



REPUBLIC OF KENYA



NPHI
KENYA NATIONAL PUBLIC HEALTH INSTITUTE
Responsive. Reliable. Trusted

GRIEVANCE REDRESS MECHANISM

Prepared by Kenya National Public Health Institute

TABLE OF CONTENTS

TABLE OF CONTENTS.....	ii
LIST OF TABLES.....	ii
ACRONYMS.....	iii
1 INTRODUCTION.....	5
2 PURPOSE.....	6
2.1 Scope.....	6
3 ROLE AND RESPONSIBILITIES.....	6
4 CATEGORIES OF COMPLAINTS AND ELIGIBILITY.....	9
4.1 Objectives.....	10
4.2 Guiding Principles.....	11
4.3 Disclosure and Awareness of GRM.....	12
5 GRM PROCESS.....	13
5.1 Overview of the GRM Process.....	13
5.2 Process of the General Complaint - GRM.....	13
5.3 Gender-Based Violence (GBV), Sexual Exploitation and Abuse/Sexual Harassment (SEA/SH), and Violence Against Children (VAC) Complaints Management Procedure.....	24
5.4 Appeal and Escalation Process.....	30
6 DATA PROTECTION.....	33

ACRONYMS

E&S	Environmental & Social
ESIA	Environmental and Social Impact Assessment
ESMF	Environmental and Social Management Framework
ESMP	Environmental and Social Management Plan
ESS	Environmental Social Standards
GBV	Gender Based Violence
GBVIMS	Gender Based Violence Information Management System
GM	Grievance Mechanism
GRC	Grievance Redress Committee
GRM	Grievance Redress Mechanism
HEPRR	Health Emergency Preparedness, Response and Resilience
PCT	Project Coordinating Team
RP	Responsible Party
SEA	Sexual Exploitation & Abuse
SEP	Stakeholder Engagement Plan
SESP	Social and Environmental Screening Procedure
SH	Sexual Harassment
SRM	Stakeholder Response Mechanism
SMS	Short Message Service
VAC	Violence Against Children
WB	World Bank

Executive Summary

KNPHI Grievance Redress Mechanism (GRM) has been established to provide a structured and transparent process for receiving, managing, and resolving concerns and complaints that may arise during implementation of the KNPHI project and related institutional activities. The project aims to strengthen local vaccine and pharmaceutical manufacturing capacity in Kenya by enhancing infrastructure, technology transfer, institutional systems, and operational capabilities to support sustainable production and access to quality health products. Through these activities, the project interacts with various stakeholders, including employees, contractors, consultants, suppliers, visitors, government agencies, and surrounding communities.

The GRM serves as a formal platform through which stakeholders can raise concerns related to environmental and social issues, labor and working conditions, occupational safety and health matters, project activities, service delivery, and other operational issues. The mechanism ensures that grievances are addressed in a timely, fair, and effective manner while promoting transparency and accountability throughout project implementation.

The mechanism is guided by key principles including accessibility, confidentiality, fairness, responsiveness, impartiality, and protection against retaliation. Stakeholders can submit grievances through established channels such as emails, written submissions, telephone communication, suggestion boxes, or direct reporting to designated focal persons. Reported grievances are documented, reviewed, investigated where necessary, and resolved within defined timelines to ensure effective management and communication throughout the process.

The implementation of the GRM is expected to strengthen stakeholder engagement, promote trust and accountability, reduce potential conflicts, and support continuous improvement in project implementation. Through this mechanism, KNPHI demonstrates its commitment to responsible institutional governance and effective management of stakeholder concerns while ensuring successful and sustainable project outcomes.

1 INTRODUCTION

The Republic of Kenya (the borrower) through the Ministry of Health (MOH) is implementing the Health Emergency Preparedness, Response and Resilience Project for Eastern and Southern Africa under Phase I of the Multiphase Programmatic Approach (Project) with the involvement of the Kenya Biovax Institute Limited (KBI), National Public Health Institute (NPHI), Pharmacy and Poisons Board (PPB) and National Quality Control Laboratory (NQCL) as set out in the Financing Agreement. KNPHI being an implementing agent under this project will involve multiple stakeholders including government agencies, contractors, workers, surrounding communities, suppliers, and the general public. Project implementation may occasionally give rise to concerns, complaints, or grievances related to environmental, social, labor, procurement, and operational matters.

A Grievance Redress Mechanism (GRM) is therefore established to provide a structured, transparent, and accessible process for receiving, recording, addressing, and resolving grievances in a timely and fair manner. The GRM serves as an important accountability and risk management tool that promotes transparency, builds trust among stakeholders, and supports effective project implementation.

