

Distribution	Policy No	Effective Date	Review Date	Page
All Departments	POL GM 002	10/12/2020	01/12/2021	1 of 15 Ver 1

	<p>THE AURUM INSTITUTE, SOUTH AFRICA</p> <p>USG PROTECTING LIFE IN GLOBAL HEALTH ASSISTANCE</p> <p>POLICY</p>	
--	--	---

Policy Information

Policy Status: Approved
Maintained by: Grants Management

The signatures below certify that this document has been reviewed and accepted and demonstrates that the signatories are aware of all the requirements contained herein and are committed to ensure their provision.

Prepared by	Name	Reney Peters	Signature and Date	
	Role	Regional Grants Manager		
Reviewed by	Name	Karin Turner	Signature and Date	
	Role	Programme Director		
Approved by	Name	Dave Clark	Signature and Date	
	Role	CEO-SA		

Company Documents once printed are considered uncontrolled documents. Only documents in the Aurum Policy Centre online Library are considered to be the most current version.

TABLE OF CONTENTS

BACKGROUND 3
INTRODUCTION..... 4
SCOPE 4
IMPLEMENTATION OF THE POLICY..... 4
PURPOSE OF THE POLICY 4
POLICY IMPLEMENTATION 5
DEFINITIONS AND ABBREVIATIONS..... 5
 Definitions..... 5
 Abbreviations..... 6
POLICY STATEMENT 8
POLICY PRINCIPLES..... 8
RELATED LEGISLATION AND COMPLIANCE..... 9
MANAGEMENT OF THE POLICY..... 10
ROLES AND RESPONSIBILITIES 10
TRAINING 11
REPORTING TO USG AND PRIME RECIPIENTS OF USG FUNDING 11
NON-COMPLIANCE 11
RECORD RETENTION 12

Distribution	Policy No	Effective Date	Review Date	Page
All Departments	POL GM 002	10/12/2020	01/12/2021	2 of 15 Ver 1

CONFIDENTIALITY 12

REGULATORY AUTHORITY 12

CERTIFICATION FORM 12

REPORTING OF NON-COMPLIANCE TO THE POLICY 13

CHANGES TO POLICY 13

CONCLUSION 13

KEY RESOURCES 13

REFERENCES..... 13

SUPPLEMENTARY DOCUMENTS..... 14

REVISION HISTORY 14

 Amendment Record..... 14

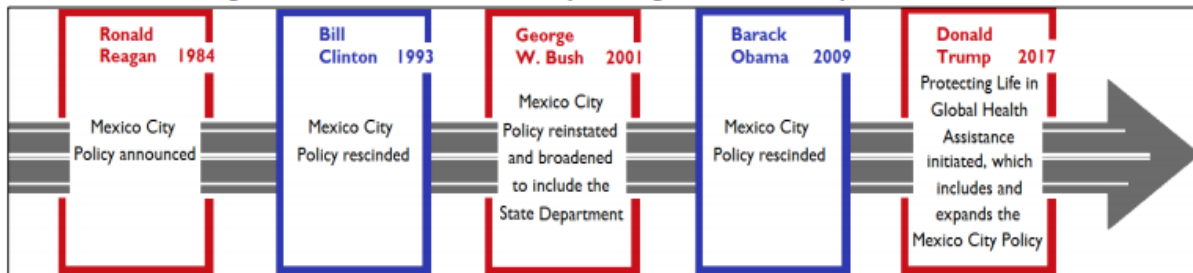
Distribution	Policy No	Effective Date	Review Date	Page
All Departments	POL GM 002	10/12/2020	01/12/2021	3 of 15 Ver 1

USG PROTECTING LIFE IN GLOBAL HEALTH ASSISTANCE (PLGHA) POLICY

BACKGROUND

1. The Aurum Institute NPC (“the Company”) is a not for profit public benefit organisation which conducts, transformational research and designs, tests and implements health systems and programmes for people with HIV and TB and their communities in both the private and public sectors. New knowledge is disseminated through literature and other media.
2. The Protecting Life in Global Health Policy (PLGHP) initiative negotiates health policy at multilateral settings where policies are debated and set, like the WHO and the UN. PLGHP focuses the international discourse around four main pillars, building coalitions to achieve: (1) better health for women, (2) the preservation of human life, (3) strengthening of family as the foundational unit of society, and (4) protecting every nation's national sovereignty in global politics. PLGHP is a sister initiative to the Protecting Life in Global Health Assistance (PLGHA) policy restriction, a global expansion of the Mexico City Policy which ensures that “U.S. taxpayer dollars do not fund organizations or projects/programmes that support or participate in the management of a programme/project of coercive abortion or involuntary sterilization.” Presidential Memorandum Regarding the Mexico City Policy: <https://www.whitehouse.gov/presidential-actions/presidential-memorandum-regarding-mexico-city-policy/>.

