



**CENTRE FOR DEVELOPMENT
— IN SOCIAL JUSTICE —**
A People-Centered Development

CENTRE FOR DEVELOPMENT IN SOCIAL JUSTICE (CDSJ)

SAFEGUARDING POLICY



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1. Title

This instrument shall be known as the **CDSJ Safeguarding Policy**.

2. Effective Date

This Policy takes effect on the date of approval by the competent governance authority of CDSJ and remains in force until amended or repealed.

3. Purpose

This Policy sets the rules for how CDSJ prevents, identifies, reports, responds to, records, manages, and learns from safeguarding concerns arising in connection with its staff, governance structures, programmes, partnerships, consultants, volunteers, operations, events, research, advocacy, and community engagement.

This Policy is adopted to make clear that CDSJ has a duty not only to do useful work, but also to ensure that its work, its people, and its institutional power do not expose others to abuse, exploitation, harassment, neglect, retaliation, or other forms of harm. Safeguarding is not an optional or specialist issue for a few staff members. It is a core institutional obligation that applies wherever CDSJ comes into contact with children, community members, partners, beneficiaries, staff, volunteers, survivors, participants, or any other person affected by its work. This Policy therefore sets practical duties, reporting timelines, case-routing rules, role allocations, and minimum response steps so that safeguarding concerns are not delayed, minimised, mishandled, or left to informal discretion.

4. Application

This Policy applies to:

- a. all CDSJ governance members;
- b. all staff, whether permanent, temporary, fixed-term, seconded, or part-time;
- c. interns, fellows, volunteers, consultants, associates, contractors, and other associated personnel;
- d. all programme activities, field visits, workshops, community dialogues, research activities, referral activities, service delivery, digital engagement, travel, and office-based operations conducted by or for CDSJ;
- e. all partners, sub-grantees, consortium members, and service providers where safeguarding compliance is included in the relevant agreement, code of conduct, or grant condition; and
- f. all CDSJ offices, branches, future country operations, and remote or digital workspaces used for CDSJ activity.

This Policy applies to safeguarding concerns involving:

- a. children;
- b. vulnerable adults or adults at risk;
- c. community members and programme participants;
- d. staff and associated personnel where the conduct arises in a safeguarding context; and
- e. any person who may be exposed to harm through CDSJ's conduct, inaction, negligence, systems, or relationships.

5. Policy Statement

CDSJ has zero tolerance for abuse, exploitation, neglect, harassment, retaliation, grooming, coercion, and misuse of power in connection with its work.

Every person covered by this Policy must:

- a. act in a way that protects others from harm;
- b. report safeguarding concerns immediately;
- c. follow the safeguarding response process;
- d. not conceal, minimise, or privately settle safeguarding matters; and
- e. cooperate with lawful safeguarding inquiries, protective actions, and referrals.

No CDSJ programme objective, donor pressure, reputation concern, or internal relationship may be used as a reason to suppress or delay a safeguarding report.

6. What Safeguarding Means in CDSJ

For CDSJ, safeguarding means the practical steps the organisation must take to ensure that no child, vulnerable adult, participant, community member, staff member, or other affected person is harmed through:

- a. abuse by CDSJ personnel or representatives;
- b. exploitation linked to CDSJ power, resources, access, or authority;
- c. unsafe programme design or unsafe engagement methods;
- d. weak supervision or poor case escalation;
- e. failure to respond when signs of harm are reported or observed; or
- f. preventable exposure created by CDSJ activities, communications, referrals, data handling, transport, events, accommodation, or partnership arrangements.

Safeguarding is wider than child protection alone. It includes protection of children and adults at risk, but also includes broader organisational duties to prevent abuse and misuse of power in all environments where CDSJ operates.

