

INTER-UNIVERSITY COUNCIL FOR EAST AFRICA (IUCEA)

SKILLS FOR ECONOMIC TRANSFORMATION AND JOBS (SET4Jobs)

GRIEVANCE REDRESS MECHANISM (GRM) MANUAL

Regional Collaboration for Tertiary Education, Research, Innovation, and Incubation

Implementing Agency	Inter-University Council for East Africa (IUCEA)
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This manual becomes effective only after approval through the Project governance process.

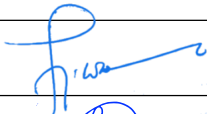
DOCUMENT CONTROL AND APPROVAL

Important notice on document hierarchy

This Manual provides operational procedures for the SET4Jobs regional operation. If any provision conflicts with the Financing Agreement, the Financing Agreement prevails. The Manual must also be applied consistently with the approved Project Implementation Manual, Stakeholder Engagement Plan, Environmental and Social Commitment Plan, Labor Management Procedures, SEA/SH Action Plan, and applicable World Bank requirements.

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Approval

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0.1	July 2026	Initial standalone GRM Manual prepared for review and operationalization.	

QUICK REFERENCE: HOW TO REPORT AND WHAT HAPPENS NEXT

Emergency and sensitive complaints

Do not seek detailed information from a person reporting SEA/SH. Ensure immediate safety, preserve confidentiality, and transfer the report to the confidential SEA/SH channel or Response Coordinator. Significant incidents must be notified through the Project incident-management procedure within 48 hours.

GENERAL GRIEVANCES Online form: https://set4jobs.lovable.app/grievance Email: grm.set4jobs@iucea.org Other: complaint box, telephone, or in-person submission to an authorized focal point	SEA/SH - CONFIDENTIAL Online form: https://set4jobs.lovable.app/safe-report Email: safereport.set4jobs@iucea.org Rule: anonymous and third-party reports are accepted; no written evidence is required
PROCUREMENT, FRAUD, CORRUPTION, OR OTHER INTEGRITY-RELATED COMPLAINTS	These matters are outside the GRM decision-making mandate. The GRM will record only minimum referral information, promptly refer the complaint to the appropriate authorized channel, and inform the complainant of the referral where possible

At-a-glance service standards

Action	Service standard
Acknowledge complaint	Within 2 working days of receipt
Screen and classify	Within 3 working days of receipt
Complete general grievance investigation	Within 10 working days of assignment, or notify the complainant of a justified extension
Communicate general grievance outcome	Within 15 working days of registration
Implement agreed corrective action	Target within 7 days where feasible; otherwise issue an approved action plan and due date
Close when complainant does not respond	21 calendar days after the resolution was communicated
Refer procurement complaint	Within 2 working days of receipt
Notify World Bank of significant incident / SEA/SH incident	Within 48 hours of the MSPFU becoming aware

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ACRONYMS AND ABBREVIATIONS

Acronym	Full Form
E&S	Environmental and Social
e-GRM	Electronic Grievance Redress Mechanism
ESCP	Environmental and Social Commitment Plan
ESF	World Bank Environmental and Social Framework
ESHS	Environmental, Social, Health and Safety
ESS	Environmental and Social Standard
GBV	Gender-Based Violence
GRC	Grievance Redress Committee
GRM	Grievance Redress Mechanism
IUCEA	Inter-University Council for East Africa
LMP	Labor Management Procedures
M&E / MEL	Monitoring and Evaluation / Monitoring, Evaluation and Learning
MPA	Multiphase Programmatic Approach
MSPFU	MPA SET4Jobs Program Facilitation Unit
OHS	Occupational Health and Safety
PIU / NPCU	Project Implementation Unit / National Program Coordination Unit
PSC	Project Steering Committee
SEA	Sexual Exploitation and Abuse
SEP	Stakeholder Engagement Plan
SET4Jobs	Skills for Economic Transformation and Jobs
SH	Sexual Harassment
WB	World Bank
E&S	Environmental and Social

KEY DEFINITIONS

Term	Operational meaning in this Manual
Complaint / grievance	An expression of concern, dissatisfaction, alleged harm, or request for remedy connected to a Project activity, decision, omission, worker, contractor, or participating entity. The terms are used interchangeably.
Complainant	A person or organization submitting a complaint, including a person submitting anonymously or on behalf of another person.
Feedback / inquiry	A suggestion, observation, request for information, or comment that may be resolved without a formal investigation, but should be recorded where follow-up is required.
Anonymous complaint	A complaint submitted without identifying the complainant. It is assessed with the same diligence, although direct feedback may not be possible.
Resolution	An agreed or approved response, remedy, corrective action, referral, explanation, or other action that addresses the complaint within the Project mandate.
Significant incident	A serious event or allegation requiring urgent protection, management escalation, and notification under the Project incident-management procedure.
SEA/SH	Sexual exploitation and abuse and sexual harassment, handled only through the specialized survivor-centered pathway.
Project worker	A direct, contracted, or other worker covered by the Project Labor Management Procedures.

1. INTRODUCTION

1.1. Background

The Skills for Economic Transformation and Jobs (SET4Jobs) Program is a regional Multiphase Programmatic Approach supporting participating countries in Eastern and Southern Africa to strengthen skills ecosystems for improved employment outcomes and economic transformation. IUCEA implements the regional operation, which finances regional collaboration mechanisms, technical assistance, evidence systems, and regional public goods that complement separately financed national operations.

The regional operation is implemented through the MPA SET4Jobs Program Facilitation Unit (MSPFU). The Project is governed by the Financing Agreement and the approved Project Implementation Manual (PIM). Stakeholder engagement and access to an effective grievance mechanism are core requirements under the World Bank Environmental and Social Framework, particularly ESS2, ESS4 and ESS10.

1.2. Purpose of this Manual

This Manual translates the Project GRM requirements into practical operating procedures for receiving, registering, screening, referring, investigating, resolving, escalating, closing, monitoring, and reporting grievances connected to the IUCEA regional operation.

- Provide a single operational reference for IUCEA/MSPFU staff, participating institutions, focal points, consultants, contractors, and other persons involved in grievance handling;
- Ensure grievances are handled consistently, promptly, confidentially, and without retaliation;
- Define safe and separate pathways for SEA/SH, and worker-related complaints, together with clear referral arrangements for matters outside the GRM mandate;
- Establish standard forms, records, reporting indicators, and quality controls; and
- Use grievance information to identify systemic issues and improve Project implementation.

1.3. Scope and applicability

This Manual applies to activities financed and implemented under the IUCEA regional grant. It covers complaints from project-affected persons, participants in regional events and technical assistance activities, students and academic staff interacting with regional activities, project workers, consultants, contractors, participating institutions, employers, civil society organizations, media, and other stakeholders with a Project-related concern.

Regional and national accountability

IUCEA handles grievances related to the regional operation. Country-level SET4Jobs operations remain governed by their own Financing Agreements, environmental and social instruments, and national GRMs. A complaint received by IUCEA that relates to a national operation is logged, referred to the responsible national PIU, and tracked for confirmation of receipt; the MSPFU does not assume national implementation authority.

1.4. Intended users

- IUCEA Executive Secretary and MSPFU Project Coordinator;
- Environmental and Social Risk Management Specialist / GRM Focal Person;
- Members of the Regional Grievance Redress Committee;
- Human Resources personnel and other authorized referral focal points, as applicable;
- National PIUs and institutional GRM focal points for coordination and referrals; and
- consultants, service providers, event organizers, and contractors required to communicate or support the GRM.

2. GOVERNING FRAMEWORK AND OPERATING PRINCIPLES

2.1. Documents to be read together

- Financing Agreement and Disbursement and Financial Information Letter, as applicable;
- Project Appraisal Document and approved Project Implementation Manual;
- Environmental and Social Commitment Plan and applicable World Bank Environmental and Social Standards;
- Stakeholder Engagement Plan;
- Labor Management Procedures;
- SEA/SH Action Plan and Code of Conduct;
- SET4Jobs MPA ESHS Manual and incident-reporting formats;
- IUCEA Staff Rules and Regulations, Financial Rules and Regulations applicable institutional procedures, and applicable national laws.

Precedence

If this Manual is inconsistent with the Financing Agreement, the Financing Agreement prevails. Material amendments to this Manual should follow the approval and World Bank agreement/no-objection requirements applicable to the PIM and Project instruments.