Figure 1. International Abortion/Family Planning-Related Policies, by Administration



Source: Created by CRS.

3. Departments and Agencies that are providing global health assistance have coordinated on training materials and other tools to assist U.S. Government staff and implementing partners in understanding and applying PLGHA, including a publicly available e-learning course produced by USAID.
4. Within the U.S. Government interagency, USAID has taken the lead on translating training materials and the PLGHA standard provision included in applicable grants and cooperative agreements into several languages to facilitate greater comprehension of the Policy by a range of implementing partners. USAID’s PLGHA standard provision is currently available on the public USAID website (<https://www.usaid.gov/global-health/legislative-policy-requirements>).
5. HHS Operating Divisions that receive and manage global health assistance continue to use and refer implementing partners to the USAID free public e-learning course. The Centers for Disease Control and Prevention (CDC), the Health Resources and Services Administration (HRSA), the National Institutes of Health (NIH), and the Substance Abuse and Mental Health Services Administration (SAMHSA) work closely and cooperatively with their implementing partners to ensure they are aware of the course. The relevant HHS Operating Divisions, program, and grants specialists have developed specific guidance to specific programs and countries. HHS widely distributed the PLGHA Frequently Asked Questions (FAQs) cleared for public distribution on

Distribution	Policy No	Effective Date	Review Date	Page
All Departments	POL GM 002	10/12/2020	01/12/2021	4 of 15 Ver 1

August 27, 2018, to the Department’s programs and grants community, and posted them on the HHS website (<https://www.hhs.gov/sites/default/files/hhs-interagency-plgha-faqs-august-2018.pdf>).

- State’s Office of the U.S. Global AIDS Coordinator and Health Diplomacy (S/GAC), through robust interagency collaboration, has developed and disseminated implementation guidance for the PLGHA Policy through the U.S. President’s Emergency Plan for AIDS Relief (PEPFAR) 2019 Country Operational Plan (COP) guidance to support all PEPFAR country teams in the implementation of the Policy. The PEPFAR 2019 COP Guidance is available on www.pepfar.gov, and includes links to the e-learning course on PLGHA and resources to provide additional information about it.

INTRODUCTION

- The Company is responsible for ensuring compliance with all legislative and policy requirements issued by the United States Government Departments and Agencies (USG) in its projects/programmes funded by USG, particularly the policy restriction “Protecting Life in Global Health Assistance” (PLGHA) under which USG will apply the provisions of the Mexico City Policy to grants, cooperative agreements, and contracts with Foreign Non-Governmental Organisations (NGOs) that receive global health assistance.

SCOPE

- This Policy only applies to any of the Company’s projects/programmes that are funded by USG, which includes but is not limited to NIH, NIAID, CDC, USAID.
- Protecting Life in Global Health Assistance applies to global health assistance to, or implemented by, Foreign NGOs. This includes global health assistance that a U.S. NGO provides to a Foreign NGO through a subaward.

IMPLEMENTATION OF THE POLICY

- Related policies that were in force prior to the commencement of this Policy are replaced in their entirety with effect from the date on which this Policy is approved.

PURPOSE OF THE POLICY

- The policy requires the Company and any of its Foreign NGO Subrecipients and Subcontractors to agree, as a condition of receiving USG global health assistance that they will not perform or actively promote abortion as a method of family planning. Under the expanded U.S. Mexico City Policy, “global health assistance,” encompasses all global health programmes, including HIV/AIDS, maternal and child health, infectious diseases including malaria, tuberculosis, and neglected tropical diseases, global health security, and family planning and reproductive health.
- For The Department of Health and Human Services (HHS), global health assistance at this time includes funding transferred to HHS from the Department of State, USAID, or the U.S. Department of Defense (DoD) for international health programmes, such as those for HIV/AIDS, maternal and child health, tuberculosis, malaria, and global health security. PLGHA applies to global health assistance provided to, or implemented by, Foreign NGOs, including those to which a U.S. NGO issues a subaward with such funds.
- For DoD, global health assistance applies to the Defense HIV/AIDS Prevention Program, which works around the world to reduce the transmission and impact of HIV/AIDS in partner militaries, in close coordination with the U.S. President’s Emergency Plan for AIDS Relief (PEPFAR).

