing partners. International Medical Corps may review an implementing partner’s safeguarding mechanism as part of the applicable pre-award assessment and/or due diligence processes prior to engagement. International Medical Corps will strive not to engage an implementing partner when their approach to safeguarding does not align with our safeguarding principles.

4. The Safeguarding Policy is intended to comply with applicable laws, regulations, and donor rules, and be consistent with reasonable business practices for non-profit humanitarian organizations. The applicable Employee or Personnel Handbook, together with applicable law, takes precedence for matters of employment and/or personnel management.

5. Within the Safeguarding Policy are references to other policies or documents. In the event of a conflict between the Safeguarding Policy and any other documents, this policy takes precedence regarding matters of safeguarding. The Safeguarding Policy does not

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2 See applicable HR procedures for descriptions of possible disciplinary actions.
seek to outline specific operating procedures or routine practices for International Medical Corps regarding safeguarding. Documents aimed at outlining procedures, improving processes, or achieving efficiencies shall adhere to the policies established in this document.

6. The Safeguarding Policy applies to all International Medical Corps programs and types of awards, regardless of funding source or donor. Any donor terms and conditions that are more restrictive than International Medical Corps’ Safeguarding Policy will take precedence. (Refer to the Exceptions and Modifications section of this document.)

Any questions about the scope, applicability, or interpretation of the policy should be addressed to the Ethics & Compliance Department at compliance@internationalmedicalcorps.org.

C. Terminology and Definitions

The list of International Medical Corps’ commonly used definitions and terminology is available on OneCorps. The full list of definitions and terminology specific to safeguarding are found in Annex A.

The following definitions of key terminology are being provided here for the purposes of clarity, consistency, and understanding in reviewing and applying this policy:

- **Safeguarding:** An organization’s responsibility to ensure their personnel, operations, and programs do no harm to the people with whom they work, with a particular focus on protecting those who may be most vulnerable to exploitation and/or abuse.
- **Protection:** All activities aimed at obtaining full respect for the rights of the individual in accordance with the letter and the spirit of the relevant bodies of law, including International Humanitarian Law and International Refugee Law.
- **Child:** Any person below the age of 18, regardless of local custom or the age of majority or consent locally.
- **Abuse:** The improper treatment of someone causing harm or injury. There are several forms of abuse (such as physical abuse, verbal abuse, sexual abuse, emotional abuse, etc.), any or all of which may be perpetrated as a result of deliberate intent, negligence, or ignorance.
- **Exploitation:** The use of position, authority, influence, or control to pressure, force, coerce, or manipulate someone to do something against their will or interest and well-being, including threatening to withhold assistance, threatening to make false claims about a person, or any other negative repercussions in the workplace or community, usually for someone else’s advantage, gratification, or profit.
- **Neglect:** The persistent failure to meet a person’s basic physical and/or psychological needs, likely to result in the serious impairment of their health or development.
- **Trafficking in persons:** The recruitment, harboring, transportation, provision, or obtaining of a person for labor or services, by using threats, force, or other forms of coercion, abduction, fraud, deception, or abuse of power of a position of vulnerability or giving or receiving payments or benefits to achieve consent for purposes of exploitation.

Questions regarding any terminology or definitions used in this policy should be addressed to the Ethics & Compliance Department at compliance@internationalmedicalcorps.org.
D. Guiding Principles

International Medical Corps uses a principles-based approach to business operations, enabling the organization to refine existing and define additional policies as needed to adapt to the changing business and operating environment of our work. International Medical Corps has defined its guiding principles in relation to safeguarding to ensure good governance of the organization, support risk mitigation, and facilitate sound decision making in implementation of this policy.

International Medical Corps’ approach to safeguarding has been informed by the following international best practice principles and standards, which have been incorporated as appropriate into the Safeguarding Policy and may be used by International Medical Corps for safeguarding decision-making:

- Inter-Agency Misconduct Disclosure Scheme (MDS)
- Inter-Agency Standing Committee (IASC) Six Core Principles Relating to Sexual Exploitation and Abuse
- Minimum Standards for Child Protection in Humanitarian Action (CPMS)
- The Sphere Project, Humanitarian Charter, and Minimum Standards in Humanitarian Response
- United Nations Convention on the Rights of the Child
- United Nations Secretary-General’s Bulletin on Special Measures for Protection from Sexual Exploitation and Abuse

The following guiding principles were used by International Medical Corps in developing the Safeguarding Policy and may be used by International Medical Corps for safeguarding decision-making:

1. While International Medical Corps recognizes that laws and norms may differ in the various locations where we work, the Safeguarding Policy is based on international best practice and reflects the organization’s commitment to ensuring that our personnel and implementing partners conduct themselves and the business of International Medical Corps in the best interests of the populations with whom we work. In some instances, the Safeguarding Policy may require personnel and implementing partners to adhere to more stringent standards than required by applicable law.