2.2. Operating principles

Accessibility: Multiple channels - digital, email, telephone, complaint box, and in-person - are available. Oral complaints are accepted and transcribed. Assistance is provided for low literacy, disability, language, or connectivity barriers.

Confidentiality: Identities and personal information are protected. Access is limited to authorized personnel. SEA/SH information is held in a separate confidential register.

Non-retaliation: Retaliation against a complainant, witness, survivor, supporter, or investigator is prohibited and may result in disciplinary action.

Survivor-centeredness: SEA/SH complaints prioritize the survivor's safety, dignity, choice, informed consent, and confidentiality.

Timeliness: Defined service standards apply at every stage. Delays are explained proactively and a revised date is communicated.

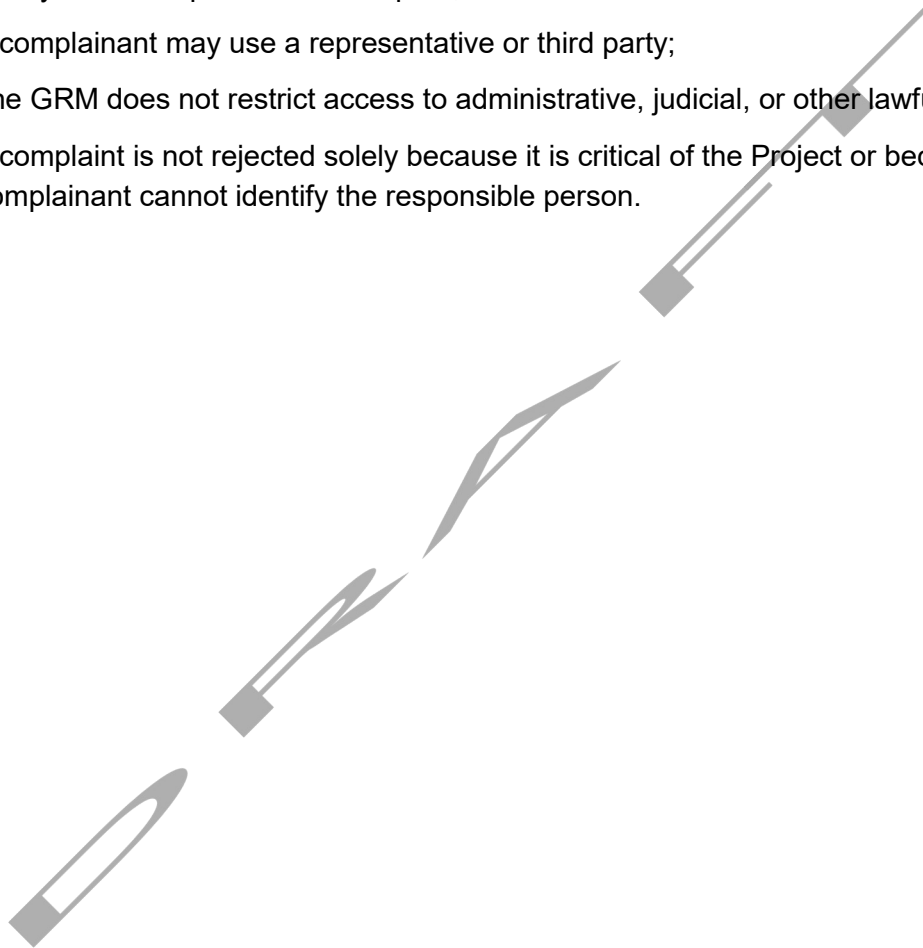
Transparency: Complainants are informed of the complaint reference, handling officer, status, outcome, rationale, and available appeal route, subject to confidentiality limits.

Inclusivity and sensitivity: The GRM is designed for women, persons with disabilities, marginalized groups, persons with low literacy, and stakeholders in hard-to-reach locations.

Documentation and learning: Actions, decisions, referrals, and corrective measures are recorded. Trend analysis informs preventive and corrective action.

2.3. Minimum service commitments

- No fee is charged to submit a complaint;
- No written evidence is required at intake;
- Anonymous complaints are accepted;
- A complainant may use a representative or third party;
- The GRM does not restrict access to administrative, judicial, or other lawful remedies;
- A complaint is not rejected solely because it is critical of the Project or because the complainant cannot identify the responsible person.



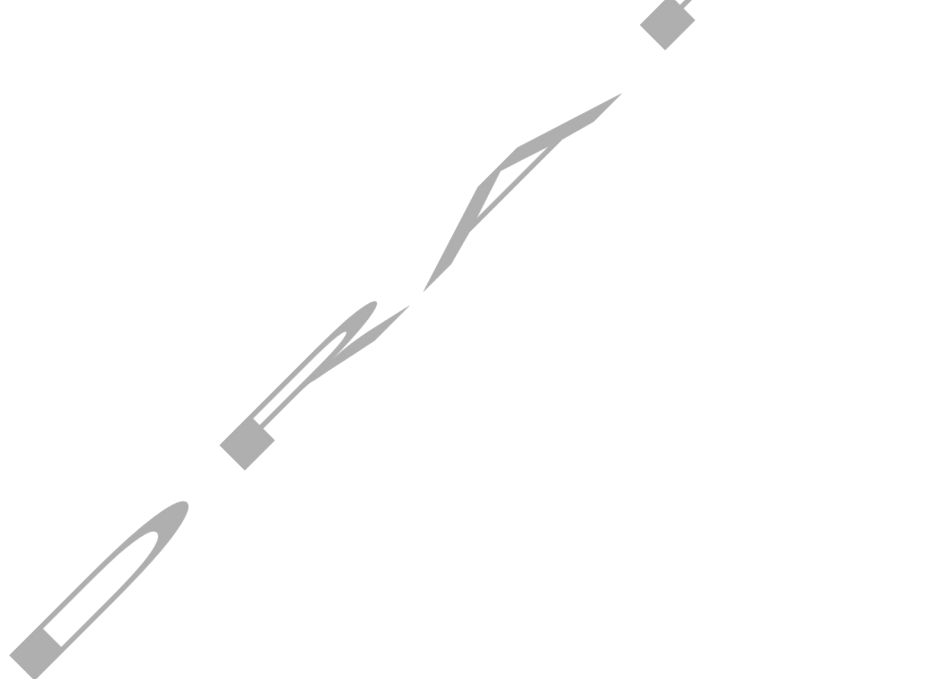
3. INSTITUTIONAL ARRANGEMENTS AND RESPONSIBILITIES

3.1. Multi-level arrangement

The GRM is organized around a regional intake and oversight function at IUCEA, supported by designated focal points at participating institutions and coordination with national PIUs. The arrangement preserves the legal and fiduciary responsibilities of each participating country while providing an accessible regional channel for IUCEA-financed activities.

3.2. Institutional Structure

The GRM operates primarily at the regional level through IUCEA/MSPFU. Figure 3-1 illustrates the institutional structure of the GRM and the channels through which grievances may be escalated from institutional and national levels to the regional level. Participating Countries may have their own grievance procedures; however, the regional GRM is the primary mechanism for matters arising from the IUCEA-led regional operation. Complaints may be escalated to the regional level if they are not resolved at the national or institutional level.



