**IRC Duty of Care Policy Framework:**

Rather than establish a separate stand-alone Duty of Care policy, the IRC has chosen to review existing policies to ensure that the organization’s Duty of Care is embedded within and across all relevant standards. To organize and guide these efforts and direct Duty of Care program activities, the IRC draws upon twelve Guiding Principles:

**Duty of Care Guiding Principles**

1. Resilience is Central: IRC recognizes that there is a degree of insecurity that is inherent in humanitarian work, and, in order to thrive in this setting, organizational practices must support resilience on a personal, team, and enterprise level.

2. Prevention and Intervention: While focusing on risk management and resilience building as primary prevention activities, IRC will also expand the organization’s capacity to execute well-coordinated, compassionate responses to critical incidents as they arise.

3. Top-down and Field-Up: IRC endeavors to pair “top-down” approaches that seek to frame standards and universally accessible services with empowered “field-up” mechanisms that enable local teams to generate and adapt ideas for their contexts.

4. Integrated: As often as possible, IRC’s Duty of Care program will utilize and integrate with existing work groups rather than develop separate initiatives.

5. Transparent about Risk: IRC will be clear with staff about the risks that can be foreseen as well as what the organization can and cannot do to mitigate them, giving all staff a choice to decline work assignments if they feel unsafe.

6. Workplace Climate Starts with Supervisors: IRC recognizes that the workplace climate starts at the team level, and therefore managers and other team leaders must be supported to build resilient teams and be held accountable to lead by example.

7. Equity: IRC aims to provide equitable supports to all categories of worker.

8. Holistic: IRC’s duty of care should be evident in all phases of a worker’s employment cycle, from recruitment to induction, assignment, and through separation.

9. Accessible: IRC recognizes that its workforce is global and endeavors to make resources available across all of IRC’s working languages.

10. Iterative: As the context of IRC’s work and the needs of its workforce evolves, so shall the Duty of Care program evolve to meet emerging needs. Continual quality improvement will be the program’s method and mantra.

11. Culture is Key: IRC recognizes that organizational culture is a significant driver of safety, security, health, and wellbeing at work. The Duty of Care program will work to push
forward the dialogues that address IRC’s shared culture and will not be afraid to take on the big conversations that stand in the way of a safe and healthy workplace.

12. Inclusive: There are populations amongst IRC’s workforce who face unique risks and stressors due to their gender, religion, sexual orientation, or other characteristics. IRC strives to accommodate the unique needs of these groups so that they can complete their work with the same expectation of safety, security, health, and wellbeing as all IRC workers.