

Protection from Sexual Exploitation, Abuse and Harassment Policy (PSEAH)

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Approved by	David Roach - Managing Director

1. Preamble

1.1 Statement of commitment

Catalpa recognises that exploitation, abuse and harassment can occur in any development, humanitarian workplace, digital or community setting, and within any employment, partnership, supplier or program relationship. Sexual exploitation, abuse and harassment are forms of gender-based violence and abuses of power that can cause profound harm to individuals and communities.

Catalpa is committed to protecting people from sexual exploitation, abuse and harassment (PSEAH). For the purpose of this Policy, PSEAH means the prevention of, protection from, reporting of, response to, and accountability for sexual exploitation, abuse and harassment.

Based on the nature of Catalpa's work, safeguarding and upholding the rights, safety and dignity of people is fundamental to how we work. Catalpa recognises that unequal power dynamics may exist within the organisation, between Catalpa and downstream partners, and between Catalpa, partners and the communities and stakeholders involved in our programs.

Catalpa has zero tolerance for sexual exploitation, abuse and harassment. This means zero tolerance for acts of sexual exploitation, abuse and harassment, and zero tolerance for inaction to prevent, report or respond to sexual exploitation, abuse and harassment.

Catalpa is committed to creating safe, inclusive, respectful and accessible workplaces and programs. This includes taking active steps to prevent sexual harassment and discrimination in line with the positive duty under the Sex Discrimination Act 1984 (Cth), as amended by the Anti-Discrimination and Human Rights Legislation Amendment (Respect at Work) Act 2022 (Cth), and taking all reasonable steps to prevent sexual harassment in connection with Catalpa's business or undertaking.

Catalpa recognises that sexual exploitation, abuse and harassment can occur in person, online, through social media, through digital communications, and through the misuse of images, video, personal information or digital platforms. Catalpa will therefore take a risk-based and survivor-centred approach to preventing and responding to SEAH in all aspects of its work.

1.2 Policy review and ratification

This Policy has been reviewed and formally ratified by Catalpa's Senior Leadership team. It is subject to review every three years or more often as necessary.

1.3 Policy linkages

This Policy is to be enacted alongside obligations confirmed in additional Catalpa policies, procedures and organisational documents including:

- Code of Conduct
- Child Safeguarding Policy and Child Safeguarding Code of Conduct
- Whistleblower Policy
- Data Privacy, Storage and Retention Policy

- Internal Complaints and Feedback Policy
- External Complaints and Feedback Policy
- Hiring Guidelines
- Catalpa safeguarding risk assessment tools and downstream partner safeguarding risk assessment/action plan
- Catalpa guidance for downstream partner development of safeguarding policies
- Catalpa communications, consent, privacy and data protection procedures, where relevant.

This Policy should be read in reference to DFAT Protection from Sexual Exploitation, Abuse and Harassment Policy, September 2025

- DFAT Child Protection Policy, September 2025
- DFAT Child and Adult Safeguards Implementation Handbook for Staff and Partners, April/May 2026
- Australian Charities and Not-for-profits Commission External Conduct Standards
- Sex Discrimination Act 1984 (Cth)
- Fair Work Act 2009 (Cth)
- Work Health and Safety Act 2011 (Cth)
- Privacy Act 1988 (Cth)
- Modern Slavery Act 2018 (Cth)
- relevant Australian and local laws in the countries where Catalpa works.

Where an issue involves a person under the age of 18, the Catalpa Child Safeguarding Policy must also be applied. Sexual abuse or exploitation of a person under the age of 18 must be handled as a child safeguarding matter and reported in accordance with relevant legal, donor and organisational requirements.

2. Purpose

The purpose of this Policy is to:

- Articulate Catalpa's commitment to protect people from sexual exploitation, abuse and harassment in connection with Catalpa's work, personnel, associates and downstream partners
- ensure Catalpa takes proactive steps to prevent, identify, mitigate and respond to SEAH risks;
- provide clear standards of behaviour for Catalpa personnel, associates and downstream partners;
- ensure all people affected by SEAH in connection with Catalpa's work can access safe, accessible and confidential reporting pathways;
- ensure reports of SEAH are managed promptly, safely, confidentially, fairly and in a victim-survivor-centred and trauma-informed manner;
- ensure Catalpa complies with relevant legal, donor and contractual requirements, including DFAT's PSEAH requirements where Catalpa is involved in DFAT business;
- support accountability by ensuring appropriate investigation, disciplinary, contractual, referral and reporting action is taken where required.

This Policy supports internal and external stakeholders, including personnel, consultants, contractors, downstream partners, community members, program participants and other stakeholders, to understand their rights, responsibilities and reporting options if SEAH occurs, is suspected, or is disclosed in connection with Catalpa's operations, programs or stakeholders.

3. Scope

This Policy addresses any incidences of sexual exploitation, abuse and/or harassment experienced, witnessed, suspected, disclosed or reported in connection to Catalpa's operations, work, programs, personnel or downstream partners. As such, this Policy applies to:

- All current and future staff, consultants and/or contractors and volunteers of Catalpa associated with or working with Catalpa in any capacity (herein referred to as "personnel")
- Board of Directors, or any person acting in a governance, advisory or representative capacity for Catalpa
- Visitors to Catalpa programs including media, donors or other supporters of Catalpa's programs and staff in partner agencies (therein referred to as "associates")
- All downstream partners including relevant agencies and/or sole traders, and suppliers of Catalpa under contract with and/or funded by Catalpa (herein referred to as "downstream partners"). As part of Catalpa's recognition and commitment to ensuring downstream partner due diligence and management of related risk, downstream partners who do not have their own Prevention of Sexual Exploitation, Abuse or Harassment Policy that is compliant with all relevant standards will be contractually required to abide by this Policy.

This Policy applies to Stakeholders both inside and outside of work hours where conduct is connected to Catalpa's work, role, reputation, programs, travel, events, online platforms, communications, equipment, funding, partnerships or stakeholder relationships. This includes conduct that occurs in person, online, through digital communication, through social media, during travel, at work-related accommodation, at workshops or events, or in community settings.

