

Annual Safeguarding Report

2025

Reporting Period: 1 January – 31 December 2025

Prepared for: Health Equity Matters Audit & Risk Committee + Board

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Purpose of this report

This report provides an annual summary of safeguarding for 2025 across Health Equity Matters. It covers governance, policy and systems, training and capacity building, safeguarding-focused initiatives, and incident management. It supports Board oversight of safeguarding risk and compliance and reflects the organisation's commitment to safe, ethical, and accountable programming.

Safeguarding Framework & Governance

Scope & Standards. The Safeguarding Policy applies to all Board members, staff, volunteers, consultants, and implementing partners. It is reinforced through mandatory induction and annual refresher training. All personnel and partners acknowledge the Safeguarding Code of Conduct, which sets clear behavioural standards and professional boundaries, including requirements for online engagement and the use of images and personal stories.

Child safeguarding & PSEAH. While Health Equity Matters does not typically engage directly with children, child safeguarding is addressed through risk-based assessments, recruitment screening, and clear protocols for any activity that may involve contact with children or young people via partners. PSEAH considerations are embedded in program design and delivery, given work with vulnerable and marginalized adults who may face heightened safeguarding risks.

Partnerships. Safeguarding is integrated into partner management through due diligence, contractual obligations, and tailored capacity strengthening—particularly for lower-capacity partners. Program-level safeguarding risk assessments inform design, monitoring, and mitigation, ensuring controls are proportionate to context and risk.

Reporting & response. All safeguarding concerns must be reported immediately via Stopleveline, the organisation's independent whistleblower and complaints service, with anonymity available. Reports are assessed by Safeguarding Focal Points, escalated to the CEO where required, and externally reported in line with mandatory requirements (including DFAT notification within 24 hours where applicable). Survivor safety, confidentiality, and access to appropriate support are prioritised.

Governance & oversight. The Board oversees safeguarding, with specific assurance via the Audit & Risk Committee (ARC). The ARC reviews safeguarding risks, incidents, and controls as a standing item, including oversight of the Complaints and Incidents Registers and the Enterprise Risk Register. Safeguarding Focal Points promote compliance, coordinate training, manage incident assessments, and advise management; regular

internal meetings support issue review and continuous improvement. High-risk or substantiated incidents are escalated to the CEO and, where appropriate, to the President and Board.

Standards alignment. The framework aligns with DFAT Child Protection and PSEAH policies, IASC Minimum Standards, and relevant Australian regulatory requirements.

Policy Development & System Strengthening in 2025

Key policy/tools updated or developed

- **Safeguarding Policy** – Comprehensive review in H2 2025 to align with updated DFAT requirements and ensure fitness-for-purpose for expanded international programming.
- **Online Safeguarding Training** – Reviewed and updated in H2 2025 to reflect policy and practice updates.
- **Stopline Flyers** – Developed for Australia-based and overseas audiences to improve visibility and access to reporting.
- **Safeguarding Country Mapping (x5)** – Developed for current international program countries.

System improvements

- **Independent reporting:** Formal engagement of Stopline as the primary, independent safeguarding reporting and whistleblowing mechanism, ensuring confidential, externally managed, anonymous options; strengthened logging, triage, and donor reporting (incl. DFAT timeframes).
- **Partner agreements:** Updated MOUs and sub-granting templates to explicitly embed safeguarding obligations (child safeguarding and PSEAH), clarify reporting and risk management responsibilities, and reinforce cooperation in incident response; tiered risk-based expectations for lower-capacity partners.
- **Focal Point role:** Reviewed/clarified Terms of Reference; strengthened responsibilities for incident coordination, training oversight, and continuous improvement; regularised focal point meetings for risk/incident review and learning.
- **Tools & registers:** Updated guidance, risk assessment tools, reporting pathways, training requirements, and supporting registers to ensure currency, practicality, and alignment with international standards.