2. International Medical Corps takes a person-centered approach to matters of safeguarding, which means giving primary consideration to the best interests of the person(s) actually or potentially harmed when taking safeguarding actions or making decisions. Accordingly, International Medical Corps will carefully consider the safety and well-being of all persons involved in a safeguarding matter. Additionally, International Medical Corps prioritizes a survivor-centered approach to minimize further harm to survivors and their families, aiming to create a supportive environment in which the survivor’s rights and wishes are respected, their safety is ensured, and they are treated with dignity and respect.3

3 See International Medical Corps Guidelines for Supporting Survivors of Safeguarding Violations.
3. International Medical Corps prioritizes attention to the safety, rights, and dignity of populations with whom we work and other vulnerable populations. International Medical Corps recognizes that some groups, such as persons with diverse sexual orientations, gender identities, gender expressions, and sex characteristics (SOGIESC), such as members of the LGBTQI+ community, face challenges in accessing humanitarian assistance due to discrimination or lack of awareness about their unique needs. Careful attention is required to ensure that all person(s) who have been subjected to a safeguarding violation under this policy are able to access timely support and services in accordance with their requests for such services or support.

4. International Medical Corps recognizes that confidentiality of information and protection of data is extremely important. All materials pertaining to safeguarding complaints will be handled with care and confidentiality to protect the rights of all persons involved to the fullest extent possible.

5. International Medical Corps will seek to engage only those personnel and implementing partners who are aligned with our mission and values. International Medical Corps will seek to use recruitment checks and/or other due diligence that prevent known perpetrators of exploitation or abuse from being engaged.

6. When depicting International Medical Corps’ work and the populations with whom we work in our communications, we will ensure that communications are accurate and depict affected populations with dignity and respect, with special protection for children and those who are most vulnerable. We will carefully consider and weigh the risk of compromising the health, welfare, or rights of the populations with whom we work. International Medical Corps will seek to obtain informed consent whenever possible.

E. Safeguarding Policy Statements

International Medical Corps’ Safeguarding Policy is organized into the following four sections:

1. Child Safeguarding Policy
2. Protection from Sexual Exploitation and Abuse (PSEA) Policy
3. Safeguarding Adults at Risk Policy
4. Trafficking in Persons (TIP) Prevention Policy

1. Child Safeguarding Policy

a. Purpose of the Child Safeguarding Policy

The need to safeguard children exists within all communities. International Medical Corps considers a child to be anyone below the age of 18. Children across the world can be vulnerable to exploitation, neglect, and abuse and experience sexual, physical, and psychological violation. Many children are forced into exploitative work, including commercial sexual exploitation. There are many factors that might further increase children’s vulnerability to exploitation and abuse,

4 LGBTQI+: lesbian, gay, bisexual, transgender, queer, and intersex.
5 For further guidance, see International Medical Corps Guidelines for Photographing and Videotaping Field Programs and Beneficiaries, and International Medical Corps Guidelines for Communications on GBV Needs & Programming 2023.
including disability, being orphaned, displacement, homelessness, or abandonment. During emergency and disaster situations, children may be more likely to experience exploitation and abuse as a result of being separated from their parents and other caregivers who might normally protect them from such harm. Child exploitation and child abuse are detrimental to children, adversely affecting their development and wellbeing. Children who are exploited or abused experience a greater likelihood of long-term consequences, including mental health issues, reduced educational outcomes, and drug and alcohol abuse.

Child safeguarding is the action that is taken to promote the welfare of children and protect them from harm, which means protection of children from abuse and maltreatment, preventing harm to children's health or development, ensuring children grow up with the provision of safe and effective care, and taking action to enable all children to have the best outcomes.

b. Guiding Principles and Standards: Child Safeguarding

- International Medical Corps is committed to the core principles reflected in the Minimum Standards for Child Protection in Humanitarian Action (CPMS),6 which incorporate principles of the UN Convention on the Rights of the Child (CRC).

- International Medical Corps is committed to supporting the safety of children within their families and communities. This includes interventions aimed at the prevention of abuse, exploitation, facilitation of child marriage and other harmful practices, neglect, child labor, and other forms of violence against children; as well as protection of children who are in these situations and implementation of appropriate measures and resources to support the needs of children who have survived them.

- International Medical Corps strives to provide protection from child, early, and forced marriages and unions, which deprive girls of their childhood and education, limit their possibilities for growth and stability, and result in increased risks of violence, abuse, rape, sexual assault, early pregnancy, and maternal mortality and morbidity.

- International Medical Corps complies with all relevant international standards7 and may impose more stringent requirements as compared to local legislation in relation to child labor and strives to protect children from domestic or other labor, if such work is inappropriate, exploitative, harmful given their age and/or developmental capacity, interferes with time available for education and recreational activities, or places them at significant risk of injury, exploitation, or violence. International Medical Corps recognizes that certain programmatic interventions may engage youth8 in activities that are appropriate and not exploitative.

- International Medical Corps will take all necessary steps to ensure that internal and external risks to children are assessed, and mitigating measures are integrated into the design, implementation, and monitoring of its programs.

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7 International Labour Organization Conventions on Child Labour: Convention No. 138 on Minimum Age and Convention No. 182 on the Worst Forms of Child Labour.
8 Consistent with the UN definition of youth, for the purpose of this policy, “youth” refers to children ages 15-17.
• International Medical Corps believes that everyone who comes into contact with a child has a responsibility to safeguard and promote the child’s welfare, and to protect them from all forms of harm and abuse. We believe that all children have an equal right to protection irrespective of their race, gender, language, religion, nationality, ethnicity, disability, or age.