Notes on limitation of Policy scope:

- *Cases of sexual exploitation, abuse or harassment in the community perpetrated by someone outside Catalpa, and not connected to Catalpa's personnel, associates, downstream partners, activities or operations, do not fall under this Policy. However, if Catalpa personnel, associates or downstream partners become aware of, witness or suspect such harm, they should respond safely and appropriately, including by supporting referral to relevant services or authorities where safe, lawful and appropriate, and/or seeking advice from the Catalpa Safeguarding Focal Point.*
- *This Policy does not replace local legal obligations, criminal reporting obligations, workplace health and safety obligations, donor reporting obligations, or obligations under Catalpa's Whistleblower Policy.*
- *Cases of abuse, exploitation and/or harassment against children is covered under the Catalpa Child Safeguarding Policy; and*

4. Policy Principles

Catalpa's approach to PSEAH is guided by the following principles.

4.1 Zero tolerance for sexual exploitation, abuse and harassment

Catalpa has zero tolerance for sexual exploitation, abuse and harassment in any aspect of its work. This means zero tolerance for acts of SEAH and zero tolerance for inaction to prevent, report or respond to SEAH.

Zero tolerance does not mean automatic dismissal without due process. All allegations will be managed fairly, confidentially and in accordance with Catalpa's disciplinary, contractual, complaints, investigation and legal obligations. However, where SEAH is substantiated, Catalpa will take appropriate disciplinary, contractual, reporting, referral or legal action.

4.2 Victim-survivor-centred and trauma-informed approach

Catalpa will apply a victim-survivor-centred and trauma-informed approach to SEAH prevention and response. This means Catalpa will seek to do no harm, prioritise the safety, rights, dignity, needs and wishes of the victim-survivor, provide information about available support, protect confidentiality as far as possible, and involve the victim-survivor in decisions that affect them, where safe and appropriate.

Catalpa recognises that the wishes of the victim-survivor must be carefully considered, but that there may be circumstances where Catalpa is legally, contractually or ethically required to take action or report a matter, including where there is an immediate risk to safety, a child is involved, a serious criminal offence may have occurred, or a donor reporting obligation applies.

4.3 Inclusion, equity and diversity

Catalpa recognises that people may be at increased risk of SEAH due to gender, age, disability, sexual orientation, gender identity, ethnicity, language, religion, socio-economic status, displacement, migration status, dependence on services, power imbalance, or other factors.

Catalpa will seek to ensure that PSEAH measures are inclusive, accessible, culturally appropriate and equitable. This includes addressing barriers to participation, reporting, protection and support, including language, accessibility, safety, discrimination, stigma, digital access and fear of retaliation.

4.4 Prevention and risk management

Catalpa will proactively identify and manage SEAH risks across its operations, programs, partnerships, recruitment, training, communications, digital platforms, travel and daily work. PSEAH is not only a response obligation; it must be embedded in program design, implementation, monitoring, risk management and organisational culture.

4.5 Empowering and participatory approach

Catalpa will seek to build trust and shared responsibility for safeguarding by consulting relevant stakeholders when assessing SEAH risks and developing effective, culturally relevant prevention and reporting measures. This includes, where safe and appropriate, consultation with women, people with disability, local partners, community representatives and other groups who may face heightened risk or barriers to reporting.

Catalpa will build on existing community, partner and national mechanisms where these are established, trusted, safe and appropriate.

4.6 Mandatory reporting

All Catalpa personnel, associates and downstream partners must immediately report any suspected, alleged or known SEAH concern connected to Catalpa's work, personnel, associates, downstream partners or operations.

Where a suspected, alleged or known SEAH incident relates to DFAT business, Catalpa must report the matter to DFAT within 24 hours, even if full details are not yet available. Investigation outcomes must also be reported to DFAT where required.

Reporting is not mandatory for victim-survivors. Victim-survivors may choose whether to report directly to Catalpa, DFAT, law enforcement or another mechanism. Catalpa will encourage reporting so support and protection can be provided, but will not force a victim-survivor to make a report unless legal or safeguarding obligations require action.

4.7 Confidentiality, privacy and protection from retaliation

Catalpa will handle SEAH concerns confidentially, with information shared only on a need-to-know basis and in accordance with legal, donor, privacy, safety and procedural fairness obligations.

Catalpa prohibits retaliation, victimisation or adverse action against any person who raises a concern, makes a report, supports a victim-survivor, participates in an investigation, or otherwise acts in good faith under this Policy.

4.8 Leadership, governance and accountability

Catalpa will embed PSEAH into organisational culture, leadership and governance. Senior leaders and managers are responsible for promoting a safe and respectful culture, ensuring personnel understand their obligations, supporting reporting, ensuring risks are managed, and taking action where concerns arise.

Catalpa will retain evidence of PSEAH implementation, including risk assessments, training records, recruitment and screening checks, partner due diligence, reporting records, investigation outcomes, action plans and senior management or Board oversight where required.

5. Standards of Conduct regarding PSEAH

5.1 Prohibition of SEAH

Catalpa personnel, associates and downstream partners must not engage in any conduct that constitutes sexual exploitation, sexual abuse or sexual harassment as defined in this Policy.

This includes, but is not limited to:

- grooming, coercion or manipulation for sexual purposes;
- sexual assault, rape, molestation or other non-consensual sexual activity;
- requests or demands for sexual favours;
- unwelcome physical touching or sexual contact;
- jokes, comments, messages, gestures, images or conduct of a sexual nature that could reasonably offend, humiliate or intimidate another person;
- suggestive looks, staring or leering;
- display, sharing or circulation of pornographic or sexual material in work-related settings;
- online sexual harassment, including through email, messaging apps, social media, digital platforms or work systems;
- sharing or threatening to share intimate images or video without consent;
- using a position of power, authority, trust or access to obtain sexual activity, attention, services or advantage.

5.2 Professional boundaries and power imbalances

Catalpa personnel, associates and downstream partners must maintain professional boundaries with colleagues, community members, program participants, beneficiaries, partners, suppliers and other stakeholders.