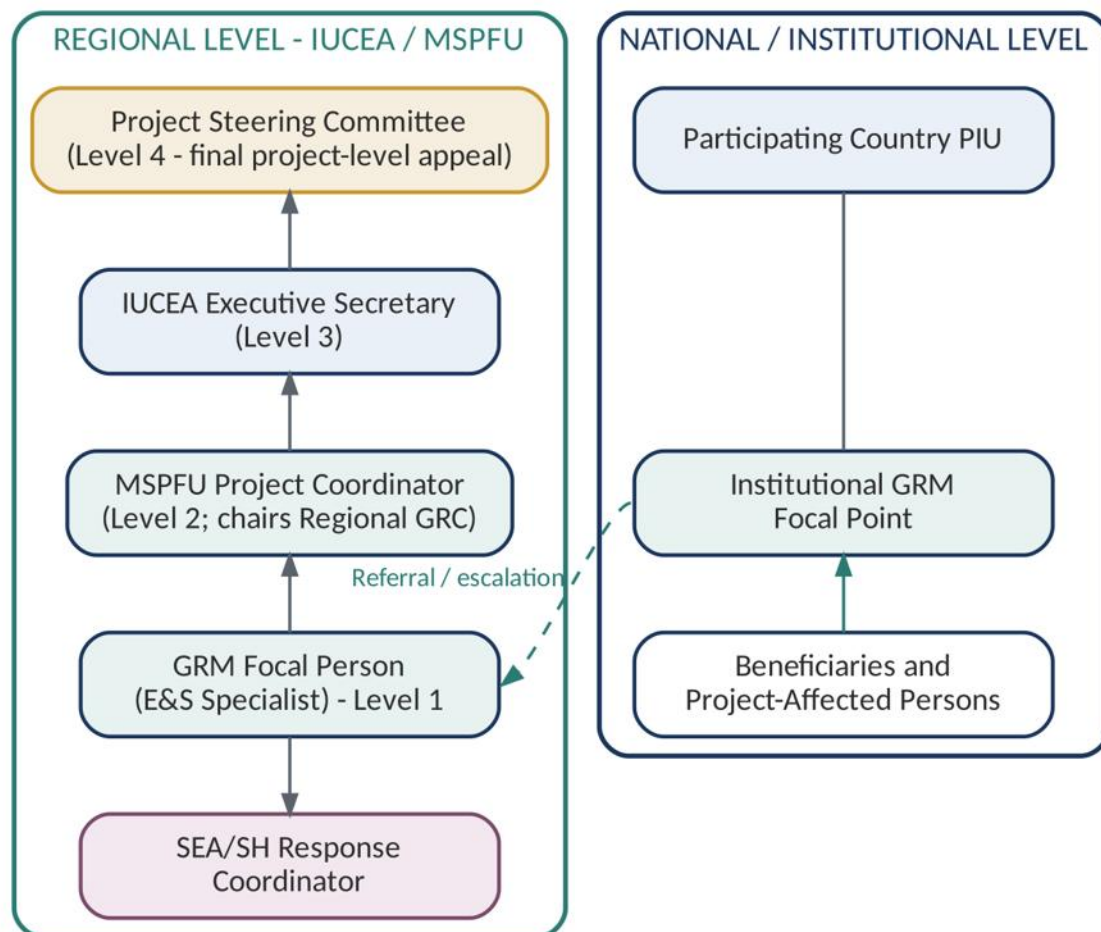


Figure 3-1: Institutional Structure for the GRM

3.3. Regional Grievance Redress Committee

A Regional Grievance Redress Committee (GRC) supports the handling of complex or cross-functional general grievances. It is chaired by the MSPFU Project Coordinator and includes, as relevant, representatives from E&S, Procurement, Finance, M&E, technical/skills functions, and Communication. The E&S Specialist serves as secretary, compiles minutes and follows up on agreed actions.

- The GRC reviews general complaints that require cross-unit analysis, significant corrective action, or management decision;
- Minor and routine complaints are managed by the GRM Focal Person without waiting for a committee meeting;
- The GRC reviews the general complaint log at least monthly and meets immediately when a significant complaint requires urgent action;

- SEA/SH case details are never discussed in the general GRC. Only non-identifying status information may be reported for oversight;
- Members must declare conflicts of interest and recuse themselves from handling affected cases.

3.4. Roles and responsibilities

Effective operation of the GRM requires clear assignment of roles and responsibilities across the various levels of project governance. Table 3-1 summarises the key responsibilities of the institutions and officials involved in grievance management, review, escalation, and oversight.

Table 3-1: Roles and Responsibilities in the GRM

Role	Core responsibilities
Project Steering Committee (PSC)	Level 4 (final project-level) appeal body for general grievances not resolved at Level 3; receives aggregate, non-identifying GRM performance reports and provides strategic direction on systemic issues.
IUCEA Executive Secretary	Overall institutional accountability; Level 3 appeal; management direction; approval of major corrective action and sanctions within authority.
MSPFU Project Coordinator	Chairs the Regional GRC; approves general grievance resolutions; provides Level 2 appeal review; escalates significant incidents and systemic issues.
E&S Specialist / GRM Focal Person	Day-to-day operation of the GRM; intake, registration, acknowledgment, classification, assignment, quality assurance, follow-up, trend analysis, outreach, and reporting.
Regional GRC members	Provide technical review and recommendations for complex general complaints; support corrective action; maintain confidentiality and recuse for conflicts.
Institutional GRM Focal Points	Receive oral, written, digital, and complaint-box submissions; provide accessibility assistance; register or transmit regional-operation complaints to MSPFU within 2 working days; support communication and follow-up.
National PIUs	Handle complaints related to national financing under national arrangements; coordinate referrals and provide agreed aggregate information without ceding national authority.
SEA/SH Response Coordinator	Receives and manages Category B complaints through confidential, survivor-centered procedures; arranges support referrals and case coordination.
Human Resources / IUCEA	Handles worker and employment grievances under IUCEA

complaints panel	Staff Rules and Regulations, including discrimination complaints and formal appeals.
M&E / Communications personnel	Use only aggregate, non-identifying grievance data for reporting, stakeholder feedback, and learning.

3.5. Transitional arrangement

Until dedicated grievance personnel and access permissions are formally established, submissions received through the dedicated electronic channels are routed to the Acting Project Coordinator and E&S specialist for registration, screening, referral, and follow-up. This interim arrangement does not authorize access to confidential SEA/SH details beyond the designated Response Coordinator and E&S Specialist.

3.6. Conflict of interest and recusal

- No person may handle a complaint in which they are the subject, a witness with a material interest, a close associate of the subject, or otherwise unable to act impartially;
- The conflict is documented in the case record without unnecessary personal detail;
- The case is reassigned to the E&S Specialist, Project Coordinator, Executive Secretary, or another authorized independent person, depending on the conflict;
- For SEA/SH, the case is immediately transferred to an unconflicted authorized person and survivor confidentiality is preserved.

4. SCOPE, GRIEVANCE CATEGORIES, AND ROUTING

4.1. Who may use the GRM

- Persons affected by or participating in IUCEA-financed regional activities;
- Students, academic staff, administrative staff, researchers, trainers, and event participants interacting with Project activities;
- Direct and contracted project workers, consultants, firms, and service providers;
- Participating institutions, employers, professional bodies, and national PIUs;
- Civil society organizations, media, communities, and members of the public with a Project-related concern;
- A representative or third party acting for or in support of an affected person.

4.2. Grievance classification and routing matrix

All complaints shall be screened upon receipt and routed according to their nature, urgency, and the responsible authority. Table 4-1 presents the classification and routing arrangements for complaints handled by the GRM and for matters that must be referred to other authorized channels.

Table 4-1: Grievance Classification and Routing Matrix

Code	Type	Examples	Primary handler	WB notification / reporting
A	General Project grievance	Access, exclusion, communication, service delivery, event management, E&S concerns other than SEA/SH, conduct, data or process concerns.	GRM Focal Person / E&S Specialist; Regional GRC for complex cases.	Aggregate quarterly reporting; significant incidents follow the 48-hour incident rule.
B	SEA/SH	Sexual exploitation, sexual abuse, sexual harassment, transactional abuse, retaliation linked to a SEA/SH report.	SEA/SH Response Coordinator through the confidential survivor-centered protocol.	Incident notification within 48 hours of MSPFU awareness; no survivor identity disclosed.

Worker grievances

Project workers may use the Project GRM or the IUCEA worker grievance mechanism, depending on the issue. Employment and discrimination complaints may proceed through the IUCEA complaints panel, appeal to the Governing Board, and further appeal to the East African Court of Justice where applicable. SEA/SH allegations always use the Category B pathway.

4.3. Inadmissible or out-of-scope complaints

A complaint may be outside the decision-making scope of the GRM, but it is still logged and the complainant is informed of the reason and, where possible, the appropriate route. Examples include:

- The same matter is already under review and no new evidence has emerged; the complainant receives a status update on the existing case;
- A personal dispute with no connection to Project activities;
- A procurement, fraud, corruption, or other integrity-related complaint that must be referred promptly to the appropriate authorized channel;
- A matter that must be handled by a national PIU, court, law-enforcement authority, professional regulator, or another competent institution;
- A request that would require disclosure of protected personal or confidential information.

4.4. Complaints relating to national operations

Where screening indicates that a complaint relates to a national SET4Jobs operation rather than the IUCEA regional grant, the GRM Focal Person records the complaint, obtains the complainant's consent where personal information must be shared, refers it to the designated national PIU focal point, confirms receipt, informs the complainant of the referral, and closes or maintains the regional record as a tracked referral. The MSPFU does not direct or decide the national complaint.