This document is aligned to the HEPRR project's enhanced GRM that was prepared by the PCT at MOH which is in line with World Bank Environmental and Social Framework (ESF) requirements and shall be implemented throughout the project cycle.

The mechanism does not replace judicial or administrative remedies. Complainants retain the right to access formal legal or administrative channels at any stage of the grievance process.

2 PURPOSE

2.1 Scope

The GRM applies to all Project activities, and all stakeholders who may be affected by, or have an interest in, KNPHI project activities. These stakeholders include project-affected communities and local residents living within or near project areas, as well as KNPHI employees, contract workers, consultants, and other individuals engaged directly or indirectly in project implementation. The GRM also applies to suppliers and vendors providing goods and services, government agencies involved in oversight or collaboration, civil society organizations, community leaders, vulnerable and marginalized groups, and members of the public who may raise concerns related to project activities. The mechanism is designed to ensure that all stakeholders, regardless of their role or level of engagement, have access to a fair, transparent, and accessible process for submitting grievances and receiving timely resolutions.

The GRM will address a broad range of grievances that may arise during project implementation. These include environmental concerns such as noise and dust pollution, improper waste management, water contamination, and air quality issues that may affect surrounding communities or project workers. The mechanism will also address social issues, including community disturbances, traffic disruptions, restricted access to public facilities, and concerns related to community health and safety. In addition, grievances related to labour and working conditions, occupational health and safety, procurement and governance matters, and gender-based violence or sexual exploitation and abuse may also be reported and addressed through the GRM.

3 ROLE AND RESPONSIBILITIES

Implementation of the GRM for the Project will be the ultimate responsibility of the E&S focal person and will be supported by the organization and other resource persons. The various roles and responsibilities are as follows:

Responsible person	Roles
E&S Focal	i. Coordinate the GRM procedure, management system and

Responsible person	Roles
Person	recording as per the steps described in the procedure ii. Providing guidance on solutions to complaints and grievances in consultation with the relevant departments and ensure consistency of redress for all grievances received in relation to the Project. iii. Refer SEA/SH cases to the SEA/SH GM system iv. Coordinate the work of investigation of the GRC v. Promote awareness about the GRM to all stakeholders in the project vi. Coordinate with the PCT & WB in the investigation of grievances and the agreement of redress that were directly received or referred.
GRC	i. Provide summary reports to the PCT (both those received by the Implementation level GRM and directly by WB) with any recommended actions. ii. Disclose the GRM's work (including case registry, summary reports on individual cases, reports on trends or patterns, and actions taken in response to trends and patterns) to the PCT and to project stakeholders, through periodic reporting (quarterly)
All Responsible Partners and Contractors	i. Receive and acknowledge any issue, concern, complaint or grievance from the community, verbally or in writing. They will record the issue and report it to the E&S focal person in compliance with the GRM ii. Involvement in the investigation of grievances as required depending on the nature and severity of the grievance and as directed by the GRM.
Project Coordinating Team	i. Ensure that this GRM procedure is applied through all Project and its Responsible Partners and Contractors' operations and activities

Responsible person	Roles
	ii. Apply necessary controls to minimise risks that could result in stakeholder grievances. iii. Review complaints received by the GRM and their outcomes, work with the E&S focal person to identify successes, lessons learned, challenges and trends, and report its assessments to the management. iv. Receive quarterly reports on complaints from the Project Implementation level of the GRM, and collaborate with KNPHI to identify successes, challenges, trends and lessons learned in responding to complaints.

4 CATEGORIES OF COMPLAINTS AND ELIGIBILITY

The management of complaints will follow different paths depending on the type of complaint. There are different categories of complaints, including:

- i. Employment and Labour Issues
- ii. Occupational Safety and Health Complaints
- iii. Sexual Exploitation
- iv. Community Health and Safety Concerns
- v. Environmental Complaints
- vi. Contractor and Supplier Complaints
- vii. Stakeholder Engagement and Communication Issues
- viii. Security Related Complaints
- ix. Corruption and Fraud Allegation
- x. Discrimination and Human Rights Issues
- xi. Administrative and Service Delivery Issues
- xii. Product Complaints

GBV/SHE-A. complaints relate to sexual exploitation and abuse (SEA/SH), sexual violence and violence against children. For this category of complaints, users need to be assured that they will be handled confidentially and without risk to themselves through the project's SEA/SH GM. In these cases, a special handling procedure is reserved to preserve the confidentiality of data processing.

4.1 Objectives of the GRM

KNPHI (GRM) is established to provide a structured, transparent, and accessible process for receiving, assessing, and resolving grievances arising from project implementation. The GRM aims to ensure that stakeholder concerns are addressed in a timely and fair manner while strengthening accountability, improving stakeholder relationships, and enhancing overall project performance. The mechanism also serves as a risk management tool to identify and address potential issues before they escalate into conflicts or disrupt project activities.