Personnel, associates and downstream partners must not use their position, authority, role, access to resources, influence, employment status, technical expertise, decision-making power or perceived power to seek, request, pressure, coerce or obtain sexual activity, sexual attention or sexual relationships.

5.3 Transactional sex

Transactional sex is prohibited for Catalpa personnel, associates and downstream partners in high-risk environments, including development, humanitarian and peacekeeping settings.

Transactional sex means the exchange of money, employment, goods, services, assistance, opportunities, favourable treatment or other advantages for sex or sexual acts. A person can be sexually exploited through transactional sex even where sex work is legal in the relevant location.

In high-risk settings, it is often impossible to distinguish between exploitative and non-exploitative transactional sex because of power imbalances based on gender, age, disability, authority, social status, economic inequality, dependency, access to assistance or other factors. For this reason, transactional sex is prohibited in high-risk environments.

5.4 Fraternisation

All non-national personnel are prohibited from fraternisation while directly delivering donor-funded activities.

Fraternisation refers to any intimate, sexual, romantic or close social relationship occurring in the course of conducting Catalpa business that may involve, or appear to involve, partiality, preferential treatment, conflict of interest, improper use of rank or position, or exploitation of a power imbalance.

Personnel, associates and downstream partners must disclose any sexual, romantic or other close relationship with another employee, consultant, partner, downstream partner, supplier, program participant, beneficiary or community stakeholder where there is, or could reasonably be perceived to be, a conflict of interest, power imbalance or safeguarding risk.

Catalpa does not support fraternisation where the relationship involves or may reasonably appear to involve exploitation, unequal power, partiality, preferential treatment, conflict of interest, or an unsafe or sexualised environment.

Catalpa will consider the risk of exploitative fraternisation in SEAH risk assessments and may prohibit fraternisation in high-risk contexts, activities or roles.

This section does not prohibit appropriate personal relationships between national personnel and community members where personnel live and work in the same community, provided there is no exploitation, conflict of interest, safeguarding risk, abuse of power, preferential treatment or breach of this Policy.

5.5 Reporting obligations

Catalpa personnel, associates and downstream partners must immediately report any suspected, alleged or known SEAH concern connected to Catalpa's work, personnel, associates, downstream partners or operations.

Failure to report a SEAH concern in accordance with this Policy may result in disciplinary, contractual or other appropriate action.

5.6 Retaliation

Catalpa personnel, associates and downstream partners must not retaliate against, victimise, intimidate, threaten, disadvantage or take adverse action against any person who raises a concern, makes a report, supports a victim-survivor, participates in an investigation, or otherwise acts in good faith under this Policy.

5.7 Cooperation with investigations

Catalpa personnel, associates and downstream partners must cooperate honestly and respectfully with any preliminary assessment, risk assessment, investigation, donor inquiry, legal process or other response process conducted under this Policy.

5.8 Consequences of breach

Failure to comply with this Policy, the Catalpa Code of Conduct, relevant contractual obligations or donor requirements may result in action including, but not limited to:

- informal or formal management action;
- mandatory training or supervision;
- written warning;
- removal from an activity or role;
- termination of employment or contract;
- termination or suspension of a partnership, subcontract, grant or supplier arrangement;
- reporting to a donor, regulator, professional body or law enforcement authority where required;
- referral to legal or statutory authorities where required.

6. Risk-based approach

Catalpa applies a risk-based approach to PSEAH. This means Catalpa will assess SEAH risks in its activities, operations and downstream partner arrangements and apply safeguarding measures that are proportionate to the level of risk, while recognising that SEAH can occur in any sector, country, workplace or community.

For DFAT business, Catalpa will apply DFAT's PSEAH Standards at the level required by the assessed risk. The five DFAT PSEAH Standards are:

1. PSEAH policy and procedures, including a Code of Conduct;
2. reporting mechanism and investigation procedures;
3. risk management processes;
4. PSEAH training;
5. recruitment and screening processes.

Catalpa recognises that most DFAT activities should be assessed as at least medium risk for SEAH, and that very few activities will be low risk. Activities in development, humanitarian and peacekeeping settings are high-risk settings and require the Comprehensive PSEAH Standards unless otherwise agreed with DFAT.

Catalpa will document SEAH risk assessments and mitigation actions for relevant activities and downstream partner arrangements. Risk assessments must be reviewed at least annually and revised where activities, partners, staffing, context, location, delivery modality, community engagement, digital platforms or risk settings change.

Where a downstream partner, particularly a small or locally based organisation, is not yet able to meet the Comprehensive PSEAH Standards in a high-risk setting, Catalpa will require the downstream partner to implement Essential Standards immediately and will document an action plan for progressing towards Comprehensive Standards within a reasonable timeframe. The action plan must include specific actions, responsibilities, timeframes and monitoring arrangements.

Catalpa will retain documented evidence of risk assessments, mitigation actions, partner due diligence, action plans and senior management visibility of SEAH risk management. Where residual safeguarding risks are high or extreme, Catalpa will ensure senior management and, where appropriate, the Board have visibility of those risks and the actions being taken to manage them.

7. Prevention

7.1 Standing risk management and mitigation

Catalpa has a number of standing strategies to address risk regarding sexual exploitation, abuse and harassment outlined below:

7.1.1 Risk identification and monitoring

One of the standing risk management and mitigation measures that Catalpa employs is risk identification and monitoring throughout the program cycle, and at an organisational level.

Catalpa will identify risks, and document relevant strategies to manage or mitigate risk regarding SEAH, through risk management plans which are undertaken at program level and organisational level. These risk management plans will be informed by DFAT's PSEAH "Risk Guidance Note".

Wherever possible, program level risk management plans are to be considered as part of the program design phase and are to be completed with downstream partners and any other relevant stakeholders as soon as possible, ideally before any contracting with back donors and /or downstream partners.

Program level risk management plans will be updated regularly through the life of the program, on a quarterly basis or more frequently as dictated by a changing operating context or other factor.

