Ghana Infrastructure Investment Fund

Sexual Exploitation, Abuse and Harassment Policy

As approved by the Board of Directors on 24th August 2026

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SEXUAL EXPLOITATION, ABUSE AND HARASSMENT POLICY

1. Introduction

This Sexual Exploitation, Abuse, and Harassment Policy ("Policy") is issued by the Board of Directors (the "Board") of the Ghana Infrastructure Investment Fund (the "Fund" or "GIIF") in pursuance of the Fund's object as a body corporate wholly owned by the Republic of Ghana and established pursuant to the Ghana Infrastructure Investment Fund, Act of Parliament, 2014 (ACT 877) and the Ghana Infrastructure Investment Fund (Amendment) Act, 2021 (ACT 1063). The Fund's mandate is to mobilize, manage, coordinate, and provide financial resources for investment in a diversified portfolio of infrastructure projects in Ghana for national development. The Ghana Infrastructure Investment Fund (GIIF) is committed to conducting its institutional activities and financing infrastructure in a manner that respects human dignity, equality, safety, and the rights of all persons. Sexual exploitation, sexual abuse, and sexual harassment (SEAH) are abuses of power and trust that can cause serious and lasting harm to individuals, communities, and institutions. GIIF recognizes that SEAH risk can arise within the workplace and in connection with the preparation, financing, implementation, supervision, and operation of GIIF-financed projects and sub-projects. Risks may affect staff, applicants, interns, consultants, contractors, workers, community members, service users, and beneficiaries, including people whose age, disability, poverty, displacement, dependency, or unequal access to resources may increase vulnerability. This Policy establishes a framework for prevention, reporting, assessment, investigation, response, protection, and oversight. It complements, rather than replaces, the GIIF Human Resources Policies and Procedures Manual, the GIIF Policy on Protection of Whistleblowers and Witnesses, the GIIF Environmental and Social Safeguards (ESS) framework, the Ghana Civil Service Code of Conduct and Sexual Harassment Policy, and applicable law. Detailed operationalization and application of this Policy are prescribed in a separate GIIF SEAH Standard Operating Procedure (SOP).

The Ghana Infrastructure Investment Fund (GIIF) has zero tolerance for all forms of Sexual Exploitation, Sexual Abuse, and Sexual Harassment (SEAH) within the Fund. This Policy applies to all of the Fund's business activities, both at the Head Office and across all sub-funds created by the Fund. This Policy is supported and endorsed by the GIIF Board of Directors (the Board), which has ultimate responsibility for this Policy's implementation.

2. Purpose and Objectives

The purpose of this Policy is to prevent SEAH, provide safe and accessible routes for raising concerns, ensure appropriate and timely action, and define the accountability of GIIF and of persons and entities working for or through it.

- Set clear behavioural and organisational expectations for institutional and project-level activities; integrate proportionate SEAH risk management into GIIF decision-making and project oversight;
- Protect survivors, complainants, witnesses and reporters from further harm and retaliation;
- Ensure fair, confidential and competent assessment, investigation and response;

- Require contractors, consultants, executing entities and service providers to meet GIIF standards; and
- Support assurance to GIIF governance bodies, financing partners and the GCF without disclosing identifying case information.

3. Scope and Applicability

This Policy applies to the GIIF Board, management, employees, sub-funds, secondees, interns, volunteers, temporary personnel, consultants, advisers, and any person acting for or representing GIIF. It applies regardless of grade, contractual status, location, or duration of engagement.

It applies to conduct in GIIF premises; during work, travel, training, meetings, social functions and online communications; in accommodation or transport provided or arranged for work; and to off-duty conduct where there is a sufficient connection to GIIF, a GIIF-financed activity, workplace safety, institutional trust or the interests of an affected person.