The specific objectives of the GRM are to:

- i. Provide accessible, inclusive, and transparent channels for stakeholders to raise concerns, complaints, and feedback related to project activities.
- ii. Ensure timely, fair, and consistent resolution of grievances while protecting complainants from retaliation or discrimination.
- iii. Promote accountability and transparency in project implementation through proper documentation, tracking, and reporting of grievances and their resolution.
- iv. Strengthen stakeholder engagement and trust by facilitating effective communication between project implementers and affected stakeholders, including vulnerable and marginalized groups.
- v. Improve project performance and risk management by identifying recurring issues, preventing escalation of disputes, and ensuring compliance with applicable World Bank requirements, national & international regulations, and institutional policies.

4.2 Guiding Principles

The guiding principles for GRM are the following:

- i. **Legitimate:** Enabling trust from the stakeholder groups for whose use they are intended, and being accountable for the fair conduct of grievance processes.
- ii. **Accessible and inclusivity:** Being known to all stakeholder groups for whose use they are intended and providing adequate assistance for those who may face barriers to access.
- iii. **Predictable:** Providing a clear and known procedure with an indicative timeframe for each stage, and clarity on the types of process and outcome available and means of monitoring implementation.
- iv. **Equitable:** Seeking to ensure that aggrieved parties have reasonable access to sources of information, advice and expertise necessary to engage in a grievance process on fair, informed and respectful terms.
- v. **Confidentiality:** Commitment to protect the identity, personal information and details shared by individuals who submit grievances
- vi. **Transparent:** Keeping parties to a grievance informed about its progress and providing sufficient information about the mechanism's performance to build confidence in its effectiveness and meet any public interest at stake.
- vii. **Rights compatible:** Outcomes are consistent with applicable national and internationally recognized rights.
- viii. **Efficiency:** This GRM will have the ability to handle and resolve grievances in a timely, organized and resource efficient manner while ensuring fair and quality outcomes.
- ix. **Feedback:** This GRM is obliged to keep complainants informed throughout the grievance handling process, communicate outcomes clearly and respectfully.

4.3 Disclosure and Awareness of GRM

KNPHI shall implement a structured communication strategy to ensure that the GRM is widely known, easily understood, and accessible to all stakeholders throughout the project lifecycle as stipulated in the Stakeholder Engagement Plan (SEP). Information about the GRM will be disclosed through multiple channels to reach diverse stakeholder groups. These will include community meetings, stakeholder engagement forums, public barazas, project launch events, and routine engagement activities. Printed materials such as posters, brochures, and flyers will be displayed at strategic locations including project site, local administration offices, health facilities, and other public areas. In addition, the GRM details will be published on the KNPHI website and shared through digital platforms where applicable.

To ensure inclusiveness, GRM information will be communicated in languages that are easily understood by local communities, and where literacy levels are low, information will be disseminated through oral communication and community sensitization forums. Special attention will be given to ensuring that vulnerable and marginalized groups, including persons with disabilities, women, and minority communities, are adequately reached through tailored communication approaches.

All project workers, including contractors and subcontractors, will be sensitized on the GRM during induction and periodic training sessions to ensure they understand how to report grievances and their responsibilities within the mechanism.

The effectiveness of GRM awareness activities will be periodically assessed through stakeholder feedback and monitoring of grievance uptake levels, and improvements will be made where necessary.

5 GRM PROCESS

5.1 Overview of the GRM Process

The GRM for the Project shall operate at two levels;

- i. Project Coordination Team (PCT) level, which shall provide oversight, review, and escalation support for grievances that are not satisfactorily resolved at the Project Management level. The PCT shall also monitor the effectiveness of the GRM, identify recurring issues, and ensure that corrective actions are implemented to prevent future occurrences.
- ii. Project Implementing level, under the overall direction and oversight of the Chief Executive Officer (CEO) of KNPHI. This level shall be responsible for receiving, recording, assessing, and resolving grievances raised by stakeholders in relation to project activities, contractors, workers, and community interactions.

As a result of this two-tier grievance management structure, complainants may raise grievances at any time through the following channels:

- i. The PCT, particularly in cases requiring escalation, review, or additional intervention.
- ii. The Project GRM managed by KNPHI or the Ministry of Health (MoH).

