

Protection from Sexual Exploitation, Abuse and Harassment

Everyone has the right to receive assistance, work and participate safely and with dignity, without abuse of power, sexual demands or harassment.

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Registration status: Registration in progress.

Adopted by authorised management on 15 October 2026 as internal commitments and procedures during registration. This adoption does not imply completed registration or statutory effectiveness of the internal bylaws.

1. Scope and definitions

This policy covers governing bodies, personnel, volunteers, consultants, contractors, partners and representatives during work, travel, events and related digital communications. Sexual exploitation is actual or attempted abuse of vulnerability, unequal power or trust for sexual purposes. Sexual abuse is actual or threatened sexual physical intrusion under coercive or unequal conditions. Sexual harassment is unwelcome sexual conduct that may cause offence, intimidation or a hostile environment.

2. Prohibited conduct

Do not exchange money, employment, goods, services, assistance or other benefits for sex or sexual acts. Paid or transactional sex is prohibited while performing organisational duties, using its resources or operating in its development programme contexts. Sexual activity with anyone under 18 and exploitation of a worker's relationship with a recipient or participant are prohibited. Unwanted sexual touching, messages, images or remarks, coercion, threats and retaliation are prohibited. Custom or apparent consent does not excuse abuse of power.

3. Leadership and prevention

The Board oversees risk, resources and accountability. Before each programme, assign safeguarding responsibility and an independent alternate and assess risks in power relationships, recruitment, transport, home visits and aid distribution. Review the risk assessment annually and when circumstances change. Integrate requirements into recruitment and contracts and integrity screening for all personnel, including identity, references and current checks or appropriate alternatives. Personnel sign the code and complete comprehensive induction and annual training for development programmes. Record management and Board awareness of risks and partner expectations. Personnel must immediately disclose relevant allegations, convictions and investigations. Explain participants' rights and reporting routes in understandable, accessible formats. These requirements must not be represented as completed without implementation records.

4. Safe reporting without retaliation

Anyone may report without payment, prior proof or management permission, including anonymously or through a trusted person. Concerns may involve any person regardless of seniority. Good-faith reporting must not affect access to assistance or employment. Report to muntalaq-alnahda@greatiraq.com or call +9647729942312. If the concern involves the recipient, or the primary route is unsafe, contact Zahraa Ali Fuad, Head of the Organisation, directly at iraqi.development.organization@gmail.com or +9647812335224. If both recipients are implicated, the case must go to unconflicted members of the Oversight and Compliance Body or Founding Body once that body and its appointments are confirmed. An independent donor reporting route may also be used where applicable.

5. Survivor-centred response

Prioritise safety, respect, informed choice, privacy and non-discrimination. Ask about safe communication and support needs and explain referral options, confidentiality limits and reporting duties. Available support must not depend on a formal complaint or participation in an investigation. Forced confrontation or mediation of sexual exploitation or abuse allegations is prohibited. Apply interim protective measures and appoint a qualified, impartial investigator where needed, ensuring procedural fairness without presuming guilt.

6. DFAT requirements

Report suspected, alleged or known SEAH connected with DFAT business immediately and within 24 hours to seah.reports@dfat.gov.au. An investigation or internal hierarchy must not delay reporting. Seek informed consent before sharing identifying details, subject to legal duties and child best interests where relevant. Where consent or safety is uncertain, send a de-identified initial notification within 24 hours and seek DFAT guidance. Share only necessary information and report investigation outcomes and required updates. Development programmes require Comprehensive PSEAH Standards. Any phased pathway for a small local organisation must be documented and agreed with DFAT, with Essential Standards applied immediately; the organisation cannot grant itself an exemption.

7. Records, consequences and review

Keep case records separate from public reports and limit access to need to know. Do not publish identities or revealing details. Document decisions, monitor retaliation risks and apply contractual or administrative consequences and lawful referrals as appropriate. The Board receives aggregated oversight information without unnecessary identifying details. Review annually and after incidents or changed requirements. Partners must provide written commitments and suitable reporting arrangements.

Governance and document control

Policy owner: Board of Directors, under Article 53 of the approved internal bylaws. Review at least annually and after significant incidents or changed requirements. Arabic and English versions are published together; any ambiguity must be resolved without weakening protection. No past training, screening or donor certification is asserted by this document.

DFAT PSEAH Policy 2025: [Official reference](#)

Web version: greatiraq.com/policies/pseah/en/