Any high or extreme residual risks from program level risk management plans – whether related to SEAH or other risks – or those risks that pose an organisational or reputational risk to Catalpa are escalated to senior leadership and Catalpa Board where appropriate so that they have oversight over agreed treatment plans and current controls to manage and mitigate risks.

Where risks apply to downstream partners, Catalpa will support these partners to mitigate and/or manage these risks. Given the nature of Catalpa’s work, Catalpa should always consider risks regarding online privacy of stakeholders and personnel involved in our work.

7.1.2 PSEAH in recruitment and human resource management

Catalpa is committed to responsible recruitment and screening processes when engaging new personnel that verify the integrity of the applicant. Anyone who poses an unacceptable risk to other personnel or vulnerable members of the community will not be permitted to work with Catalpa. Responsible recruitment includes:

- Job ads will include a statement of Catalpa’s commitment to prevention of sexual exploitation, abuse and harassment to deter any applications from candidates who do not share this commitment
- A requirement for an applicant to disclose at the time of applying for a role whether they are subject to current charges, previous convictions or disciplinary findings related to child safeguarding, SEAH, fraud, corruption, violence, terrorism or other serious misconduct;
- Personnel contracts will explicitly reference PSEAH and disciplinary measures including containing clauses authorising dismissal, suspension or transfer to other duties for violation of Code of Conduct including regarding PSEAH. Criminal behaviour will be immediately reported to the proper authorities. Contracts will specifically state the personnel who pose an unacceptable risk are able to be removed (suspended, transferred or terminated) without a criminal conviction
- Documented Criminal history checks undertaken prior to engagement, including checks for any country in which an applicant has lived for 12 months or more in the last 5 years¹ and their country of citizenship, which are updated regularly. In limited circumstances it may prove impossible to obtain a reliable criminal record check. A statutory declaration, or local legal equivalent, outlining efforts made to obtain a foreign police check, and disclosing any charges and spent convictions related to violence or abuse of a sexual nature may be accepted instead. Criminal history checks should be updated every 24 months or more recently if circumstances change.
- Every role will be assessed for safeguarding and SEAH risk, taking into account the nature of the role, operating context, level of contact with community members or program participants, access to resources or decision-making power, travel, supervision arrangements, digital/data access, and whether the role is connected to DFAT business. Additional safeguards will be applied where the role or activity presents heightened SEAH risk, including roles connected to high-risk DFAT business requiring the Comprehensive PSEAH Standards, such as:
 - behavioural-based interview questions
 - A minimum of two documented verbal referee checks for each applicant including a recent former line manager, asking about any integrity, professional conduct, safeguarding concerns and suitability to work with communities, program participants and their former colleagues.

In the event of a ‘change in circumstance’ (i.e. a change in country where the personnel is working, in the event of involvement in criminal activity or if disciplinary procedures and/or criminal or civil court proceedings are underway) then checks may also be re-done or additional checks required.

Supervision and performance appraisals will include adherence to the PSEAH policy.

Direct appointments, urgent appointments, short-term consultancies and sole trader arrangements must not bypass safeguarding screening. Where urgency requires a modified process, the reasons must be

¹ Or seven years in the case of World Bank-funded projects

documented and minimum safeguarding checks must be completed before the person commences work involving safeguarding risk.

Where a role or activity is connected to DFAT business and the SEAH risk is high, Catalpa will apply the Comprehensive PSEAH Standards, including targeted safeguarding messaging and questioning throughout recruitment and onboarding, and ongoing monitoring of personnel behaviour and adherence to PSEAH and safeguarding policies and processes.

Catalpa will retain evidence of completed recruitment and screening checks in accordance with privacy, data protection and records management requirements.

7.1.3 Training and awareness raising

Catalpa personnel will undergo mandatory Safeguarding Training as part of their orientation process/ Personnel involved in DFAT business, or in activities with SEAH risk, must receive PSEAH refresher training at least annually. Other personnel will receive refresher training at a frequency proportionate to their role and risk exposure, and at least every three years at a minimum. This training is aimed to build a workplace culture of respect and accountability to prevent SEAH from occurring and so all personnel understand their rights, obligations and responsibilities under this Policy.

Awareness of the PSEAH Policy will be part of onboarding any new personnel and associates as they will be required to read this Policy and confirm they have understood and agree to it including the Standards of Conduct in section 5. Further, all personnel and associates sign the Catalpa Code of Conduct and are expected to uphold all the behaviour expected of Catalpa employees and consultants.

All Catalpa stakeholders will be made aware of the disciplinary steps available in the event of non-compliance with the Policy as outlined in Annex One.

Training requirements will be proportionate to the person's role, level of safeguarding risk, management responsibilities and contact with stakeholders. Personnel who receive reports, manage complaints, conduct investigations, supervise high-risk activities, recruit personnel, manage downstream partners or collect images/stories/data from communities may require additional role-specific training.

Catalpa will maintain central records of training completion, including participant names, dates, training content, trainer or provider, and any refresher requirements.

7.1.4 Ensure respectful and non-exploitative communications

Catalpa recognises that SEAH and safeguarding risks can arise through communications, images, stories, video, social media, digital platforms, personal data and online interactions.

Catalpa personnel, associates and downstream partners must ensure that communications and digital practices are safe, respectful, dignified, consent-based and do not expose people to increased risk of SEAH, stigma, retaliation, identification, discrimination or harm.

Personnel, associates and downstream partners must not:

- take, use or share images, videos, stories or personal information in a way that is exploitative, sexualised, degrading, unsafe or misleading;
- share or threaten to share intimate images or video without consent;
- use work-related access, platforms, devices, data or relationships for sexual purposes;
- contact program participants or community stakeholders through personal digital channels for inappropriate, sexual, exploitative or non-work purposes;
- publish identifying information where this may create safety, privacy or safeguarding risks;
- use images or stories of victim-survivors or people affected by SEAH without specific, informed and safe consent.