5.2 Process of the General Complaint - GRM

The following process will be followed to address and resolve a grievance:

5.2.1 Step 1 – Receiving And Registering Grievance

A grievance shall be received at KNPHI and shall be forwarded to the E&S focal person. Grievances will be submitted through:

The contact details for logging in the GRM are as shown below:

Kenya National Public Health Institute,
Afya House Annex, KNH Grounds, Hospital Road, Nairobi, Kenya.
Telephone: +254 718 777 000
Email: dg@nphi.go.ke

All grievances shall be logged using the Grievance Form below:

Table 1. Grievance record (To be filled by complainant or on behalf of complainant)

Grievance Record			
Reference No: (Official Use Only)			
Anonymous	☐ Yes	☐ No	
Full Name			
Gender	☐ Male	☐ Female	☐ Other
Age			
Contact Information:	Area of Residence		
	Telephone:		
	Email:		
Preferred contact method	☐ Letter	☐ Telephone	☐ Email
Preferred language for communication			
Grievance Description			
Description of Grievance or Incident <i>(What happened? Where did it happen? Who did it happen to? What is the result of the problem?)</i>			
Date of Incident/			

Grievance	
Nature of Incident/ Grievance (tick one and include date)	☐ One time incident/ grievance (Date_____)
	☐ Incident/ grievance happened more than once (Date_____)
	☐ On-going incident/ grievance (Date_____)
What would you like to see happen to resolve the problem?	
Additional Comments:	

The GRM focal person will log, document and track all responses received within the secure grievances database below. Grievances shall be assigned a case number and records of communication/consultation shall all be attached with the relevant entry and filed. The database shall be monitored regularly for recurring responses so that appropriate mitigation can be developed. As a minimum, the following information shall be recorded:

- i. Case number.
- ii. Complainant's name and contact details.
- iii. Date of complaint.
- iv. Details of complaint.
- v. Resolutions discussed and agreed with the party(ies) in question.
- vi. Actions implemented (including dates); and

Outcome of the actions implemented.

Table 2. Grievance Database

Case Number	Date of Complaint	Recipient	Complainant (Name and Contacts)	Description of Grievance	Priority	Resolutions Discussed	Actions Implemented (with dates)	Person Responsible	Status (open/closed)- Outcome of actions	Findings	Resolution	Date of Sign-off	Additional Comments / Follow-up

5.2.2 Step 2 – Acknowledging, Assessing and Assigning Grievance

i. Acknowledgement of the grievance

The E&S focal person shall acknowledge receipt of any grievance as soon as possible, but within 48 hrs (2 days) from the date it was submitted. Once received and acknowledged the grievances will be categorized based on the available categories. The complainant whose address is known shall be informed about the timeframe in which a response can be expected. A Response Receipt Form below shall be signed and a copy provided to the complainant.

Table 3. Grievance Receipt Acknowledgement Form

(To be sent/delivered to complainant to acknowledge grievance received)

Grievance Receipt Form	
Grievance Number:	
Date Submitted:	
Target Date for initial meeting to address grievance:	
Name:	
Address and Contact Details:	
Grievance Received by:	
Name of Grievance Responsible Person	
Contact Details of Grievance Responsible Person	Telephone: Email: Address:
Comments	

Additional considerations on acknowledging grievances: Literacy levels should be taken into consideration when providing the complainant with the acknowledgement of receipt, and verbal acknowledgement should accompany a written acknowledgement.

ii. Assigning grievances

The GRC chairperson will convene a Grievance Redress Committee which shall be composed of the Project focal person, E&S focal person, Human Resource personnel and any other person that is deemed necessary. The team will assign organisational

responsibility for formulating a response. The E&S focal person has the responsibility for coordinating the Project's response to a grievance.

Table 4. Grievance responsibility assignment

Grievance Record (Official Use)		
Grievance Number		
Date Submitted		
Target Date for Resolution		
Full Name:		
Address and contact details:		
Grievance received by:		
Name of Grievance Responsible Person:		
Description of Grievance:		
Assessment of Grievance Level:		
Assign Responsibility		
Notification to PCT	☐ Yes	☐ No

The progress on process should be logged in the Grievance Database.

5.2.3 Step 3: Investigating and Development of Resolutions

The Grievance Management Committee will obtain as much information as possible from the person who received the complaint, as well as from the complainant, to gain a first-hand understanding of the grievance:

The committee will:

- i. Analyse the problem.
- ii. Conduct necessary investigations and evaluations.
- iii. Undertake a site visit, if required, to clarify the parties and issues involved.
- iv. Gather the views of other stakeholders, including project employees, if necessary and identify initial options for settlement that parties have considered.

If the grievance concerns physical damage (e.g., crops, house, community asset) take a photograph of the damage and record the exact location as accurately as possible.

The GRC will explore potential solutions and mobilize additional resource persons as necessary to propose a resolution to the grievance. The Chairperson to the GRC will be responsible for coordinating the process and convening meetings.