5. GRIEVANCE ACCESS AND REPORTING CHANNELS

Complainants may submit a grievance through any applicable channel below. Channels are intended to be accessible, confidential and free of charge.

5.1. Approved channels

The Project provides multiple accessible channels for general and SEA/SH complaints, as outlined in Table 5-1. If a submission concerns procurement, fraud, corruption, or another integrity matter, the GRM records only the minimum information necessary for referral and promptly transfers it to the appropriate authorized channel. The GRM does not investigate or

decide such matters. No channel shall be published or promoted until it has been verified as active, monitored, secure, and formally approved.

Table 5-1: Approved Grievance Reporting Channels

Pathway	Online form	Email	Additional channels / controls
General	https://set4jobs.lovable.app/grievance	grm.set4jobs@iucea.org	Complaint boxes; in-person or telephone submission to MSPFU or an institutional focal point. Dedicated hotline: [TO BE ASSIGNED].
SEA/SH	https://set4jobs.lovable.app/safe-report	safereport.set4jobs@iucea.org	Monitored only by the SEA/SH Response Coordinator. Anonymous and third-party reports accepted.

5.2. Oral and in-person complaints

- The receiving officer listens respectfully, records the complainant's own words, and does not require a written statement.
- The officer reads the record back to the complainant for confirmation, where possible.
- A reference number is issued verbally, by SMS, email, or letter according to the complainant's preference.
- For SEA/SH disclosures, the receiving person records no unnecessary detail and immediately transfers the report to the confidential pathway.

5.3. Complaint boxes

Complaint boxes are installed at the MSPFU office and participating institutions where regional activities are implemented. They are clearly labelled, physically accessible, and checked at least weekly by the authorized focal person or designated backup. Two-person access or another documented control should be used where feasible to protect integrity and confidentiality.

5.4. Language and accessibility

- Complaints may be submitted in a language used by the complainant. Translation should be arranged promptly when needed for processing.
-
- Core regional materials are prepared in English and French, Portuguese, Kiswahili, and relevant local-language support where required by the participating context.
- Assistance is available for persons with low literacy, visual or hearing impairments, limited connectivity, or other accessibility needs.
- Accessible formats may include large print, audio explanation, assisted completion, sign-language interpretation, or other reasonable accommodation.
- A complainant may choose a safe and private communication channel and may request a same-gender focal person where feasible.

5.5. Anonymous and third-party complaints

Anonymous complaints are accepted and assessed with the same diligence as identified complaints. The case record notes that direct acknowledgment or feedback may not be possible. A third party may submit a complaint on behalf of another person; personal information is shared or follow-up contact made only with appropriate consent, except where mandatory protection or legal requirements apply.

6. STANDARD OPERATING PROCEDURE FOR GENERAL GRIEVANCES

The Standard Operating Procedure (SOP) for General Grievances establishes a clear and consistent process for receiving, registering, assessing, investigating, resolving, and closing grievances submitted under the Project GRM. The procedure aims to ensure that all grievances are addressed in a timely, transparent, fair, and confidential manner, while providing complainants with an opportunity to seek redress and appeal decisions where necessary.

The following steps define the standard process for receiving, assessing, resolving, and closing general grievances under the Project GRM. Figure 6-1 illustrates the grievance management process and the key decision points from complaint receipt to case closure.

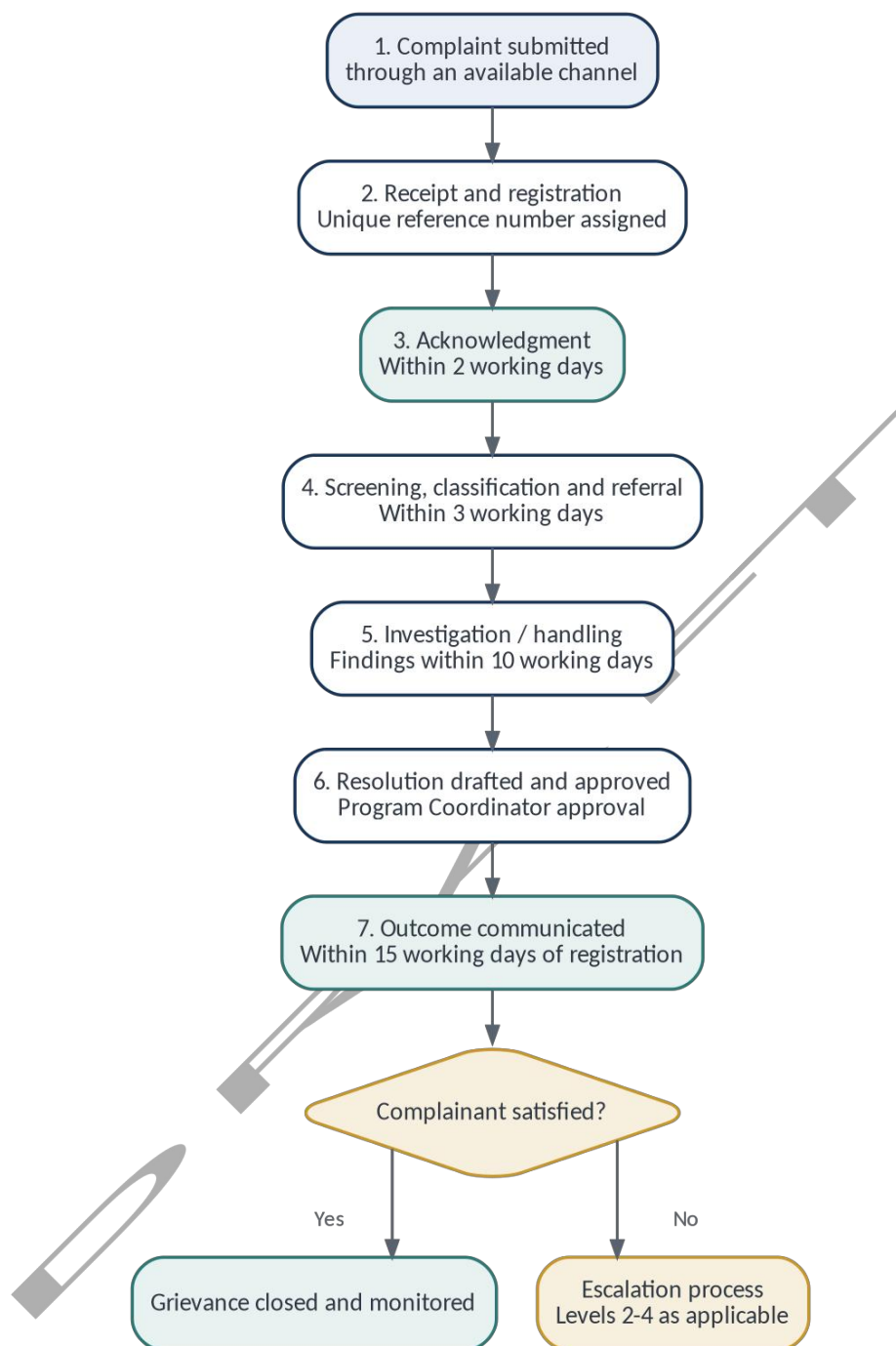


Figure 6-1: Standard Grievance Handling Process Flowchart

6.1. Step 1 - Submission and immediate safety triage

A complaint may be submitted through any approved channel. The receiving person first checks whether there is an immediate threat to life, safety, health, evidence, or the risk of retaliation. Urgent protective action is taken without waiting for routine screening. SEA/SH,

worker, and national-operation complaints are routed to the relevant specialized pathway. Procurement, fraud, corruption, and other integrity-related matters are referred promptly to the appropriate authorized channel and are not investigated or decided through the GRM.

6.2. Step 2 - Registration and acknowledgment

Within 2 working days of receipt, the GRM Focal Person or authorized institutional focal point:

- logs the complaint in the e-GRM or controlled register;
- assigns a unique reference number in the format SET4J-[YEAR]-[SEQUENCE], for example SET4J-2026-001;
- records the minimum required data fields;
- issues an acknowledgment through the complainant's preferred channel, where contact details are available;
- states the expected timing, handling officer, confidentiality arrangements, and right to escalate.