7. Conduct Prohibited Under this Policy

The following conduct is prohibited:

- a. physical abuse;
- b. sexual exploitation, sexual abuse, or sexual coercion;
- c. sexual contact with a child in any circumstance;
- d. grooming, manipulation, or predatory behaviour;
- e. emotional or psychological abuse;
- f. degrading treatment, humiliation, intimidation, or threats;
- g. neglect or deliberate failure to act where a person is at serious risk;
- h. exchange of money, employment, benefits, goods, transport, protection, or opportunity for sexual activity, favours, silence, or personal access;
- i. retaliating against a complainant, child, witness, reporter, or survivor;
- j. inviting a child or vulnerable person into unsafe private settings connected to CDSJ work without proper authorisation and safeguarding justification;
- k. photographing, recording, documenting, publishing, or sharing a child's or vulnerable person's image or story in an unsafe or unauthorised manner;
- l. exposing a person's case details, HIV status, sexual orientation, identity details, or other sensitive

- information in a way that creates risk;
- m. failing to report a known safeguarding concern; and
- n. any other conduct that creates or increases a safeguarding risk in connection with CDSJ work.

8. Special Rule on Children

No CDSJ governance member, staff member, consultant, volunteer, intern, partner representative, or associated person may:

- a. engage in sexual activity of any kind with a child;
- b. communicate with a child in a sexualised, manipulative, or exploitative way;
- c. touch a child in a way that is inappropriate, unnecessary, or capable of being interpreted as sexualised or abusive;
- d. be alone with a child in a closed, unobservable, or unauthorised setting without a valid safeguarding reason and approved safeguards;
- e. transport a child alone in a private vehicle for CDSJ purposes without prior authorisation except in a documented emergency; or
- f. arrange private meetings with a child outside approved programme purposes and supervision arrangements.

For this Policy, a child is any person below the age of 18 unless a stricter legal standard applies in the country of operation.

9. Special Rule on Adults at Risk

Where CDSJ works with adults who may be at heightened risk because of disability, trauma, displacement, dependency, age, poverty, violence exposure, social isolation, institutionalisation, migration status, or other vulnerability, all staff must exercise heightened safeguarding care.

This includes:

- a. avoiding exploitative dependence;
- b. ensuring communication is understandable and respectful;
- c. checking whether referrals or consent processes are meaningful; and
- d. escalating any sign that a person is being manipulated, abused, threatened, or controlled.

10. Safeguarding Duties of All Personnel

All personnel covered by this Policy must:

- a. read and comply with this Policy;
- b. complete required safeguarding induction or training;
- c. maintain professional boundaries;
- d. identify and report safeguarding concerns immediately;
- e. avoid being alone with a child or vulnerable person in unsafe circumstances;
- f. seek guidance where a safeguarding risk is unclear;
- g. protect confidentiality; and
- h. cooperate fully with safeguarding risk assessments, referrals, and case processes.

A person who is unsure whether something is a safeguarding concern must still report it. Doubt is not a reason to stay silent.

11. Safeguarding Duties of Managers

Managers and supervisors must:

- a. ensure that their teams know how to report concerns;
 - b. not discourage reporting;
 - c. act immediately when a safeguarding concern is raised;
 - d. not attempt to investigate serious safeguarding matters informally by themselves unless formally assigned;
 - e. preserve records and evidence;
 - f. separate the parties where immediate safety requires it; and
 - g. escalate the matter to the Safeguarding Focal Point or appropriate authority on the same working day.
- A manager who receives a safeguarding concern and delays action breaches this Policy.

12. Safeguarding Focal Point

CDSJ shall designate at least one **Safeguarding Focal Point** and one alternate where possible.

The Safeguarding Focal Point shall:

- a. receive and log safeguarding concerns;
- b. classify the level and nature of risk;
- c. advise on immediate protection measures;
- d. coordinate referral to specialised services or authorities where required;
- e. support internal case routing;
- f. monitor timelines and case documentation; and
- g. report serious safeguarding trends or incidents to Executive Management and governance oversight where required.

If the Safeguarding Focal Point is implicated in a concern, the matter must be reported directly to one of the Co-Executive Directors or to the Chairperson, depending on who is implicated.

13. How a Safeguarding Concern May Arise

A safeguarding concern may arise through:

- a. direct disclosure by a child, adult at risk, staff member, or community member;
- b. observation of behaviour, signs, injuries, fear, or distress;
- c. report by a witness;
- d. complaint through a community or staff complaint channel;
- e. digital communication, images, recordings, or messages;
- f. unusual behaviour by staff or partners; or
- g. information received from another organisation, school, clinic, authority, or community structure.