5.2.4 Step 4: Communicating Response and Seeking Agreement

The E&S focal person shall draft a proposed solution and communicate it to all parties involved, including a written response to the complainant. E&S focal person will submit a proposed resolution not later than 28 days after receipt of the complaint.

Upon receipt of the proposed resolution, the complainant will be asked to approve or disapprove the suggested actions, so that the complaint can be closed or considered for further investigation/mediation.

The response shall be in writing, in language that is easily accessible to the complainant. The E&S focal person may also contact the complainant by telephone or set up a meeting to review and discuss the proposed response.

The proposed response shall include:

- i. A clear restatement of the complainants' concerns.
- ii. A detailed description of the proposed response, with an explanation of why it has been proposed so.
- iii. A listing of the complainant's choices, given the proposed response. (Those choices may include, among others: agreement to proceed; a referral decision, or a plan for compliance review; further dialogue on a proposed

action; or participation in a proposed assessment and engagement process or any other)

- iv. The expected timeframe for resolution aiming to resolve any grievances within 28 days.

The following template is populated by the E&S focal person and sent to the complainant to seek agreement and continue with resolution.

Table 5. Grievance Resolution Response form

Grievance Resolution Response	
Grievance Number:	
Date of Communication:	
Name of Complainant:	
Restatement of Grievance/ Concern	
Proposed Solution/Response	Proposed Solution:
	Explanation:
List of choices for moving forward	1. Agreement to proceed with above solution. 2. Request for a review of a decision, 3. A referral decision, or 4. A plan for compliance review. 5. Further dialogue on a proposed action. 6. Request participation in a proposed assessment and engagement process 7. Other to be suggested by complainant

Target Date for Resolution	(28 days from receipt of grievance)
Grievance Received by:	
Name of Grievance Responsible Person	
Contact Details of Grievance Responsible	Telephone: Email: Address:

5.2.5 Step 5: Implementing Response

The complainant may or may not agree with the proposed response. If there is agreement, then the E&S focal person will proceed with the proposed response. Actions agreed upon during mediation will be implemented in a timely manner.

The progress shall be logged in the Grievance Database **Table 2**. E&S focal person is responsible for overseeing the implementation of agreed actions to resolve the complaint.

5.2.6 Step 6: Reviewing Resolution

The E&S focal person and the stakeholders shall monitor implementation jointly. Where implementation of agreements reached is a multi-step process, and there is some implementation risk, the E&S focal person shall seek commitments from all stakeholders to “come back to the table” when needed to deal with challenges during implementation. The E&S focal person shall populate the template below, in line with agreed response on a given grievance and monitor progress.

Table 6. Grievances Actions Form

Actions to Resolve Grievance (Official Use)			
Delegated to:			
Action	Who	When	Completed (Y/N)

Strategy to communicate response:	
Response/Resolution:	
Sign-Off:	
Date:	

5.2.7 Step 7: Closing Out or Referring Request

If the response is successfully implemented, the E&S focal person shall document the satisfactory resolution. In cases where there have been major risks, impacts and/or negative publicity, it may be appropriate to include written documentation from the complainant indicating satisfaction with the response. In others, the E&S focal person shall note the action taken and that the response was satisfactory to the complainant and the organization. Once sign-off has occurred, this shall be recorded in the Grievance database Log.

If the grievance has not been resolved, the E&S focal person shall document steps taken, communication with the complainant (and other stakeholders if there has been substantial effort to initiate or complete a multi-stakeholder process), and refer the grievance to the PCT. The E&S focal person shall document the outcome of the discussions with the complainant in a way that makes clear what options were offered through the GRM and why the complainant chose not to pursue them.

To be completed by the E&S focal person once all actions agreed upon have been completed

Table 7. Grievances close out form

Conclusion					
Is complainant Satisfied?	☐ Yes	☐ No	Comments from GRC Chairperson:		
Is Grievance Closed?	☐ Yes	☐ No	Grievance Resubmitted?	☐ Yes	☐ No
Time Taken	☐ Within 28 Days	☐ Beyond 28 Days	Comments		
Signature of GRC			Date:		

Chairperson			
New Grievance Number:		Date:	

5.2.8 Step 8: Monitoring and Evaluation

BioVax will monitor grievances routinely as part of the broader management of the Project. Monitoring may be as simple as a telephone call and discussions with the complainant to confirm that a relatively straightforward response has been fully implemented. Effective monitoring may require ongoing meetings of a multi-stakeholder group that has reached agreement to review implementation of a set of commitments for consultation with indigenous people.

Grievance records will be always made available to the PCT. Quarterly internal reports will be compiled by the E&S focal person and forwarded to the Senior management team. These grievance reports will also be included in the quarterly progress reports and will include:

- i. The number of grievances logged.
- ii. The number of grievances of the same or similar issue.
- iii. Number and percentage of complaints resolved within the stipulated time frame
- iv. Number and percentage of complainant satisfied with complaint handling process
- v. Number and percentage of complainants satisfied with actions taken

These reports and other records will be made available for external review if required. Grievance reporting will be part of the annual reporting.

