

GRIEVANCE REDRESS MECHANISM (GRM) MANUAL

Nigeria for Women Project

Version 1

Acknowledgments

This GRM manual has been adapted from the National Social Safety Nets Project (NASSP) GRM Manual. The Nigeria for Women Project team would like to acknowledge the contribution of NASSP and its staff and consultants who developed the original manual.

Acronyms

FPCU	Federal Project Coordinating Unit
GBV	Gender-based violence
GRM	Grievance Redress Mechanism
GRM FPs	GRM Focal Points
IPV	Intimate partner violence
LFS	LGA Field Supervisor
LPIU	LGA Project Implementation Unit
NFWP	Nigeria for Women Project
SEA/SH	Sexual exploitation and abuse / sexual harassment
SPCU	State Project Coordinating Unit
WAG	Women Affinity Group
WF	Ward Facilitator
WSO	WAG Support Officers

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Chapter 1

INTRODUCTION

This manual has been developed for the staff of the Nigeria for Women Project (NFWP) for implementation by the project coordination units and all staff and volunteers at Federal, State, and LGA levels. It offers practical information on how to effectively handle grievances under NFWP. Effective complaint handling is vital for ensuring transparency, beneficiary support, and quality of service delivery.

This guide provides step by step information on the basic principles to be adhered to in handling and managing grievances under NFWP. It describes the various roles and responsibilities needed to effectively handle grievances and the standard

process that should be followed. It provides guidance to staff on how to effectively analyze, record, receive and categorize grievances, provide feedback to complainants, and report findings to management.

1. Chapter one briefly describes the NFWP.
2. Chapter Two provides an explanation of the importance of grievances to the success of NFWP and outlines NFWP's principles and standards for its GRM.
3. Chapter Three describes the types of grievances that can be submitted, how they can be submitted, and by whom.
4. Chapter Four explains the basic

principles to be followed in grievance handling.

5. Chapter Five provides a description of the key roles and responsibilities in the grievance handling process.
 6. Chapter Six gives a detailed explanation of the steps to be taken to resolve different categories of grievances.
 7. Chapter Seven graphically describes key decision points and processes in handling grievances.
 8. Chapter Eight examines the standard operating procedures for handling grievances under NFWP.
 9. Chapter Nine describes how the GRM will be monitored and evaluated.
 10. Chapter Ten outlines the importance of beneficiary feedback and how to conduct beneficiary feedback sessions specific to the GRM.
- 1.1. About NFWP

Nigeria for Women Project (NFWP) is a five-year national

program with an objective to support women's improved livelihood opportunities in targeted communities. This project is a long-term engagement between the World Bank and the Government of Nigeria. The current project represents the first phase of this engagement for a five-year period. This project is informed by other projects such as the Rural Livelihoods Projects in India that uses the model of women groups. NFWP introduces WAGs in a very distinctive way starting with six states to prove that these platforms can be the base for layering livelihoods support.

This project design is the first of its kind to be implemented in Nigeria, through government and at scale supporting women groups. Therefore, the implementation and roll-out will be phased, starting with six states out of 36 to allow learning. Documented experiences and lessons learnt as well as models developed during the implementation of this phase will be

replicated in the subsequent project phases.

1.1.1 NFWP Structure

NFWP is implemented by a Federal Project Coordination Unit (FPCU), State Project Coordination Units (SPCUs), LGA Project Implementation Units (LPIUs), and Ward Facilitators (WFs) at community level.

1.1.2 Objectives of NFWP

The purpose of the project is to bring down the barriers to gender equality and promote economic and social

inclusion of women. Specific **objectives include:**

- * Support improved savings and livelihoods for women in targeted areas of Nigeria
- * Promote social inclusion through the establishment of institutional platforms that improve women's access to critical life, business, financial and technical skills
- * Develop a better understanding of what works and leverage partnerships especially with the private sector
- * Inform and influence attitudes and behaviors related to gender equality to change discriminatory social norms

Chapter 2

BASIC PRINCIPLES FOR GRMS

1.1. What is a Grievance?

A grievance is a formal complaint made by beneficiaries and non-beneficiaries on, but not limited to, their dissatisfaction with the delivery of services, lack of or inadequate information on Project activities, mistreatment, fraud, corruption, staff conduct, gender-based violence (including sexual exploitation and abuse or sexual harassment), and overall implementation of the Project.

1.2. What is a GRM?

GRMs are organizational systems and resources established by Project

implementers to receive and address concerns about the impact of their policies, programs, and operations. A GRM serves to identify and resolve implementation problems in a timely manner and also identifies systemic issues.

1.3. GRM Basic Principles

To effectively manage grievances, there are basic principles that must be followed to ensure that the grievance redress mechanism is effective and valuable to beneficiaries and non-beneficiaries. The key principles include the following:

Communicated and Visible

A good grievance mechanism should be clearly communicated to all relevant stakeholders (beneficiaries, the general public, and others). Information on how to channel grievances should be clear and widely publicized both by publishing in visible locations in the community, such as a primary school notice board, and through other commonly used communication channels such as local media, local town criers, radio, etc. To achieve this, all relevant stakeholders must be well sensitized and there should be regular, periodic engagement with them to reinforce GRM messaging.

Beneficiaries and non-beneficiaries should be informed on the timelines and the necessary steps that will be taken in handling their grievances. Information on what type of grievances can be made should also be clearly communicated to the beneficiaries, staff, and any other interested party. Staff of the organization should also be provided

with all the necessary information on the GRM, particularly the frontline staff who engage directly with citizens. In the case of NFWP this includes the Ward Facilitators (WFs), WAG Support Officers (WSOs), and LGA Field Supervisors (LFSs).

Communication of the grievance mechanism should aim to reach poor and marginalized groups and emphasize that:

- * There is no financial charge for making a complaint;
- * Grievances are welcome and encouraged because they help improve project design, systems, and service delivery;
- * Grievances will be confidential, and complainants will not be punished for submitting them;
- * Beneficiaries have both rights and responsibilities under NFWP to either complain and/or ensure that they receive quality service standards from drivers of the Project.
- * Feedback will be communicated on each complaint.

Accessible

An effective GRM should be easily

accessible by all. It should offer multiple channels for receiving and responding to grievances (e.g. in person, by phone, in writing, etc.). The conditions of the beneficiaries and other interested citizens should be taken into account when establishing a GRM. For example, if the GRM has a hotline element and there are beneficiaries with no phones, the grievance handling process should offer other alternatives such as face to face interaction or writing letters as alternatives for channeling grievances. Also, a good GRM should enable and encourage the use of different local languages in channeling grievances, which makes it more accessible for those who may not understand the official language.

Responsive

It is essential that a GRM should be responsive to the needs of its beneficiaries and non-beneficiaries. It should ensure that grievances are acknowledged and issues resolved promptly. Staff handling the complaints must follow the agreed

targeted timelines for resolving grievances. A responsive GRM will ensure that complainants are regularly informed on the progress or status of their grievances. A good GRM should be responsive to the needs of different people, including vulnerable persons such as the elderly or disabled, and those who cannot speak or write in English. It should also take a survivor-centered approach to gender-based violence (GBV) and sexual exploitation and abuse / sexual harassment (SEA/SH) complaints.

The GRM-responsible staff should assist vulnerable persons (e.g. people with disabilities, young people, the elderly, GBV or SEA/SH survivors) in making complaints when necessary – for example helping in filling the forms, being able and willing to explain the complaints process to those who may find it difficult to read leaflets or information, as well as being willing to engage with the complainant's caretaker or interpreter (where applicable) in determining the details

of a complaint. Also, people should be allowed to make complaints on behalf of those who cannot do so.

Fair and Objective

Grievance handling staff should be fair and objective when handling and managing grievances. Grievances should be handled with all sense of fairness and without any bias. Staff receiving grievances should be objective and empathetic towards the complainant and should not be defensive, unfair or seen to be taking sides. Complainants should feel that they were treated fairly and with respect.

Staff Empowerment

Grievance handling staff should be empowered to resolve some of the grievances on the spot. This will help ensure that grievances are handled on time. However, in a situation where a complaint requires further investigation or response by other

staff, then this process should be communicated to the complainant. Handling complaints requires good listening, questioning, and empathetic skills. It is important that officers designated to handle grievances have skills or are trained in developing these skills. Staff should be empowered with all the necessary information needed to help them in investigating and resolving grievances.

Learning and Improvement

GRMs should be designed in a manner that can contribute to organizational learning and improvements in the delivery of services and implementation modalities of the mechanism itself. Grievances received should be regularly analyzed so that trends are identified and key problem areas highlighted and resolved at an early stage, which will help in improving service delivery under the Project.

Chapter 3

VALUE OF GRIEVANCES TO NFWP

1.1. Importance of NFWP GRM

The establishment of a GRM is beneficial for organizational and Project strengthening. Grievances should be seen as a gift and not a threat to the Project. Grievances submitted are a source of valuable information that can help to strengthen the implementation of the Project and provide support and protection to Project beneficiaries. NFWP's ability to resolve grievances demonstrates transparency and accountability to beneficiaries and non-beneficiaries.

For NFWP, the implementation of an effective grievance redress mechanism will:

- * Enable FPCU and SPCUs to identify key service delivery issues within the Project;
 - * Promote constructive engagement between beneficiaries and government to deal with service delivery issues;
 - * Provide an avenue to deter fraud and corruption and mitigate risks, as well as identify corrupt activities as they occur;
 - * Improve NFWP's accountability and responsiveness to beneficiaries;
 - * Ensure that Project benefits are efficiently delivered to the beneficiaries;
 - * Serve as a useful learning tool for NFWP;
- Improve FPCU and SPCU's oversight of the Project.

1.2. Service Standards for NFWP GRM

* NFWP will ensure that all grievances are handled and resolved within the specified time frame depending on the category of complaint. The maximum time frame for resolving categories of issues that are within the remit of NFWP will be 3 months (90 days).