A safeguarding concern does not need to be proven before it is reported. The duty at first stage is to report and protect, not to decide guilt.

14. Immediate Reporting Rule

Any safeguarding concern must be reported **immediately** and not later than the same working day.

If the concern is disclosed after hours and presents immediate risk, the receiving person must contact the appropriate emergency or management route as soon as possible and complete written reporting on the next working day.

No staff member may wait for “more evidence” before reporting a safeguarding concern where there is a risk of harm.

15. Permitted Reporting Channels

A safeguarding concern may be reported to:

- a. the Safeguarding Focal Point;
- b. the immediate line manager, if safe and appropriate;
- c. the next-level manager where the line manager is implicated or unavailable;
- d. the Co-Executive Director – Programmes and Partnerships;
- e. the Co-Executive Director – Operations and Technical Services;
- f. the Chairperson or designated governance authority where Executive Management is implicated; or
- g. any emergency authority, child protection service, police, clinic, or statutory body where immediate protection is required by law or urgency.

Where a concern is reported to a person who is not the correct safeguarding handler, that person must route it immediately and not later than the same working day.

16. Immediate Response by the First Recipient

The first person receiving a safeguarding concern must do the following:

- a. listen calmly and take the concern seriously;
- b. not promise absolute secrecy;
- c. not interrogate the person extensively;
- d. record the basic facts as soon as possible;
- e. protect the person from immediate further harm where possible;
- f. report to the Safeguarding Focal Point or correct authority immediately; and
- g. not alert the alleged perpetrator before the matter is assessed unless failure to do so would create immediate risk and authorised guidance has been given.

The first response is not an investigation. It is a protection and escalation step.

17. Minimum Information to Record

The receiving person or Safeguarding Focal Point must record at least:

- a. date and time of report;
- b. name of reporter, if known;
- c. name of affected person, if known;
- d. age or approximate age if the concern involves a child;
- e. short description of what was reported or observed;
- f. date, place, and people involved if known;
- g. immediate risk identified; and
- h. immediate action taken.

If some information is unknown, the report must still be logged. An incomplete first report is acceptable. A missing report is not.

18. Safeguarding Risk Classification

Every safeguarding report must be classified within **1 working day** by the Safeguarding Focal Point or designated authority as one of the following:

- a. **Critical risk** – immediate danger, ongoing abuse, serious injury, child sexual abuse concern, severe exploitation risk, or threat to life or safety;
- b. **High risk** – credible safeguarding allegation requiring urgent protective action and formal case handling;
- c. **Moderate risk** – concern requiring structured follow-up, supervision, referral, or behaviour management;
- d. **Low risk** – concern requiring monitoring, guidance, or minor corrective action but no immediate danger.

Critical and High-risk matters must be escalated to Executive Management immediately and handled on an urgent basis.

19. Immediate Protective Action

Where required, CDSJ must take immediate protection steps, which may include:

- a. removing the person at risk from immediate danger where safe and lawful;
- b. separating the alleged perpetrator from the child, adult at risk, or affected person;
- c. suspending the alleged staff member or associated person from contact duties pending process;
- d. arranging safe transport, medical support, psychosocial support, or referral;
- e. securing records, messages, devices, or evidence; or
- f. making an immediate referral to child protection, social services, police, or other competent authority where required.

Protective action must not wait for completion of a full internal investigation where there is immediate risk.

20. Referral to External Services or Authorities

Where the safeguarding concern involves possible criminal conduct, serious violence, child abuse, immediate protection need, or any legally reportable matter, CDSJ must make or facilitate referral to the appropriate external authority or support service without delay.

This may include:

- a. police;
- b. child protection authority;
- c. social worker;
- d. health facility;
- e. psychosocial support service;
- f. legal support provider; or
- g. another legally competent authority.

The Safeguarding Focal Point and relevant Co-Executive Director must document:

- a. what referral was made;
- b. to whom;
- c. when; and
- d. what immediate support or next step was arranged.