Process	Description	Time Limit
Step 1: Receive grievance	i. Emails ii. Telephone- SMS, Calls, whatsapp iii. Postal box iv. Presented verbally v. Complaints box vi. Community focal persons vii. Website viii. Social Media ix. QR codes	7 working days

Process	Description	Time Limit
	x. Client feedback forms xi. Completed and Submitted Complaint Form (online or in person or on behalf of complainant) xii. Community complaints or protests (verbal and non-verbal), including signs or road blocks	
Step 2: Acknowledge, Assess and Assign Grievance Significance	i. Register grievance ii. Report grievance iii. Assess eligibility iv. Log grievance on system with a number for tracking v. Communicate receipt of grievance	
Step 3: Develop a Response	i. Develop an appropriate response and identify resolution depending on the significance	
Step 4: Communicate Response and Seek Agreement	i. Investigate and consult with relevant parties to fully understand issues and implement actions agreed upon ii. Communicate response back to the complainant iii. Agree on the proposed way forward to resolve grievance	28 Days (from acknowledgement of receipt)
Step 5: Implement Resolution	i. Where agreement is met, move forward with proposed action ii. Monitor success of resolution	
Step 6: Review Response	i. Communicate results of the resolution to the stakeholders ii. Identify if further action is required	
Step 7: Close Out or Refer Request	i. Close out the grievance if the response is successful ii. Where unsuccessful, refer the grievance to the Project Assurance	

Process	Description	Time Limit
Step 8: Monitoring and Evaluation	i. Monitor ongoing success of the resolution ii. Results and to be included in project monitoring processes	ongoing

5.3 Gender-Based Violence (GBV), Sexual Exploitation and Abuse/Sexual Harassment (SEA/SH), and Violence Against Children (VAC) Complaints Management Procedure

BioVax recognizes that Gender-Based Violence (GBV), including Sexual Exploitation and Abuse (SEA), Sexual Harassment (SH), and Violence Against Children (VAC), are serious violations of human rights that require a specialized, confidential, and survivor-centered response. In line with World Bank requirements, all GBV/SEA/SH and VAC-related complaints shall be handled through a dedicated and sensitive process that prioritizes the safety, dignity, confidentiality, and well-being of survivors.

BioVax shall provide information to employees, contracted workers, surrounding communities, and all relevant stakeholders on how to report cases of GBV, SEA/SH, and VAC through the established Grievance Mechanism (GM). This information shall be disseminated through appropriate communication channels during stakeholder engagement meetings, worker inductions, community sensitization forums, posters, notices, and other awareness activities. The communication materials shall clearly indicate the available reporting channels, designated focal persons, and referral pathways for survivors.

To ensure that survivors feel safe and comfortable reporting incidents, complaints may be submitted through confidential channels including: (i) Telephone calls or SMS, (ii) Face-to-face reporting to designated focal persons, and (iii) written communication such as letters or emails. Anonymous reporting shall also be permitted where necessary to protect the survivor.

Upon receipt of a complaint, the case shall be immediately recorded in a separate confidential register using minimal information necessary to protect the survivor and uphold the survivor-centered approach. Only essential information shall be recorded which includes; the nature of the complaint as reported, age and gender of the survivor where voluntarily disclosed, and whether the incident is linked to the project. An acknowledgment of receipt shall be provided to the complainant within 48 hours of filing

the complaint, provided this does not compromise the survivor's safety.

All GBV/SEA/SH and VAC complaints shall be managed with the support of specialized service providers responsible for social protection, medical care, psychosocial support, legal assistance, and child protection services where applicable. Immediate referral of survivors to appropriate support services shall be prioritized, based on the survivor's informed consent.

The GRC Committee or designated Focal Person shall serve as the primary focal point for receiving complaints, facilitating referrals, monitoring case handling, and ensuring that survivor support services are provided. All prevention and response actions shall follow a survivor-centered approach, ensuring that the survivor's safety, confidentiality, choices, dignity, and well-being remain the highest priority while also respecting due process.

The grievance mechanism shall also protect the rights of the alleged perpetrator, including confidentiality and fair treatment during any subsequent administrative or legal processes. Handling of sensitive complaints shall be undertaken in close collaboration with relevant specialized institutions, legal advisors, employers where applicable, and law enforcement agencies where required by law and with the survivor's consent.