Where Catalpa collects or uses images, stories, video or personal information, it must ensure:

- informed consent is obtained in a language and format the person understands;
- the person understands how the material may be used and how long it may be kept;
- consent can be refused or withdrawn without penalty;
- additional care is taken where the person is a victim-survivor, person with disability, child, crisis-affected person, displaced person, or participant dependent on services;
- file names, metadata, captions and storage practices do not create avoidable safeguarding risks;
- materials are stored securely and access is limited;
- consent evidence and permitted uses are recorded.

Image, story, video, social media and data risks must be considered in project and downstream partner safeguarding risk assessments where relevant.

There is detailed information about how to seek informed consent in the '[Procedures for collection, storage and use of stories, photos and video](#)' and it is important that all Catalpa personnel are familiar with these.

7.1.5 Ensure compliance of downstream partners

Before entering into a relevant downstream partner arrangement, Catalpa will undertake safeguarding due diligence proportionate to the nature of the arrangement, activity, context and SEAH risk.

Due diligence may include review of the downstream partner's:

- PSEAH policy, procedures and Code of Conduct;
- complaints and reporting mechanisms;
- investigation procedures;
- recruitment and screening processes;
- PSEAH training arrangements;
- SEAH risk assessment and mitigation processes;
- previous safeguarding incidents, where safe and appropriate to assess;
- capacity to meet donor, legal and contractual safeguarding obligations.

Catalpa will include PSEAH obligations in relevant contracts, grants, subcontracts, supplier agreements, letters of engagement or MOUs. These obligations may include requirements to:

- comply with this Policy or maintain equivalent PSEAH standards approved by Catalpa;
- comply with Catalpa's Code of Conduct or an equivalent Code of Conduct;
- prohibit SEAH and retaliation;
- prohibit transactional sex in high-risk settings;
- manage fraternisation risks where relevant;
- undertake SEAH risk assessments and implement mitigation actions;
- ensure personnel complete appropriate PSEAH training;
- conduct appropriate recruitment and screening checks;
- provide safe, accessible and confidential reporting mechanisms;
- immediately report suspected, alleged or known SEAH concerns to Catalpa;
- cooperate with Catalpa, donor or external investigations;
- comply with safe image, story, social media, privacy and data requirements;
- maintain evidence of compliance and provide it to Catalpa on request.

Where a downstream partner does not yet meet required PSEAH standards, Catalpa may require the partner to adopt Catalpa's Policy and Code of Conduct or equivalent approved standards while strengthening its own systems.

For downstream partners in high-risk settings that cannot yet meet the Comprehensive PSEAH Standards, Catalpa will require the partner to implement Essential Standards immediately and agree to a documented action plan to progress towards Comprehensive Standards within a reasonable timeframe.

The action plan must include:

- specific actions required;
- the standard or gap being addressed;
- responsible person or organisation;
- timeframe;
- support or capacity-building to be provided;
- monitoring arrangements;
- evidence required to demonstrate progress.

Catalpa will monitor progress against action plans and retain evidence of implementation.

Catalpa may provide or facilitate support to downstream partners to meet PSEAH obligations. Support may include orientation, training, template policies, Code of Conduct guidance, reporting pathway guidance, recruitment and screening guidance, risk assessment support, communications materials and investigation referral guidance.

Downstream partners must immediately report to Catalpa any suspected, alleged or known SEAH concern connected to Catalpa's work, personnel, associates, downstream partners, activities or operations.

Where the concern relates to DFAT business, Catalpa must report the matter to DFAT within 24 hours, even if full details are not yet available.

Catalpa will maintain evidence of downstream partner safeguarding due diligence and monitoring. This may include:

- partner safeguarding assessments;
- signed policies and Codes of Conduct;
- contract clauses;
- training evidence;
- recruitment and screening evidence;
- SEAH risk assessments;
- action plans;
- community reporting materials;
- incident reports;
- investigation records;
- monitoring updates;
- evidence of senior management review where required.
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7.1.6 Ensuring that program design and implementation considers PSEAH and power imbalances more broadly

As above, risk assessments will be undertaken for all programs and projects to identify and address the risk of PSEAH.

Programs and projects should be designed carefully to avoid perpetuating power imbalances between project staff and project participants. Where appropriate, project design should avoid the transfer of financial, material or occupational benefits or other situations that may put project staff in a position of power, whether perceived or actual. No individual staff member should be in a position to determine who should benefit from the project. Where transfer of benefits is unavoidable and opportunities to participate in the project are limited, a clear and transparent selection criteria must be established and communicated.

7.2 Additional measures identified on a program-by-program basis as needed

In addition to the standing risk mitigation and management measures described under section 7.1, there may be occasions where the risk identification process outlined in section 7.1.1 identifies additional risks specific to SEAH in a particular activity and/or downstream partner(s) involved in a program of work.

The risk identification process at programmatic activity level should consider each program's compliance

with regulations relating to tax, migration, and labour hire and ethical treatment of staff, including domestic staff and staff of service providers and digital security to ensure privacy of personnel, program participants and/or stakeholders.

As part of Catalpa's recognition and commitment to ensuring downstream partner due diligence and management of related risk, downstream partners who do not have their own PSEAH policy, procedures and Code of Conduct that meet applicable DFAT Essential or Comprehensive PSEAH Standards and any other relevant donor or legal requirements will be contractually required to abide by this Policy and Catalpa's Code of Conduct, or equivalent standards approved by Catalpa.

Risk assessments may identify higher risks within some downstream partners and/or operating contexts than others, which will require additional risk management and mitigation strategies. Examples are provided at Annex Two of this Policy.

8. Reporting to Catalpa

8.1 What needs to be reported

Catalpa personnel, associates and downstream partners must immediately report any suspected, alleged or known SEAH concern connected to Catalpa's work, personnel, associates, downstream partners, activities or operations.

This includes:

- witnessing SEAH or suspected SEAH;
- receiving information from another person about suspected, alleged or known SEAH;
- concerns about grooming, coercion, transactional sex, sexual abuse, sexual harassment or sexual misconduct;
- online or digital SEAH;
- retaliation against a person who has raised a concern;
- breach of this Policy, the Code of Conduct or PSEAH-related contractual obligations.