At the project level, this Policy applies throughout the GIIF investment cycle and to GIIF-financed or supported projects and sub-projects, including activities undertaken by project proponents, borrowers, investees, executing entities, implementing partners, contractors, subcontractors, consultants, suppliers, security providers, and community-facing service providers. It covers interactions with workers, communities, beneficiaries, and other persons who may be affected by those activities.

3.1. Relationship with national law and other standards

This Policy does not limit any right or duty under Ghanaian law, employment arrangements, professional rules or financing agreements. Where multiple standards apply, GIIF shall seek to meet the standard that provides the stronger protection while observing due process and legal requirements. Nothing in this Policy requires a survivor to participate in an internal process or prevents lawful access to police, health, psychosocial, labour, human-rights or judicial mechanisms.

4. Definitions

Sexual exploitation	Any actual or attempted abuse of a position of vulnerability, differential power or trust for sexual purposes, including profiting monetarily, socially or politically from the sexual exploitation of another person.
Sexual abuse	Actual or threatened physical intrusion of a sexual nature, whether by force or under unequal or coercive conditions.
Sexual harassment	Unwelcome conduct of a sexual nature that might reasonably be expected or perceived to cause offence or humiliation, or that interferes with work, participation, access to opportunities or a safe environment. It may be verbal, non-verbal, physical or digital and may occur as a single serious incident or a pattern

SEAH	The collective term used in this Policy for sexual exploitation, sexual abuse and sexual harassment
Survivor	A person who has experienced or reports having experienced SEAH. "Affected person" may be used where preferred by the individual. Use of this term does not prejudge an investigation.
Complainant or reporter	A person who raises a concern. The reporter may be the survivor, a witness or another person.
Child.	A person below 18 years of age.
Retaliation	Any direct or indirect detrimental action, threat, intimidation, discrimination or disadvantage arising because a person reported, supported, disclosed or participated in a matter under this Policy.
Third party	Any person or entity outside GIIF that performs work, delivers services, implements activities or otherwise acts in connection with GIIF or a GIIF-financed project.
Project-affected person or beneficiary	A community member, service user, worker or other person who is affected by, participates in or is intended to benefit from a GIIF-financed activity.

Consent must be voluntary, informed, specific and capable of being withdrawn. Silence, lack of resistance or prior consent is not consent. Consent cannot be inferred where force, threat, coercion, deception, abuse of authority, incapacity or the age of the person makes consent invalid under applicable law. A mistaken belief about age is not a defence to conduct involving a child.

5. Policy Statement and Zero-Tolerance Commitment

GIIF has zero tolerance for SEAH and for inaction in the face of SEAH risk or allegations. Zero tolerance means that GIIF will take reasonable steps to prevent misconduct; provide safe ways to report; respond promptly and appropriately; protect against retaliation; apply fair process; and act on substantiated findings. It does not mean that every allegation is automatically substantiated or that due process may be disregarded.

SEAH by any person within the scope of this Policy is prohibited. Sexual activity with a child is prohibited, regardless of any asserted consent or local custom. Exchange of money, employment, goods, services, assistance, contracts, access, or preferential treatment for sexual activity or sexualized conduct is prohibited. Abuse of authority, dependency, vulnerability, or influence for sexual purposes is prohibited. Retaliation, intimidation, victimization, interference with reporting, destruction of evidence, and deliberate breach of confidentiality are prohibited. Knowingly false or malicious allegations may be addressed under applicable disciplinary rules; an allegation that is unsubstantiated or made in good faith is not, by itself, false or malicious.

6. Guiding Principles

Survivor-centred: The safety, wishes, dignity, rights and well-being of the survivor guide decisions, subject to legal and safeguarding duties.

Do no harm: GIIF will avoid actions that increase exposure, stigma, retaliation, trauma or other foreseeable harm.

Confidentiality and informed choice: Information is shared only on a need-to-know basis. Survivors receive clear information about options, limits to confidentiality and foreseeable consequences.