* NFWP will ensure that feedback is provided to complainants on the status of their grievances within 28 working days from the time the complaint was first received. Where investigations are likely to take more than 7 days, NFWP will provide complainants with a

progress update.

* NFWP will guarantee that all complainants are treated with respect and fairness. NFWP will ensure that persons with disabilities and other vulnerable groups can easily access the GRM using available channels for registering complaints.

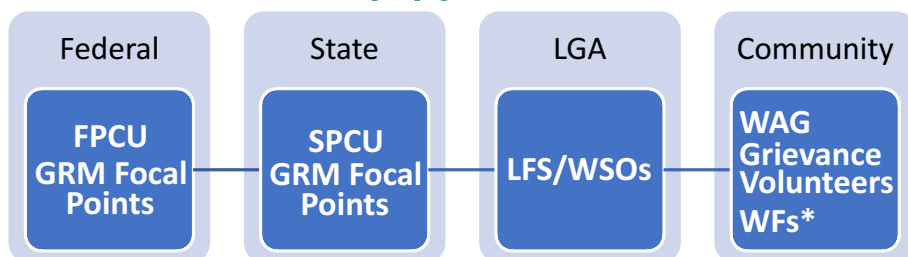
* NFWP will ensure that GBV and SEA/SH complaints are treated appropriately following a survivor-centered approach and using special procedures outlined in Annex 2.

For further information about Service Standards under NFWP, please see Annex 1.

Chapter 4

KEY ROLES AND RESPONSIBILITIES IN MANAGING GRIEVANCES UNDER NFWP

1.1. Structure for managing grievances



*Ward Facilitators can only receive complaints but cannot investigate or resolve them as this would be a conflict of interest.

1.1. NFWP Grievance Handling and Management Structure

Grievance Receiving Agents and Staff

The following can receive grievances from complainants under the NFWP GRM:

1. Grievance Volunteers and Ward

Facilitators* (at community level)

2. LGA Field Supervisors (LFS) and

WAG Support Officers (at LGA level)

3. SPCU GRM Focal Points - specifically the Social Safeguards and Environmental Safeguards Anchors and Advisers (at State level)

4. FPCU GRM Focal Points - specifically the Social Safeguards and Environmental Safeguards Anchors and Advisers (at Federal

level)

Resolving or tackling grievances under the NFWP GRM

All staff of NFWP have a role to play in the GRM, whether it is by intaking or managing complaints as a GRM Focal Point (FP) or by supporting GRM FP with the investigation and response to received grievances. Under the guidance of the GRM FP, other staff in departments ranging from accounting to procurement to livelihoods to GBV will be expected to support in the process of responding to received grievances. See Chapter 6.

1.1. Key levels in the NFWP Grievance Administration & Management Process

FIRST LEVEL

LFS & WSOs

This is the first level in the grievance administration process. The LFS will coordinate all grievances that are received at this level and liaise with

the SPCU GRM Focal Points for grievances that need to be resolved at the state level; they will also work closely with the WSOs, WFs, and WAG Grievance Volunteers at the Community level to collate, investigate and resolve grievances.

SECOND LEVEL

SPCU GRM Fps

The SPCU GRM FPs will receive grievances, including via the State hotline, and will liaise with other state officers in investigating and resolving or referring grievances. Further investigations on grievances brought forward by the LFS can be handled at this level. The SPCU GRM FPs ensure that the LFSs, WSOs, WFs, and WAG GRM Volunteers are adequately trained in the GRM manual, complaints types, etc. to enable them distinguish complaints accordingly and take necessary actions for referral or resolution. The SPCU GRM FPs also ensure that training is cascaded to the beneficiaries at the community levels by the LFSs, WSOs,

and WFs. The essence is to ensure that beneficiaries are aware of the GRM and various channels open to them for registering grievances.

It is also important to note that beneficiaries can also directly complain to the SPCU GRM FPs or any other NFWP staff if they don't feel comfortable doing that at the community or LGA levels. These complaints can be made through a telephone or visit to the SPCU, if the beneficiaries live in close proximity to the state offices. The GRM FPs at this level should send monthly reports to the GRM FPs at the Federal level.

THIRD LEVEL

FPCU GRM Focal Points

The FPCU GRM FPs will head the GRM for NFWP and will liaise with officers in other departments and at State and LGA levels in resolving grievances. They will have constant interactions with the SPCU GRM FPs in handling grievances received. They are also responsible for training the SPCU GRM FPs and the LFSs and

WSOs, on handling and managing grievances and any other training required for the GRM. This can be done at the Community, LGA, State and Federal levels.

Beneficiaries may also call the NFWP GRM hotline at Federal level with any type of grievance. Complaints received at FPCU level will be resolved by liaising with the relevant staff at State and LGA level, depending on what the issue is, to investigate and resolve the grievance.

Serious grievances that cannot be handled or resolved at the frontline or State level will be resolved at Federal level. Issues relating to staff misconduct or corruption related grievances should be made directly to the FPCU GRM FPs who will forward those grievances to the NPC for further action/directives. The FPCU GRM FPs will provide feedback to the complainants on the outcome of the investigation.

Chapter 5

GRIEVANCE FILING UNDER NFWP

1.1. Who can raise grievances?

Anyone can raise a grievance about NFWP. Beneficiaries and non-beneficiaries are all welcome to submit complaints on any aspect of NFWP via any of the available grievance channels (e.g. in-person to staff or volunteers or by phone, letter, email, or social media).

1.2. How can grievances be Submitted?

At the community level grievances can be submitted via:

1. WAG GRM Volunteers: Each WAG will elect a GRM Volunteer to make complaints on their behalf using any

of the multiple channels. Their role is to collate grievances from community members or beneficiaries who may not be able to come to the LFS to make a complaint, do not have a telephone to call the hotline directly, or only feel comfortable complaining at the community to their fellow community members. Each WAG GRM Volunteer should be supplied with a register book and training by the LFS/WSO/WF so they can record complaints that they will transmit to the LFS via phone or in person as soon as possible. With respect to GBV/SEA/SH-related incidents, WAG GRM Volunteers should, wherever possible, seek to assist or facilitate the survivor/complainant to make

complaint through one of the GRM's channels where the individual chooses to do so, rather than making the complaint on their behalf. The WAG GRM Volunteer should never record any information about GBV/SEA/SH-related complaints in their register book.

2. WFs: Complainants who feel comfortable reporting their grievance to WFs are welcome to do so. WFs have access to the GRM app on their tablets and have been trained to capture grievances which are then reported to the LFSs for investigation and resolution. As direct implementers in the community, WFs have no role in the investigation or resolution of grievances.

The above volunteers can be provided with complaints forms and trained on how to fill in the forms to collect grievances from aggrieved community members. They may submit those forms to the LFS who records the complaints and follows up on either resolving the grievances or escalating to the SPCU GRM FPs

depending on the nature of grievance received.

All complaints especially those sensitive in nature such as GBV *complaints can be made directly to the NFWP GRM hotlines if the complainant doesn't feel comfortable lodging the complaint at community or LGA levels. In cases where complainants do not have access to a network or phone to call the hotline, they can ask a family member or friend who owns a phone and lives within a network range to make the complaint on their behalf*

Where necessary, corruption cases will be channeled to the key anti-corruption agencies Independent Corrupt Practices and Other Related Offences Commission (ICPC) (0800-Call-ICPC or 080022554272), *Department of State Security services (DSS) and Economic and Financial Crimes Commission (EFCC) for further actions and prosecutions.*

At the LGA, State, and Federal levels:

1. **LFSs / WSOs:** Complaints can be made through the LFSs or WSOs in person or in writing. They are also responsible for reviewing any complaints relating to their LGA received via any channel. They are effectively trained on project activities to collate and address grievances, channeling them as necessary to the SPCU GRM FPs.

2. **SPCU GRM FPs:** Grievances can be made at the state offices either in person, via telephone, in writing, or through any other accessible channel as there are SPCU GRM FPs that have been trained on effectively handling and managing grievances. Telephone numbers for State hotlines will be displayed at various state and local government offices and in Project communities.

3. **FPCU GRM FPs:** At the FPCU level, there are GRM FPs who have been trained on handling and managing grievances and they can

receive and register grievances from beneficiaries and non-beneficiaries using any channel convenient for them. Grievances may come in via hotline, in writing, in person, or via social media.

4. **SPCUs and FPCU telephone hotlines:** Grievances can also be made through dedicated telephone hotlines at every SPCU and FPCU between the hours of 9am 4pm Monday through Friday. The numbers are:

- a. FPCU: 09057309945
- b. Abia: 08063302760, 07080601288
- c. Kebbi: 09122357299, 08031231403
- d. Niger: 08033224917, 08022833897
- e. Ogun: 08008001234
- f. Taraba: 09124377879, 08008800800

1.1. Anonymous Complaints

Anonymous complaints are welcome; no one should be required to give their name or contact information if they do not wish to. However, if the complainant wants to receive a response, they will need to leave some basic contact details such as an address, telephone number, or email. Anyone complaining anonymously should be encouraged to provide as much information as possible to enable effective investigation and resolution of complaints.

1.2. Addressing complaints related to GBV and SEA/SH

The NFWP GRM takes complaints related to gender-based violence (GBV) and sexual exploitation or abuse / sexual harassment seriously. As further discussed below, the GRM will have special procedures for responding to allegations of sexual exploitation and abuse (SEA) and sexual harassment (SH) that are

made against a project actor. However, for any complaint that is reported to the GRM (including complaints involving other forms of GBV that are not related to the project), the GRM will also have procedures in place to refer the individual to GBV service providers. For the purposes of the GRM, these terms are defined as follows:

- **Gender-based violence.**

Gender-based violence, or GBV, is an umbrella term for any harmful act that is perpetrated against a person's will and that is based on socially ascribed (i.e. gender) differences between males and females. It includes acts that inflict physical, sexual, or mental harm or suffering, threats of such acts, coercion, and other deprivations of liberty. These acts can occur in public or in private. Across the globe, gender-based violence disproportionately affects women and girls. SEA/SH (defined below) is a subset of GBV.