• International Medical Corps’ recruitment processes include screening measures that strive to prevent employing those who pose a risk to children.

c. Expected Conduct for Child Safeguarding

International Medical Corps personnel and implementing partners are required to:
• Be committed to creating a culture of openness and mutual accountability at workplaces to enable all child safeguarding issues or concerns to be raised and discussed.
• Be accountable and responsible for maintaining an environment that promotes child safeguarding and empowers children to raise their concerns about their personal safety.
• Consider child safeguarding in project planning and implementation to determine potential risks to children that are associated with project activities and operations.
• Provide children with safe, accessible, and preferred mechanisms to raise concerns.
• Ensure that two adults are always visible to others while working with children.9
• Avoid inappropriate physical contact with children and respect a child's wishes with respect to some forms of contact that are generally deemed appropriate, such as handshakes, high-fives, or hugs.
• Raise any concerns of inappropriate behavior immediately.

d. Prohibited Conduct for Child Safeguarding

Within and outside their work environments and regardless of local custom and/or law, personnel and implementing partners of International Medical Corps must never:
• Engage in any type of sexual activity with children below the age of 18 regardless of the age of consent locally.
• Be married to a child while working with International Medical Corps. Child marriage refers to any formal marriage or informal union between a child below the age of 18 and an adult or another child. (International Medical Corps does not recognize mistaken belief in the age of a person as a defense in cases of child marriage or any sexual relations with a child below the age of 18.)
• Develop relationships with children that could in any way be deemed exploitative or abusive.
• Be alone with a child from the beneficiary community during time of sleeping. At least two persons must be with a child during time of sleeping unless they are a parent or guardian of the child.
• Behave physically in a manner that is inappropriate or sexually provocative to a child.
• Spend unnecessary or excessive time alone with a child from the beneficiary community unless they are a parent or guardian of the child.
• Take a child from the beneficiary community to their home or visit the child’s home where they may be alone with that child unless they are a parent or guardian of the child.

9 There are situations when this may not be appropriate, such as certain clinical settings.
• Allow a child from the beneficiary community to stay overnight at their home unsupervised unless they are a parent or guardian of the child.
• Initiate unnecessary physical contact with a child or do things of a personal nature for a child that the child could do for themselves (e.g., toileting, changing clothes).
• Be intoxicated under the influence of alcohol or drugs when in the presence of a child.
• Hit or otherwise physically assault or physically abuse children, even where this may be culturally and/or legally acceptable.
• Act in ways that may be abusive or may place a child at risk of abuse.
• Use language to make suggestions or offer advice that is inappropriate, offensive, or abusive to a child.
• Condone or participate in behavior with children that is illegal, unsafe, or abusive.
• Act in ways intended to shame, humiliate, belittle, or degrade children, or otherwise perpetrate any form of emotional abuse.
• Show favor to children to the exclusion of others (for example, promising a child gifts and enticements).
• Hire children in any form of child labor, which is work that deprives them of their childhood, their potential, and their dignity, and that is harmful to physical and mental development.10
• Take a child alone in a vehicle unless it is absolutely necessary and with parental and/or managerial consent.
• Conduct or be part of harmful traditional practices, or spiritual or ritualistic abuse toward a child (including but not limited to female genital mutilation, also sometimes referred to as female genital cutting).

The above is not an exhaustive or exclusive list. Personnel and implementing partners should always avoid actions that may allow behavior to be misrepresented, constitute poor practice, or constitute potentially abusive behavior.

2. Protection from Sexual Exploitation and Abuse (PSEA) Policy

a. Purpose of the PSEA Policy

Sexual abuse is the actual or threatened physical intrusion of a sexual nature, whether by force or under unequal or coercive conditions; sexual exploitation is any actual or attempted abuse of a position of vulnerability, differential power, or trust for sexual purposes, including, but not limited to, profiting monetarily, socially, or politically from the sexual exploitation of another.11 The purpose of the PSEA Policy is to ensure that all International Medical Corps personnel and implementing partners understand the importance of preventing sexual exploitation and abuse and their responsibility to ensure that they, their behavior, and their work does not result in harm against a person with whom we work or another vulnerable population. We believe all people have a right to live their lives free from sexual violence and any abuse of power regardless of

10 Child labor includes work that is: mentally, physically, socially, or morally dangerous and harmful to children, and/or interferes with their schooling by depriving them of the opportunity to attend school, obliging them to leave school prematurely, or requiring them to attempt to combine school attendance with excessively long and heavy work. Child labor includes work as a domestic servant. Children who have reached the minimum working age can safely engage in employment that is in alignment with applicable law and international standards.

age, gender, sexuality, sexual orientation, disability, religion, or ethnic origin. We recognize that there are unequal power dynamics across the organization and in relation to those we serve, and that we face the risk of some people exploiting their position of power for personal gain.

b. Guiding Principles and Standards: PSEA

- International Medical Corps adheres to the core principles adopted by the Inter-Agency Standing Committee (IASC) Task Force on protection from sexual exploitation and abuse.\(^\text{12}\)

- International Medical Corps does not tolerate its personnel and implementing partners carrying out any form of sexual exploitation or sexual abuse.