Non-discrimination and accessibility: Responses will be respectful and accessible regardless of sex, gender, age, disability, status, nationality, ethnicity, religion, sexual orientation or other characteristic.

Promptness and proportionality: GIIF will act without undue delay and match prevention and response measures to risk and seriousness.

Independence, impartiality and due process: Decisions and investigations must be free from conflicts of interest, appropriately skilled and fair to all affected parties.

Accountability and learning: GIIF will address individual misconduct, organizational failures and recurring risk while protecting personal information.

7. Institutional-Level SEAH Requirements

GIIF shall maintain a workplace and institutional culture in which respectful conduct is expected, power is not abused, and concerns can be raised without fear. Board members, managers and supervisors have an enhanced duty to model appropriate behavior, address known risks and avoid discouraging reporting.

Incorporate SEAH commitments into recruitment, onboarding, codes of conduct, performance expectations, and relevant contracts; apply lawful and proportionate screening, declarations, and reference checks for roles with elevated safeguarding or community contact risk; manage conflicts of interest and personal relationships that create actual or perceived abuse-of-power risks; provide more than one reporting route and a way to bypass any person implicated in an allegation; make reasonable workplace adjustments and interim protective arrangements without penalizing a survivor; and use an independent or external investigator where seniority, sensitivity, conflict of interest, or limited internal capacity could compromise confidence in the process.

Managers who receive or become aware of a concern must not conduct informal investigations, confront the alleged subject, promise absolute confidentiality, or attempt a private settlement. They must ensure immediate safety and promptly refer the matter through an authorized channel described in the SEAH SOP or the existing GIIF framework.

8. Project and Sub-Project-Level SEAH Requirements

SEAH considerations shall be integrated into GIIF's ESS and investment processes from screening through exit or project completion. Project proponents shall identify relevant risks and proposed controls through the applicable Formal ESS Screening, ESS Self-Assessment or equivalent GIIF process.

Record the SEAH risk classification and required mitigation in project appraisal and approval materials include appropriate measures, responsibilities, resources and indicators in environmental and social action plans or equivalent instruments verify accessible reporting and referral arrangements for workers and communities before high-risk activities begin ensure project grievance mechanisms can safely receive and confidentially refer SEAH concerns without requiring public disclosure or community mediation and include SEAH performance and incidents, in non-identifying form, in supervision, monitoring and escalation.

9. Prevention and Risk Mitigation

Prevention is a continuing responsibility. GIIF and relevant third parties shall use a risk-based approach that addresses individual conduct, organisational culture, project design and contextual risks. Controls must be realistic for GIIF's size and may draw on qualified external providers, shared referral networks and existing government or partner mechanisms where these meet this, Policy.

9.1. Core prevention measures

Leadership communication and visible accountability for respectful conduct; clear codes of conduct and contractual prohibitions communicated in languages and formats understood by affected persons; role-based induction and periodic refresher training; safe recruitment and assignment practices for higher-risk roles; workplace and project risk assessments, including consultation with women, persons with disabilities, and other potentially affected groups; design measures that reduce isolated contact, uncontrolled access to beneficiaries, unsafe transport or accommodation, and discretionary allocation of benefits; mapping of credible health, psychosocial, child-protection, legal, and security referral options; and periodic review of complaints, monitoring observations, and lessons without identifying survivors.

9.2. Risk escalation

Where screening or monitoring identifies material SEAH risk, GIIF may require specialist assessment, a project-specific SEAH action plan, dedicated focal points, enhanced training, community communication, independent monitoring or other proportionate controls. Approval, contracting, disbursement or implementation may be conditioned on satisfactory measures. Serious or persistent deficiencies shall be escalated under the ESS, contractual and investment governance frameworks.

9.3. Children and adults at heightened risk

Activities involving children or adults at heightened risk require safeguards appropriate to the context. GIIF shall not use community conciliation, informal mediation or family settlement as a substitute for safeguarding action where this may expose a person to harm or suppress a report. Decisions involving a child shall give primary consideration to the child's best interests and applicable legal reporting duties.