* **Sexual exploitation.** Any actual or attempted abuse of 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.

* Sexual Abuse. Actual or threatened physical intrusion of a sexual nature, whether by force or under unequal or coercive conditions.

* **Sexual harassment.** Any unwelcome sexual advance, request for sexual favors, verbal or physical conduct or gesture of a sexual nature, or any other behavior of a sexual nature that might be reasonably expected or perceived to cause offense or humiliation to another, when such conduct interferes with work; is made a condition of employment; or creates an intimidating, hostile, or offensive work environment.

* **Intimate partner violence (IPV).** As defined by the World Health Organization (WHO), IPV refers to any

behavior within an intimate relationship that causes physical, psychological or sexual harm to those in the relationship. Examples of types of behavior include:

* Acts of physical violence, such as slapping, hitting, kicking and beating.

* Sexual violence, including forced sexual intercourse and other forms of sexual coercion.

* Emotional (psychological) abuse, such as insults, belittling, constant humiliation, intimidation (e.g. destroying things), threats of harm, threats to take away children.

* Controlling behaviors, including isolating a person from family and friends; monitoring their movements; and restricting access to financial resources, employment, education or medical care.

Within the context of the project:

* Sexual exploitation occurs when access to or benefit from Bank-financed goods, works, non-consulting services or consulting

services is used to extract sexual gain.

*Sexual abuse occurs when a project worker (e.g., staff, consultant employed by the project) uses force or unequal power vis-a-vis a community member or colleague to perpetrate or threaten to perpetrate an unwanted sexual act.

*Sexual harassment occurs between personnel/staff of the Project and involves any unwelcome sexual advance or unwanted verbal or physical conduct of a sexual nature (for example, when a staff member or contractor makes repeated advances or sends sexually explicit text messages to a colleague, or repeatedly pressures a co-worker to meet socially outside of work).

*Separately from SEA/SH, GRM operators may encounter GBV complaints from beneficiaries that are not perpetrated by a project actor, for example complaints of IPV within a beneficiary household that relates to the use or control of project

benefits or complaints about domestic conflicts.

The distinction between project-related SEA, SH and other forms of GBV such as IPV are important so that agency policies and staff trainings can include specific instruction on the procedures to report each.

To fulfill the role of addressing GBV, all staff and volunteers at all levels should be trained (and/or have previous knowledge and experience) on the GBV Guiding Principles (see Annex 2) and the specialized procedures for receiving and referring GBV-related complaints. This set of skills will help GRM staff and volunteers to support the quality of the complaint mechanism, while at the same time ensuring the adherence to these Guiding Principles and a survivor-centered approach, including right to safety, respect, and confidentiality, of the complaint intake and management. Hotline operators in particular should receive training on the handling of

GBV-related complaints in line with the principles of confidentiality and the specialized procedures outlined in Annex 2.

When receiving a grievance/during the intake process, the person receiving the complaint shall respect the wishes, choices, rights and dignity of the complainant. In order for the survivor/complainant to make informed decisions about whether to seek services and whether to file a complaint with the project (where the complaint involves SEA or SH), she/he needs to be provided with clear and simple information on the functioning of the system, on the possible outcomes, likely timelines, and the types of support that can be provided.

The survivor/complainant must also give their consent for the sharing of basic, anonymous, non-identifiable monitoring data about the incident with the SPCU/FPCU and with the World Bank. If a complainant chooses not to be referred to GBV service providers or have the project take further action, then the case will be closed. The officer or volunteer must seek the survivor/complainant's

consent to share basic monitoring data, and if no consent is given, no data will be recorded. For GBV cases, it is important to ensure that access to the complaints processes is as easy and as safe as possible for the complainant/survivor and that they clearly understand the referral process. All of these topics are addressed in further detail below and in Annex 2.

Chapter 6

GRIEVANCE CATEGORIES AND MANAGEMENT PROCEDURES

CATEGORIES	EXAMPLES	RESOLUTION FLOW	WHO INVESTIGATES & RESOLVES	RESOLUTION PERIOD
CATEGORY 1: WRONGFUL INCLUSION/EXCLUSION				
1.A WAG - Wrongful inclusion	<p>"Mrs. Yakubu was included in WAG but she is not engaged in an income generating activity. She is just a housewife."</p> <p>"Mary was included in a WAG but she is only 16 years old."</p>	<ol style="list-style-type: none"> 1. Complaint is entered into the register. 2. The LG FS investigates and resolves the grievance. 3. LFS issues and delivers response to the complainant. 	LFS	21 DAYS TO 1 MONTH
1.B WAG - Wrongful exclusion	<p>"I was not allowed to join a WAG by the Ward Facilitator."</p> <p>"I was not allowed to join a WAG by the other women who wanted to be in that WAG because I have a disability."</p> <p>"I was away/ sick during the WAG"</p>	<ol style="list-style-type: none"> 1. Complaint is entered into the register. 2. The LG FS investigates the reason why the woman was not allowed to join including by speaking with the WF and other WAG members. <p>- Women may only be excluded from joining a WAG if they are below 18 years of age or are not engaged in an income-generating activity or if their WAG has chosen to remove them from the group based</p>	LFS	21 DAYS TO 1 MONTH

	<p>formation process.”</p> <p>“I was kicked out of a WAG.”</p>	<p>on their agreed Constitution.</p> <p>6. LFS determines the appropriate response, records it in the grievance register, and communicates the decision to the complainant.</p>		
<p>1.C</p> <p>Livelihood grants – wrongful exclusion</p>	<p>“I have been excluded from receiving a livelihood grant in my WAG.”</p>	<p>1. Complaint is received and registered.</p> <p>2. The LFS investigates whether the excluded woman should have received a grant by speaking with the WF and other WAG members and liaising with the SPCU GRM FPs and other livelihoods staff at SPCU.</p> <p>3. Based on investigation the LFS determines the appropriate response, records this in the grievance register, and communicates the response to the complainant.</p>	<p>LFS, SPCU GRM FPs, SPCU Livelihoods</p>	<p>21 DAYS</p>
<p>1.D</p> <p>Livelihood grants – wrongful inclusion</p>	<p>“The wrong WAG member received the livelihoods grant. Hers was the business plan that the WAG had selected.”</p>	<p>1. Complaint is received and registered.</p> <p>2. The LFS investigates whether the included woman should have received a grant by speaking with the WF and other WAG members and</p>	<p>LFS, SPCU GRM FPs, SPCU Livelihoods</p>	<p>21 DAYS</p>

		liaising with the SPCU GRM FPs and other livelihoods staff at SPCU.		
		3. Based on investigation the LFS determines the appropriate response, records this in the grievance register, and communicates the response to the complainant.		
CATEGORY 2: PAYMENTS				
2.A Delay in payment	<p>"My WF stipend did not arrive on time."</p> <p>"I was meant to receive my grant last week but it is late."</p>	<p>1. Complaint is entered into the register.</p> <p>2. LFS sends to SPCU GRM FP.</p> <p>3. SPCU GRM FP works with SPCU accounting team to investigate and resolve.</p> <p>7. The SPCU GRM FP updates the register and they or LFS deliver the feedback and close the complaint.</p>	LFS, SPCU FP, SPCU accounting	WITHIN 7 DAYS
2.B Incorrect payment amount	<p>"I am a WF that supports 5 groups but I was paid N8,000 instead of N10,000"</p> <p>"I am a WAG member and I was</p>	<p>1. Complaint is entered into the register.</p> <p>2. LFS sends to SPCU GRM FP.</p> <p>3. SPCU GRM FP works with SPCU accounting and M&E teams to investigate and resolve.</p>	LFS, SPCU FP, SPCU accounting, SPCU M&E team	WITHIN 7 DAYS

	supposed to receive N50,000 for my livelihood grant but I only received N40,000."	<p>- If a WF has complained, check how many groups they are supporting in the M&E system then check whether they were paid the corresponding amount via the payments system.</p> <p>- If a WAG member has complained, check M&E system for the woman's name and the amount she was meant to receive, then check whether the right amount was sent via the payments system.</p> <p>7. After investigation, the SPCU GRM FP updates the register and they or LFS deliver the feedback to the complainant and close the complaint.</p>		
CATEGORY 3: SERVICE DELIVERY ISSUES				
3.A Mistreatment / rudeness by staff	"The WF / BBC / LFS / SPCU Official insulted us"	<p>1. Complaint is registered.</p> <p>2. The State-level or National-level GRM FP, as appropriate, investigates the complaint and forwards to the State or National Coordinator for appropriate action to be taken against the official (e.g. the offender may be issued a CAUTION stating never to commit such act again.)</p> <p>3. SPCU GRM FP issues an apology on behalf of the</p>	State- or Federal-level GRM FPs, SPCU or FPCU Coordinator	WITHIN 7 DAYS

		offender to the complainant. This should include reference to what action was taken against the staff. Once feedback is delivered the complaint should be resolved in the register.		
3.B Complaints not responded to	"I sent a complaint since but have not received feedback"	<p>1. Complaint is received and registered.</p> <p>2. The receiving GRM FP MUST apologize to the complainant and then ask for all necessary details (all of the original details plus the complaint ID number they were given the first time) in order to ascertain what happened to the earlier complaint.</p> <p>3. If the complaint can immediately be found in the Grievance Register, the current status of that grievance must be passed to the complainant on the spot. If there is no access to the Grievance Register in the moment, the GRM FP should tell the complainant when they will be able to access the Grievance Register and get back to the complainant.</p> <p>5. Where the original grievance cannot be found in the Grievance Register,</p>	All GRM FPs	WITHIN 7 DAYS OR ON THE SPOT