Where an adult victim-survivor discloses SEAH, the person receiving the disclosure must respond in a victim-survivor-centred and trauma-informed way. This includes listening, prioritising immediate safety, explaining available support and reporting options, and seeking the victim-survivor's informed consent before sharing identifying information, unless there is a legal, child safeguarding, imminent safety, donor, contractual or other mandatory reporting obligation.

Reporting is not mandatory for victim-survivors. Victim-survivors may choose whether to report to Catalpa, DFAT, law enforcement, a community mechanism or another reporting pathway. Catalpa will encourage reporting so that support and care can be provided, but will not pressure or force a victim-survivor to report unless Catalpa is required to act due to legal, child safeguarding, safety, donor or other mandatory obligations.

Further, if Catalpa is requested not to take any further action by the person making the allegation, for instance out of fear for the security of the victim / survivor, the Catalpa must liaise with the victim / survivor to establish and document their wishes on the matter.

A person does not need proof before making a report. Concerns should be reported even where the information is incomplete or uncertain.

8.2 How to report to Catalpa

Concerns or reports can be provided via email to Catalpa's Safeguarding Focal Point on safeguarding@catalpa.io or by contacting via Stopline, a third party platform which allows anonymous reporting and provides support to people trying to report including translation / interpretation services if needed. You can reach Stopline on:

Telephone: 1300 30 45 50 (Australia Only)

Email: makeareport@stopline.com.au

On-line: <https://catalpa.stoplinereport.com>

Mail: Catalpa International, c/o Stopline, PO Box 403, Diamond Creek, VIC 3089

By QR code:



As per the Whistleblowing Policy, if an eligible whistleblower (someone connected to Catalpa) reports a 'disclosable matter' to a Catalpa 'protection officer' (including the People and Culture Manager) then they will be protected under the Whistleblowing Policy - please see the Whistleblowing Policy for more information including for definitions.

8.3 Confidentiality of reports and investigations

Information regarding a report of SEAH and a subsequent investigation will be treated confidentially to safeguard the survivor / victim and any complainant who raised the allegation, and also to provide due process for the respondent (alleged perpetrator). Catalpa will do this by providing information about the issue only on a 'needs to know' basis within the investigation team, redacting identifying details where possible, using qualified investigators who are aware of their obligations to keep confidentiality and storing information correctly so that it can not be seen or accessed by a wider group of staff or stakeholders.

If the disclosure was made under the Catalpa Whistleblowing Policy, all requirements of that Policy will be followed including ensuring no disclosure of the identity of the Whistleblower.

8.4 Reporting to DFAT or other donor

Where a suspected, alleged or known SEAH incident relates to DFAT business, Catalpa must report the matter to DFAT within 24 hours, and comply with the following:

- Reports to DFAT should be made to seah.reports@dfat.gov.au, preferably using the DFAT Incident Notification Form.
- Catalpa must also report investigation outcomes to DFAT where required.

- As noted above, where there are fears for the safety of a victim-survivor, or where a victim-survivor has not consented to information being reported to DFAT, Catalpa will seek advice from DFAT at seah.reports@dfat.gov.au and will carefully manage the report in a way that prioritises safety, privacy and legal obligations.
- Catalpa may have obligations to report certain matters to Australian or local law enforcement, statutory authorities, regulators or donors. Catalpa will consider these obligations on a case-by-case basis, taking into account safety, victim-survivor wishes, legal obligations, child safeguarding obligations, donor requirements and the risk of further harm.

If the suspected, alleged or known SEAH incident relates to another donor's business, reporting should follow the standards and requirements set up by that donor's contract with Catalpa.

Where there are fears for the safety of a victim-survivor, or where a victim-survivor has not consented to information being reported to DFAT, Catalpa will seek advice from DFAT at seah.reports@dfat.gov.au and will carefully manage the report in a way that prioritises safety, privacy and legal obligations.

Where a child is involved, the Catalpa Child Safeguarding Policy and relevant legal reporting requirements must be applied.

9. Responding to, and/or Investigating, SEAH

9.1 Determining whether or not an investigation is warranted

All SEAH reports received by Catalpa must be referred to the Safeguarding Focal Point or their qualified delegate as soon as possible.

The Safeguarding Focal Point or qualified delegate will conduct a preliminary assessment to determine:

- whether the matter falls within the scope of this Policy;
- whether a child is involved and the Child Safeguarding Policy must also be applied;
- whether there is any immediate safety risk;
- whether urgent support or referral is required;
- whether the matter may involve criminal conduct;
- whether donor reporting is required, including DFAT reporting within 24 hours where the matter relates to DFAT business;
- whether law enforcement, statutory or regulatory reporting may be required;
- whether interim risk management action is needed;
- whether an investigation is required;
- whether the matter should be managed internally or referred to an external investigator.

Interim risk management action may include temporary changes to reporting lines, work duties, travel, access to communities, access to systems, contact with the victim-survivor or witnesses, or suspension from duties where appropriate and lawful. Interim action is not a finding of wrongdoing and must be managed with procedural fairness.

The Safeguarding Focal Point or qualified delegate will use the information collected through the preliminary assessment to recommend whether an investigation is required.

In making this recommendation, they should consider:

- whether the matter falls within the scope of this Policy;
- the nature and seriousness of the allegation;

- whether a victim-survivor may have been sexually exploited, abused or harassed;
- any immediate or ongoing risk to the victim-survivor, reporter, witnesses or others;
- whether the allegation may involve criminal conduct;
- whether the allegation may involve gross misconduct;
- whether the allegation relates to Catalpa personnel, associates, downstream partner personnel or another person connected to Catalpa's work;
- whether the matter relates to DFAT business or another donor-funded activity;
- whether an internal or external investigation is appropriate;
- the views, safety and support needs of the victim-survivor, where these can be safely and appropriately established;
- any conflict of interest or perceived conflict of interest.