Distribution	Policy No	Effective Date	Review Date	Page
All Departments	POL GM 002	10/12/2020	01/12/2021	5 of 15 Ver 1

POLICY IMPLEMENTATION

14. The PLGHA provision is applicable to and must be included in:
 - 14.1. all new grants, cooperative agreements, subawards and in-kind assistance that provide global health assistance; and
 - 14.2. all existing grants, cooperative agreements, subawards and in-kind assistance that provide global health assistance when such agreements are amended to add new funding.
15. The Company as a Foreign NGO, and Prime Recipient of any USG funding does not need to sign a separate certification that it agrees to abide by PLGHA. For U.S. State/USAID, Foreign NGOs who are Prime Recipients of USG funding agree to the conditions of the policy by signing their award (or amendment to their award) with the standard provision included, and for DHHS/HHS, Foreign NGOs who are Prime Recipients of USG funding agree to the conditions of the policy by drawing down funds in their award.
16. The Company is however required to flow down the PLGHA provision to any of its Foreign NGO Subrecipient and Subcontracts contracts when providing funding from any of its projects/programmes funded by USG through the mechanisms mentioned in paragraph 14 above to the Company, by including Annexure A hereto in such contracts.

DEFINITIONS AND ABBREVIATIONS

Definitions

17. **Actively promoting abortion** means the active promotion of abortion as a method of family planning includes, for example, abortion counselling, referrals (except for passive referrals), lobbying, and public information campaigns. Referrals for abortion in cases of rape, incest, or endangerment of the life of the mother are not prohibited.
18. **Contract** means a mechanism used by the U.S. Federal Government to provide funding for research and development projects. Unlike a Grant or Cooperative Agreement though, the U.S. Federal Government uses Contracts as a procurement mechanism whereby the products and related services required, when required, can be procured, without the need for dealing with traditional procurement delays.
19. **Cooperative Agreement(s)** means a legal agreement between the U.S. Federal Government and any other entity, which occurs when the U.S. Federal Government transfers something of value, usually money, to a State Government, Municipality or Private Company for a public purpose. A cooperative agreement is distinguished from a Grant in that it provides for substantial involvement between the U.S. Federal awarding agency or pass-through entity and the non-Federal entity in carrying out the activity contemplated by the U.S. Federal award.
20. **Foreign NGO** is a for-profit or not-for-profit nongovernmental organisation not organised under the laws of the United States, any U.S. State or Territory, the District of Columbia, or the Commonwealth of Puerto Rico. Please note that this definition of a foreign NGO for Protecting Life in Global Health Assistance is different from the definition of a “foreign organization” in [2 CFR 200.47](#) and the definition above applies specifically for the purposes of this policy.
21. **Grant(s)** means one of the U.S. Federal Government’s mechanisms for funding ideas and projects to provide public services, stimulate the economy, and benefit the general public. Grants can be awarded for a wide variety of activities, such as innovative research, recovery initiatives, infrastructure building, or any of the other hundreds of funding programmes in the [Catalog of Federal Domestic Assistance \(CFDA\)](#).

Distribution	Policy No	Effective Date	Review Date	Page
All Departments	POL GM 002	10/12/2020	01/12/2021	6 of 15 Ver 1