		<p>the GRM FP MUST re-enter the grievance and if it is something that can be answered ON THE SPOT, that should be done.</p> <p>6. Where it will take a while to resolve, let the complainant be informed of the date for feedback.</p> <p>7. Complaint should be sent to relevant SPCU-level GRM for fast-tracked resolution and response.</p> <p>8. The SPCU GRM FP should issue a response to the complainant within 7 days.</p>		
3.C Wrong information / poor communication	"The WF told us to meet at Buruku for the community meeting but when we got there, we were told they were at Gbako community"	<p>1. Complaint is received and registered.</p> <p>2. The receiving officer MUST apologize to the complainant for that mistake.</p> <p>3. The receiving officer then asks for details of the WF or any other officer who failed to disseminate good information.</p> <p>4. Complaint is referred to the SPCU GRM FP and relevant SPCU official for investigation and appropriate action to be taken against the offending staff person (e.g. a CAUTION may be issued so</p>	State-level GRM FPs, plus relevant SPCU staff (e.g. ICBs)	ON THE SPOT OR WITHIN 7 DAYS

		that such act will not be repeated again). 6. Feedback is sent to the SPCU GRM FP who ensures a response is delivered to the complainant and the complaint is closed.		
3.D Other Service Delivery Issues	<i>"The WF, LFS, SPCU staff was not on time for our sessions"</i>	1. Complaint is received and registered. 2. The receiving officer MUST apologize to the complainant and get all relevant details to enable an investigation and appropriate action. 3. The receiving officer refers the details to the appropriate state- or national-level GRM FPs for action. 6. Relevant GRM FP issues response/feedback and ensures feedback it is delivered to the complainant and the complaint is resolved.	SPCU and FPCU GRM FPs and other relevant SPCU or FPCU staff	ON THE SPOT OR WITHIN 7 DAYS

CATEGORY 4: FRAUD AND CORRUPTION ISSUES

4.A Bribe & Extortion	<i>"Paramount Ruler asked me for N3,000 from my livelihood grant/savings share out"</i>	1. Complaints is registered 3. The SPCU GRM FP reports the complaint to the SPCU Coordinator and the NPC. 4. The SPCU Coordinator,	SPCU/FPCU GRM FPs, SPCU Coordinator, NPC	21 DAYS OR MORE
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	<p>"The ward/LGA/SPCU staff over there, said if I do not give him money, he will not attend to me."</p> <p>"The WAG president asks us for N50 out of our savings contribution every time."</p>	<p>depending on the enormity of the grievance, investigates directly AND/OR delegates the GRM FPs to investigate the veracity or otherwise of the allegations and report back immediately.</p> <p>5. As soon as investigations are concluded, reports are sent to the NPC for appropriate action to be taken</p> <p>The Coordinator may, for example, choose to:</p> <ul style="list-style-type: none"> - Issue a CAUTION (providing an official warning) to offending staff - Report the offender to the community leader, Village head or constituted authority to be dealt with in a customary way for non-staff - The offender may be made to pay back all he received dishonestly - Depending on gravity of the case, it may be referred to EFCC, ICPC, DSS for further prosecution. <p>7. Resolution is communicated to relevant GRM manager for entry into the register and he or she will issue a response to the</p>		
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		complainant.		
4.B Misappropriation / Theft	"Our Treasurer/Group member ran away with all our contribution "	<p>1. Complaint is received and registered.</p> <p>2. The SPCU GRM FPs report the complaint to the SPCU Coordinator and the NPC for further directives.</p> <p>4. As soon as investigations are concluded, reports are sent to the NPC who decides on the appropriate action to take. The NPC may, for example, choose to:</p> <ul style="list-style-type: none"> - Remove the treasurer/group member from the program - Require the offender to pay back the money - Involve the DSS for further prosecution where necessary <p>6. Relevant GRM FP enters response into the register and ensures it is delivered to the complainant before the complaint is closed.</p>	SPCU/FPCU GRM FPs, SPCU Coordinator, NPC	21 DAYS
CATEGORY 5: INQUIRIES AND INFORMATION REQUESTS				
Inquiries and information requests	"Please I want to know when this program will end or is it forever?"	<p>1. Inquiry/information request is received and registered.</p> <p>2. If the receiving officer is able to provide a response ON THE SPOT, then the</p>	All GRM FPs	WITHIN 7 DAYS

	<p>"When are we going to receive the grants?"</p> <p>"Please what is the essence of this program?"</p> <p>"How can one qualify as a beneficiary?"</p> <p>"How is this project different from other women empowerment programs?"</p>	<p>response is given and the complaint is marked as closed.</p> <p>3. If the receiving officer is unable to answer the inquiry on the spot, then he/she forwards to the LGA or SPCU GRM FP for response.</p> <p>4. Where the SPCU cannot provide the information, the inquire is escalated it to the FPCU GRM FPs who will liaise with responsible FPCU officers to provide the information and give feedback through the SPCU GRM FPs.</p> <p>5. Once feedback is delivered, either ON THE SPOT or later on, the inquire is closed.</p>		
CATEGORY 6: OTHER				
6.A Complaints OR INQUIRY for other programs	<p>"I want help accessing vaccines for my child."</p> <p>"Please our community needs a borehole."</p> <p>"I am pregnant again and my</p>	<p>1.The complaint is received.</p> <p>2. The complainant is referred to the appropriate intervention/Ministry at State or Federal level.</p> <p>3. The response issued to the complainant notes that the complaint was not about NFWP and was therefore referred to a different program or Ministry. This response</p>	All GRM FPs	7 DAYS

GRM Intake and Management Procedures for GBV and SEA/SH Complaints

CATEGORY	EXAMPLES	INTAKE & REFERRAL PROCESS	RESPONSIBILITIES	RESPONSE TIME FOR FURTHER ACTION
CATEGORY 7: GENDER-BASED VIOLENCE				
7.A Sexual exploitation and abuse (SEA) or sexual harassment (SH) (e.g. staff or contractor inflicting SEA/SH on a beneficiary, community member, or other staff member)	<p>"The staff coming to train us, is always making advances at my daughters, I told him to keep off and he threatened to remove me from the program."</p> <p>"The Ward Facilitator told me to stay after the WAG meeting to discuss something and when I did, he abused me."</p>	<p>1. Complaint is received and, using an empathetic and supportive approach, with the survivor/complainant's consent, the complaint is registered in accordance with confidentiality protocols/specialized data procedures outlined in the GBV Guiding Principles (e.g. minimal, confidential data collection and use of the survivor centered approach) and using the special collection form in the GRM app. Any mandatory reporting requirements should be disclosed to prior to collecting information.</p> <p>2. Receiving GRM FP shares complete information about the potential outcomes of the complaint, including potential for referral to outside service providers including healthcare,</p>	<p>LFS and SPCU GRM FPs, SPCU and FPCU Coordinators, GBV/Gender officers are responsible for ensuring GBV-related complaints are treated according to the GBV and SEA/SH Guiding Principles in Annex 2.</p> <p>The survivor/complainant maintains the right to choose whether further action should be taken on their complaint. They also have the right to change their mind and stop seeking resolution of their complaint.</p>	<p>As soon as the incident becomes known, the GRM FP should notify the SPCU GRM FP/SPCU Coordinator</p> <p>14 to 30 DAYS may be required for resolution</p> <p>(only in cases where complainant chooses to seek further action through the project)</p>