10. Reporting and Referral of SEAH Concerns

GIIF shall maintain safe, accessible and confidential channels for staff and external stakeholders. A concern may be reported verbally or in writing, anonymously where the channel permits, and by a survivor, witness or other person. No person is required to confront the alleged subject or first use a line-management route.

Approved channels and contact details shall be maintained in the SEAH SOP and communicated via the GIIF website, workplace materials, project notices, and contractual documents, as appropriate. Existing HR, complaints, and whistleblower channels may receive SEAH concerns but must promptly route them to authorized personnel with restricted access.

10.1. Immediate action and referral

The first priority is immediate safety and urgent medical or other support. The recipient of a report shall listen respectfully, avoid detailed questioning, explain available choices and confidentiality limits, record only essential information, and refer to the matter promptly. Medical care must not be conditioned on reporting to the police or participating in an investigation.

GIIF shall determine whether a matter requires internal administrative action, a project or contractual response, specialist investigation, referral to a competent public authority, or a combination. Referral decisions shall consider the survivor's wishes, safety, legal duties, child or adult safeguarding obligations, risk to others, evidence preservation and GIIF's mandate. Where disclosure is legally required or necessary to prevent serious harm, GIIF shall, where safe and lawful, inform the survivor before disclosure and limit information shared.

10.2. Investigation and response

Allegations within GIIF's mandate shall be assessed promptly and, where warranted, are investigated by trained and impartial persons using a survivor-centered, trauma-informed and rights-respecting approach. The standard of proof, decision authority, timelines, conflict checks, evidence management and communication with parties will be established in the SEAH SOP and applicable HR or investigation procedures.

GIIF shall not delay reasonable safeguarding or contractual action solely because a criminal or external process is pending. Internal action must be coordinated so it does not obstruct lawful external investigation. Findings and recommendations shall address both individual accountability and control weaknesses.

11. Survivor-Centered Protection and Support

GIIF shall treat every survivor with dignity, respect and compassion and shall avoid blame, disbelief or pressure. Support is available irrespective of whether the survivor makes a formal complaint, identifies the alleged subject, participates in an investigation or obtains a substantiated finding meaningful choice and informed consent regarding available options, subject to clearly explained legal and safeguarding limits immediate safety planning and proportionate interim protection confidential handling and restricted access to identifying information reasonable access or referral to medical, psychosocial, legal, protection and other appropriate services reasonable workplace or participation adjustments, including changes to reporting lines, location, schedule or contact arrangements communication in an accessible language and format, with a support person where appropriate and protection from retaliation, stigma, repeated interviewing and unnecessary disclosure.

Interim measures are precautionary and do not determine guilt. They should, as far as possible, avoid transferring burdens to the survivor. The rights of the subject of an allegation to notice, a fair opportunity to respond, confidentiality and impartial decision-making shall also be respected.

12. Responsibilities of GIIF, Staff and Third Parties

12.1. Board and senior management

The Board approves this Policy and oversees material institutional risk. Senior management ensures implementation, assigns accountable functions, allocates proportionate resources, receives anonymised trend information and acts on significant control weaknesses. Neither body should receive unnecessary identifying case details.

12.2. Designated policy owner and functional roles

GIIF shall designate a senior policy owner with authority to coordinate implementation. Human Resources leads employment measures; Risk and Sustainability integrates project and ESS requirements; Legal/Compliance supports contractual and legal analysis; Internal Audit or another independent function may provide assurance. Specific case roles, alternates and conflict-of-interest arrangements shall be set out in the SEAH SOP and approved internal mandates.

12.3. All personnel and third parties

All persons within scope must comply with this Policy, complete required training, cooperate with authorised processes, protect confidentiality and report concerns where required by their role or contract. They must not retaliate, investigate privately, obstruct a process or misuse information.