22. **Institutional Official** means the individual within the Company that is responsible for the review of disclosures of PLGHA. For the purposes of this Policy, the Company Official is designated as the Group Chief Executive Officer, or his or her duly authorised designee.
23. **Institutional responsibilities** mean the Project Director's professional responsibilities associated with his or her Institutional appointment or position, such as research, teaching, clinical activities, administration, and institutional, internal and external professional committee service.
24. **Passive Referral** means providers are permitted to respond to a question regarding where a safe, legal abortion may be obtained if a woman who is already pregnant specifically asks the question, she clearly states that she has already decided to have a legal abortion, and the healthcare provider reasonably believes that the ethics of the medical profession in the host country require a response regarding where the procedure is available safely and legally. A passive referral is allowed when all of these conditions are met.
25. **Policy** refers to this, the PLGHA policy.
26. **Project Director** means any individual who is responsible for the design, conduct, or reporting of USG sponsored projects/programmes, research, or proposals for such funding. This definition is not limited to those titled or budgeted as Project Director, Principal Investigator or Co-Investigator on a particular proposal, and may include Postdoctoral Associates, Senior Scientists, or Graduate Students. The definition may also include Subrecipients, Contractors, Subcontractors, Collaborators or Consultants as appropriate.
27. **Research** means a systematic investigation, study, or experiment designed to contribute to generalizable knowledge relating broadly to public health, including behavioural and social-sciences research. The term encompasses basic and applied research (e.g. a published article, book, or book chapter) and product development (e.g. a diagnostic test or drug).
28. **U.S. Government Departments and Agencies (USG)** means the Public Health Service of the U.S. Department of Health and Human Services (DHHS/HHS), and any components of the U.S. Government to which the authority may be delegated. The components of the USG include, but are not limited to the Centers for Disease Control and Prevention (CDC), Food and Drug Administration (FDA), Health Resources and Services Administration (HRSA), National Institutes of Health (NIH), National Institute of Allergy and Infectious Diseases (NIAID), Substance Abuse and Mental Health Services Administration (SAMHSA), and United States Agency for International Development (USAID).
29. **U.S. NGO** is a for-profit or not-for-profit non-governmental organisation that is organised under the laws of the United States, any U.S. State or Territory, the District of Columbia, or the Commonwealth of Puerto Rico.

Abbreviations

AIDS	Acquired Immunodeficiency Syndrome
CDC	Centers for Disease Control and Prevention
CEO-SA	Chief Executive Officer – Southern Africa Region
CFDA	Catalog of Federal Domestic Assistance

Distribution	Policy No	Effective Date	Review Date	Page
All Departments	POL GM 002	10/12/2020	01/12/2021	7 of 15 Ver 1

CFR	Code of Federal Regulations
DHHS/HHS	United States Department of Health and Human Services
DoA	Delegation of Authority
DOAG	Development Objective Agreements
DoD	Department of Defense
FDA	Food and Drug Administration
GAVI	Global Alliance for Vaccines and Immunisation
G-CEO	Group Chief Executive Officer
G-CFO	Group Chief Financial Officer
HIV	Human Immunodeficiency Virus
HRSA	Health Resources and Services Administration
NGOs	Non-Governmental Organisations
NIAID	National Institute of Allergy and Infectious Diseases
NIH	National Institutes of Health
NPC	Not for Profit Company
PDF	Portable Document Format
PEPFAR	U.S. President's Emergency Plan for AIDS Relief
PLGHA	Protecting Life in Global Health Assistance
PLGHP	Protecting Life in Global Health Policy
PMI	U.S. President's Malaria Initiative
SAMHSA	Substance Abuse and Mental Health Services Administration
TB	Tuberculosis
U.S.	United States of America
UN	United Nations

Distribution	Policy No	Effective Date	Review Date	Page
All Departments	POL GM 002	10/12/2020	01/12/2021	8 of 15 Ver 1

USAID	United States Agency for International Development
USG	U.S. Government Departments and Agencies
WHO	World Health Organization

POLICY STATEMENT

30. U.S. NGOs are not required to agree that they will not perform or actively promote abortion as a method of family planning as a condition of receiving global health assistance funds. However, the policy requires U.S. NGOs to agree not to make a subaward of global health assistance to a Foreign NGO unless that Foreign NGO agrees to abide by the terms of PLGHA.
31. The policy does not apply to humanitarian assistance. Pursuant to the PLGHA, the policy also does not apply to national or sub-national governments, public international organisations, and other multilateral entities in which sovereign nations participate. For example, this includes funding to The Global Fund to Fight AIDS, Tuberculosis, and Malaria; The GAVI Alliance, the Vaccine Alliance; and United Nations organisations, such as the Joint United Nations Programme on HIV/AIDS and the WHO. Therefore, the PLGHA provision does not need to be included in agreements with host governments (e.g., government-to-government agreements, Development Objective Agreements (DOAG), or other agreements with host governments), agreements with bilateral governmental donors, or agreements with public international organizations.
32. This policy does not prohibit Foreign NGOs from treating injuries or illnesses caused by illegal or legal abortions (i.e., post-abortion care), such as emergency treatment for complications from spontaneous or induced abortion, with USG or other funds.
33. If a healthcare provider has an affirmative duty (i.e., he or she is required) under local law to provide counseling about and referrals for abortion as a method of family planning, the policy does not prohibit compliance with such law. Legal Counsel must be consulted before relying on this exception.
34. The policy covers implementation-science research, operational or programmatic research, surveys, needs assessments and related capacity-building conducted for the purpose of making improvements to global health programs funded by USG and implemented through a foreign NGO with a primary purpose and effect of benefiting a foreign country. The policy excludes basic research studies and in vitro studies that use human tissues.