		<p>psychosocial support and justice/security actors. The survivor/complainant should clearly understand that the GRM is an administrative procedure, not a legal/judicial one, and the survivor is free to report to the police or seek legal advice at any time (this should be among the service referrals made available).</p> <p>3. The survivor/complainant chooses whether to seek resolution through the project (i.e., accountability of the perpetrator) or to leave the complaint as is and do nothing further.</p> <p>4. Whether or not the survivor/complainant chooses to seek resolution through the project, the receiving GRM FP provides the individual with referrals to service providers (it is the individual's choice whether to take up the referrals).</p>		
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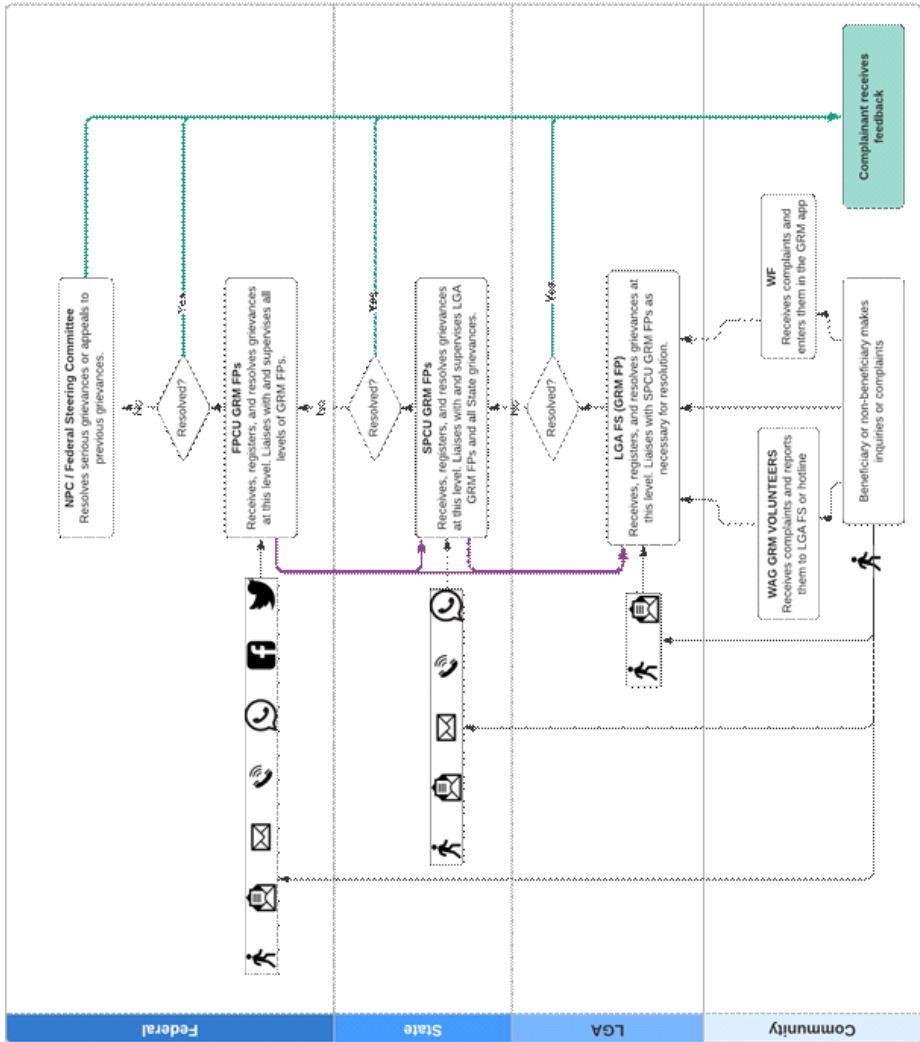
		<p>5. If the complainant chooses to seek resolution through the project, the complaint is forwarded to the SPCU GRM FPs and SPCU Coordinator. The SPCU Coordinator and relevant Project authorities investigate and take necessary action against project staff and contractors, in accordance with the project Human Resources manual, employment contracts, and any applicable civil service or labor laws or regulations.</p> <p>6. The World Bank should be immediately notified of SEA/SH cases by the SPCU FP/SPCU Coordinator.</p> <p>7. The outcome of any action is communicated to the complainant. Generally, the SPCU GRM FP (who is also the gender/social safeguards officer) should be tasked with remaining in contact with the survivor to communicate developments.</p>		
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		<p>8. If the complainant chooses NOT to seek resolution through the project, the GRM FP closes the complaint having collected the minimal, anonymized data listed under (1) above with the survivor's consent.</p> <p>The GRM is not responsible for investigating claims of SEA/SH under the project. The GRM may only provide the individual with referrals to service providers and provide the report of the complaint to SPCU/FPCU authorities for their action, when a complainant has provided consent and chosen to seek resolution through the Project.</p> <p>Consult the GBV Guiding Principles in Annex 2.</p>		
7.B Other forms of GBV (not SEA/SH), e.g., IPV and domestic	'My husband threatened to divorce me if I don't hand over my livelihood grant/savings.'	1. Complaint is received and, using an empathetic and supportive approach, with the survivor/complainant's consent, is registered in accordance with	LFS and SPCU GRM FPs, Gender/GBV Anchors and Advisers are responsible for ensuring GBV-related complaints are treated according to the GBV	7 DAYS (to make referrals; there is no investigation or accountability

<p>conflicts</p> <p>(e.g. between project beneficiaries or community members - not involving staff or contractors)</p>	<p>"Other wives of my husband are always fighting me because I am the only member of a WAG"</p> <p>"My husband does not allow me to go out for trainings and meetings."</p> <p>"Since joining a WAG my wife has left me and now, I am the only one taking care of the children in the HH."</p> <p>"My husband has threatened me to leave his house because of my participation in WAG."</p> <p>"My husband has abandoned me and neglected the</p>	<p>confidentiality protocols/specialized data procedures outlined in the GBV Guiding Principles (e.g., minimal, confidential data collection and use of the survivor centered approach) and using the special collection form in the GRM app. Any mandatory reporting requirements should be disclosed to prior to collecting information.</p> <p>2. Receiving GRM FP shares complete information about the potential outcomes of the complaint, including potential for referral to outside service providers including healthcare, psychosocial support and justice/security actors. The survivor/complainant should clearly understand that the GRM is an administrative procedure, not a legal/judicial one, and the survivor is free to report to the police or seek legal advice at any time (this should be among the service referrals made available).</p>	<p>and Guiding Principles in Annex 2.</p> <p>The survivor/complainant maintains the right to choose whether they take up the referrals provided. They also have the right to change their mind and stop seeking actions on their complaint.</p>	<p>mechanisms in these cases)</p>
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	<p>children and has stopped providing in the home because I am in WAG.”</p> <p>“My husband beats me and forcefully collects money from me.”</p>	<p>3. The survivor/complainant chooses whether to seek a referral through the project or to leave the complaint as is and do nothing further.</p> <p>4. If the complainant chooses to seek a referral, the GR FP at LGA or SPCU level works with the SPCU GBV/gender officer and uses the GBV referral mapping and GBV Accountability and Response Framework to provide a referral to the appropriate service provider.</p> <p>5. If the complainant chooses NOT to seek further action through the project, the GRM FP closes the complaint having collected minimal, anonymized data.</p> <p>There is no investigation, verification or other action when the complaint does not relate to SEA/SH. The only thing the project can do is provide referrals to service providers.</p>		
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Figure 1. NFWP GRM Process Flowchart

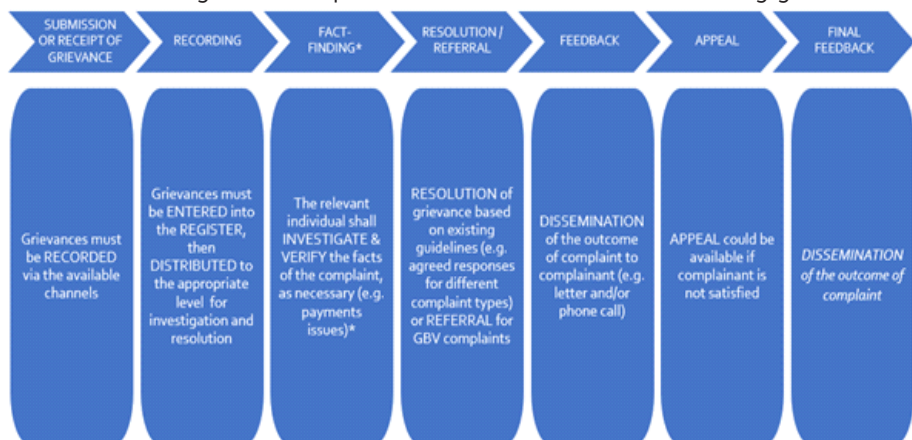


Chapter 7

STANDARD OPERATING PROCEDURES FOR HANDLING GRIEVANCES

1.1. Basic Processes In Grievance Handling

The following are basic processes to be followed in handling grievances:



*There is no investigation for GBV complaints – these should be referred via the appropriate referral pathway if the complainant so desires.

1.1. RECEIVING GRIEVANCES

Grievances can be received in person, via telephone, in writing (letters or email), or via social media (see Grievance Flow above). Receiving grievances or

complaints is the first stage in the grievance handling process and requires good listening and empathetic skills.

By Telephone

Greet the complainant and introduce

yourself (you may speak the local dialect if you understand the language, ideally the GRM FPs should be able to speak the main languages of their State, if you need to speak in pidgin, please speak in pidgin). If speaking in pidgin English, you may greet as follows: This na the Nigeria for Women Project, my name na Mrs Thomas, how we fit help you today?

Ask the person calling for his or her name, location, and community. You could also ask the age. You should also ask if the caller is calling on behalf of a beneficiary or is self-representing.

Afterwards, you ask the caller to state the reason for calling or you could ask them what assistance or help they require

Listen attentively to the complainant and make notes so as not to lose any information. You may wish to either directly input info in the complaints application or to take detailed notes

on paper while the caller is talking about his or her complaint.

After listening to the complaints, thank the complainant for the information and apologize (e.g. Many thanks Mrs. Musa for letting us know about this problem. We are sorry that you are experiencing this problem. We will try and address this as quickly as we can. First, I have to ask you a few questions so that I can help you).

At this point any complaints that seem to be GBV-related (including SEA/SH) should be treated according to the Guiding Principles in Annex 2.

The next stage will be to ask questions in order to interrogate further. For example, if a beneficiary is calling to complain about not being included in a WAG, the first question to ask is to verify whether the caller is in one of the LGAs receiving the project in their State.

After gathering all the necessary information, the officer should notify

the complainant on the next steps and actions to be taken based on the complaints categories table above.

Then the officer should find out if it's okay to get back to them on the number that they had used to make the grievance or if the complainant would like to leave alternate contact information. The officer should let the complainant know that feedback on the progress made in resolving the issue will be done via the supplied contact address or phone number.

The officer should also notify the complainant on a time frame that he/she should expect to receive feedback. Please refer to the resolution times on the action table for resolving complaints and ensure that a reasonable time frame is given. Also refer to the grievance redress policy or service charter. If for example the time frame given is 7 days and the issue was resolved in 3 days, the officer should inform them as soon as the case is resolved and not wait till 7 days to inform the complainant. But if it is clear that the

case will take longer than 7 days to address, the officer should advise the complainant accordingly, and commit to giving the complainant an update within 7 days.

If it is a simple case where the GRM FP can resolve the problem quickly then they can say: This is what we are going to do. I will speak to the xxxxxxxx now and get back to you. Please leave your number and I will call you back in 30mins.

B. In Person

Grievances can also be received in person at all levels of the project. When receiving grievances in person, the steps mentioned above apply. However, the main difference is that when you greet and welcome the complainant, the officer should offer a seat and make the environment conducive in a private room if possible so that the complainant is comfortable. For example, Welcome to the Nigeria for Women Project Grievance Desk. I am Mr Abubakar, Please how can I help you today?

Second you listen attentively (take notes as the complainant is stating the problem) or alternatively if the complainant prefers to write you can allow the complainant to submit a written letter describing the complaint.

At this point any complaints that seem to be GBV related should be treated according to the Guiding Principles in Annex 2.