- International Medical Corps will strive to create and maintain a safe organizational culture for all those who work for and with us, as well as those in the communities where we operate, through robust prevention and response work, offering support to survivors, and holding those responsible for sexual exploitation or abuse accountable.

- International Medical Corps requires its personnel and implementing partners to put the well-being and best interests of populations with whom we work as the highest priority, to treat all beneficiaries and host community members with respect and dignity, and to never engage in conduct that could be perceived as abusive or exploitative.

- International Medical Corps expects its personnel and implementing partners to foster a culture that supports this standard.

c. Policy Statements for PSEA

- Sexual exploitation and sexual abuse by International Medical Corps personnel of persons with whom we work and other vulnerable populations constitute acts of gross misconduct and will result in disciplinary action, up to and including termination of employment.

- Sexual activity with a child (defined as a person below the age of 18) is prohibited regardless of the age of majority or age of consent locally, including the prohibition of staff marriages to anyone below 18 years of age. Mistaken belief in the age of a person is not a defense.

- Relationships between those providing humanitarian assistance and a person benefiting from such humanitarian assistance are often based on unequal power dynamics and may undermine the credibility and integrity of humanitarian aid work. For this reason, romantic and sexual relationships between personnel and people benefiting from humanitarian assistance are prohibited. However, International Medical Corps recognizes that some personnel are members of the communities in which they work and therefore may have relationships with a person aged 18 years or over in their communities that are not inappropriate. In those circumstances, International Medical

Corps requires that such personnel disclose any relationship with someone receiving assistance from International Medical Corps, as described in the *Conflicts of Interest Policy*, so an assessment of the risk of unequal power dynamics can be made and appropriate directions given, if needed. *Guidance on Ethical Conduct for Staff Engaging in Romantic Relationships with Residents of Countries Hosting International Medical Corps Programs* provides direction for ensuring location-specific procedures comply with the Safeguarding Policy.

- Exchange of money, employment, goods, services, or anything of value for a sex act, including sexual favors or other forms of humiliating, degrading, or exploitative behavior, is prohibited. This includes the exchange of money, employment, goods, services, or anything of value for a sex act, including sexual favors or other forms of humiliating, degrading, or exploitative behavior, as a condition for selection as a beneficiary or assistance as a beneficiary. This also includes sex with a sex worker for the exchange of money, employment, goods, services, or anything of value regardless of local law or custom allowing such practice.

- International Medical Corps personnel must report concerns or suspicions of sexual exploitation or sexual abuse related to a fellow humanitarian actor, whether or not the individual is affiliated with International Medical Corps, following the procedures outlined in the “Reporting Requirements, Mechanisms, and Protections” section below.

- International Medical Corps personnel are obliged to create and maintain an environment that prevents sexual exploitation and abuse and promotes implementation of International Medical Corps’ Safeguarding Policy. Managers at all levels have particular responsibilities to model appropriate behavior, and support and develop systems that maintain this environment.

3. Safeguarding Adults at Risk Policy

a. Purpose of the Safeguarding Adults at Risk Policy

Many communities International Medical Corps works with around the world are receiving assistance due to the difficult and dangerous environments in which they live. In many contexts, entire communities and groups may be vulnerable because they live in remote, insecure, or inaccessible areas, or because they are geographically dispersed with limited access to assistance and protection. Groups may be under-served and mistreated because of nationality, ethnicity, race, language, gender identity, sexual orientation, religion, or political affiliation.

International Medical Corps works with communities to uphold the rights and dignity of adults who may be at greater risk of abuse or exploitation. An adult at risk is any person who is aged 18 years or over and at risk of abuse or neglect because of their needs for care and/or support. They may be at risk if they are experiencing, or at risk of, abuse or neglect, and as a result of those care and support needs are unable to protect themselves from either the risk of, or the experience of, abuse or neglect. An adult at risk may: have an illness affecting their mental or physical health, learning or physical disabilities, or drug or alcohol substance use disorders; or be frail. Individuals and groups have different capacities, needs, and vulnerabilities, which change over time. Individual factors such as age, sex, disability, and legal or health status can
limit access to assistance; this interplay of factors in a given context can strengthen capacities, build resilience, or undermine access to assistance for any individual or group.

Abuse of adults at risk may take many forms, which could include but are not limited to:
- Physical abuse
- Intimate partner violence
- Sexual abuse
- Psychological abuse
- Financial/material abuse
- Modern slavery, human trafficking, and forced labor
- Mistreatment due to gender identity, race, national origin, religion, age, disability, sexual orientation, political affiliation, etc.
- Neglect

b. Policy Statements for Safeguarding Adults at Risk

- International Medical Corps is committed to safeguarding adults at risk from abuse or neglect and enabling and empowering adults to make informed choices.

- International Medical Corps recognizes that all adults have rights, irrespective of their gender, disability, ethnicity, sexuality, religion, age, or other factor. Particular resources and attention may be required to ensure protection for adults at risk.

- International Medical Corps will respond to safeguarding violations of adults at risk in an empowering and proportionate way, taking or prompting action to protect people who are at particular risk.

- Personnel and implementing partners of International Medical Corps will not engage in any type of abuse of adults and will work to protect adults at risk from abuse.

- International Medical Corps will take into consideration the risks and vulnerabilities faced by adults at risk in its assessments and develop mitigation measures to be integrated into its programming to address them.