Where the report may relate to DFAT business, the Safeguarding Focal Point or their delegate must ensure DFAT is notified within 24 hours, even if all details are not yet available.

9.2 Determining whether a complaint warrants an Internal and external investigation

Catalpa will determine whether an investigation should be conducted internally or externally.

Complaints that should usually be referred to an external investigator with experience in sensitive investigations include:

- allegations of sexual abuse, sexual exploitation or serious sexual harassment
- allegations involving possible criminal conduct
- allegations involving gross misconduct
- allegations involving a member of the Senior Leadership Team, Board, Safeguarding Focal Point or investigation decision-making group
- allegations involving significant conflict of interest or perceived conflict of interest
- allegations involving significant safety, security, legal, reputational or donor risk, and
- allegations where the complexity, sensitivity or seriousness of the matter requires external expertise.

Complaints that may be investigated internally include:

- allegations that appear less serious and do not involve sexual abuse, sexual exploitation, criminal conduct or gross misconduct
- process failures where no person appears to have been harmed
- breaches of policy that can be fairly reviewed internally, and
- matters where an internal investigation is sufficient to establish facts and identify corrective action.

An example of the type of incident that could be investigated internally would be where the incorrect safeguarding template was used to obtain informed consent for photographs; or where a staff member makes a 'joke' which is insensitive or inappropriate (i.e. sexist / racist).

An internal investigation may be referred externally at any time if new information indicates a higher level of seriousness, conflict, risk or complexity.

9.3 Investigation principles and Procedural Fairness

Catalpa will ensure that SEAH investigations are conducted in a manner that is safe, confidential, timely, fair, trauma-informed and victim-survivor-centred. Investigations will be guided by the following principles:

- safety and wellbeing of the victim-survivor, reporter, witnesses and others
- confidentiality and privacy
- procedural fairness for the subject of the allegation
- cultural safety and accessibility
- avoidance of retaliation
- evidence-based decision-making
- impartiality and conflict-of-interest management
- compliance with legal, donor and contractual obligations, and
- documentation and secure records management.

Catalpa will ensure procedural fairness for the subject of an investigation. This includes, where appropriate and safe:

- informing the subject of the general nature of the allegations although this may not be immediately upon receipt of the allegation or complaint to enable time for evidence to be secured
- giving the subject a reasonable opportunity to respond
- allowing the subject to have a support person or interpreter where appropriate
- making decisions based on relevant evidence
- avoiding prejudgment
- managing confidentiality and privacy, and
- ensuring investigation decision-makers are impartial and free from conflict of interest.

Procedural fairness does not require Catalpa to disclose information where doing so would create safety risks, breach confidentiality, compromise an investigation, expose a victim-survivor or reporter, or breach legal or donor obligations.

9.4 Guidelines for Internal and external investigations

Catalpa's detailed procedures for conducting and overseeing investigations are contained separately in the Safeguarding Action Group Terms of Reference and the Confidential Reporting and Investigation Committee Terms of Reference. Those procedures must be read and applied consistently with this Policy.

For each investigation, Catalpa will identify an investigation focal point or Investigation Officer responsible for coordinating the investigation process. This may include liaising with the Safeguarding Focal Point, relevant members of the investigation decision-making group, an external investigator where one is appointed, the complainant and/or victim-survivor where safe and appropriate, and any donor or managing contractor where reporting obligations apply.

The investigation focal point will ensure that key decisions, actions, referrals, donor notifications, investigation status and outcomes are recorded securely in the Stopline Complaints Log or other approved confidential case management system.

Investigations must be conducted by appropriately skilled and experienced personnel or external investigators, depending on the seriousness, complexity, sensitivity and risk of the allegation. Allegations involving sexual exploitation, sexual abuse, serious sexual harassment, possible criminal conduct, gross misconduct, significant conflict of interest, or significant safety, security, legal, reputational or donor risk should usually be referred to an external investigator with experience in sensitive investigations.

Catalpa may take interim risk management action during an investigation, including changes to duties, supervision, reporting lines, access to systems, travel, community contact or other arrangements. Interim action is not a finding of wrongdoing and must be managed with procedural fairness.

Where a matter is reportable to DFAT or another donor, Catalpa will meet the applicable reporting requirements, including reporting investigation outcomes where required.

9.5 Outcome of investigations

At the conclusion of an investigation, Catalpa will determine appropriate findings and actions based on the evidence available.

Possible outcomes may include:

- no further action where the allegation is not substantiated;
- risk mitigation action even where a finding cannot be made;
- apology, training, supervision, coaching or management action;
- disciplinary action up to and including termination of employment;
- suspension or termination of a contract, subcontract, grant, partnership or supplier arrangement;
- referral to law enforcement, statutory authorities, regulators or donors where required;
- review of policies, procedures, training, risk assessments or controls;
- community or stakeholder communication where safe and appropriate;
- additional support or referral for the victim-survivor or others affected.

Where an investigation relates to DFAT business, Catalpa must report investigation outcomes to DFAT where required.

In cases of sexual harassment, Catalpa will be guided by the Respect at Work guidance regarding outcomes and consequences here

<https://www.respectatwork.gov.au/organisation/response/reporting/outcomes-and-consequences>

Even in cases of anonymous complaints or where an investigation has not proceeded, Catalpa commits to ensuring steps are taken to promote learning and improvement which could include:

- Undertaking a general campaign about appropriate workplace behaviours, with a focus on PSEAH

- Providing a reminder to all staff of Catalpa's PSEAH Policy, reporting and resolution procedure and supports as well as encouraging workers to raise a concern
- Implementing new procedures or systems of work that reduce the possibility or opportunity for further misconduct to occur
- Further, if there was insufficient information for an investigation to proceed but a respondent(s) or department misconduct was identified in the allegation, Catalpa will consider:
 - Initiation of a 360 review, health check or similar in an area where anonymous reports suggest there may be issues however no formal complaints have been received
 - Where there are several similar complaints from the same department or area, extra targeted training may be utilised
 - In the case of receiving numerous anonymous reports against the same person, Catalpa could instigate an independent investigation observing all necessary standards and procedural fairness
 - To obtain further information, speaking with other members of the alleged respondent's team to identify whether there is a cultural issue or pattern of conduct, or the roll out of broader pulse surveys could be used to further test concerns. A pulse survey is usually a simple short survey to gauge worker insights on a particular issue
 - Monitoring the alleged respondent's behaviour and intervening if new issues arise, including possible victimisation.