The Project Grievance Mechanism shall not conduct investigations into GBV/SEA/SH or VAC cases directly. Its primary role shall be limited to safe receipt of complaints, confidential registration, referral to appropriate service providers, and follow-up to ensure the complaint has been properly handled and closed. Investigations and formal case management shall be undertaken only by authorized specialized institutions.

In accordance with World Bank requirements, the Project shall notify the World Bank through the PC within 48 hours of becoming aware of any GBV, SEA, SH, or VAC incident that is directly linked to project activities, while maintaining strict confidentiality and without disclosing personally identifiable information.

All stakeholders involved in the grievance process shall maintain strict confidentiality regarding both survivors and alleged perpetrators, except where disclosure is necessary to prevent serious harm or where disclosure is required by law. This confidentiality is critical to protecting the dignity, safety, and rights of all parties involved and to maintaining trust in the GM.

A verification process form shall be used by the verification committee to review available information about the GBV/SEA/SH claim in question, the nature of the claim, and whether there is a link with the project. The committee will also make its

recommendations to the alleged perpetrator's employer or manager for appropriate disciplinary sanctions.

The objective of the verification process will be to examine only whether there is a link between the project and the reported GBV/SEA/SH incident and to assure accountability in recommending appropriate disciplinary measures. The verification process establishes neither the innocence nor the guilt of the alleged perpetrator as only the judicial system has that capacity and responsibility. In addition, all final decisions regarding disciplinary actions will rest solely with the employer of the alleged perpetrator; the verification committee will only make its recommendations.

SEA/SH complaint verification Form

Section A:

Has the survivor provided his/her informed consent to access the grievance mechanism? Yes ☐ No ☐

IF YES, please complete the form in its entirety.

IF NO, please share

- 1) the type of incident reported
- 2) the date and area of the incident,
- 3) the alleged perpetrator's connection to the project (if known), and
- 4) the age and gender of the survivor.

(Explain that this information will only be used by the project for the purpose of gathering information on the risks created by the project to the safety and well-being of men, women and children in their communities and to take steps to mitigate these risks. No data specific to the incident in question, including the identity of the victim, specific location, etc., will be shared outside the provider)

Has the survivor provided his/her informed consent to share the above-mentioned information?

Yes ☐ No ☐

If YES, please fill out below only Section B.2; B.2; B.3

If NO, please do not fill out the rest of the form.

Section B:

1. INFORMATION RELATED TO THE COMPLAINANT/GBV SURVIVOR

Survivor Code:

Age and sex of the GBV survivor:

Girl (<18) ☐

Woman (>=18) ☐

Boy (<18) ☐

Man (>=18) ☐

2. INFORMATION RELATED TO THE SEA/SH ALLEGATION:

Time, area and date of incident reported by the survivor:

GBV Type (classification GBVIMS):

- i. Rape ☐
- ii. Sexual aggression ☐

Please specify:

- i. Sexual exploitation and abuse ☐
- ii. Sexual harassment ☐
- iii. Physical aggression ☐
- iv. Emotional and psychological violence ☐
- v. Forced marriage ☐
- vi. Denial of resources and opportunities ☐

Has the survivor received any services? Yes ☐ No ☐

If yes, please specify:

- i. Medical ☐
- ii. Psychosocial ☐
- iii. Legal ☐
- iv. Security/protection: ☐
- v. Other ☐ please specify:

3. INFORMATION REGARDING THE LINK TO THE PROJECT:

This section aims to determine whether the incident is linked to the project and if the alleged perpetrator is hired or is associated to the project

Is the alleged perpetrator linked to the project? Yes ☐ No ☐ Do not know ☐

Name of the alleged perpetrator (if known): Role of the alleged perpetrator (if known):

- i. Public Officer ☐
- ii. NGO staff ☐
- iii. Parent/Guardian ☐
- iv. Police ☐
- v. Soldier ☐
- vi. Security official ☐
- vii. Religious/community leader ☐
- viii. Any other individual associated with the project ☐
- ix. Not known ☐

Has the incident been confirmed as credible after verification? Yes ☐ No ☐
Verification ongoing ☐

End date of the verification process: Decision taken:

- i. No action/sanction ☐
- ii. Informal warning ☐
- iii. Formal warning ☐
- iv. Additional training ☐
- v. Loss of salary ☐
- vi. Suspension of employment ☐
- vii. Layoff with notice ☐
- viii. Layoff without notice ☐
- ix. Report to the police if warranted ☐
- x. Fines ☐
- xi. Other actions ☐ Please specify:

Date of notification to the perpetrator's employer/contractor:

Date of notification to the GBV survivor:

Notification of the implementation of the decisions/sanctions: yes ☐ No ☐

Notification to the PCT yes ☐ No ☐

Time reported to the PCT and Word Bank Within 48 hrs ☐ After 48hrs ☐

Notification to the World bank (*the verification structure needs only share the nature of the case, the age and sex of the complainant -if known-, whether there is a link with the project, and whether the survivor has been referred for services*) yes ☐ No ☐

Note below any follow-up communication with the survivor:

For example: When/if a verification has begun, or the allegation has been determined to have an insufficient basis to continue. It may also include concerns raised by the victim through the verification process.