4. Trafficking in Persons (TIP) Prevention Policy

a. Purpose of the Trafficking in Persons Prevention Policy

International Medical Corps strongly opposes trafficking in persons and forced labor in any form and prohibits its personnel from engaging in behaviors that facilitate or support trafficking in persons. Trafficking in persons means the recruitment, harboring, transportation, provision, or obtaining of a person for labor or services by using threats, force, or other forms of coercion, abduction, fraud, deception, or abuse of power of a position of vulnerability or giving or receiving payments or benefits to achieve consent for purposes of exploitation. Exploitation for purposes of this definition includes, at a minimum, the exploitation of the prostitution of others or other forms of sexual exploitation, forced labor or services, slavery or practices similar to slavery, servitude, or the removal of organs.
 Trafficking in persons is the trade in people and does not necessarily involve the movement of persons from one place to another. The consent of a victim of trafficking is irrelevant. The recruitment, transportation, transfer, harboring, or receipt of someone below the age of 18 for the purpose of exploitation is considered trafficking in persons even if this does not involve the use of threat or other means referenced above.

b. Policy Statements for TIP Prevention

Trafficking in persons and forced labor are violations of law, including in the U.S., U.K., Croatia, and internationally recognized human rights, including the UN Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children (to which many countries where we operate have signed), and are incompatible with International Medical Corps’ core values.

All International Medical Corps personnel and implementing partners (e.g., vendors, service providers, contractors, subrecipients, partners, etc.) must comply with the requirements of Executive Order 13627, “Strengthening Protections Against Trafficking in Persons in Federal Contracts” codified in U.S. Government regulations and agency specific provisions (collectively referred to as “Trafficking Provisions”). To the extent that the U.S. Government regulations, U.S. Government agency provisions, or the Executive Order and this policy differ in their requirements, the stricter requirements, as determined by the International Medical Corps Legal Department, must be followed. All personnel must report any known or suspected instance of trafficking in persons.13

c. Prohibited Conduct for TIP Prevention

As outlined in the Trafficking Provisions, International Medical Corps personnel and implementing partners are prohibited from:

- Engaging in trafficking in persons.
- Procuring commercial sex acts, regardless of whether the act is legal in the jurisdiction where it is procured and regardless of whether the conduct occurs during or outside working hours. (A commercial sex act is any sex act on account of which anything of value is given to or received by any person. This includes both commercial items or such situations as, for example, a job or promises of similar.)
- Using forced labor.
- Destroying, concealing, confiscating, or otherwise denying personnel access to their identity or immigration documents.
- Failing to pay return transportation costs for certain personnel who have finished employment or work outside their nation of residence (except as exempt by law or regulation).

13 This policy complies with the requirements of Executive Order 13627 issued on 9/25/2012; FAR 52.222-50, Combating Trafficking in Persons (MAR 2015); and USAID Standard Provision, Trafficking in Persons (April 2016); and the pronouncements or requirements of other U.S. Government agencies, including Department of State, each addressing the crime of human trafficking by setting forth the Federal Government’s zero tolerance policy regarding trafficking in persons. In addition, this policy complies with section 54(1) of the Modern Slavery Act 2015 (UK) and constitutes International Medical Corps’ Modern Slavery Statement.
• Soliciting a person for the purpose of employment, or offering employment, by means of materially false or fraudulent pretenses, representations, or promises regarding that employment.
• Charging recruitment fees to prospective personnel.
• Providing or arranging housing that fails to meet the host country’s housing and safety standards.
• If required by applicable law, failing to provide an employment contract, recruitment agreement, or similar work document in writing in the person’s native language and prior to them departing from their country of origin.

F. Exceptions and Modifications to the Safeguarding Policy

This section outlines exceptions and modifications to the Safeguarding Policy.

1. International Medical Corps may, at its sole discretion, but consistent with our guiding principles, make exceptions to this policy and/or any associated procedures.

2. Waivers, exceptions, or additional restrictions, including donor, program, or award-specific exceptions, require prior written approval of the Ethics & Compliance Department and/or Safeguarding Unit.

3. International Medical Corps reserves the right to modify this policy either in whole or in part at any time with approval of the Ethics & Compliance Department and Safeguarding Task Force.

4. International Medical Corps may issue interim or supplementary policies or guidelines to be used in conjunction with this policy. Such documents will have the same force and effect as the contents of this policy and will be included in any subsequent updated version of the policy.

5. When modifications are made to this policy, International Medical Corps will notify all personnel of the modifications per organizational procedure, and, as necessary, highlight information regarding the change.

6. Modifications to this policy, in part or in whole, will cite an effective date if different from the effective date of the full Safeguarding Policy.

7. International Medical Corps personnel may suggest changes to the Safeguarding Policy if they believe a change would improve International Medical Corps’ ability to fulfill its mission. Questions, comments, or suggestions can be submitted to the Ethics & Compliance Department at compliance@internationalmedicalcorps.org.

G. Roles and Responsibilities

Safeguarding is everyone’s responsibility at International Medical Corps. In addition, the following personnel oversee policies, procedures, and frameworks to support our safeguarding values and standards:
1. **Members of the Board of Directors and Executive Leadership** develop and maintain an environment that promotes safeguarding, ensure that policies and procedures related to safeguarding are in place and followed, and create a safe environment that encourages the raising of concerns.