Safeguarding Training and Capacity Building in 2025

Summary of safeguarding training delivered during the reporting period. Includes formal training for staff and focal points, as well as any informal refreshers or update sessions e.g in All Staff meeting

Audience	Training Type	Delivery Mode	Numbers Trained
Staff (initial training)	Safeguarding Foundations	Online module	9
Staff (refresher training)	Safeguarding Foundations	Online module	38
Consultants	Safeguarding Foundations	Online module	2
International partner staff	Safeguarding Foundations	Online module	22
Staff	Updates provided during staff meetings	Online – live	19 attendees on 24 September 2025

Safeguarding Focal Points	Training / workshop session (externally delivered) to support focal point role & responsibilities	Online – live	2
Safeguarding Focal Points + other senior staff	Complaints management training (externally delivered) for those involved in managing complaints	Online - live	3

Partner and In-Country Capacity Building

PNG (KPAC PNG): Delivered safeguarding training for staff/Board; co-developed a DFAT-aligned organisational Safeguarding Policy and systems; Board endorsement achieved. Provided support to manage an early-2025 safeguarding issue.

Fiji (PSGDN): Provided technical support to review and strengthen PSGDN’s Safeguarding Policy; delivered updated training for staff.

Fiji (new integrated community-led program): Embedded safeguarding in new MOUs (Codes of Conduct, reporting obligations). While compliance/enforcement for sub-grants sits with PSGDN, Health Equity Matters provided assurance and support. Organisational Capacity Assessments for four new Fijian partners (late 2025) included structured safeguarding reviews informing tailored development support.

SKPA-2 portfolio: Published Safeguarding Summary Brief (Feb 2025) consolidating safeguarding integration, roles, and tools; delivered a dedicated safeguarding session at the SKPA-2 Portfolio Workshop (Mar 2025). Published CLM Learning Brief on Serious Incident Management & Response (Jan 2025), embedding safeguarding in serious incident processes across Bhutan, Mongolia, and Sri Lanka. Mandated HOLA safeguarding training for Health Equity Matters staff and SRs to establish a shared baseline on SEAH and reporting.

International Partner Safeguarding Policy development

KPAC PNG (PNG): Developed and fully endorsed DFAT-compliant Safeguarding Policy.

PSGDN (Fiji): Reviewed and updated existing policy to donor-compliant standard.

Malaysia AIDS Council / Malaysia AIDS Foundation (Malaysia): Developed and endorsed comprehensive safeguarding policy suites (PSEAH and Child Safeguarding), Codes of Conduct, and survivor-centred complaints procedures.

Youth for Health Centre (Mongolia): Supported first overarching Safeguarding Policy, Code of Conduct, complaints handling, and Focal Point designation.

Family Planning Association (Sri Lanka): Developed integrated Safeguarding Policy, Code of Conduct, and Complaints Procedure; strengthened survivor-centred response and legal alignment.

Save the Children (Bhutan): Targeted TA to strengthen visibility of complaints mechanisms, partner arrangements, and internal accountability.

Safeguarding Incidents and Case Management in 2025

De-identified summary of safeguarding incidents reported during the year

Category	Number of incidents
Child Safeguarding	0

Bullying, harassment or misconduct	0
Sexual exploitation, abuse or harassment	2
Other safeguarding concerns	0
Total	0

Management Response

Both reported incidents involved partner/sub-recipient organisations and were escalated promptly via established channels. Management followed organisational policy and contractual obligations using a survivor-centred approach. Actions included risk mitigation (e.g., removal from program activities where required), coordination with partner processes, and referral to appropriate services based on survivor consent and context. Where survivors chose not to proceed, cases were closed consistent with best practice. Learnings informed clearer escalation pathways, reinforced partner roles and responsibilities, heightened attention to HR/performance management, and targeted training/guidance updates.

Risk trends & emerging issues

Partner capacity constraints: Lower-capacity, community-led organisations may have gaps in HR, supervision, and performance management that undermine safeguarding in practice; training must be complemented by stronger systems.

Higher-risk delivery contexts: Mobile outreach, community-led monitoring, and multi-partner delivery environments carry elevated risks due to power imbalances, stigma, and limited trusted reporting pathways.

Reporting channels: Concerns raised indirectly (e.g., via consultants/partners) highlight the need to continually reinforce clear escalation pathways across all implementing arrangements.

Contextual factors: Restrictive legal environments, fear of retaliation, HIV-related stigma, and low trust in authorities can limit survivor engagement and investigative options; requires careful balancing of duty-of-care and survivor autonomy.