POLICY PRINCIPLES

35. Strict controls and good corporate governance principles are set out and adhered to by the Company. This Policy has been compiled in compliance with all relevant legislation and good governance principles.
36. Any interactive mechanism or contract with government, industry or other private or public agencies or parties must provide a stated benefit to the Company's missions of instruction, research, or service.
37. The interactive mechanism or contract must be in concurrence with the mission and policies of the Company.
38. The rights and interests of both parties must be fully recognised. All arrangements will, as far as is reasonably possible, be governed by a principle of fairness.

Distribution	Policy No	Effective Date	Review Date	Page
All Departments	POL GM 002	10/12/2020	01/12/2021	9 of 15 Ver 1

39. The Company must at all times require that the highest ethical and professional standards are followed in the implementation of all its Grants, Cooperative Agreements, and Contracts.
40. The Authorised Executives and Employees will be fully informed of these principles of interaction, will have participated in the formulation of related Institution policies, and will know their responsibilities if they become involved.

RELATED LEGISLATION AND COMPLIANCE

41. This Policy must be implemented and aligned with the following USG legislative and policy requirements, as amended:
 - 41.1. For DHHS/HHS Awards, which includes CDC:
 - 41.1.1. [45 CFR Part 75](#);
 - 41.1.2. [HHS Grants Policy Statement](#); and
 - 41.1.3. <https://www.cdc.gov/grants/additionalrequirements/ar-35.html>
 - 41.2. For NIH Awards:
 - 41.2.1. [2 CFR 200](#); and
 - 41.2.2. [NIH Grants Policy Statement](#).
42. For USAID Assistance Awards:
43. [Standard Provisions for U.S. Nongovernmental Organizations](#); and
44. [Standard Provisions for Non-U.S. Nongovernmental Organizations](#).
45. For USAID Contracts:
46. [Acquisition & Assistance Policy Directive \(AAPD 08-01\)](#).
47. Legislative Restrictions: Since the enactment of U.S. legislation in 1973, there have been restrictions on using U.S. foreign assistance funds for abortion-related activities, namely:
 - 47.1. The Helms Amendment: No foreign assistance funds may be used to pay for the performance of abortion as a method of family planning or to motivate or coerce any person to practice abortions. Under the Helms Amendment, post-abortion care is permitted. USAID post-abortion care programs include emergency treatment for complications of induced or spontaneous abortion, counselling on and provision of family planning options, and community mobilization. *Sources: Section 104(f) of the Foreign Assistance Act of 1961, as amended; Annual Foreign Operations Appropriations Acts.*
 - 47.2. The Leahy Amendment: The term "motivate," as it relates to family planning assistance, shall not be construed to prohibit the provision, consistent with local law, of information or counselling about all pregnancy options. *Source: Annual Foreign Operations Appropriations Acts.*
 - 47.3. The Siljander Amendment: No foreign assistance funds may be used to lobby for or against abortion. *Source: Annual Foreign Operations Appropriations Acts.*
 - 47.4. The Biden Amendment: No foreign assistance funds may be used to pay for any biomedical research which relates, in whole or in part, to methods of, or the performance of, abortions or involuntary sterilization as a means of family planning. *Sources: Section 104(f) of the Foreign Assistance Act of 1961, as amended; Annual Foreign Operations*

Distribution	Policy No	Effective Date	Review Date	Page
All Departments	POL GM 002	10/12/2020	01/12/2021	10 of 15 Ver 1

Appropriations Acts.

MANAGEMENT OF THE POLICY

48. The CEO-SA of the Company is mandated by the G-CEO to act as custodian of this Policy. However, full accountability and responsibility lies with the G-CEO.
49. The provisions of this Policy shall be strictly followed at all times, subject to paragraph 50 below.
50. In the event that a need or intent to deviate from this Policy is envisaged, a written document must be prepared stating the nature and the reasons for the proposed deviation and submitted to the CEO-SA for consideration and approval as per the DoA.