2. The **Safeguarding Task Force** comprises cross-departmental senior management representatives who oversee International Medical Corps’ safeguarding policy framework, strengthen current safeguarding processes, identify and address gaps in implementation of safeguarding policies and procedures, and ensure that International Medical Corps’ safeguarding policies and procedures reflect current international best practices.

3. The **Safeguarding Unit** is the operational unit supporting the Safeguarding Task Force and the organization and is responsible for day-to-day management of the implementation of International Medical Corps’ safeguarding approach, including providing strategic direction and strengthening integration of policies, procedures, and programmatic frameworks in regard to safeguarding and protection.

4. The **Safeguarding Case Team** is the senior management group with the mandate to review all safeguarding allegations and advise on investigation workplans, reports, and decisions to implement administrative leave, or discipline personnel based on the findings of a safeguarding investigation. The Safeguarding Case Team is coordinated by the Ethics & Compliance Department as part of the scope of the Safeguarding Investigations Unit.

5. The **Ethics & Compliance Department** is responsible for maintenance of the Safeguarding Policy as part of the department's oversight for the organization’s ethical policies and procedures, promotes use of the organization’s reporting mechanisms, and executes safeguarding investigations in coordination with the Safeguarding Case Team.

6. The **Human Resources Department** ensures that safe recruiting processes are in place and adhered to, including properly vetting prospective personnel, and that all personnel undergo training on this Policy and acknowledge their understanding of and willingness to abide by it; embeds the principles into HR processes; ensures that prospective candidates are screened and eligible for hire; and manages the Misconduct Disclosure Scheme process.

7. **Senior Directors, International Programs**, promote a culture of safeguarding at all levels and in all programs and activities, and hold Country Directors and Senior Management Teams accountable for the implementation of and adherence to this Policy and associated procedures globally across all country offices.

8. **Country Directors and Senior Management Teams** bear primary responsibility for implementation of the Safeguarding Policy at the country level by putting in place action plans to ensure that safeguarding is promoted with personnel, implementing partners, and communities with whom we work, adequate staff have been assigned to implement safeguarding activities, appropriate measures have been put in place to protect beneficiaries against risks introduced by our programs and personnel, systems are in place to support survivors of safeguarding violations, and that personnel, implementing
partners, and community members feel able to raise concerns through accessible and confidential reporting mechanisms.

9. **Safeguarding Focal Points, Safeguarding Officers, Survivor Assistance Liaisons, and Safeguarding Caseworkers** are responsible for ensuring that a safeguarding environment is promoted at country level by carrying out the duties assigned to them to implement safeguarding initiatives in-country and ensure that survivors of safeguarding violations are provided timely support and services in accordance with their wishes.

10. **Leaders at all levels** are responsible for modeling behaviors consistent with the values and ethical standards outlined in the Safeguarding Policy and Code of Conduct & Ethics, reporting any safeguarding concerns immediately and encouraging their staff members to do the same, and reporting any witnessed or reported safeguarding violations.

Any questions, guidance, or interpretation regarding the implementation of roles or responsibilities related to the Safeguarding Policy should be addressed to the Safeguarding Unit (SafeguardingUnit@internationalmedicalcorps.org).

**H. Safeguarding Policy Implementation**

The Safeguarding Unit is responsible for maintaining and communicating the internal procedures, guidance, and tools for facilitating and ensuring implementation of and compliance with International Medical Corps’ Safeguarding Policy and its guiding principles.

Procedures and guidance for implementation of the Safeguarding Policy have been outlined in the following documents:

- **Safeguarding Policy Implementation Guide**: provides a framework to support our collective approach to implementing our Safeguarding Policy.
- **Safeguarding Policy Implementation Toolkit**: contains information, guidance, and tools to support safeguarding efforts of country teams and headquarter (HQ) departments.

Any questions, guidance, or interpretation regarding the internal procedures, guidance, and tools related to the Safeguarding Policy and safeguarding generally should be addressed to the Safeguarding Unit (SafeguardingUnit@internationalmedicalcorps.org).

**I. Reporting Requirements, Mechanisms, and Protections**

This section outlines reporting requirements, mechanisms, and protections consistent with International Medical Corps’ Whistleblower Policy. Any questions or guidance regarding reporting matters can be addressed to the Ethics & Compliance Department using report@internationalmedicalcorps.org.

1. **Primary Reporting Requirements and Mechanisms**

Personnel and implementing partners are required to immediately report any instance of actual or suspected violation of this policy using one of these primary reporting mechanisms:
Email and Internet reporting are managed by the Ethics & Compliance Department in accordance with maintaining confidentiality and a person-centered protection approach.

Managers and supervisors are required to immediately report all safeguarding complaints or suspected violations of the Safeguarding Policy to the Ethics & Compliance Department in writing via email reporting or EthicsPoint reporting.

All reports of safeguarding violations are referred to International Medical Corps’ Ethics & Compliance Department. The Ethics & Compliance Department reviews and addresses reports in accordance with its internal procedures, which incorporate International Medical Corps and best practice values of confidentiality, independence, fairness, thoroughness, impartiality, objectivity, timeliness, and the protection, safety, and well-being of individuals involved.