After reading the written complaint, the GRM FP can then follow up with further questions. For example, if the complaint is about being excluded from receiving a livelihood grant, the first step will be to establish whether that person was meant to have received the livelihood grant. Thereafter, the beneficiary should be advised on what next steps will be taken (e.g. conduct investigations, cross check with list of grant beneficiaries, etc.) and provided with the time frame within which feedback will be given. To provide feedback to the complaint on the

outcome of their complaint, the GRM FP can request for a contact number via which the complainant can be reached or provide a time frame for the complainant to visit the office a second time to find out whether or how their complaint has been resolved.

1.1. ASSESSING GRIEVANCES

Any complaints that seem to be GBV- or SEA/SH-related should be treated according to the Guiding Principles in Annex 2. This category of complaints (Category 5) does not include investigation or assessment of the validity of the grievance.

For complaints that are in Categories 1-6 (i.e. not GBV or SEA/SHA complaints), after receiving and acknowledging receipt of the grievance, the grievance desk officer should conduct an assessment of the grievance. The initial assessment will begin with:

* Identifying if it is a valid grievance or a grievance that can be addressed within the scope of the project. Does it contradict what the project has committed to offering?

* Once it is established if it is a valid grievance that falls within the project, the officer will also need to establish if all the information needed to conduct the investigation has been provided. Does it clearly indicate what has happened, who was there, etc.?

* Identifying what category of issue, the complaint falls under.

* Determining what state and which staff should be responsible for further investigation and resolution.

Once this has been established, the GRM FP then makes contact with the staff that will work on resolving the issue and provides an initial assessment of the grievance and all the necessary details to that staff person for further investigation and resolution. For example, where the

FPCU GRM FP receives a grievance (most likely through the telephone), she/he will be expected to call the SPCU in the State where that the grievance has been made for further action.

1.1.RECORDING GRIEVANCES

The PMIS has a GRM Module and a corresponding GRM Intake Application to enable the complete and accurate collection of data related to complaints. The GRM FP receiving the complaint should record the grievance in the grievance register/app and then provide the complainant with a reference number from the register/app for easy tracking of the complaint. It is important that the information recorded in the grievance register is accurate as this will be used to analyze the grievance trends that would inform learning in the organization.

GBV and SEA/SH grievances should be recorded according to the Guiding Principles in Annex 2 which stress confidentiality, minimal data collection, and a survivor-centered approach.

1.2. INVESTIGATING GRIEVANCES

Only grievances in Categories 1-6 will be investigated by the GRM team. Grievances in Category 7 (i.e. GBV and SEA/SH-related grievances) should NOT be investigated. Please refer to the guidelines in Annex 2 for how to manage these types of complaints.

Investigations are critical to the success of resolving non-GBV-related grievances. It is important that investigations are carefully executed. Investigations should usually involve collecting, analyzing and assessing facts on grievances made. In conducting investigations on grievances received, it is necessary for the GRM FP to have a plan on how to conduct these investigations in a fair, respectful,

and responsible manner in line with the Project 'Do No Harm Principles'. For example, the plan can involve identifying the staff to be interviewed on the issues and the relevant persons that will be able to address the issue raised in a prompt manner (if beyond the capacity of the GRM FP to do so). Also, it may involve the need to follow up with the external service providers (depending on the grievance), review documents (beneficiary register, payment schedule, etc.). After drawing up a plan of action, the next step will be to interview or consult the necessary persons and documents. These consultations are important for this case and should be carefully conducted to ensure that all the facts of the case are established and solutions found. It is important for all the staff involved in handling grievances to have the full contact details of all LFSs, WFs, SPCU, and FPCU GRM FPs. This will help ensure proper coordination of investigations and resolving of grievances. A WhatsApp group for all those

involved in handling and managing grievances has been created to facilitate communication between GRMFps.

Once investigations have been concluded, notes from the investigation should be recorded in the grievance register. This should include responses from the staff interviewed and the GRM FPs' observations and findings. For example, if a grievance is about a WF not being on time to WAG meetings and trainings, the GRM FP will need to:

- * Talk to other members of the WAG to determine if this an accurate representation of WF behavior

- * Speak to the WF to understand their schedule and any challenges there are facing

- * Try to ascertain if this is an issue of the WF not having enough time to carry out their duties or if the WF has been negligent by not showing up on time

- * If there is evidence the WF has been

neglecting their duties, the LFS and SPCU should determine the appropriate action to be taken against the WF (e.g. perhaps issuing a warning that if they continue to show up late they may lose their position)

- * Once a decision has been made, the GRM FP records the decision in the grievance register and communicates the feedback to the beneficiary.

1.3. FEEDBACK TO COMPLAINANTS ON GRIEVANCES

The complainants should be informed of the outcome of investigations and efforts to resolve their grievances. It is important that at the point the grievance is being made whether in person, by telephone, or social media, the complainant should be asked their preference for receiving feedback on progress made in resolving the grievance. Remember that complainants can choose to

complain anonymously or choose not to receive feedback or leave contact information. They should only be contacted about their complaint with their consent.

If the grievance was made by telephone, with the complainant's consent the GRM FP can call the number of the complainant to provide feedback. If the complainant does not have a telephone and the grievance was made in person, the complainant can be asked if there is a contact number that can be used to reach them or if they are able to come back to the office within a specified timeframe to collect feedback on the outcome of the investigation. LFSs may also reach out by asking the complainant if it is okay to come to their homes or meet at a community hall to discuss. Alternatively, if the WAG GRM Volunteers or community leaders collated and made the grievance on behalf of the beneficiaries, it is most likely that they may have a phone. Feedback can be provided via phone or as

mentioned above, they could be asked to come back within a specified timeframe to receive feedback on the outcome of the investigations.

It is important to give feedback to complainants on their cases or referrals as it will give them confidence that the project is concerned and committed to efficient service delivery. In cases where it will take more time than is specified in the Service Charter or categories table to resolve a complaint, the GRM FP should provide the complainant with feedback on progress being made in undertaking an investigation.

For all feedback delivered to the complainant, the Project staff member delivering the feedback should ask the complainant whether they are satisfied with the response they received. The complainant's response as to whether they were satisfied should be logged in the grievance register as it is a key M&E indicator.

Chapter 8

MONITORING, EVALUATION AND REPORTING ON GRIEVANCE TRENDS

1.1. Monitoring Indicators for GRM

The GRM will be monitored using both qualitative and quantitative indicators. The

qualitative indicators will be based upon the basic principles for handling and managing grievances effectively mentioned above. The GRM will therefore be monitored using these indicators:

Indicators	Data Source
Participation	
Percentages of grievances registered by type and location {state, LGA, community, etc.}	GRM Register
Effectiveness	
Percentage of grievances resolved	GRM Register
Percentage of grievances where complainant was provided with a referral to a service provider (GBV only)	GRM Register
Percentage of grievances resolved or referred within specified time frame	GRM Register
Time taken to resolve or refer complaints (disaggregated by different types of grievances, State, LGA, etc.)	GRM Register
Efficiency	
Percentage of complainants satisfied with grievance redress process	GRM Register
Percentage of recurring complaints by category	GRM Register
Percentage of complaints satisfactorily address within specified time frames	GRM Register
Accessibility	
Citizens reporting that the GRM is accessible (dimensions of remoteness, language, education and income level)	Beneficiary Consultations / Project Responsive Feedback Mechanism
Citizens reporting awareness of the GRM including the process	
Transparency and Fairness	
Citizens reporting that the GRM procedures and outcomes are transparent	Beneficiary Consultations / Project Responsive Feedback Mechanism
Learning and Adaptation	
Changes informed by GRM data to improve policies, processes and service delivery	Admin data

1.1. Monitoring and reporting on grievance trends

Reporting on the grievances received is crucial to the success of the Project. It will help in the following ways:

- * Providing information to the project on the types of grievances received
- * Enabling the project to identify weak areas where service improvement is needed
- * Enabling NFWP to initiate strong systems and processes that would improve service delivery
- * Enabling NFWP to make any changes necessary in the GRM processes and/or structures

The GRM FPs at FPCU will be expected to manage information on all grievances received. They will collate all grievance reports produced by SPCU GRM FPs. They will also be responsible for providing monthly and quarterly reports on all

grievances received and resolved which will be reported to the M&E Unit, NPC, World Bank, and Federal and State Steering Committees, as necessary. Monthly or quarterly reports can be generated from the grievance register in the PMIS.

The FPCU and SPCU GRM FPs will be responsible for producing annual reports on the GRM which will be disseminated publicly (e.g. via the NFWP website). Additionally, they will produce synopses of key findings and any recommendations arising from the monthly and quarterly reports and share these with the NPC and SPCU Coordinators for action. The annual GRM report should consist of the following:

1. Percentages of grievances received for the reporting period
2. Percentages of grievances resolved or referred, and the average time it took in resolving complaints
3. Percentages of grievances not resolved or referred and why they were not resolved
4. Percentage of complaints

satisfactorily addressed within specified timelines

5. Categories/types of grievances received
6. Most frequent grievance types
7. Areas where complaints occur most
8. Location where grievances occurs most
9. Actions taken to resolve or refer grievances
9. Areas that need service improvement
10. Steps taken to improve weak areas

Information on allegations of GBV/SEA/SH will be managed differently from other complaints. As indicated above, the GRM will collect only limited, anonymized information about these complaints, using the special collection form within the GRM app. This information is limited to (a) the nature of the allegation or incident; (b) whether the incident is likely to be project related; (c) the age/sex of the survivor (if known); and (d) whether the survivor was referred for services.

1.2. Report template

Introduction

In this section, please state the (number of grievances received, number of grievances resolved and average time it takes in resolving grievances, number of grievances not resolved). E.g. NFWP received a total number of 200 grievances this year. 100 of them were successfully resolved. 50 of them were not resolved. The average time for resolving grievances was 15 days. 20 grievances could not be resolved while 10 grievances are still under investigation.

Description

Please briefly describe the categories/types of grievances received, most frequent grievances and areas/locations where grievances come from. E.g. A total of 200 grievances were received during this period. 50% of those grievances came from beneficiaries who had not received grants.