Name of the representative and signature

.....
.....

5.4 Appeal and Escalation Process

The (GRM) provides complainants with the right to appeal or escalate their grievance where they are not satisfied with the response provided at the Project Implementation

level, or where they believe that the grievance has not been handled fairly, adequately, or within the established timelines. The appeal process ensures transparency, accountability, and fairness while providing complainants with additional avenues for redress.

5.4.1 Level One: Internal Appeal at Project Implementation Level

Where a complainant is dissatisfied with the initial response, proposed resolution, or outcome of the grievance, they may submit an appeal at the Project Implementation level for review. The appeal shall clearly state the reasons for dissatisfaction and may provide additional information or evidence to support reconsideration of the complaint.

Upon receipt of the appeal, the E&S focal person shall review the case together with the GRC and relevant departments to reassess the grievance and determine whether further action, investigation, or adjustment of the proposed resolution is necessary. The complainant shall be informed of the outcome of the appeal within a reasonable timeframe, not exceeding fourteen (14) working days.

5.4.2 Level Two: Escalation to the Project Coordination Team (PCT)

If the complainant remains dissatisfied after the internal appeal at the Project Implementation level, the grievance may be escalated to the PCT. The PCT shall serve as the second level of review and provide independent oversight of the grievance handling process.

The PCT shall review all documentation related to the grievance, assess whether due process was followed, and determine whether the response provided was fair, reasonable, and in compliance with project procedures and applicable safeguards requirements. The PCT may engage with the complainant, project management, contractors, and other relevant stakeholders to facilitate resolution. Where necessary, the PCT may recommend corrective actions, mediation, additional investigations, or referral to specialized bodies depending on the nature of the complaint.

5.4.3 Level Three: Escalation to the World Bank Group

Complainants who are not satisfied with the outcome of the Project Implementation GRM and the Project Coordination Team review, or who are concerned about an adverse response, may further escalate their complaint to the World Bank Group through the World Bank's corporate grievance mechanisms.

Complaints may be submitted to the World Bank Grievance Redress Service (GRS), which ensures that project-related complaints are promptly reviewed and addressed by the World Bank. The GRS provides an avenue for communities and individuals who believe they are adversely affected by a World Bank-supported project to raise their concerns directly with the Bank.

Complainants may also submit their concerns to the World Bank for people who believe they have been or are likely to be adversely affected by a World Bank-funded project due to non-compliance with the operational policies and procedures. Complaints submitted to the World Bank Group shall be handled in accordance with the Bank's established procedures, policies, and timelines. Submission of a complaint to the World Bank does not prevent the complainant from pursuing available national legal or administrative remedies.

5.4.4 Principles of the Appeal Process

The appeal and escalation process shall be guided by the principles of fairness, confidentiality, transparency, non-retaliation, and accessibility. All complainants shall be informed of their right to appeal and the available escalation channels at every stage of grievance handling. The process shall ensure that no complainant is disadvantaged or victimized for seeking further review of their grievance.

6 DATA PROTECTION

KNPHI recognizes the importance of protecting personal and sensitive information collected through the GRM. All grievance-related data shall be handled with strict confidentiality and in compliance with the applicable legal and regulatory framework, including the Kenya Data Protection Act 2019.

Personal information collected during the grievance process, including names, contact details, and details of the complaint, shall only be used for the purpose of grievance resolution. Such information will not be disclosed to unauthorized persons without the consent of the complainant, except where required by law.

All grievance records shall be stored securely in both electronic and, where necessary, physical formats. Access to grievance data will be restricted to authorized personnel such as the E&S focal person and designated members of the GRC. Appropriate security measures, including password protection, controlled access systems, and secure storage facilities, will be implemented to prevent unauthorized access, loss, or misuse of information.

For sensitive grievances, particularly those related to GBV/SEA/SH, additional confidentiality safeguards will be applied. Information related to such cases will be handled on a strictly need-to-know basis and managed in a manner that protects the dignity, privacy, and safety of the complainant.

In reporting GRM performance, all data will be anonymized to ensure that individual complainants cannot be identified. Aggregated data will be used for monitoring, evaluation, and reporting purposes.



Kenya National Public Health Institute
P.O. Box 31 - 00202,
Afya Annex Building , KNH Grounds, Hospital Road,
Nairobi, Kenya
For Enquiries +254 716 717 717