ROLES AND RESPONSIBILITIES

51. G-CEO:
 - 51.1. is the custodian of this Policy and therefore ultimately responsible for the control, implementation and compliance of this Policy;
 - 51.2. must appoint an independent and impartial person (appointed person) for the resolution of any disputes, objections, complaints and queries arising as a result of this Policy;
 - 51.3. assist the appointed person to perform his/her functions effectively; and
 - 51.4. ensures compliance and knowledge of its elements, and for taking immediate and appropriate corrective actions where warranted.
52. CEO-SA:
 - 52.1. mandated by the G-CEO to act as custodian of this Policy and therefore is responsible for the control, implementation and compliance of this Policy together with G-CEO;
 - 52.2. to approve this Policy and ensure implementation of the approved Policy; and
 - 52.3. to periodically review the Policy for approval in terms of the Company's Policy Framework.
53. Grants Management Specialists/Grants Managers:
 - 53.1. assisting the CEO-SA with periodic reviews and updates to this Policy, when applicable;
 - 53.2. ensuring access to PDF copies of all the applicable contracts with the required signed PLGHA Certification
 - 53.3. ensuring access to PDF copies of all PLGHA training certificates provided by Aurum employees; and
 - 53.4. ensuring compliance and knowledge of its elements.
54. All Business/Operational/Project/Programme Directors and Project/Programme Managers:
 - 54.1. are assigned with the responsibility for implementing this Policy;
 - 54.2. communicating the PLGHA restrictions to all project staff implementing USG projects as well as Subrecipients, Subcontractors and/or Service Providers;
 - 54.3. monitoring compliance with the PLGHA restrictions should be part of routine site visits and as well as Project Meetings, and special effort should be made to interview program managers, frontline service providers, referral agents, and clients during site visits, as well as non-clinic based service delivery points, such as community-based distribution or social marketing activities;

Distribution	Policy No	Effective Date	Review Date	Page
All Departments	POL GM 002	10/12/2020	01/12/2021	11 of 15 Ver 1

- 54.4. documenting all efforts to monitor compliance and maintaining such documents in project files; and
- 54.5. taking immediate and appropriate corrective actions where warranted and immediately informing the Company Official of any non-compliance or possible violations of the PLGHA policy.

TRAINING

- 55. The most important way to learn about what the policy and its implementing procedures is to read the Protecting Life in Global Health Assistance Policy (most used public source: <https://www.usaid.gov/global-health/legislative-policy-requirements>) to ensure compliance.
- 56. This effort should include the training of staff and partners and the periodic monitoring of compliance.
- 57. A course entitled, "Protecting Life in Global Health Assistance and Statutory Abortion Restrictions," is publicly available through the USAID-supported Global Health E-Learning Center: <https://www.globalhealthlearning.org/course/protecting-life-global-health-assistance-and-statutory>.
- 58. At a minimum, all Business/Operational/Project/Programme Directors, Project/Programme Managers and Grants Management Specialist/Grants Manager must complete training on this Policy annually by doing the E-Learning Course referred to in paragraph 57 above.
- 59. Additionally, under the following circumstances, training must be completed within 30 (thirty) days of any of the following occurrences:
 - 59.1. The Company revises this Policy in any manner that affects the requirements;
 - 59.2. When a new Business/Operational/Project/Programme Director, Project/Programme Manager and/or Grants Management Specialist/Grants Manager begins work on any ongoing USG funded projects/programmes at the Company; and
 - 59.3. The Company finds that a Business/Operational/Project/Programme Director, Project/Programme Manager or Grants Management Specialist/Grants Manager is not in compliance with this Policy.
- 60. Proof of such completed annual training (i.e. training certificate) must be provided to the applicable Grants Management Specialist/Grants Manager for record keeping.

REPORTING TO USG AND PRIME RECIPIENTS OF USG FUNDING

- 61. The Company Official will report any non-compliance in accordance with this policy, and/or any USG legislative and policy requirements relating hereto, within 60 (sixty) days of any subsequently identified non-compliance.

NON-COMPLIANCE

- 62. In the event of any failure to comply with this Policy, the Company Official may suspend all relevant activities or take other disciplinary action until the matter is resolved, or other action deemed appropriate by the Company Official is implemented.
- 63. The Company Official's decision to impose sanctions on a non-compliant Employee because of failure to comply with this Policy, or failure to comply with the decision of the Company Official, must be described in a written explanation of the decision to the Investigator, and must notify the individual of the right to appeal the decision. The Company Official must promptly notify USG as

Distribution	Policy No	Effective Date	Review Date	Page
All Departments	POL GM 002	10/12/2020	01/12/2021	12 of 15 Ver 1

the Prime Recipient of the USG funding of the action taken or to be taken. If the USG funding for the programme is made available from a Prime Recipient, such notification shall be made promptly to the Prime Recipient for reporting to USG.