13. Requirements for Contractors, Consultants, Executing Entities and Service Providers

GIIF shall translate this Policy into proportionate due diligence, contractual and supervision requirements. The responsible GIIF function shall identify which requirements apply before engagement or financing and shall verify implementation according to risk.

13.1. Minimum requirements

A prohibition of SEAH, retaliation and obstruction, applicable to personnel, subcontractors and agents a duty to communicate standards and ensure relevant personnel receive induction and training safe reporting arrangements linked to GIIF channels and prompt notification to GIIF of reportable allegations, subject to survivor safety and applicable law cooperation with GIIF-authorised assessment, investigation, audit and monitoring, including preservation of relevant records confidential handling and survivor-centered referral and support appropriate screening, supervision and corrective action for relevant personnel flow-down of equivalent obligations to material subcontractors and delivery partners and GIIF has the rights to require remediation, suspend activities or payments, replace personnel, terminate, refer or exercise other contractual remedies.

13.2. Notification and information sharing

Third parties shall notify GIIF promptly of credible allegations connected to a GIIF-financed activity in the manner and timeframe specified in the contract or project instrument. Initial notification should contain only information necessary for GIIF to assess safety, reporting obligations and oversight. Names or identifying details shall not be transmitted routinely or through general project reporting.

13.3. Reliance on third-party systems

GIIF may recognise a third party's own policy, reporting channel or investigation process where due diligence confirms that it provides protection materially consistent with this Policy. GIIF retains the right to require information, independent review, corrective action or direct intervention where the third party's response is inadequate, conflicted, delayed or unsafe.

14. Training, Awareness and Communication

GIIF shall maintain a practical training and awareness programme proportionate to its size. All Board members, managers, staff and relevant contracted personnel shall receive orientation on prohibited conduct, reporting channels, confidentiality, retaliation and bystander responsibilities. Refresher training shall be provided periodically and when material policy or risk changes occur.

Persons who receive reports, conduct assessments or investigations, manage projects, supervise contractors, work with communities or make disciplinary and contractual decisions shall receive role-specific training. Specialist functions may be delivered by qualified external providers.

Project communication shall be accessible, culturally appropriate and designed with attention to literacy, language, disability, privacy and unequal access to technology. It shall explain expected behaviour, ways to seek help or report, confidentiality limits and protection from retaliation. Communication must not promise services that are unavailable or suggest that project benefits depend on reporting.

15. Monitoring, Reporting and Record Keeping

The policy owner shall coordinate proportionate monitoring of implementation. Relevant functions shall track completion of risk assessments and action plans, contractual coverage, training, availability of reporting routes, response timeliness, corrective action and recurring control issues.

Management and the relevant Board committee shall receive periodic, anonymised and aggregated reporting. Serious systemic weaknesses or material risks shall be escalated promptly. Reporting to financing partners, including the GCF, shall follow applicable agreements and confidentiality requirements.

15.1. Case information

SEAH case records shall be kept separately from general grievance and personnel files, with role-based access, secure transfer and an auditable record of access where feasible. Only information necessary for a defined purpose shall be collected. Retention and disposal shall follow applicable law, GIIF records requirements, contractual obligations and the SEAH SOP.

15.2. Learning and assurance

GIIF shall use de-identified trends to improve controls, not to rank units or projects by complaint numbers. An absence of reports is not evidence of an absence of risk. Internal Audit or another suitably independent provider may periodically review implementation, while avoiding access to identifying information unless necessary and authorised.

16. Linkages with Existing GIIF and Government Policies

This Policy is an umbrella SEAH instrument. It establishes the additional coverage needed for sexual exploitation and sexual abuse, project-affected persons and third-party implementation while relying on existing GIIF and Civil Service systems for compatible operational and disciplinary processes.

GIIF Human Resources Policies and Procedures Manual. Applies workplace conduct, sexual-harassment, complaint/enquiry, confidentiality and disciplinary provisions. The SEAH SOP specifies survivor-centered routing and any adaptations required for SEA or external affected persons.