Outcomes

Please provide details on the actions taken to resolve grievances and the outcomes from these actions.

Challenges

Please state any challenges you faced in handling/managing grievances received.

Service Improvement

Please provide information on areas that need service improvement based on the grievances received.

You can also mention steps that have been taken to improve these weak areas if applicable.

Recommendations

Please state any recommendations you may have

Indicators	Result
Percentages of grievances received for the monitoring period	
Percentages of grievances resolved or referred	
Percentages of grievances resolved or referred within the specified time frame	
Types of grievances resolved or referred within the specified time frame	
Percentages of grievances not resolved or referred within the specified time frame	
Types of grievances not resolved or referred within the specified time frame	
Average time taken to resolve or refer grievances	
Percentages of outstanding grievances (still)	
Most frequent grievance types	
States where grievances occur most	
Local government areas where grievances occur most	
Communities with the highest grievances	

1.1. Soliciting Beneficiary Feedback

Beneficiary feedback will help strengthen the GRM and should form part of the grievance mechanism. It also helps to ensure constructive engagement between service providers and beneficiaries. Collecting beneficiary feedback can be useful to NFWP in the following ways:

- To get feedback on the grievance handling process under NFWP
- To get feedback on the delivery of services under NFWP

Feedback on the grievance handling process

For the GRM to be effective and successful, it is necessary that the GRM FPs and M&E team organize periodic consultations with beneficiaries on a quarterly or annual basis to collect their views on the grievance handling process. This will help the project in identifying areas in the process that need to be removed

or strengthened to ensure that it is beneficial to the users. For example, in collecting feedback on the GRM, communities can be asked about the time taken to resolve grievances, response rates, satisfaction of beneficiaries with grievance resolution, satisfaction with the telephone hotlines, staff attitude, etc.

Feedback on services provided

It is equally important to receive feedback (both good and bad) on services being delivered by the project. This would help in identifying weak areas that need service delivery improvement. For NFWP, beneficiary feedback consultations would include the SPCU Coordinator, GRM FPs, M&E staff, community leaders and WAGs.

Key principles to follow in collecting beneficiary feedback

1. Make the beneficiaries feel as comfortable as possible
 - Follow the local custom, if in an area where women are organized

Annex 1: NFWP GRM

Communications & Service Charter

Communications Messages

Some Essential Messages:

- How can a grievance be submitted?
- What are the types of grievances that can be submitted?
- What are NFWP's timeliness standards for handling grievances?
- What are the limitations on NFWP's jurisdiction to handle grievances?
- What are the options available to a person if they are dissatisfied with how their grievance was handled or with the outcome?

Messages to Build Trust:

- There is no financial charge for making a grievance
- People are encouraged to complain if they are dissatisfied or feel aggrieved
- Grievances are treated confidentially; there are no adverse repercussions for a complainant.
- Grievances are valued by NFWP because they help it improve its policies, systems and service delivery.
- Anonymous reporting of grievances is allowed

- All complaints are welcome/No complain is too small

These MUST be baked into the Project communications strategy as a whole and should be regularly reiterated!

NFWP Service Charter

Nigeria for Women Project Our Commitment to you!

What is the NFWP Service Charter?

This service charter is the commitment of the NFWP Federal and State Coordinating Units to providing quality services under NFWP. It provides details on services and standards to expect as well as our service delivery targets under the NFWP.

What are the key services offered under NFWP?

The project aims to bring women in targeted areas together through "Women Affinity Groups" (WAGs) to improve their livelihoods by building social capital in the communities and

through livelihood grants, innovations and partnerships. The project is taking a holistic approach to the upliftment of women and thus, the community. NFWP will provide savings, life skills, and business skills training, as well as linkages to markets and promotion of innovation in economic activities.

Who are NFWP's key beneficiaries?

ALL women resident in the target LGAs who are 18 years and older and are engaged in economic activities.

Our service targets for the NFWP

1. To ensure that women in the target LGAs are enrolled in WAGs
2. To ensure WAG member receive trainings and grants to support improved savings and livelihoods
3. To provide good quality and accessible trainings for as WAGs as possible within given resources
4. To provide coaching and mentoring which is timely, accessible, effectively delivered

Standards of service you should expect from us

1. We guarantee that the WAG formation process in each community will take not more than 4 weeks.
2. We guarantee inclusion of all eligible women within the Project's capacity.
3. We guarantee to provide training to all WAGs at community level using languages easily understood by beneficiaries.
4. We encourage WAGs to freely make their rules through their Constitution, including any fees or fines for agreed offenses.
5. We guarantee that all WAG meetings will take place in a safe space.
6. We guarantee that WAGs will be safe from discrimination, partiality, or favoritism on any grounds, following the project's 'Do No Harm' Principles.
7. We guarantee high professionalism in line with the project's 'Do No Harm' Principles.

What we expect from beneficiaries

1. To adhere to the NFWP principles
2. To attend weekly meetings with their WAG and all trainings
3. To form savings groups and mobilize savings for their income generating activities.
3. To take up support from Ward Facilitators and Barefoot Business Counsellors in establishing or expanding income generating activities

Providing feedback on our services If you are not happy with our service

standards or you want to make suggestions on improving our services, you can do it in the following ways:

1. Complain to the WAG GRM Volunteer, Ward Facilitator, or the LGA Field Supervisor in your local Government, or the GRM Focal Points at the State or Federal levels. Call dedicated telephone hotlines between the hours of 9am-4pm Monday through Friday. The numbers are: FPCU: 09057309945

Abia: 08063302760
Kebbi: 09122357299
Niger: 08033224917
Ogun: 08008001234
Taraba: 09124377879

2. We will ensure that your grievances will be treated in confidence and you will not be punished for submitting complaints.
3. Where we can handle your complaints, we will give you feedback within 28 days, or let you know if it can only be handled by someone else.

NFWP is committed to serve and make you happy. We are... for women!.

Annex 2: GBV Guiding Principles

Guiding Principles

The NFWP GRM is grounded in the following guiding principles that need to be understood by all, especially those who will be interacting with survivors and those managing complaints relating to GBV, including SEA/SH. Those responsible for managing GBV complaints should have the capacity and capability to do so as it is a very sensitive area.

Safety & Well-Being: The safety of the survivor shall be ensured at all times, including when a complaint is made and is in the process of being addressed by the project. The NFWP GRM will need to consider potential dangers and risks to all parties (including the survivor, the complainant if different, the subject of the complaint, and the organizations involved), and streamline ways to prevent additional harm in all the complaint handling process.

The survivor is never to blame for reporting an act of GBV and should never be made feel judged or disbelieved. On the contrary, it is important that they feel that their story is heard, believed and valued. The actions and responses of the complaint mechanism will be guided by respect for the choices, needs, rights, and the dignity of the survivor. Furthermore, if a survivor chooses to seek further action through the Project in the case of an SEA/SH complaint, while the case is pending investigation by the appropriate team in the SPCU/FPCU (not the GRM team), the SPCU/FPCU should make efforts to ensure that the subject of the complaint does not have further contact with the survivor, such as by preventively suspending employment, and each survivor should have control over each step of the process and decisions making.

Confidentiality: The confidentiality of complainants, survivors, and other relevant parties must be respected at all times. All GBV-related complaints

will be kept strictly confidential and information will be shared only on a strict need-to-know basis. The GRM will collect only limited, anonymized information about these complaints, using the special collection form within the GRM app. This information is limited to (a) the nature of the allegation or incident; (b) whether the incident is likely to be project related; (c) the age/sex of the survivor (if known); and (d) whether the survivor was referred for services. Where a survivor chooses to proceed with accountability measures, any other information will be kept by the SPCU GM FP or FPCU GM FP in password-protected files with highly restricted access available only on a need-to-know basis.

Survivor-Centered Approach:

All prevention and response actions will need to balance the respect for due process with the requirements of a survivor-centered approach in which the survivor's choices, needs, safety, and wellbeing remain at the center in all matters and procedures.

As such, all actions taken should be guided by respect for choices, needs, rights and dignity of the survivor, whose agency and resilience must be fostered through the complaint process.

Accessibility and non-discrimination:

The mechanism must be accessible to all potential complainants and sufficient information must be given on how to access it, making the complaints process accessible to the largest possible number of people. This includes identifying and instituting various entry points that are both gender and context-sensitive. To facilitate incidents reporting and avoid stigmatization, reports from third parties (witnesses, people suspicious or aware of an incident, etc.) must also follow accountability protocols.

Considerations regarding children: While all GRM actors should follow a survivor-center approach that prioritizes the consent of the survivor,

obtaining the consent of children is different than obtaining the consent of adults, and may involve the application of different standards. “Children are considered unable to provide consent because they do not have the ability and/or experience to anticipate the implications of an action, and they may not understand or be empowered to exercise their right to refuse” (World Bank 2020: 8). Special provisions are required for SEA/SH allegations that involve minors, especially given how vulnerable they are, including child-friendly feedback channels and specialized training for staff.

Intaking and responding to GBV complaints

Complaints of this nature should be handled differently from the other categories of complaints, because of the sensitivity and potential for stigma or further harm to a survivor. Accordingly, the process for resolving allegations will be different from other complaints. As further explained below, where the

complainant/survivor makes an allegation involving SEA or SH, the project will have specific procedures in place to initiate disciplinary actions against an alleged perpetrator (with the survivor's consent, and if the incident is confirmed). For other forms of GBV that may be reported to the GRM, such as IPV and domestic conflicts, the survivor/complainant can be referred to GBV service providers, but these claims are NOT subject to investigation or verification by the project. Follow the guidance below in the uptake and resolution of these two types of complaints.

