VISITORS CODE OF CONDUCT

AUSTRIAN DOCTORS
THE JOY OF HELPING

Austrian Doctors is committed to protect the safety, security, privacy and dignity of children and vulnerable adults in all our projects. All visitors are therefore expected to support us in protecting children and vulnerable adults by abiding these rules at all times:

- I will only visit Austrian Doctors projects with prior approval from Austrian Doctors, and when an authorized staff member accompanies me throughout the visit. I will not re-visit a project without the knowledge of Austrian Doctors and without the company of an authorized staff member.
- I will always be professional and culturally sensitive in my interactions with Austrian Doctors project staff, partners, and beneficiaries, but especially with children and vulnerable adults.
- I will not engage in inappropriate physical contact with children and vulnerable adults, including hitting, cuddling, and kissing.
- I will not use language that is inappropriate, harassing, abusive, sexually provocative, or demeaning.
- I will not spend time alone with children. I will always ensure another adult is present or nearby to observe my activities.
- I will not exchange personal contact details with any child, vulnerable adult and/or their family. I will also not invite a child or vulnerable adult into my home, residence, or hotel.
- I will not use computers, mobile phones, photo and/or video cameras to exploit or abuse children and vulnerable adults or produce and share photos and/or film material without prior approval by the authorized staff member and the voluntary consent of the person involved or legal guardian.
- Abiding the previous rule, I will only photograph children and vulnerable adults when they are appropriately dressed. I will respect their dignity and right to privacy at all times. If I have to share medical issues with other doctors, I have to make sure, that the patients can't be identified in the picture.
- I will seek guidance from an authorized staff member when I am unsure about the boundaries of appropriate behaviour.

I understand that a child is a person under the age of 18 years. I understand that my mistaken judgement of the age of the child is not an excuse.

I understand that the project visit will be stopped, and necessary action will be taken, should there be any breach of these protocols.

With this signature, I give my assurance that I have carefully read and clearly understood Austrian Doctors Child Protection Policy. I also agree to abideby the Austrian Doctors Visitors Code of Conduct and visitors protocol at all times.

Name: _____

Signature: _____ Date: _____