64. In addition, if the Company Official determines that non-compliance was not identified or managed in a timely manner, an independent committee appointed by the Company Official must complete a retrospective review of the Investigator's activities and the USG funded programme to determine whether the activities conducted during the period of non-compliance were biased or in breach of this policy.
65. Documentation of the retrospective review shall include the USG full name, award number, project title, principal investigator, name of non-compliant Employee, reason(s) for the retrospective review, detailed methodology used for the retrospective review, and findings and conclusions of the review.
66. The Company Official must update any previously submitted report to USG or the Prime Recipient of the USG funding relating to the projects/programmes, specifying the actions that must be taken to manage the non-compliance going forward. This retrospective review must be completed in the manner and within a reasonable timeframe established by the independent committee. If bias or breach is found, the Company must promptly notify USG submit a mitigation report. The mitigation report must identify elements documented in the retrospective review, a description of the impact of the bias or breach of the activities conducted on the projects/programmes, and the plan of action to eliminate or mitigate the effect of the bias or breach.

RECORD RETENTION

67. The Company must retain all certifications, and related documents for a period of 3 (three) years from the date the final expenditure report of the applicable projects/programmes is submitted to USG or to the Prime Recipient of USG funding, unless any litigation, claim, financial management review, or audit is started before the expiration of the 3 (three) year period, the records shall be retained until all litigation, claims or audit findings involving the records have been resolved and final action taken.

CONFIDENTIALITY

68. To the extent permitted by law, all certifications, and related information must be confidential. However, the Company may be required to make such information available to USG, to a requestor of information concerning non-compliance of this policy related to USG funding or to the Prime Recipient who made the funding available to the Company, if requested or required. If the Company is requested to provide such information to an outside entity, the Business/Operational/Project/Programme Director, and/or Project/Programme Manager will be informed of this disclosure.

REGULATORY AUTHORITY

69. This policy implements the requirements of USG legislation and policy requirements, as amended, where there are substantive differences between this Policy and the USG legislation and policy requirements, the USG requirements shall take precedence.

CERTIFICATION FORM

70. All certifications shall be made by using the PLGHS Certification Form (FRM-GM-002);
71. All completed certification forms must be duly dated and signed by the disclosing party;

Distribution	Policy No	Effective Date	Review Date	Page
All Departments	POL GM 002	10/12/2020	01/12/2021	13 of 15 Ver 1

72. All completed, dated, and signed certification forms must be scanned and submitted as an Annexure to the contract between the Company and the disclosing party; and
73. Should the disclosing party refuse to sign the Certification form or disclose to be conducting any of the restricted activities, the contract process should be put on hold and immediately inform the Company Official. Only once the matter has been adequately resolved by the Company Official, may the contract process be reinstated, and if unresolved, the contract process should be cancelled/withdrawn.

REPORTING OF NON-COMPLIANCE TO THE POLICY

74. Compliance with the Policy by all Management and Employees of the Company is mandatory.
75. Any practices found to contravene the provisions contained in this Policy will be regarded as unauthorised – and must be halted immediately and must be reported to the CEO-SA who, if he deems it necessary, may report such contravention to the Board for further direction. When reporting any non-compliant practice(s) to the above, the exact nature of the non-compliant transactions must be accurately described, as well as the corrective action already taken or to be taken in order to eliminate the non-compliant practice(s) in question in future.
76. In the case of the contravention of this Policy, the Authorised Executive and/or Employee(s) who are found guilty of contravening this Policy will be dealt with in terms of the relevant Human Resources policies and procedures including, where necessary, the Company’s Disciplinary policy (POL HR 002, Disciplinary Code) and Schedule 8 of the Labour Relations Act’s Code of Good Practice: Dismissals.

CHANGES TO POLICY

77. This Policy will be periodically reviewed at least every twelve (12) months. The G-CEO and CEO-SA are the custodians of this Policy. The custodians are ultimately responsible for the control, implementation and compliance of this Policy. All changes to the Policy must be approved by the CEO-SA.