Table 1. Illustrative operating procedures and response protocol for GBV/SEA/SH allegations

Step in the GRM	Function	Detail
Uptake	Receive SEA/SH allegations through multiple reporting channels	<p>GBV-related complaints can be made using all of the project's grievance channels, including State and Federal hotlines, WhatsApp, in-person complaints, etc.</p> <p>Intake points include WAG Grievance Volunteers (who should facilitate survivors to make complaints where they choose to do so, but should not record GBV/SEA/SH incidents in their record books), LFS and WAG Support Officers, Gender/GBV/Safeguards Anchors and Advisors at the SPCU and FPCU level.</p> <p>Anyone who interacts with a survivor as part of the GM process should understand and implement the survivor-centered approach, creating a supportive, empathetic environment, responding without judgment, and prioritizing confidentiality, safety and the survivor's choice.</p>
Sorting and Processing (Documentation)	Document and register allegation	<p>The entity to whom the allegation was disclosed should provide information on any mandatory reporting requirements. The allegation is then captured: the recipient requests the consent of the survivor to share some non-identifiable, anonymous data with the SPIU/FPIU and the World Bank, specifically (1) the type of incident, (2) if the alleged perpetrator is associated with the project (if known), (3) the age and sex of the survivor (if available) and (4) whether the survivor was referred for services. In the absence of consent, there should be no sharing or recording of data.</p> <p>If consent is given, this information is recorded in the specialized forms within the PMIS system.</p>
Acknowledge and follow-up	Refer the survivor to relevant GBV service providers.	<p>The entity to whom the allegation is disclosed acknowledges receipt of the grievance and provides honest, clear, and complete information about services available from the various agencies that may be able to assist the survivor, as well as details on how to access them. The range of proposed referrals typically encompasses service providers of health/medical, psychosocial, safety-and security-related, justice and legal aid, economic empowerment, and livelihood support (see Referral Pathways for your State and LGA). The entity to whom a SEA/SH allegation is disclosed should inform the survivor of his or her legal rights and of the costs and benefits of choosing various referral options.^b The survivor/complainant should also clearly understand that the GRM is an administrative procedure, not a legal/judicial one, and the survivor is free to report to the police or seek legal advice at any time (this should be among the service referrals available). The entity to whom the SEA/SH</p>

		<p>allegation is disclosed explains to the survivor his or her right to control whether and how information about the case is shared with other agencies or individuals as well as any implications of sharing information with other actors. Survivors should be given adequate information to provide informed consent and should understand that they have the right to place limitations on the type of information they want shared and to specify which organizations can and cannot be given the information. As noted above, where possible, survivors should be notified of any mandatory reporting requirements prior to the disclosure of any information that could trigger mandatory reporting (World Bank 2020: 44 as cited in GMs for SEA/SH in WB-Financed Projects).</p> <p>The survivor's consent must be documented. This means that the survivor can choose to fill out, sign, or fingerprint a consent form that outlines the survivor's choices regarding whether information about the case is shared with other agencies or individuals and for what purpose. Ultimately, it is up to the survivor, and only the survivor, whether to take up the proposed referrals.</p> <p>Where the allegation appears to involve SEA or SH, the survivor also has the option to seek accountability of the perpetrator through the project's GM, as further discussed below. Where the allegation involves other forms of GBV that are not related to the project (for example IPV), then the survivor should still be provided with referrals to GBV service providers and the complaint recorded, however there is no investigation or verification of these complaints.</p> <p>The survivor/complainant should be provided with complete information about the possibility of reporting an incident of SEA/SH to the project and seeking perpetrator accountability. They should also understand that the GM process will not give rise to any compensation or payment, and is an administrative, not a legal process. They should also understand that participating in the process means that a person designated by the project will contact the survivor/complainant (the person's identity should be provided), and that the alleged perpetrator and others may be contacted who may know the case to verify the information contained in the complaint.</p>
Verify, investigate and act (further action by the PIU - not sole responsibility of GRM)	<p>Provide support services to survivors.</p> <p>Review allegation and determine the likelihood that it is project-related.</p>	<p>GBV service providers support survivors until their services are no longer needed.</p> <p>Where the allegations involve SEA/SH, if a survivor wishes to proceed with accountability measures, the grievance team and State or National Coordinators consider the SEA/SH allegation, according to previously established protocols, to determine the likelihood that it is related to the project. The perpetrator's</p>

		employer is then responsible for determining appropriate sanctions.
	Implement sanctions for perpetrators in accordance with employment contracts and local labor laws.	If SEA/SH allegations are confirmed, the appropriate party—i.e., the employer of the perpetrator, which will be the Implementing Agency/FCPU/SPCU,—implements the adequate remedy/disciplinary action in accordance with the project's Human Resources manual, employment contracts, and any applicable civil service or labor laws or regulations.
	Resolve and close cases.	<p>There are two elements related to resolving and closing SEA/SH cases: (1) the internal project system, in which the survivor is referred to GBV service providers for support and appropriate actions are taken against perpetrators through the established SEA/SH resolution mechanism; and (2) the support the survivor receives from GBV service providers. When an allegation is received, it is registered in the project grievance mechanism and referred to GBV service providers, with the consent of the survivor.</p> <p>If the survivor does not wish to submit an official complaint with the employer, the complaint is closed. If the survivor proceeds with the complaint, the case is reviewed by the established SEA/SH resolution mechanism, and a course of action is agreed on; the alleged perpetrator's employer takes the agreed-on disciplinary action. Once an action is deemed appropriate according to the established SEA/SH resolution mechanism, the grievance mechanism operator is notified that the case is closed (World Bank 2020: 47 as cited in GMs for SEA/SH in WB-Financed Projects).</p> <p>In other words, if the survivor has been referred to the relevant GBV service providers, received adequate assistance, and if appropriate actions have been taken against the perpetrator or if the survivor does not wish to submit an official grievance with the employer, the GRM FP (at whichever level the case terminates) can close the case. The GRM FP records the resolution of the incident, the date it was resolved, and marks it as closed. The FPCU and SPCU and World Bank are notified that the case is closed.</p>
Monitor and evaluate	Monitor, track, and provide regular reports.	<p>The GRM team compiles data about reported project-related SEA/SH allegations, making sure that it does not contain any information with the potential of being identifying, including names and addresses of survivors, their families, or of alleged perpetrators.</p> <p>The GRM team is responsible for issuing regular (e.g., monthly) reports that can contain data such as the total number of allegations, the number of alleged perpetrators who have a</p>

		relationship to the project, the type of incident, and the age and sex of survivors.
Provide feedback	Respond to survivors.	<p>The SEA/SH allegation recipient needs to provide ongoing feedback to the survivor throughout the process but especially: (1) when the grievance is received; (2) when the case is reported to agency headquarters; (3) when the investigation commences or when a determination is made that there is an insufficient basis to proceed; and (4) when an investigation concludes or when any outcomes are achieved or disciplinary action taken. The grievance mechanism should include templates and provisions for providing feedback to the survivor and the subject of the grievance (IASC 2016a as cited in GMs for SEA/SH in WB-Financed Projects).</p> <p>The responsibility for providing ongoing feedback to the survivor should rest with the GRM FP (who is also the gender anchor/social safeguards officer).</p> <p>When an investigation is concluded, the survivor must be informed first to assess his or her safety before the investigation's conclusions are communicated to the perpetrator, particularly when sanctions will be taken.</p>

GBV = gender-based violence; SEA = sexual exploitation and abuse; SH = sexual harassment.

- a. While most organizations should already have their own intake forms, samples can be found at <http://www.gbvims.com/gbvims-tools/intake-form/>.
- b. For example, in the case of reporting to the police, this means explaining “who will interview them, who determines if the case proceeds to court, what

happens if a report is made but the police does not press charges, what will happen if the matter proceeds to court (how much will it cost, how long it will take, what the survivor will need to do),” the likelihood that the case will actually proceed to court and/or result in conviction, etc. (USAID 2017: 68 as cited in GMs for SEA/SH in WB-Financed Projects).

Consent for Release of Information

This form should be read to the survivor or complainant in their first language, after a complete explanation of their options and the GM process

I, _____, give my permission for (**Name of PIU/GRM**) to share information about the incident I have reported to them as explained below . I understand that I am free to consent to all or only one of the options (for example, only to have access to services without consenting to the GM process), or may refuse consent to any option.

1. I give (**Name of PIU/GRM**) permission to share information about my complaint with the service provider(s) I have indicated below. I understand that the information provided will be treated with confidentiality and respect, and will only be disclosed if necessary to enable me to receive assistance I have requested. I retain the right to change my mind at any time regarding the disclosure of information. I would like my information to be communicated to: (tick the appropriate boxes and specify the name, department and agency/organization, if applicable)

Security services / police (specify): _____

Psychosocial services (specify): _____

Health / medical services (specify): _____

Safe place / refuge (specify): _____

Legal assistance services (specify): _____

Protective services (specify) : _____

Livelihood services (specify): _____

Other (specify type of service, name and organization): _____

1. Authorization to be marked by complainant: <i>(or parent/guardian if complainant is under 18)</i>	Yes	No
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2. I give (**Name of PIU/GRM**) permission to share information about my complaint with the alleged perpetrator's employer so they can initiate the complaint management mechanism . I understand that this will be an administrative process and not a judicial one, and can only give rise to administrative or employment-related penalties against the alleged perpetrator (if any), not criminal penalties . I understand that the GM will not give rise to any compensation or reparation, but that I have the right to seek legal advice or make a report to the police at any time.

I understand that the process will involve an inquiry, and that I will be contacted to provide details of the complaint. I have received detailed information about the GM process, who will contact me, with what purpose and the time frame, and I agree to participate in these steps. I retain the right to change my mind at any time regarding the disclosure of information , and if I do, the process of handling my complaint will be interrupted. The information provided will be treated with confidentiality and with respect, and will only be disclosed if necessary in the process of verifying my complaint.

I understand that if I choose not to pursue the complaint management mechanism (if I underlined "no" below), this means that my complaint will be closed and none of the confidential and/or identifiable information will be shared. This does not affect my rights to access support services.

2. Authorization to be marked by complainant: <i>(or parent/guardian if complainant is under 18)</i>	Yes	No
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