International Medical Corps’ policy is that only trained personnel will investigate allegations of sexual exploitation and abuse.

Reports are reviewed and, if warranted, an investigation will be conducted. International Medical Corps reviews all reports and promptly follows up on the reports by communicating with the reporter to acknowledge receipt. Where the reported misconduct may affect an individual’s physical or emotional safety or well-being, International Medical Corps will seek to ensure the safety and security of those at risk as well as the safety of any other personnel and communities at risk. (For more information about the treatment of reports, see the Whistleblower Policy.)

All personnel and implementing partners have an obligation to cooperate fully in an investigation process. Failure to cooperate will result in disciplinary action, up to and including termination of employment.

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14 **International Medical Corps Reporting Hotline (EthicsPoint):** EthicsPoint is a comprehensive reporting system in which staff can file secure, anonymous reports via phone or internet; this system is hosted and managed by a leading industry provider of confidential reporting systems. EthicsPoint Hotline Specialists can be reached 24 hours per day, 7 days per week to assist with reporting, and to provide guidance on whether a situation may be a cause for concern. Reporters may submit reports in any language. The EthicsPoint platform is available in English, French, and Arabic.

15 Anonymous reporting is available through the EthicsPoint online portal. Reporters are strongly encouraged to review their complaint online regularly, as an investigator may ask questions through the EthicsPoint portal.
engagement. All reports and investigations will be kept confidential to the extent possible, consistent with the need to investigate, address findings, and/or notify third parties as required by laws, regulations, or contractual obligations.

2. Community-Based Feedback and Response Mechanisms

International Medical Corps’ Community-Based Feedback and Response Mechanisms (CBFRM) are intended to provide disaster-affected communities with access to a safe, confidential means of providing input, feedback, and voicing concerns on issues within the control of the organization. In accordance with the International Medical Corps CBFRM Guidelines, and each International Medical Corps country’s contextualized CBFRM Standard Operating Procedure, complaints received through the CBFRM that are categorized as “sensitive” (i.e., Category 5 or Category 6 complaints) shall be routed to the Ethics & Compliance Department using the EthicsPoint web portal or the report@internationalmedicalcorps.org email.

3. Reporting Protections

In accordance with the International Medical Corps Whistleblower Policy, the following protections apply to reporting of safeguarding allegations:

- **No Adverse Action:** No adverse employment actions will be taken against any personnel in retaliation for reporting allegations they reasonably believe to be true.
- **Anti-Harassment:** Harassment of personnel who have reported a concern in good faith will not be tolerated. If harassment is found to have occurred, the harassing individual will be subject to appropriate disciplinary action, up to and including termination.
- **Confidentiality:** International Medical Corps will, to the fullest extent possible, maintain confidentiality in the investigation of any allegation. Investigations and the results of investigations will be discussed only on a need-to-know basis.
- **Anonymous Allegations:** Individuals are encouraged but not obliged to share their name when reporting allegations. In some cases, appropriate follow-up questions and investigation procedures may not be possible unless the source of the information is identified.
- **Malicious Allegations:** Individuals making allegations with reckless disregard for their truth or falsity may be subject to disciplinary action, up to and including termination.
ANNEX A: Definition of Key Terms Utilized in the Safeguarding Policy

**Abuse** - the improper treatment of someone causing harm or injury. There are several forms of abuse (such as physical abuse, verbal abuse, sexual abuse, emotional abuse, etc.), any or all of which may be perpetrated as a result of deliberate intent, negligence, or ignorance.

**Adults at-risk** - any person who is aged 18 years or over and at risk of abuse or neglect because of their needs for care and/or support. They may be at risk if they are experiencing, or at risk of, abuse or neglect, and as a result of those care and support needs are unable to protect themselves from either the risk of, or the experience of, abuse or neglect.

**Anonymity** - a situation where a person's identity is unknown, making them non-identifiable, unreachable, and/or unable to be tracked.

**Beneficiary** - individuals, groups, or organizations who have been designated as the intended recipients of humanitarian assistance or protection in an aid intervention.

**Child** - any person below the age of 18, regardless of local custom or the age of majority or consent locally.

**Child abuse** - an act, or failure to act, on the part of a parent, guardian, and/or caregiver that results in the death, serious physical or emotional harm, sexual abuse, or exploitation of a child, or which places the child in an imminent risk of serious harm, and/or seriously impacts the child’s long-term development and potential.

**Child exploitation** - the use of children for someone else's advantage, gratification, or profit often resulting in unjust, cruel, and harmful treatment of the child. These activities are to the detriment of the child's physical or mental health, education, moral, or social-emotional development. It covers situations of manipulation, misuse, abuse, victimization, oppression, or ill treatment.

**Child labor** - work that deprives children of their childhood, their potential, and their dignity, and that is harmful to physical and mental development, including work that is: mentally, physically, socially, or morally dangerous and harmful to children, and/or interferes with their schooling by depriving them of the opportunity to attend school, obliging them to leave school prematurely, or requiring them to attempt to combine school attendance with excessively long and heavy work. (“Decent work” is the term used for acceptable forms of employment that children who have reached the minimum working age can safely engage in.)