CONCLUSION

78. Responsibility for Policy compliance and monitoring is vested in the Authorised Executives where contracts relate to their portfolio of responsibility.
79. Operational monitoring of contracts is vested in the appointed Business/Operational/Project Directors; for the purposes of compliance and for making business decisions based on the performance of contracts.

KEY RESOURCES

80. [Protecting Life in Global Health Assistance and Statutory Abortion Restrictions eLearning course](#)
81. [USAID Protecting Life in Global Health Assistance Frequently Asked Questions and Answers](#) (October 2019)
82. [HHS Protecting Life in Global Health Assistance – Frequently Asked Questions – PDF](#) (August 2018)

REFERENCES

83. Protecting life in global health assistance fact sheet, 2017. United States Department of Defense, Office of the Spokesperson. *Source:* <https://www.state.gov/protecting-life-in-global-health-assistance-2/>

Distribution	Policy No	Effective Date	Review Date	Page
All Departments	POL GM 002	10/12/2020	01/12/2021	14 of 15 Ver 1

84. Global health legislative & policy requirements, 2018. United States Agency for International Development. [Source: https://www.usaid.gov/global-health/legislative-policy-requirements](https://www.usaid.gov/global-health/legislative-policy-requirements)
85. Protecting life in global health assistance six-month review, 2018. United States Department of State, Office of Foreign Assistance Resources. [Source: https://www.state.gov/protecting-life-in-global-health-assistance-six-month-review/](https://www.state.gov/protecting-life-in-global-health-assistance-six-month-review/)
86. U.S. Department of State – Review and Second Review of the PLGHA Policy. [Source: https://www.state.gov/second-review-of-the-protecting-life-in-global-health-assistance-policy/#:~:text=The%20Protecting%20Life%20in%20Global%20Health%20Assistance%20\(PLGHA\)%20Policy%20aims.a%20method%20of%20family%20planning.](https://www.state.gov/second-review-of-the-protecting-life-in-global-health-assistance-policy/#:~:text=The%20Protecting%20Life%20in%20Global%20Health%20Assistance%20(PLGHA)%20Policy%20aims.a%20method%20of%20family%20planning.)
87. POL HR 002, Disciplinary Code.

SUPPLEMENTARY DOCUMENTS


Forms	Number
Protecting Life in Global Health Assistance Certification	FRM-GM-002 A

REVISION HISTORY

Amendment Record

This document is reviewed to ensure its continuing relevance to the systems and process that it describes. A record of contextual changes, additions or omissions is given below.

Ver #	Approval date	Next Review date	Context	
			Page No.	Significant Changes
1	10 December 2020	December 2021	1-15	N/A – First authorised version
2	DD MM YYYY	MM YYYY		List all significant changes

 THE AURUM INSTITUTE	Document Control <i>Controlled document</i> If printed, valid from: 8-Dec-20	Document No. FRM GM 002 A
		Date of Issue 1 January 2021-
		Rev 1
		Approved by CEO-SA

PROTECTING LIFE IN GLOBAL HEALTH ASSISTANCE CERTIFICATION

I certify that _____ *[Company Name]* _____ does **NOT** engage in the following activities:

- Offer a counselling program to clients, which offers regular advice on abortion.
(Please note: Exclusions apply for abortions in the case of rape, incest or to save the mother’s life).
- Provide unsolicited advice to its clients on where to obtain an abortion.
(Please note: This does not include providers passively responding to client questions when clients indicate they intend to get an abortion).
- Lobby any Government Entity or Government Ministry to legalize abortion.
- Engage in any public information campaigns on abortion.

I also certify that, as a recipient of U.S funded global health assistance, **I have read the Policy titled, *Protecting Life in Global Health Assistance* (“the Policy”) which compels organizations receiving global health assistance to comply with its requirements. I will comply with its terms and ensure that all employees, consultants and subrecipients engaged in U.S. Government-funded global health have also read it, or have otherwise received the complete guidance provided in the USG Standard Provision.**

I understand that under the Policy (i) the treatment of injuries or illnesses caused by legal or illegal abortions, for example, post abortion care; and, (ii) referrals for abortion as a result of rape, incest, or if the life of the mother would be endangered, are activities that are both allowable and excluded from the definition of *actively promoting abortion as a method of family planning*.

I will be able to demonstrate that all employees, consultants and subrecipients have read the Policy and/or received training on its application and implementation within sixty (60) days of signing this Certification.

By: _____
Signature

Name
Who warrants he/she is duly authorised

Title/Designation

Date