10. Communicating the policy

This PSEAH Policy will be published on Catalpa's website.

All Catalpa personnel, associates and downstream partners will receive orientation on the PSEAH Policy, and training will be provided for new staff and on a refresher basis in accordance with section 7.1.3.

Where possible, communications material regarding complaints handling and processes will be developed and translated into the local languages of the communities in which we work.

11. Policy Monitoring and Review

Catalpa will monitor implementation of this Policy and retain evidence of compliance.

Evidence may include:

- policy approval and review records;
- signed Code of Conduct acknowledgements;
- PSEAH training records;
- recruitment and screening records;
- SEAH risk assessments and mitigation plans;
- downstream partner due diligence and action plans;
- partner contract clauses and compliance records;

- community reporting materials;
- records of reports, preliminary assessments, investigations and outcomes;
- DFAT and donor reporting records;
- records showing senior management and Board visibility of SEAH risks where required;
- records of policy, procedure, training or control improvements made following incidents or reviews.

Catalpa will review PSEAH risks, implementation and evidence at least annually, and earlier where there is a significant incident, donor requirement, legal change, operating context change, organisational change or identified gap.

Catalpa may take corrective action where this Policy is not being implemented effectively. Corrective action may include additional training, policy revision, partner action plans, contract action, strengthened reporting mechanisms, risk mitigation, disciplinary action or referral to external authorities.

Annex One: Definitions

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. This includes, for example, coercing individuals into engaging in sexual activities in exchange for aid, services, employment opportunities or other benefits.

Sexual abuse

The actual or threatened physical intrusion of a sexual nature, whether by force or under unequal or coercive conditions. This includes all forms of sexual assault, rape, molestation and other forms of non-consensual sexual activity.

Sexual harassment

Any unwelcome conduct of a sexual nature that occurs in circumstances in which a reasonable person, aware of those circumstances, would anticipate that the person being harassed might feel offended, humiliated or intimidated.

Sexual harassment can be overt, covert or subtle. It can be repeated or a one-off incident. Sexual harassment can happen in person, over the phone or online, including via social media. Examples include, but are not limited to, unwelcome physical touching, jokes, comments or messages of a sexual nature, suggestive looks, staring or leering, display or circulation of pornographic material, and sharing or threatening to share intimate images or video without consent.

SEAH

Sexual exploitation, abuse and harassment.

PSEAH

Protection from Sexual Exploitation, Abuse and Harassment. In this Policy, PSEAH includes prevention, risk mitigation, reporting, response, support, investigation and accountability.

Victim-survivor

A person who is, or has been, sexually exploited, abused or harassed. The term acknowledges both the harm suffered and the resilience and agency of the person. It emphasises a supportive, rights-based approach to addressing their needs and upholding their dignity throughout the reporting and response process.

Safeguarding

Measures taken to avoid or minimise the potential negative impacts of Catalpa's operations, business activities and development programs on the people, communities and environments in which Catalpa works. In the context of this Policy, safeguarding includes promoting safe and respectful workplaces and minimising the risk of SEAH in Catalpa's operations and programs.

Transactional sex

The exchange of money, employment, goods, services, assistance, opportunities, favourable treatment or other advantages for sex or sexual acts.

Fraternalisation

Any intimate, sexual, romantic or close social relationship occurring in the course of conducting Catalpa business that may involve, or appear to involve, partiality, preferential treatment, conflict of interest, improper use of rank or position, or exploitation of a power imbalance.

Downstream partner

Any individual or organisation engaged by Catalpa to support, deliver or contribute to Catalpa's work, including partner organisations, subcontractors, sub-grantees, suppliers, consultants, sole traders and personnel of those organisations.

Catalpa personnel

All employees, fixed-term personnel, consultants, contractors, casual personnel, volunteers, interns and directly contracted service providers engaged by Catalpa.

Associates

Board Directors, visitors to Catalpa programs, media, donors, supporters, evaluators, technical advisers and any other people acting in a governance, advisory, representative or visiting capacity for Catalpa.

DFAT business

Any funded or unfunded activity, agreement, program, contract, grant, partnership, service, event, operation or engagement connected to DFAT.

Reporter

A person who reports a suspected, alleged or known SEAH concern. The reporter may be the victim-survivor or another person.

Subject of allegation / respondent

A person whose alleged conduct is the subject of a SEAH report or investigation.

Retaliation

Any adverse action, intimidation, threat, victimisation, discrimination, disadvantage, reprisal or harm against a person because they raised a concern, made a report, supported a victim-survivor, participated in an investigation, or acted in good faith under this Policy.

Annex Two. Examples of additional PSEAH risks that may be identified through the course of risk assessments for specific program activities and/or downstream partners, and examples of risk mitigation or management strategies to address these

The examples below are illustrative only. In a full risk assessment, the likelihood and consequence of different risks should also be considered.

Example risk		Example mitigation or management strategy	
Risk description	Consequence	Current control	Future treatment plan
Recipients of Catalpa's services are not in areas where there is availability or mechanisms for reporting PSEA incidents	Harm to vulnerable adults due to lack of reporting of previous PSEAH	Catalpa will work with communities to ensure there are multiple modalities for providing feedback and complaints	
The specific needs of men, women, boys and girls are not identified in preliminary research because there was not a gender balance in the staff doing the research	Program outcomes cannot be met Harm to program participants and/or stakeholders from excluded gender groups Reputational risk to Catalpa	Catalpa will work to ensure a gender balance to include more female staff for those conducting human-centred design	Gender training
Data of vulnerable adults is hacked and shared publicly	Harm to vulnerable adults	Digital security protocols are followed	