**Child marriage** - any formal marriage or informal union where at least one of the parties is below 18 years of age.

**Child safeguarding** - the action that is taken to promote the welfare of children and protect them from harm, which means protection of children from abuse and maltreatment; preventing harm to children's health or development; ensuring children grow up with the provision of safe and effective care; and taking action to enable all children to have the best outcomes.

**Complaint** - an assertion of conduct that may be in breach of our Safeguarding Policy.

**Confidentiality** - a principle that is used to restrict access to and dissemination of information. In cases of sexual exploitation, abuse, fraud, and corruption, the principle of confidentiality
requires that information be available only to a limited number of authorized people for conducting/resolving the case. Confidentiality helps create an environment in which all individuals involved are more willing to recount their versions of events and builds trust in the system and in the organization.

**Emotional abuse** - harm done by persistent or severe emotional ill-treatment or rejection, such as degrading punishments, threats, bullying, withholding care and affection, or an action resulting in adverse effects on the behavior and emotional state/development of an adult or child.

**Exploitation** - the use of position, authority, influence, or control to pressure, force, coerce, or manipulate someone to do something against their will or interest and well-being, including threatening to withhold assistance, threatening to make false claims about a person, or any other negative repercussions in the workplace or community, usually for someone else's advantage, gratification, or profit.

**Financial/material abuse** - theft, fraud, exploitation, pressure in connection with wills, property, or inheritance or financial transactions, or the misuse or misappropriation of property, possessions, or benefits.

**Forced marriage** - a marriage or informal union in which one and/or both parties have not personally expressed their full and free consent to the union. A child marriage is considered to be a form of forced marriage, given that one and/or both parties have not expressed full, free, and informed consent.

**Harmful traditional practices** - practices based on cultural beliefs and values that have harmful consequences for children e.g., witchcraft, early or forced marriage, female genital mutilation, sometimes known as female genital cutting.

**Implementing partners** - vendors, service providers, contractors, subrecipients, or other partners with whom we contract.

**Informed consent** - approval given after thoughtful consideration, based upon a clear appreciation and understanding of the facts, implications, and future consequences of an action. Informed consent for services requires the voluntary agreement of an individual who understands options/services being offered, faces no pressure to agree to services, and has the legal capacity and maturity to give consent. There may be instances where consent might not be possible due to cognitive impairments and/or physical, sensory, or intellectual disabilities.

**Intimate partner violence** - behavior by an intimate partner or ex-partner that causes physical, sexual, or psychological harm, including physical aggression, sexual coercion, psychological abuse, and controlling behaviors.

**Investigation** - an internal administrative procedure, in which International Medical Corps gathers and reviews information to establish whether there has been a breach of International Medical Corps' policies by personnel or implementing partners.

**Modern slavery** - the recruitment, movement, harboring, or receiving of children, women, or men through the use of force, coercion, abuse of vulnerability, deception, or other means for the purpose of exploitation.

**Neglect** - the persistent failure to meet a person’s basic physical and/or psychological needs, likely to result in the serious impairment of their health or development.
Perpetrator - a person who commits or attempts to commit a safeguarding violation.

Person-centered approach - giving primary consideration to the best interests of the person(s) actually or potentially harmed when taking safeguarding actions or making safeguarding decisions, as well as carefully considering the safety and well-being of other persons involved in the safeguarding matter.

Personnel - directors, officers, employees, consultants, volunteers, interns, agents, or any other type of worker or representative of International Medical Corps.

Physical abuse - the use of physical force that results in harm. Physically abusive behavior includes but is not limited to shoving, hitting, slapping, shaking, throwing, punching, kicking, biting, burning, strangling, and poisoning.

Protection - all activities aimed at obtaining full respect for the rights of the individual in accordance with the letter and the spirit of the relevant bodies of law, including International Humanitarian Law and International Refugee Law.

Psychological abuse - behavior or intended actions of harm or abandonment, prevention of contact or communication, controlling, limiting access, humiliation, intimidation, coercion, harassment, verbal abuse, and bullying.

Safeguarding - an organization’s responsibility to ensure their personnel, operations, and programs do no harm to people with whom they work, with a particular focus on protecting those who may be most vulnerable to exploitation and/or abuse.

Sexual abuse - the actual or threatened physical intrusion of a sexual nature, whether by force or under unequal or coercive conditions.

Sexual exploitation - any actual or attempted abuse of a position of vulnerability, differential power, or trust for sexual purposes, including, but not limited to, profiting monetarily, socially, or politically from the sexual exploitation of another.

Spiritual abuse - using spiritual or religious beliefs to hurt, scare, or control a person. It can involve forcing a person to participate in spiritual or religious practices when they do not want to. It can also involve refusing to let a person participate in spiritual or religious practices that are important to them.

Survivor - the person who is, or has been, subjected to a safeguarding violation. The term “survivor” implies strength, resilience, and the capacity to survive.

Survivor-centered approach - creating a supportive environment in which the survivor’s rights and wishes are respected, their safety is ensured, and they are treated with dignity and respect.

Trafficking in persons - the recruitment, harboring, transportation, provision, or obtaining of a person for labor or services, by using threats, force, or other forms of coercion, abduction, fraud, deception, or abuse of power of a position of vulnerability or giving or receiving payments or benefits to achieve consent for purposes of exploitation.