6.3. Step 3 - Screening and classification

Within 3 working days of receipt, the E&S Specialist screens the complaint to determine Project connection, category, urgency, responsible unit, potential conflict of interest, confidentiality level, and whether external or national referral is required. Screening does not attempt to prove the allegation; it determines the safe and appropriate route.

6.4. Step 4 - Assignment and investigation

For a general Project grievance, the GRM Focal Person assigns the case to the relevant technical, E&S, administrative, or institutional unit. The investigation may include a desk review, verification of records, consultation with the complainant with consent, interviews, a site or event review, and an opportunity for affected persons to present relevant information.

- The assigned unit submits findings to the GRM Focal Person within 10 working days of assignment.
- All material actions, evidence sources, interviews, limitations, and conflicts are documented.
- Only information necessary to determine the complaint is collected.
- If the investigation cannot be completed within 10 working days, the complainant is notified no later than the tenth day, with the reason and revised estimated resolution date.

6.5. Step 5 - Proposed resolution and approval

The GRM Focal Person, E&S Specialist, and responsible unit prepare a proposed resolution or corrective action. Complex cases may be reviewed by the Regional GRC. The MSPFU Project Coordinator approves the proposed general grievance resolution before it is communicated.

A resolution may include an explanation, correction of records, repeat or replacement of a service, improved access or accommodation, apology, process change, referral, disciplinary or contract action within authority, restitution or payment where lawfully authorized, or another proportionate remedy. Any payment or reparation must follow applicable financial and approval procedures and must be documented. A financial settlement may never substitute for accountability in a SEA/SH matter.

6.6. Step 6 - Communication and corrective action

The complainant is informed of the outcome within 15 working days of registration through their preferred channel. The response includes a summary of findings, the resolution or corrective action, the rationale, the implementation timeline, and the appeal route. Agreed corrective action should be implemented within 7 days where feasible. Where more time is required, an approved action plan with responsible person and due date is issued and tracked.

6.7. Step 7 - Appeal and escalation

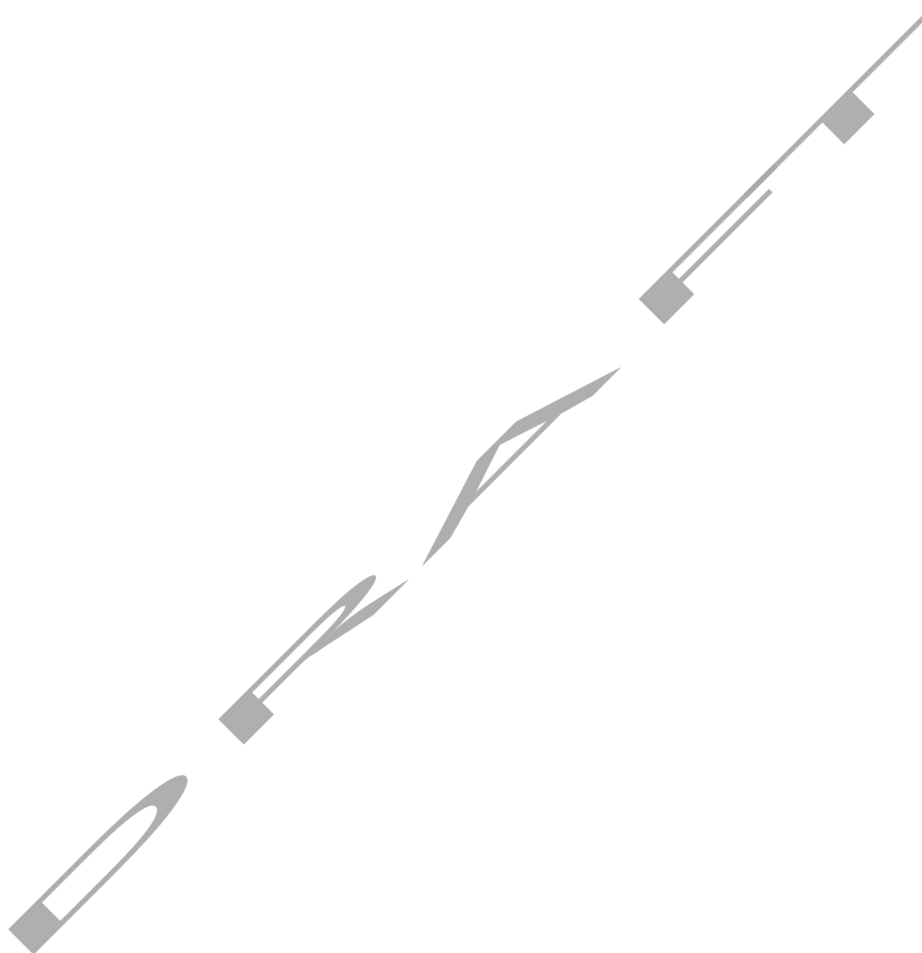
A complainant who is not satisfied with the initial resolution may escalate the grievance through successive levels of review. The grievance escalation hierarchy, responsible officers, and applicable response timelines are presented in Table 6-1, while the escalation pathway is illustrated in Figure 6-2. At each stage, the complainant shall be informed of the outcome and the next available avenue for redress.

Table 6-1: Grievance Escalation Process

Level	Handler	Response standard
Level 1	GRM Focal Person (E&S)- initial resolution	Outcome communicated within 15 working days from initial registration
Level 2	MSPFU Project Coordinator	Within 10 working days from escalation
Level 3	IUCEA Executive Secretary	Within 15 working days from escalation
Level 4	Project Steering Committee (PSC) – final project-level appeal	Within 20 working days from escalation; the PSC may consider the appeal at an extraordinary or virtual sitting

At every stage, the complainant is informed of the next available route. After feasible internal remedies are exhausted, the complainant is informed that legal or other external

recourse remains available. Use of the GRM does not waive those rights. Complaints that fall within the responsibility of a national SET4Jobs operation are not escalated through these levels; they are referred to the designated national PIU focal point in accordance with Section 4.4 and handled under the applicable national GRM. Complainants are also informed that they may submit a complaint to the World Bank Grievance Redress Service (GRS) (<http://www.worldbank.org/GRS>) or request an inspection by the World Bank Inspection Panel (www.inspectionpanel.org).



