

## Submission of Family Planning NSW

# DFAT Preventing Sexual Abuse, Exploitation and Harassment (PSEAH) Policy

February 2019

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Thank you for the opportunity to comment on the Department of Foreign Affairs and Trade (DFAT) discussion paper on preventing sexual exploitation, abuse and harassment (SEAH) policy. This is a critical issue for organisations working in international development, and we welcome DFAT's leadership.

### About us

Family Planning NSW (FPNSW) is a DFAT accredited provider of sexual and reproductive health and rights, contraception, gender, disability and cervical cancer programming in the Pacific. Domestically, we have over 90 years of experience supporting communities by delivering services, educating health professionals, promoting healthy lives, and conducting research. We operate overseas as Family Planning Australia.

As a provider of programming overseas, we are acutely aware of the risks for sexual exploitation, abuse and harassment, and for that reason have a rigorous process to ensure that our programmes operate on a no harm basis. This includes child safeguarding policies, staff training on preventing sexual exploitation, abuse and harassment, and a rigorous monitoring and evaluation process for our projects. As a member of Australian Council for International Development (ACFID), we also follow the new commitments in the Code of Conduct to have a strong policy position on PSEAH.

Family Planning NSW has also provided input into the ACFID submission.

### Key Issues

Family Planning NSW supports an industry approach to protecting staff, partners and beneficiaries from sexual exploitation, abuse and harassment. We agree that in particular, women, young women and girls are more vulnerable to SEAH, but that there remains a risk for all sectors in a community.

With regards to the policy's alignment with international and Australian standards and norms, we believe these should all be referenced and where an organisation is adhering to them, the policy should reflect them, but not replace them.

Likewise, we support harmonised definitions for SEAH where possible, but this should not come at the expense of definitions that have the potential to create harm or that are unclear. With respect to the options presented in the paper, we support the UN Secretary-General's Bulletin definition of sexual exploitation, the Care International definition of sexual abuse, and the Australian definition of sexual harassment. In all these cases, we find the language in the definitions to be the most comprehensive and clear.

We support a PSEAH policy to be in place for DFAT funded projects, but would ask that DFAT not require their policy to be adopted more broadly within organisations receiving DFAT funding. In the case of Family Planning NSW, which is first and foremost a provider of clinical, education and research within Australia (our role in international development being more recent) we have multiple income streams operating over multiple Australian jurisdictions that would prove difficult to align to the same policy. Only 4% of our total income

relates to our international work. Family Planning NSW already complies with obligations in relation to different work streams, including meeting:

- the National Safety and Quality Health Service Standards (applies to staff in our clinical services pillar)
- compliance obligations in relation to our status as a National Disability Insurance Scheme provider (applies to NDIS participants)
- legal and ethical requirements contained within the *Children and Young Person (Care and Protection) Act 1998*
- clinical policies including on child protection, domestic violence and reproductive coercion and sexual assault (applies to disclosures made by patients to staff)
- internal policies including our Sexual Harassment Policy, which we will update in 2019 to align with ACFID commitments
- the requirements of being an Australian Registered Training Organisation (RTO)
- the requirements of the National Health and Medical Research Foundation for ethical research practice.

We ask that DFAT recognise our multiple obligations, the compliance responsibilities already in place in relation to these responsibilities and that overlapping policies could put vulnerable people at risk (for instance, if an incident involving a young NDIS participant were also reported to DFAT it could unnecessarily infringe that young person's privacy without furthering DFAT's goals).

That said, we would support a policy that DFAT funded organisations must have comprehensive policies to prevent SEAH, and only require the DFAT policy for those projects or sections of an organisation that receive DFAT funding.

A zero tolerance approach to SEAH is critical, and for this reason we agree that the policy should be clear on what the expectations are in response to an allegation. We recognise that this will likely increase reportable incidents, and so long as DFAT adopts a transparent and open approach to reporting, this should not have a negative effect on programming. We would also support DFAT requiring all partners, regardless of risk or size, to have to comply with the policy equally.

On the issue of gender and equal women's participation, we would recommend that the PSEAH policy be read in conjunction with DFAT's broader approaches to gender equality, including the need for strong leadership within organisations and partners. This would create policy coherence, and emphasise already existing policies on these issues.

We support DFAT's reporting regime as proposed in the discussion paper. We urge DFAT to utilise the learning from implementation of child protection and fraud policies with partners downstream, including:

- providing the guidance materials, tools and other resources required for successful implementation and cultural change (we currently provide the technical support to partners to develop these policies despite not receiving sufficient funding to do so)
- resourcing coordination efforts with multiple funding bodies (for example a single Family Planning project could be funded by International Planned Parenthood Federation, UNFPA and the NSW Ministry of Health).

Additionally, in-country support from posts may be required in dealing with government partners to ensure that this policy is appropriately adopted and to work through issues encountered in investigation and reporting.

Finally, it would be useful for DFAT to better understand how existing programmes already support the PSEAH agenda. For example, the work we do on promoting comprehensive sexuality education is directly related to providing vulnerable populations with the tools and information to understand what inappropriate behaviour is, and how to mitigate and report it. This approach would ensure that the PSEAH policy is practically linked to on -the -ground development activities.

### **Conclusion**

Family Planning NSW supports DFAT taking a proactive approach to preventing sexual exploitation, abuse and harassment. We support this being integrated formally into our work in International Development. However, given our multiple Australian service streams, reporting to DFAT on incidents not related to our international development work should not be mandatory as other reporting obligations are already in place and would cause both duplication of work and potential loss of privacy to Australian clients. We remain available to discuss our views or provide further input into the development of this policy.