Governance & assurance: Trends underscore the importance of robust partner accountability, proactive risk management, and ongoing analysis of incident/complaints data to inform improvements.

Priorities for 2026

1. **Endorse & implement updated Safeguarding Policy and Code of Conduct**, including tools/templates, refreshed guidance, and consistent rollout across staff, Board, partners, and SRs.
2. **Strengthen training & capability**, with targeted refreshers for staff/Board/Focal Points and tailored partner training linking safeguarding to supervision, performance management, and leadership accountability.
3. **Enhance systems & oversight**, including operation of Safeguarding Focal Points, regular focal point meetings, and use of safeguarding registers for trend analysis and continuous improvement.
4. **Targeted partner support**, prioritising lower-capacity, higher-risk partners to strengthen HR systems, complaints handling, and internal accountability.
5. **Board/ARC assurance**, through regular safeguarding reporting on policy implementation, partner compliance, and emerging risks to support strategic oversight.

Glossary of Terms

Term	Definition
Audit & Risk Committee (ARC)	A standing committee of the Board responsible for oversight of organisational risk management, safeguarding, compliance, and assurance processes.
Child Safeguarding	Measures taken to prevent harm to children, including abuse, exploitation, and neglect, and to respond appropriately if concerns arise.
Code of Conduct	A set of mandatory behavioural standards outlining acceptable and unacceptable conduct for Board members, staff, consultants, volunteers, and partners.
Community-Led Monitoring (CLM)	A social accountability approach where communities, particularly key populations, collect and use data to monitor the quality, accessibility, and safety of services.
Complaints and Incidents Register	A confidential internal register used to record, track, and manage safeguarding complaints and incidents.
Department of Foreign Affairs and Trade (DFAT)	The Australian Government department responsible for managing Australia's overseas aid program and setting safeguarding, child protection, and PSEAH requirements for funded partners.
Do No Harm	A principle requiring programs to avoid causing harm or exacerbating existing vulnerabilities through their activities or responses.
Enterprise Risk Register	A central register identifying key organisational risks, including safeguarding risks, and outlining mitigation and management strategies.
Human Resources (HR) Systems	Organisational policies and practices related to recruitment, supervision, performance management, discipline, and staff wellbeing.
Inter-Agency Standing Committee (IASC) Minimum Standards	International standards outlining best practice for protection from sexual exploitation and abuse in humanitarian and development contexts.
Memorandum of Understanding (MoU)	A formal agreement outlining roles, responsibilities, and expectations between partnering organisations, including safeguarding obligations.
Office of the Inspector General (OIG)	An independent body of the Global Fund responsible for investigating allegations of wrongdoing and safeguarding concerns.
Partner Due Diligence	A process used to assess a partner's capacity, governance, safeguarding systems, and risk profile prior to engagement.
Protection of Sexual Exploitation, Abuse and Harassment (PSEAH)	Policies and practices aimed at protecting sexual exploitation, abuse, and harassment by personnel or partners, and ensuring appropriate response where incidents occur.
Safeguarding	The responsibility to prevent and respond to harm, including sexual exploitation, abuse and harassment, child abuse, and other forms of misconduct.
Safeguarding Focal Point	A designated individual responsible for coordinating safeguarding implementation, incident management, training, and internal advice.
Safeguarding Policy	The overarching organisational policy setting out commitments, responsibilities, reporting mechanisms, and response procedures for safeguarding.
Serious Incident	An incident involving significant harm or risk of harm, including sexual exploitation, abuse, harassment, violence, or breaches of confidentiality.
Stopline	An independent, external whistleblower and complaints reporting service used by Health Equity Matters to receive safeguarding concerns confidentially and anonymously.
Sub-Recipient (SR)	An organisation that receives funding through Health Equity Matters to implement program activities and is required to comply with safeguarding obligations.
Survivor-Centred Approach	An approach that prioritises the rights, safety, dignity, and choices of individuals affected by harm.
Tiered, Risk-Based Approach	An approach to safeguarding and partner management that applies controls and support proportionate to the level of risk and organisational capacity.