GIIF Policy on Protection of Whistleblowers and Witnesses. Provides confidential reporting and non-retaliation protections. SEAH reports received through whistleblower channels must be handled under the enhanced confidentiality, safeguarding and consent principles in this Policy.

GIIF Environmental and Social Safeguards framework. Provides project screening, appraisal, action planning, grievance, supervision and corrective-action architecture. SEAH risks and measures are integrated through those processes rather than managed as a parallel project system.

Ghana Civil Service Code of Conduct. Reinforces standards of public-service integrity, proper conduct, reporting and disciplinary accountability, including applicability to relevant advisers and consultants.

Ghana Civil Service Sexual Harassment Policy. Provides the government-wide sexual harassment framework, including complaint, confidentiality, non-retaliation, support, investigation, discipline, monitoring and training. This Policy extends GIIF coverage to SEA and project-level risks.

GCF Revised Policy on Prevention and Protection from SEAH. Provides the benchmark for zero tolerance, prevention, survivor-centered response, reporting, due diligence, investigation, non-retaliation and contracted-party obligations relevant to GIIF's accreditation and GCF-financed activities.

16.1. Interpretation and hierarchy

The instruments above should be read together. For an employment matter, HR procedures govern employment process and sanctions; for protected disclosures, whistleblower safeguards apply; for project risk and corrective action, the ESS and investment frameworks apply; and for public-service conduct, applicable Civil Service requirements apply. This Policy supplies the common SEAH principles and minimum protections across those routes.

If a conflict or uncertainty arises, the policy owner shall obtain advice from the relevant GIIF functions and, where necessary, external legal expertise. The survivor-centered and do-no-harm principles shall guide interpretation, without overriding applicable law or the due-process rights of any party.

17. Non-Compliance, Sanctions and Corrective Measures

Non-compliance includes committing SEAH; retaliation; failure to disclose or report where a duty applies; obstruction; mishandling confidential information; failure to implement required controls; failure to notify GIIF; or failure to cooperate with an authorised process.

Where misconduct or non-compliance is substantiated, GIIF shall take proportionate action consistent with applicable law, the HR Manual, Civil Service requirements, contracts and due process. Measures may include counselling or training where appropriate, formal warning, reassignment, removal from duties or a site, disciplinary action up to termination, removal from a project, contractual remediation, suspension, withholding, termination, exclusion from future engagements, recovery where lawful, and referral to competent authorities.

GIIF may also require organisational corrective action, including changes to project design, supervision, staffing, grievance arrangements, contractor controls, referral pathways, training or management accountability. A survivor's decision not to participate does not prevent GIIF from taking risk-reduction measures based on other available information.

18. Policy Governance, Review and Approval

The GIIF Board of Directors approves this, Policy. Senior management is responsible for implementation. The designated policy owner coordinates maintenance supports consistent interpretation and prepares periodic implementation reporting. Each functional owner remains accountable for requirements within its mandate.

The Policy shall be reviewed at least every three years and earlier following significant legal or regulatory changes; revision of relevant GCF or government requirements; a serious incident or identified systemic weakness; material change in GIIF's mandate or portfolio; or lessons from implementation. Amendments require approval according to GIIF's policy governance arrangements.

POLICY CONTROL

Authority to approve	Board
Authority to recommend to Board	Human Resource and Legal Committee
Policy owner	Head, Human Resource Department
Authority for exemptions	Board
Prepared By	Environmental & Social Risk Coordinator
Current version	1.0
Created date	July 2026
Approval date	24th August 2026
Due for review	30th June 2029

VERSION CONTROL

Version	Revision Date	Prepared By	Description
1.0	30th July, 2026	Environmental & Social Risk Coordinator	Sexual Exploitation, Abuse and Harassment Policy

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Head, Human Resources Management (Policy Owner)