21. Internal Safeguarding Case Handling

21.1 Opening of Case

Every safeguarding concern that is not immediately dismissed as clearly unrelated must be opened as a safeguarding case file.

21.2 Assignment

The Safeguarding Focal Point, together with the appropriate Co-Executive Director, shall determine whether the matter requires:

- a. internal safeguarding review;
- b. formal investigation;
- c. disciplinary referral;
- d. external referral only; or
- e. combined response.

21.3 Timeline

An initial safeguarding response plan must be set within **2 working days** of case opening.

21.4 Investigation

Where internal investigation is appropriate, it must be assigned to a person who is not conflicted and who understands the sensitivity of safeguarding cases.

21.5 Survivor- or Victim-Centred Approach

Where a person reports harm, CDSJ must act in a way that protects dignity, avoids blaming language, minimises repeated retelling, and prioritises safety.

22. Case Handling Rules

In every safeguarding case:

- a. the welfare and safety of the affected person must come first;
- b. confidentiality must be preserved as far as possible;
- c. information must be shared only on a need-to-know basis;
- d. the alleged perpetrator must not be allowed to influence the case process;
- e. retaliation must be prohibited and monitored; and
- f. the case file must show what action was taken and when.

23. Safeguarding in Recruitment and Engagement

Before CDSJ appoints staff or associated personnel to roles involving regular contact with children or vulnerable adults, CDSJ must complete the checks required by law and internal procedure, which may include:

- a. identity verification;
- b. reference checks;
- c. criminal record or police clearance where lawful and available;
- d. signed Code of Conduct and Ethics acknowledgement; and
- e. signed safeguarding acknowledgement.

A person may not be placed in a child-facing or high-risk protection role until the required checks are complete, unless the Co-Executive Director – Operations and Technical Services approves a temporary controlled arrangement in writing and records the reason.

24. Safeguarding in Programme Design

Before launching a programme or activity involving children, vulnerable adults, sensitive disclosures, or community interaction, the responsible programme lead must consider:

- a. who may be exposed to harm;
- b. whether staff are trained for the activity;
- c. whether safe reporting routes exist;
- d. whether referral pathways are available;
- e. whether transport, venue, accommodation, privacy, or image-use arrangements create risk; and
- f. whether partner staff or volunteers also need to meet safeguarding requirements.

No child-facing or high-risk activity may proceed without this basic safeguarding review.

25. Safeguarding in Images, Stories, and Communications

CDSJ staff and associated personnel may not photograph, film, record, interview, publish, or share information about a child or vulnerable person in a way that creates avoidable risk, violates dignity, or breaches confidentiality.

The following rules apply:

- a. no identifying image or story of a child or high-risk person may be used without proper internal review and any required consent or protection process;
- b. sexual violence, trafficking, abuse, or high-stigma survivor stories require heightened protection;
- c. geolocation, school name, home address, health detail, or similar identifying information must not be casually disclosed; and
- d. communications value does not override safeguarding duty.

26. Safeguarding and Partners

Where CDSJ works through partners, sub-grantees, volunteers, consultants, or consortium members, the responsible programme or partnership lead must ensure that:

- a. safeguarding obligations are included in agreements where relevant;
- b. reporting routes are known;
- c. serious safeguarding incidents are reported to CDSJ immediately; and
- d. partner safeguarding weakness is not ignored where it creates risk to people linked to CDSJ-supported work.

CDSJ may suspend or terminate a partnership where serious safeguarding breaches occur and are not credibly addressed.

27. False or Malicious Safeguarding Reports

A safeguarding concern that is not substantiated is not automatically false.

However, where it is established that a person deliberately fabricated a safeguarding allegation or knowingly forged evidence for malicious reasons, that conduct may be referred for disciplinary action.

This rule must not be used to intimidate or discourage good-faith reporting.

28. Outcome Categories

A safeguarding case may conclude as:

- a. referred externally and monitored internally;
- b. internally substantiated;
- c. partly substantiated;
- d. not substantiated;
- e. unresolved due to insufficient information;
- f. closed after immediate protection and referral; or
- g. escalated for disciplinary, contractual, governance, or legal action.