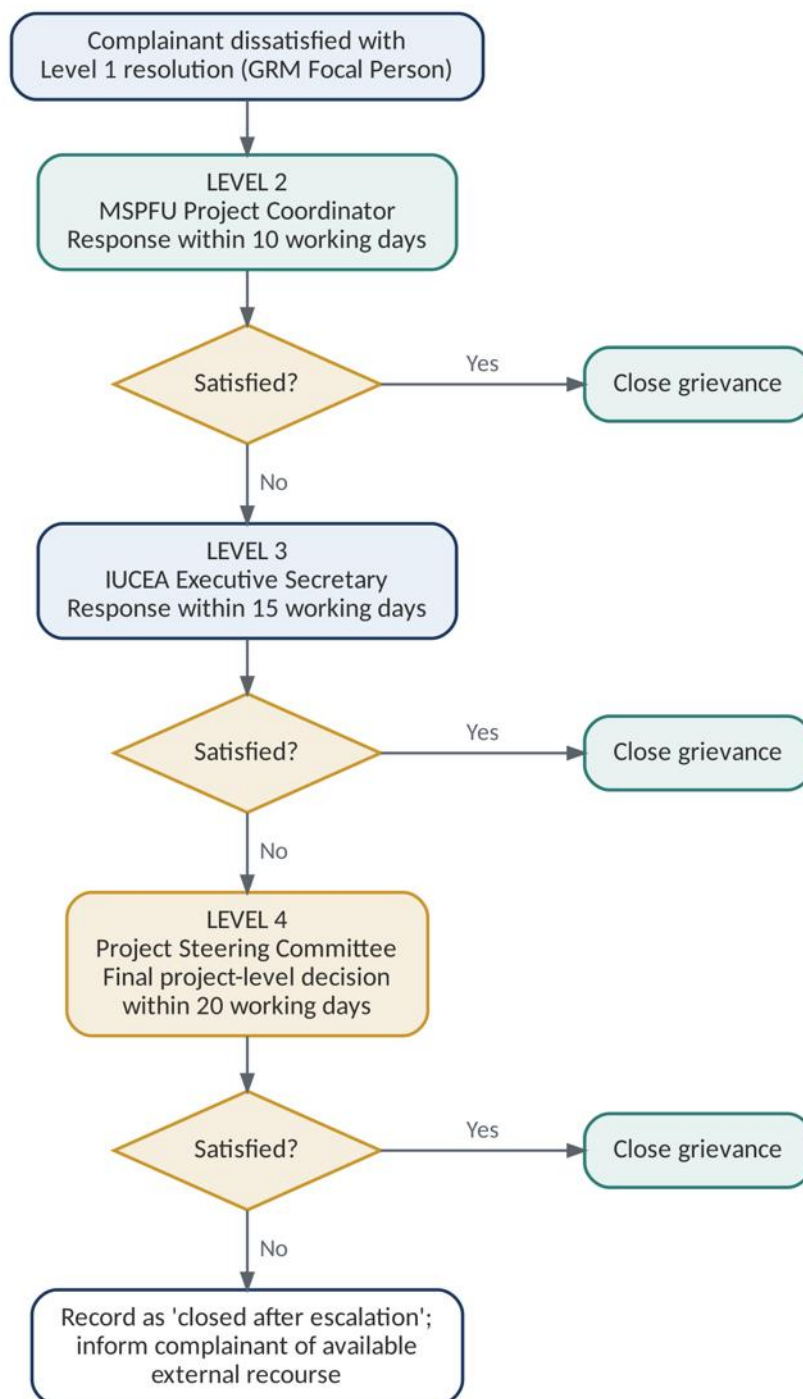


Figure 6-2: Grievance Escalation Pathway

6.8. Step 8 - Closure

A grievance is closed when the complainant confirms satisfaction; the agreed resolution and corrective action have been completed; the complaint is referred and receipt is confirmed by the responsible mechanism; the complainant withdraws; or the complainant does not

respond within 21 calendar days after the resolution was communicated. If feasible remedies have been exhausted but the complainant remains dissatisfied, the case is recorded as closed after escalation, with the remaining external routes explained.

- Record the closure date, outcome type, corrective action, appeal status, and lessons learned.
- Attach the approved resolution and evidence that actions were implemented.
- Do not close a case merely to meet a reporting deadline.
- Reopen the case if material new evidence emerges.

6.9. Service standards summary

Process point	Target
Acknowledgment	2 working days from receipt
Screening and classification	3 working days from receipt
Investigation findings - Category A	10 working days from assignment
Resolution communicated	15 working days from registration
GRC convening where required	Within 7 working days; immediately for significant matters
Corrective action implementation	Target within 7 days, subject to the approved action plan
Closure for non-response	21 calendar days after resolution communication

7. SPECIALIZED GRIEVANCE PATHWAYS

7.1. SEA/SH pathway - Category B

First response rule

Listen without judgment. Do not investigate, seek proof, promise a specific outcome, or share the disclosure. Confirm immediate safety, explain available support, obtain informed consent for referrals, and transfer the matter to the SEA/SH Response Coordinator.

All SEA/SH reports are received through the confidential online form, confidential email, or direct referral to the SEA/SH Response Coordinator. Anonymous reports are accepted. The survivor's account is sufficient to initiate the response; no written evidence is required see process in Figure 7-1.

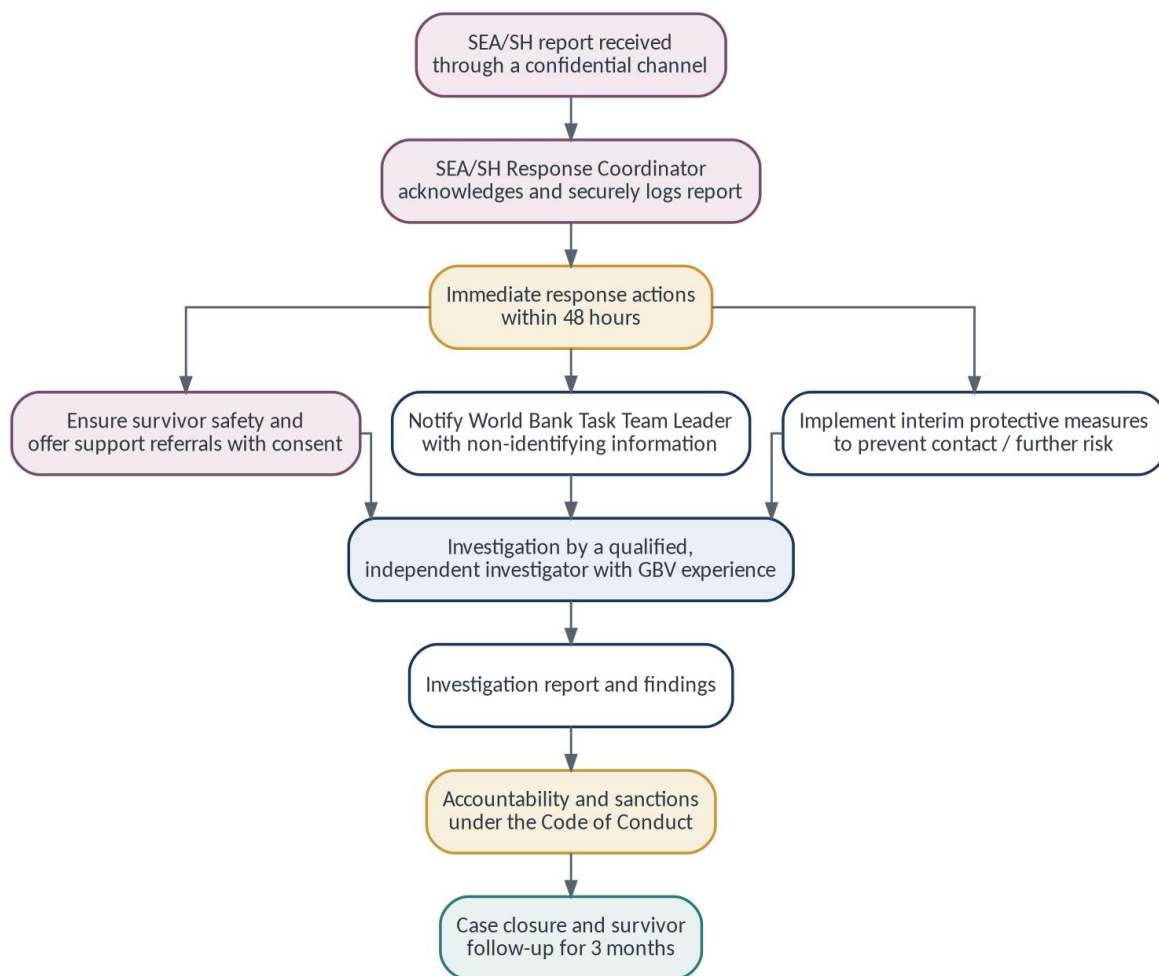


Figure 7-1: SEA/SH Complaint Handling Process Flowchart

7.1.1. Actions during the first 48 hours

1. Log the report in the separate confidential SEA/SH register, accessible only to the authorized Response Coordinator and E&S Specialist.
2. Check for a conflict of interest and transfer the case immediately if the receiving person is implicated or closely associated with the alleged perpetrator.
3. Contact the survivor only where their identity is known and they have consented; confirm safety, listen to immediate needs, explain options, and agree on a safe communication method.
4. With informed consent, refer the survivor to appropriate medical, psychosocial, legal, shelter, or hotline support. Target support referral within 24 hours where feasible.

5. Implement discreet interim protective measures, including separating the alleged perpetrator from contact with the survivor or other beneficiaries, without disclosing the survivor's identity.
6. Notify the World Bank Task Team within 48 hours using the approved incident-notification format and without identifying the survivor.
7. Explain the investigation process and obtain informed consent for any steps involving the survivor directly.

7.1.2. Investigation and case management

- A qualified investigator with GBV and survivor-centered experience leads the investigation; an independent external investigator is used where possible.
- The survivor's safety, dignity, confidentiality, and right to withdraw consent are overriding priorities.
- The investigation file is restricted to the investigator, E&S Specialist, and Project Coordinator.
- The alleged perpetrator is given a fair opportunity to respond without disclosure of the survivor's identity.
- The investigation report and recommended actions are shared with the World Bank Task Team as required.
- The target is to complete at least 90 percent of investigations within 30 working days.
- After closure, the Response Coordinator follows up with the survivor at their preferred frequency for at least three months, where the survivor consents.