The outcome and reasons must be recorded in the case file.

29. Time Requirements

The following minimum timelines apply:

- a. report of safeguarding concern: **same working day**;
- b. routing to correct safeguarding authority: **same working day**;
- c. risk classification: **within 1 working day**;
- d. initial safeguarding response plan: **within 2 working days**;
- e. immediate protective action: **without delay** once the risk is known; and
- f. referral to external authority or service: **without delay** where required by risk or law.

Where a timeline cannot be met, the reason must be recorded in the file.

30. Records and Case Register

The Safeguarding Focal Point must maintain:

- a. a secure Safeguarding Case Register; and
- b. a secure individual case file for each reported safeguarding matter.

The register must record at least:

- a. case reference number;
- b. date received;
- c. risk level;
- d. type of concern;
- e. whether a child is involved;
- f. responsible case handler;
- g. referral status; and
- h. case status.

Access to safeguarding records must be strictly limited.

31. Retaliation and Obstruction

No person may:

- a. intimidate or threaten a reporter, survivor, witness, or child;
- b. discourage reporting;
- c. conceal evidence;
- d. privately negotiate silence;

- e. influence a witness improperly; or
- f. obstruct a safeguarding response.

Any such conduct is a serious breach of this Policy and may amount to gross misconduct.

32. Roles and Responsibilities

32.1 Executive Committee and Governance Oversight

The relevant governance authority shall receive reports on serious safeguarding incidents where required, ensure institutional response is adequate, and act where senior leadership or governance actors are implicated.

32.2 Co-Executive Director – Programmes and Partnerships

This office shall oversee safeguarding in programme design, community engagement, partner management, and field response.

32.3 Co-Executive Director – Operations and Technical Services

This office shall oversee safeguarding in staffing, HR handling, administrative control measures, suspension decisions, and institutional case management support.

32.4 Safeguarding Focal Point

This role shall receive, log, classify, coordinate, and monitor safeguarding concerns and ensure case routing, response tracking, and file integrity.

32.5 Managers and Supervisors

Managers shall ensure their teams understand the Policy, report concerns immediately, and implement immediate protective instructions when directed.

32.6 All Staff and Associated Personnel

All covered persons must comply with the Policy, report concerns immediately, and maintain professional boundaries.

33. Non-Compliance with this Policy

Non-compliance with this Policy includes:

- a. failure to report a safeguarding concern;
- b. delayed reporting without justification;
- c. unsafe contact or unsafe conduct with children or vulnerable persons;
- d. unauthorised disclosure of safeguarding information;
- e. retaliation;
- f. obstruction of a case; or
- g. approval of unsafe programme activity without basic safeguarding review.

Any such failure may result in immediate protective action, disciplinary action, contract termination, governance action, referral to authorities, or partner sanction, depending on the seriousness of the breach.

34. Country Operations Clause

This Policy applies across all CDSJ operations.

Where a country of operation requires additional child protection, mandatory reporting, survivor protection, referral, criminal reporting, labour, or data handling procedures, CDSJ shall issue a country annex. The annex may add requirements but may not reduce the minimum protection standards in this Policy unless mandatory local law requires a different formulation.

35. Related Instruments

This Policy shall be read together with:

- the Constitution of CDSJ;
- the CDSJ Policy Framework;
- the Board Governance and Oversight Charter;
- Code of Conduct and Ethics Policy;
- Human Rights Policy;
- Child Protection Policy;
- Sexual Harassment Policy;
- Whistleblower Protection Policy;
- Grievance and Complaints Handling Policy;
- Disciplinary Policy;
- Data Protection, Privacy, and Confidentiality Policy;
- Records Management and Document Retention Policy; and
- any approved safeguarding forms, referral maps, training records, case registers, or country annexes.

36. Review

This Policy must be reviewed at least once every three years, or earlier if required by legal change, serious safeguarding incident, audit or governance finding, partner risk, or country expansion.

37. Approval

Approved by: Adv. Motlatsi J Mofolo

Approving Authority: Director and Boards Ex-Officio

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