7.1.3. Confidential reporting rules

- No survivor name or identifying detail appears in the general GRM register, GRC minutes, dashboard, quarterly report, or public communication.
- Only aggregate status information is reported: incident type, country/institution code, referral status, protective measures, investigation status, and sanctions status.
- Information is shared strictly on a need-to-know basis and with informed consent, except where mandatory child-protection or legal requirements apply.
- SEA involving a person under 18 requires immediate protective action and referral to relevant law-enforcement and child-protection authorities in accordance with the SEA/SH Action Plan.

7.2. Worker grievance pathway

Project workers may raise concerns about wages, terms and conditions, discrimination, harassment, discipline, termination, OHS, contractor conduct, or other labor matters. The

Project worker mechanism is integrated with the GRM and exists alongside IUCEA institutional procedures.

- A project-worker complaint submitted through the GRM follows the general service standards unless another IUCEA procedure applies.
- Discrimination complaints may be considered by the IUCEA complaints panel, with appeal to the Governing Board and further appeal to the East African Court of Justice where applicable.
- Contracted-worker complaints are referred to the responsible employer or contract manager with MSPFU oversight of ESS2 compliance.
- SEA/SH complaints by workers are immediately transferred to the confidential Category B pathway.
- No worker may be retaliated against for using the mechanism in good faith.

7.3. Significant incidents and emergency grievances

Significant incidents - including SEA/SH incidents, serious accidents, and child or forced labor allegations - are notified to the World Bank within 48 hours of MSPFU awareness. An incident review report and corrective action plan are submitted within 10 business days unless otherwise agreed. Grievance handling continues in parallel with incident management and does not delay immediate safety measures.

8. RECORDS, CONFIDENTIALITY, AND DATA MANAGEMENT

This section establishes the requirements for the creation, maintenance, protection, and retention of grievance records under the Project GRM. The procedures are intended to ensure confidentiality, data integrity, accountability, and compliance with applicable project, institutional, and legal requirements.

8.1. Required general register fields

All grievances received through the GRM shall be recorded in the electronic GRM (e-GRM) register. The minimum information required for registration and case management is presented below.

- Unique reference number and date received;
- Submission channel, country, institution, and location;
- Complainant type and gender where voluntarily disclosed;
- Preferred language and communication channel;
- Brief non-sensitive description of the complaint;
- Classification, urgency, referral, assigned handler, and conflict-of-interest status;
- Acknowledgment, investigation, response, corrective-action, appeal, and closure dates;
- Outcome type and evidence of implementation;
- Systemic issue, lesson learned, and preventive or corrective action.

8.2. Separate and restricted records

Different complaint categories require varying levels of confidentiality and access control. Table 8-1 outlines the categories of records maintained under the GRM, the applicable access restrictions, and the minimum information to be retained.

Table 8-1: Separate and Restricted Records

Record	Access rule	Minimum content
General e-GRM register	GRM Focal Person and authorized E&S / management users	Operational data needed to manage Category A complaints and referrals.
SEA/SH register	SEA/SH Response Coordinator and E&S Specialist only; additional access strictly authorized	Coded, non-identifying operational information; support, protective measures, consent, investigation, and follow-up records.

Worker grievance file	HR, E&S, Project Coordinator, or contractor management as applicable	Employment-related record with access limited to the relevant process.
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8.3. Information-security controls

To protect sensitive information and maintain the integrity of grievance records, the following information-security controls shall apply to all GRM records and systems:

- Use password-protected systems, role-based access, and controlled shared drives or case-management folders.
- Do not send sensitive case files to broad distribution lists or store them in personal email or unapproved devices.
- Use coded identifiers in dashboards, meeting papers, and management summaries.
- Maintain an audit trail of registration, access, changes, referrals, decisions, and closure.
- Back up the e-GRM and protect the backup with equivalent access controls.
- Dispose of records only under an approved IUCEA retention and disposal schedule consistent with the Financing Agreement and applicable requirements.

8.4. Data minimization and accuracy

Only information necessary to handle the complaint is collected. The complainant is not required to provide irrelevant personal data. Where information is corrected or updated, the original entry and the reason for the change remain auditable. Country-reported or institution-reported information is not altered without confirmation from the originating entity.

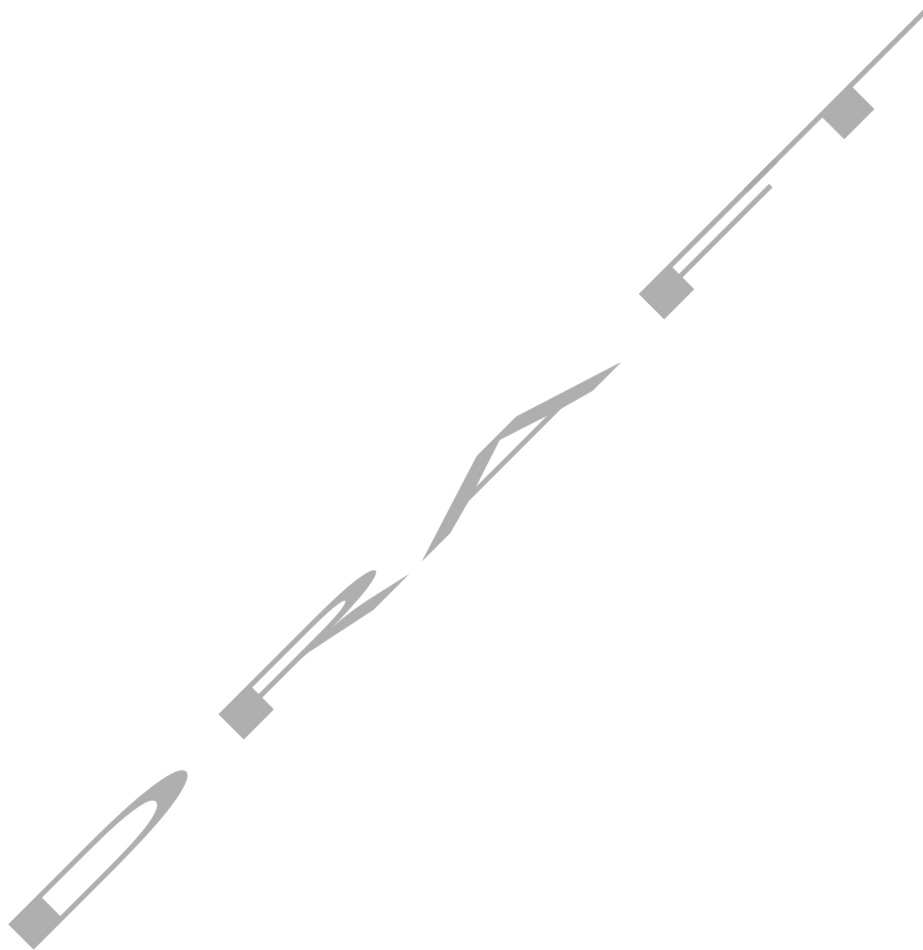
8.5. Case coding and naming

To promote consistency, traceability, and efficient record management, all GRM records shall follow the coding and naming conventions set out in Table 8-2.

Table 8-2: Case Coding and Naming Standards

Item	Standard
Reference number	SET4J-YEAR-SEQUENCE
Category	A General; B SEA/SH; C Integrity; D Procurement
Outcome	Resolved; Partially resolved; Referred; Escalated; Withdrawn; Closed after non-response

Priority	Routine; Significant; Emergency
File name	Reference_Document type_YYYYMMDD, excluding names from sensitive file names



9. AWARENESS, COMMUNICATION, AND NON-RETALIATION

9.1. Awareness and outreach

The GRM is effective only when stakeholders know how to use it and trust that complaints will be handled safely. The MSPFU incorporates GRM information into all relevant stakeholder engagement and communication activities. Table 9-1 outlines the minimum awareness and outreach requirements for different stakeholder groups.

Table 9- 1: Awareness and Outreach Requirements

Audience / setting	Minimum communication action	Frequency
Project staff and consultants	GRM and SEA/SH channels, non-retaliation, referral duties, and Code of Conduct during onboarding. Project meetings and institutional meetings.	Before engagement and as required
Contractors and service providers	Contract clauses, worker GRM, SEA/SH reporting obligations, and focal-point contacts.	At contract start; during monthly monitoring, and refresher for long assignments.
Regional events and trainings	safe-space and GRM briefing; channels displayed in participant materials and at venue.	At every major event
Participating institutions	Posters, complaint box, focal-point information, and accessible information for students and staff.	Continuous; checked each semester or activity cycle
General public and stakeholders	Website, social media, general meetings, stakeholder forums, and disclosure of aggregate performance.	Continuous / periodic

9.2. Minimum content of GRM materials

All GRM communication materials shall, at a minimum, include:

- who may complain and examples of Project-related issues;
-
- all available reporting channels, including the separate SEA/SH and the referral arrangements for matters outside the GRM mandate;
-

- assurance that complaints are free, anonymous reports are accepted, and no written evidence is required;
- expected acknowledgment and response times;
- confidentiality and non-retaliation assurances;
- appeal and referral routes;
- accessibility assistance and language options.

9.3. Non-retaliation

Zero tolerance for reprisals

Any intimidation, adverse treatment, interference, coercion, discrimination, or retaliation against a complainant, survivor, witness, supporter, or person cooperating with an investigation is prohibited. Retaliation is recorded as a separate serious complaint and may result in disciplinary, contract, or other authorized action.

9.4. Reporting back to stakeholders

Stakeholders are informed about GRM performance through aggregate, non-identifying information in Project reports, stakeholder forums, annual communication products, and other disclosure channels. Reporting includes the number and nature of complaints, resolution timeliness, corrective actions, and lessons learned without disclosing confidential or personal information.

10. MONITORING, REPORTING, AND LEARNING

Monitoring and reporting enable the Project to assess the effectiveness of the GRM, identify recurring issues, strengthen accountability, and drive continuous improvement.

10.1. Internal monitoring cycle

The Project shall implement the following monitoring and reporting cycle:

- The GRM Focal Person reviews the live register at least monthly for overdue actions, repeat issues, referrals, and systemic risks.
- The Regional GRC receives a monthly non-sensitive summary and follows up corrective actions.
- Quarterly ESHS reporting to the World Bank includes aggregate grievance performance and significant incident status.
- A consolidated annual summary is included in the Project's annual reporting and stakeholder communication in non-identifying form.
- The GBV Service Provider Directory is reviewed and updated semi-annually.

10.2. Core GRM indicators

The key performance indicators used to monitor GRM effectiveness are presented in Table 10-1.

Table 10-1: Core GRM Performance Indicators

Indicator	Disaggregation / quality check	Frequency
Total complaints received	Category, channel, country, institution, complainant type, sex where voluntarily disclosed	Monthly / quarterly
Acknowledged within 2 working days	Number and percentage	Monthly / quarterly
Classified within 3 working days	Number and percentage	Monthly / quarterly
Category A resolved within 15 working days	Number and percentage; explain justified extensions	Monthly / quarterly
Complaints escalated	By appeal level and outcome	Quarterly
Complaints pending	Ageing analysis and responsible handler	Monthly
Referrals	National PIU, procurement, integrity, worker, SEA/SH	Quarterly

Recurring themes and systemic risks	Corrective / preventive actions and responsible unit	Quarterly
SEA/SH support referrals within 24 hours	Aggregate only; no identifying information	Quarterly
SEA/SH incidents notified within 48 hours	Aggregate compliance percentage	Quarterly
SEA/SH investigations completed within 30 working days	Target at least 90 percent	Quarterly

10.3. Corrective and preventive action tracking

When a complaint reveals a systemic weakness, the GRM Focal Person records the issue in the regional action matrix. The action entry identifies the root issue, corrective or preventive measure, responsible entity, due date, status, evidence of completion, and whether a policy, procedure, training, contract, or communication change is required. Persistent overdue actions are escalated to the Project Coordinator and Executive Secretary.

10.4. Quality assurance

Quality assurance activities shall include:

- sample review of closed general complaints for completeness and consistency;
- verification that complainants were informed of outcomes and appeal rights;
- review of overdue cases and reasons for delay;
- access-control and confidentiality checks;
- annual stakeholder awareness assessment;
- review of complaints, near-misses, and lessons after significant incidents.

11. TRAINING AND CAPACITY BUILDING

11.1. Training objectives

Training ensures that all persons with an intake, referral, investigation, decision, communication, or reporting role can apply this Manual consistently and safely. Training records include participant name, role, date, topic, facilitator, and confirmation of completion.

11.2. Minimum training program

The minimum training requirements are summarized in Table 11-1.

Table 11-1: Minimum GRM Training Program

Target group	Minimum content	Timing / frequency	Lead
MSPFU staff and Regional GRC	GRM principles, categories, case workflow, confidentiality, conflict of interest, non-retaliation, records, and reporting.	Before operations; as per need	E&S Specialist
Institutional and national focal points	Intake, oral complaints, accessibility, referral within 2 days, communication, complaint boxes, and data protection.	On designation; refreshers and as per needs of respective country	E&S Specialist / GRM Focal Person
SEA/SH Response Team	Survivor-centered response, informed consent, referral pathways, confidentiality, incident notification, and safe investigation.	Before assuming the role, quarterly, and after an incident.	Qualified GBV specialist / E&S Specialist
Consultants, contractors, and firms	Code of Conduct, worker GRM, SEA/SH and integrity reporting obligations, and retaliation prohibition.	At contract commencement; quarterly, and annually for long-term contracts	E&S Specialist / Procurement
Event facilitators and trainers	Safe-space briefing, how to receive a disclosure, immediate referral, emergency	Before each major event	GRM Focal Person / E&S Specialist

	contacts, and venue accessibility.		

11.3. Practical readiness exercises

- Test the online forms and dedicated email accounts;
- Simulate an oral complaint and issue a reference number;
- Simulate a SEA/SH disclosure without recording identifying details;
- Test referral to the national PIU and worker grievance routes, and confirm that matters outside the GRM mandate can be transferred securely to the appropriate authorized channels;
- ;
- Verify complaint-box opening controls and weekly schedule;
- Verify access permissions, backup arrangements, and incident notification contacts;
- Conduct a tabletop review of overdue-case escalation and continuity during staff absence.

12. REVIEW, AMENDMENT, AND DOCUMENT CONTROL

12.1. Routine review

The E&S Specialist reviews this Manual at least annually and recommends changes to the Project Coordinator. Review considers changes in Project design, participating countries or institutions, applicable instruments, grievance trends, stakeholder feedback, audits, incidents, accessibility findings, and implementation lessons.

12.2. Triggered review

- A significant incident or pattern of serious complaints;
- A material change to the Project, PIM, SEP, ESCP, LMP, SEA/SH Action Plan, or Financing Agreement;
- A change in institutional roles, e-GRM system, reporting channels, or participating arrangements;
- An audit or World Bank implementation-support finding;
- Evidence that the GRM is inaccessible, unsafe, delayed, or not trusted by stakeholders.

12.3. Amendment process

1. The E&S Specialist prepares the proposed amendment and change summary.
2. The Project Coordinator reviews operational, fiduciary, legal, and stakeholder implications.
3. The Executive Secretary approves the amendment through IUCEA governance procedures.
4. World Bank agreement or no-objection is obtained where required by the Project documents.
5. The revised version is dated, issued to all focal points, reflected in training and communication materials, and archived with the superseded version.

12.4. Controlled copies

The MSPFU maintains one authoritative electronic copy and a controlled distribution list. Printed copies are marked “Uncontrolled when printed” unless formally issued. Contact details, forms, and service provider directories may be updated administratively without changing core complaint rights, timelines, or safeguards, provided changes are documented and communicated.

Appendix A: General Grievance Intake Form

Intake rule

Do not use this form to record SEA/SH details. Transfer a SEA/SH disclosure immediately to the confidential pathway and record only the referral code in the general register.

Reference number	
Date and time received	
Receiving officer / focal point	
Submission channel	
Country / institution / location	
Complainant name (optional)	
Complainant type	
Gender (optional / self-disclosed)	
Contact details and safe preferred channel	
Preferred language / accessibility support	
Anonymous complaint? ☐ Yes ☐ No	
Third-party submission? ☐ Yes ☐ No	

Complainant's description in their own words

Description	
--------------------	--

• **Immediate screening**

Immediate safety risk? ☐ Yes ☐ No	
Potential SEA/SH? ☐ Yes ☐ No	
Potential integrity issue? ☐ Yes ☐ No	
Potential procurement issue? ☐ Yes ☐ No	
Potential worker grievance? ☐ Yes ☐ No	
Potential national-operation complaint? ☐ Yes ☐ No	
Immediate action / referral taken	
Acknowledgment issued: date / method	

Receiving officer signature: _____

Date: