Discrimination and Harassment Prevention and Response Policy

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Associated Procedures:
Unit Roles and Responsibilities
Voluntary Process Procedures
Procedures for Filing a Report
Investigation Procedures
Procedures for Responding to Reports of Systemic Discrimination
Statement on Confidentiality and Privacy
Education and Awareness

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DEFINITIONS

For the purposes of this Policy, the following definitions apply.

“Administrative Authority” means the senior individual identified at the outset of an investigation to have administrative responsibility for the Respondent, or decision-making authority. Administrative authorities may include but are not limited to: Vice-Presidents, Associate Vice-Presidents, Deans, Chairs, Executive Directors, Directors or other senior positions at the University. Where the appropriate Administrative Authority is in question, the relevant Vice President will identify the Administrative Authority.

“Anonymous Allegation” means an allegation communicated to Equity and Human Rights (“EQHR) regarding their experience of Discrimination or Harassment while remaining anonymous. An Anonymous Allegation is not a Report and does not necessarily initiate a process under this Policy (see section 12-18 for process options).

“Complainant” means a Person Who Has Experienced Harm who makes a Report to Equity and Human Rights (“EQHR”) alleging Direct Discrimination, Systemic Discrimination, Personal Harassment and/or Harassment Based on a Protected Characteristic.

“Consultation” means a discussion with EQHR by any member of the University Community about issues related to this Policy.

“Disclosure” means telling someone about their experience of Discrimination and/or Harassment. A Disclosure is not a Report and does not necessarily initiate a process under the Policy (see section 12-18 for process options).

“Direct Discrimination” is the intended or unintended harmful (differential and/or prejudicial) treatment by an individual towards another based on any Protected Characteristic. Direct Discrimination has the effect or purpose of negatively impacting that individual’s participation in a University-Related Activity.

“Discrimination” includes Microaggressions, Direct Discrimination, and Systemic Discrimination.

“Environmental Assessment” means a process, initiated by the University, designed to assess the working and/or learning environment of a unit or department following the receipt of a pattern of concerns or allegations related to the Policy.

“Equity and Human Rights” or “EQHR” is the unit at the University with institutional accountability for receiving and responding to Consultations, requests for Voluntary Process, and Reports, including conducting and overseeing investigations. EQHR has responsibility for providing education, information, and referrals related to the Policy.

“Harassment” includes Personal Harassment and Harassment based on Protected Characteristics.
“Harassment Based on a Protected Characteristic” is Personal Harassment that includes a direct or indirect reference to any Protected Characteristic.

“Hostile Working or Learning Environment” means a University environment in which there are multiple and/or persistent experiences of Microaggressions, Direct Discrimination, Personal Harassment and/or Harassment Based on a Protected Characteristic.

“Individuals with Supervisory Responsibilities” means those with workplace supervisory responsibilities in both academic and non-academic units, instructors and other individuals authorized by the University to supervise or lead a University Activity.

“Interim Measures” means any temporary restrictions or conditions on an individual’s ability to enter upon or to carry out activities upon University premises, or their ability to exercise University privileges under University policy or collective agreements (see Response to At-Risk Behaviour Policy).

“Intersectional” means the ways in which an individual’s experiences are shaped by the interaction of different social positions (for example, sex, sexual identity, gender identity or expression, Indigeneity, racial or ethnic background, ability, faith, socioeconomic status, caste, migration status, and age). These interactions are rooted in interconnecting systems and structures of power that produce both privilege and oppression determined by colonialism, racism, antisemitism, islamophobia, homophobia, ableism, patriarchy, transphobia, queer antagonism, trans antagonism, bi antagonism, and/or any other form of discrimination.

“Microaggressions” are everyday actions or words which intentionally or unintentionally communicate hostile, derogatory, or negative messages or attitudes based on any Protected Characteristic. Microaggressions are often the result of perceived difference and/or unconscious bias.

“Person Alleged to Have Caused Harm” means an individual who is the subject of a Disclosure. If a Report is filed about this person with EQHR, the Person Alleged to Have Caused Harm will be referred to as the Respondent.

“Person Who Has Experienced Harm” means an individual who have experienced Discrimination and/or Harassment. If this person files a Report with EQHR, the Person Who Has Experienced Harm will be referred to as the Complainant.

“Personal Harassment” is any conduct or comment by an individual towards another that the individual knew or reasonably ought to have known would cause that individual to be humiliated or intimidated. Personal Harassment has the effect or purpose of negatively impacting that individual’s participation in a University-Related Activity. Personal Harassment excludes any reasonable action taken by a supervisor or instructor relating to workplace or educational evaluation, management, and direction.

“Protected Characteristics” are Indigenous identity, race, colour, ancestry, place of origin, religion, marital status, family status, physical or mental disability, sex, sexual orientation, gender identity or expression, or age. In the case of employment, political belief, or conviction for a criminal or summary conviction offence that is unrelated to the employment or to the intended employment of that person
are additional Protected Characteristics. In the case of tenancy, such as University residences, Protected Characteristics also includes source of income.¹

“Policy” means the Discrimination and Harassment Prevention and Response Policy.

“Respondent” means a Person Alleged to Have Caused Harm who has a Report filed with EQHR alleging they have violated the Policy.

“Report” means a report form alleging Direct Discrimination, Systemic Discrimination, Personal Harassment and/or Harassment Based on a Protected Characteristic, which has been completed and filed with EQHR with the intention of initiating an investigation or review.

“Retaliation” means any adverse action or threatened action taken or made through any means, including through social or other electronic media, that could reasonably discourage an individual from seeking support or other services, participating in an investigation, or otherwise engaging with this Policy.

“Student” includes any of the following:

(a) An individual who is registered, enrolled, or participating in any course or program (credit or non-credit) offered by the University;

(b) an undergraduate who has been enrolled at the University for one or more of the last three terms and is eligible to continue in a program of study;

(c) a graduate student who is enrolled at the University in the current term and is eligible to continue in a program of study;

(d) a graduate student who is on an approved or personal leave and is eligible to enroll at the University when the leave ends; or

(e) a visiting or exchange or audit student who has been formally admitted to the University for the purposes of taking courses or to take part in an approved research term.

“Systemic Discrimination” refers to policies or practices that are part of the structures of the University that contribute to the exclusion of, or less favourable outcomes for, an individual or group based on any Protected Characteristic. Systemic Discrimination can be the intentional or unintentional result of the way a policy or practice is carried out or designed. Systemic discrimination does not occur where the policy or practice can be demonstrated to be reasonable and legitimate in the circumstances or is permitted by law.

¹ This list of Protected Characteristics is based on the personal characteristics that are protected by the British Columbia Human Rights Code.
“Third Party” means, for the purposes of making a Third Party Statement under the Policy, an individual other than the Person Who Has Experienced Harm and other than the Person Alleged to Have Caused Harm. A third party can be a witness, a friend, a colleague, a person to whom the Discrimination and Harassment was disclosed, or any other person.

“Third Party Statement” means a statement by a Third Party which shares information with EQHR on behalf of, and with the consent of, the Person Who Has Experienced Harm (see section 23).

“Those Impacted by Discrimination and Harassment” includes the Person Who Has Experienced Harm, witnesses, those who have received Disclosures and the Person Alleged to Have Caused Harm.

“Trauma-informed” means acknowledging the pervasiveness and differential impacts of trauma and the importance of providing support in a way that centres care, transparency, and empowerment to avoid further traumatization.

“University” means the University of Victoria.

“University Activity” means any activity that is directly connected to the operations of the University at any location, or any activity where a University Community member is formally representing the University. Including but not limited to:

(a) in-person and online courses;
(b) athletic events;
(c) artistic performances;
(d) placements (including co-op and practica);
(e) meetings in furtherance of University business;
(f) academic or professional conferences;
(g) academic or research field work.

“University Community Members” means:

(h) Students and continuing studies students;
(i) faculty, librarians and staff members;
(j) anyone holding a University appointment;
(k) post-doctoral fellows;
(l) all individuals employed under contracts with University faculty members as the employer and who provide research or administrative services directly supporting faculty members’ research activities (including grant-funded employees);

(m) visiting researchers;

(n) anyone contractually required by the University to abide by University policies;

(o) anyone volunteering with a University program or activity;

(p) members of the Board of Governors and Senate; and

(q) anyone who ordinarily resides in University Residence or Housing.

“Voluntary Process” means a voluntary process facilitated by EQHR and agreed to by the Person Who Has Experienced Harm, the Person Alleged to Have Caused Harm and the University. A Voluntary Process does not result in a determination of whether the Policy has been violated.

FOUNDATIONAL STATEMENTS

1. Purpose

1.1 The purpose of the Discrimination and Harassment Prevention and Response Policy is to set out the University’s expectations and framework to prevent and respond to Discrimination and Harassment.

1.2 Discrimination and Harassment are unacceptable and prohibited conduct at the University.

1.3 Through the implementation of the Policy the University works to instill and cultivate institutional, collective, and individual responsibility to create an environment and culture in which equity, diversity, and inclusion are foundational principles and practices at the University.

1.4 The Policy does not address sexualized violence (including sexual harassment). The University’s Sexualized Violence Prevention and Response Policy describes how Disclosures and Reports of sexualized violence (including sexual harassment) will be handled. University Community Members may seek information from EQHR if they are unclear which policy applies to a given situation.

1.5 The Policy works to uphold the University’s responsibilities under the British Columbia Human Rights Code, the British Columbia Declaration on the Rights of Indigenous Peoples Act and the British Columbia Workers Compensation Act as they pertain to Discrimination and Harassment.

2. Principles of the Policy

The following principles are intended to assist in the interpretation of the Policy.
2.1 The Policy applies to all University Community Members regardless of an individual’s position within the University’s structures, hierarchies, and power relations.

2.2 Excellence in teaching, learning, research, scholarship, service, and operations at the University can only be achieved when all University Community Members can work, live, and learn in an environment free from Discrimination and Harassment.

2.3 To maximize effectiveness, the approaches used in the Policy to address Discrimination and Harassment must be linked to the University’s broader anti-oppression and equity, diversity, and inclusion initiatives on campus.

2.4 The Policy is based on the premise that ending all forms of Discrimination and Harassment requires all University Community Members to actively participate in creating change and dismantling systems of oppression. This means all University Community Members have responsibilities under the Policy.

2.5 Efforts to address Discrimination and Harassment should be grounded in an Intersectional understanding that each individual’s experience, and the relationship between those who are subject to the Policy, will be affected by those factors that confer both privilege and oppression including but not limited to their sex; gender identity or expression; sexual identity; family status; Indigenous, racial, or ethnic background; language; ability; faith; age; migration status; socioeconomic status; academic standing; as well as their position within University structures, hierarchies, and power relations.

2.6 Acts of Discrimination and Harassment are rooted in conscious and/or unconscious bias, prejudice, and stereotypes, and that these attitudes, beliefs, and behaviours need to be actively addressed and unlearned.

2.7 Whether or not the concerning conduct meets the threshold for the definitions of Discrimination and Harassment in the Policy, conduct that is disrespectful or harmful can nevertheless negatively affect participation by a University Community Member in the University’s living, learning, or working environments.

2.8 University Community Members will engage with the University and the Policy from their unique situation or position. Because of existing hierarchies and power dynamics at the University, individuals may be disadvantaged when engaging with the Policy, for example feeling comfortable navigating particular process options under the Policy. Understanding how power is held is key to preventing and responding to Discrimination and Harassment.

2.9 The University will learn and adjust, to the extent that it is possible to do so, by proactively addressing issues and potential barriers as well as learning from all Consultations and Reports that are brought forward under the Procedures of the Policy.
EXPECTATIONS AND COMMITMENTS

3. Commitment to Those Covered by the Policy and its Procedures

3.1 The University recognizes the serious impacts of Discrimination and Harassment and is committed to providing Trauma-informed support to all University Community Members, regardless of who they are or where and when the Discrimination and/or Harassment occurred.

3.2 The University is committed to changing systems or processes in response to Reports of Systemic Discrimination, to the extent that it is possible to do so. The University is committed to proactively addressing systemic barriers as well as learning from Disclosures and Reports that are brought forward under the procedures of the Policy.

3.3 The University will work to repair harm caused by Discrimination and Harassment, where possible. The University commits to taking on this work using an Intersectional and Trauma-Informed approach that acknowledges that any participant in a process under the Policy may have past or present experience with Discrimination and Harassment.

3.4 The immediate and longer-term needs of Those Impacted by Discrimination and Harassment is unique and requires a personalized pathway through their support options. The University recognizes that Those Impacted by Discrimination and Harassment may not find all the support and repair they need by engaging with the Policy and its associated procedures. The University commits to:

(a) recognizing the specific barriers and power relationships that impact individuals’ decisions to make a Disclosure and identifying strategies that mitigate and take into account such barriers and power inequities;

(b) providing available University supports based on the unique needs of the University Community Member;

(c) offering relevant and supportive referrals to on- and off-campus services; and

(d) providing information on process options in an accessible manner.

3.5 For Indigenous University Community Members, the University is committed to upholding the Indigenous Standard of Practice.²

3.6 People Who Have Experienced Harm have the right to determine if and when they choose to make a Disclosure about their experience and will not be required or pressured to make a Report to the University. If the University is required to take action without a Report (see section 20), the University will make reasonable efforts to inform the Person Who Has Experienced Harm.

² The Indigenous Standard of Practice is currently in development.
3.7 The University is committed to providing timely access to information and support for Those Impacted by Discrimination and Harassment. They may seek information, as appropriate from EQHR, Faculty Relations, Human Resources, Student Affairs, Occupational Health, Safety and Environment, Campus Security (see Appendix A – Unit Roles and Responsibilities). Support may also be available from alternative sources such as the Office of the Ombudsperson, or union representatives under processes outside of the Policy.

3.8 EQHR, in coordination with other offices, will work to enable the on-campus safety and wellbeing of Those Impacted by Discrimination and Harassment. This may include developing safety plans, referrals to services and supports, assistance in obtaining academic or non-academic supports, and helping such individuals to navigate any subsequent process in which the individual chooses to participate.

3.9 The University is committed to hold accountable those that are found, through an investigation, to have violated the Policy.

4. Commitment to Education and Training

4.1 The University is committed to addressing and preventing Discrimination and Harassment by implementing and actively promoting education, awareness and training programs, in multiple formats and tailored to multiple audiences (see Appendix H: Education and Awareness).

4.2 The overall goal of the University’s Discrimination and Harassment prevention education is to support groups and individuals in creating and maintaining inclusive living, learning, and/or working environments at the University based on respect.

4.3 The University acknowledges that effective education on Discrimination and Harassment not only provides individuals with opportunities to expand their understandings of Discrimination and Harassment but also enable them to prevent behaviours that may cause harm to others.

4.4 The University may identify required education, awareness, and training programs for all or specific University Community Members.

SCOPE

5. Prohibited Conduct

5.1 All Discrimination, Harassment and Retaliation are prohibited under the Policy.

6. Jurisdiction of the Policy

6.1 The Policy and its associated procedures apply to all University Community Members.

6.2 All University Community Members may request information and referrals to support under the Policy, regardless of when or where the Discrimination and Harassment occurred, and who was involved.
7. Jurisdiction to Investigate Reports

7.1 EQHR will determine whether there is jurisdiction to investigate a Report of Direct Discrimination, Personal Harassment and/or Harassment Based on a Protected Characteristic. Jurisdiction to investigate is limited by the following:

(a) the allegations are against a University Community Member; and,

(b) it is alleged to have occurred in one or more of the following circumstances:

(i) on any property that is controlled by the University and used for University purposes including during use of the University’s electronic information resources;

(ii) when the Respondent was in a position of power or influence over the Complainant’s academic or employment status; or

(iii) while engaged in a University Activity.

7.2 If an incident does not meet one or more of the criteria in section 7.1(b) and the University has authority to address the matter, the University, through a Response Coordination Team (RCT) (see section 25) that includes EQHR and the Administrative Authority, may respond to a Report if the incident is alleged to have occurred in one or more of the following circumstances:

(a) the Respondent is claiming to represent the University or could reasonably be interpreted to be representing the University; or

(b) the University has reasonable grounds to believe the conduct creates a risk to the health or safety of a University Community Member in the University’s living, learning, or working environments.

7.3 The University does not have jurisdiction to investigate Reports against an individual who is not a University Community Member. However, when allegations are brought forward against a visitor (for example, visiting alumni, non-University employed contractors, members of the general public), the University has the ability to look into the matter and to revoke visitors’ access to University property. EQHR can also assist University Community Members in reporting to another reporting body (e.g., police, employer, etc.).

7.4 EQHR may accept a Report of Direct Discrimination, Personal Harassment and/or Harassment Based on a Protected Characteristic from an individual who is not a University Community Member if the Respondent is a University Community Member and the incident falls within section 7.1 or 7.2.

8. Jurisdiction to Review Reports of Systemic Discrimination

8.1 EQHR will determine whether there is jurisdiction to conduct a review of a Report of Systemic Discrimination.
8.2 Jurisdiction to review a Report of Systemic Discrimination is limited to policies or practices that are part of the structures of the University. This does not include any policies or practice where the University is not the decision-maker or does not hold ultimate responsibility for design and implementation. Excluded policies and practices include, but are not limited to, those set by:

(a) external research organizations;

(b) faculty, staff and student Unions;

(c) accrediting and professional associations;

(d) national, regional or local associations.

8.3 If the University does not have jurisdiction to review Systemic Discrimination, the University may assist University Community Members in reporting to the appropriate organization or association, where possible.

9. Employees of the University Covered by a Collective Agreement

9.1 This Policy and its associated procedures are designed to complement and not conflict with the University’s collective agreements. Where there is a conflict between the Policy or its procedures and a University collective agreement, the terms of the collective agreement will be followed. University Community Members may seek information from EQHR if they are unclear which policy or provision applies to a given situation.

10. Impact of Concurrent Human Rights, Criminal, Civil or Other Proceedings

10.1 The Policy and its associated procedures are separate from any human rights, criminal or civil proceedings. The University is responsible for determining whether a University Community Member has violated the Policy when a Report has been filed and is not responsible for determining violations of human rights, criminal, or civil law.

10.2 A process under the Policy or its associated procedures may occur simultaneously with, prior to, or following any human rights, criminal, civil, or other proceeding. The University may proceed with an investigation into a Report about Discrimination and/or Harassment while the allegations, or aspects thereof, are also being investigated by the police or other statutory investigative authorities.

10.3 Any University process under the Policy or its associated procedures, including an investigation, may be suspended by EQHR pending the outcome of another process or proceeding, or based on a participant’s health or ability to participate. This may be done at the request of the Complainant, Respondent, or an external body, or at the University’s initiative.

10.4 If a University process under the Policy or its associated procedures is suspended (section 10.3), EQHR may continue to coordinate support to University Community Members as described in the Policy and its associated procedures.
DISCLOSURES

11. Choosing to Disclose

11.1 A Disclosure is not a Report and will not necessarily initiate a process under the Policy.

11.2 University Community Members make a Disclosure to any member of the University Community. Individuals may disclose for a variety of reasons, including when seeking support or information about the Policy.

11.3 A University employee who receives a Disclosure may need to share it with others to properly perform their employment duties (see section 29.4). In such cases, the University employee should first inform the Person Who Has Experienced Harm.

POLICY PROCESSES

12. Process Options

12.1 A Person Who Has Experienced Harm who believes there has been a violation of the Policy has various process options available to them under the Policy.

12.2 Available process options will vary based on the form of Discrimination and/or Harassment experienced. The available options are laid out in sections 12-19 with more details in the associated procedures. For more information about which process options are available in any given circumstance, a Person Who Has Experienced Harm should seek information through a Consultation with EQHR.

12.3 There are generally three main process options after making a Disclosure to EQHR:

(a) requesting EQHR keep a record with no further action;

(b) requesting a Voluntary Process (see Appendix B - Voluntary Process Procedures);

(c) completing and filing a Report (see Appendix C – Procedures for Filing a Report).

12.4 EQHR will accept Anonymous Allegations or Third Party Statements. However, the University’s ability to act on or investigate Anonymous Allegations or Third Party Statements will be limited if the information it receives is incomplete and the University is unable to follow up with the Person Who Experienced Harm (See section 23).

12.5 University Community Members who have experienced unwelcome comments or conduct are encouraged, although not obliged, to make it known that the behaviour is unwelcome. In situations where it is believed that addressing the comment or conduct directly could lead to an escalation of or to safety risks, this approach is not recommended. In the latter circumstance, University Community Members may:
(a) inform an individual with supervisory responsibility and ask for support;
(b) seek a Consultation from EQHR.

13. Consultation with EQHR

13.1 University Community Members who have concerns related to Discrimination and Harassment have access to EQHR to learn more about the process options under the Policy. This Consultation will be held in confidence unless EQHR is obliged to act under section 35.4 of this Policy. At a Consultation, confidentiality and limits on confidentiality will be explained.

13.2 A Consultation does not necessarily lead to a process being initiated but it is a required step for those who do want to initiate a process under the Policy and associated procedures.

13.3 If a Disclosure is made during a Consultation, it will be kept on record for the purposes of pattern identification and data collection and annual reporting. EQHR will share learnings and recommendations from this data in a way that does not identify the individual but allows for institutional and/or unit level learning and adjustment.

13.4 Consultations, in some cases, are a way for EQHR to assist individuals in identifying a relevant process that may be outside of the Policy; however, EQHR cannot and will not provide legal advice. These might include:

(a) a grievance through their union;
(b) a report of a crime directly to the police;
(c) a human rights complaint to the BC Human Rights Tribunal;
(d) a claim or complaint to WorkSafeBC;
(e) a civil suit.

14. Direct Discrimination

14.1 University Community Members who believe they have experienced Direct Discrimination have the following options available to them after making a Disclosure to EQHR. Options include:

(a) requesting EQHR keep a record with no further action;
(b) requesting a Voluntary Process (see Appendix B - Voluntary Process Procedures);
(c) completing and filing a Report (see Appendix C – Procedures for Filing a Report).
15. Systemic Discrimination

15.1 An individual who believes they have experienced Systemic Discrimination, have the following options available to them after making a Disclosure to EQHR. Options include:

(a) requesting EQHR keep a record with no further action;
(b) completing and filing a Report (see Appendix C – Procedures for Filing a Report).

16. Personal Harassment

16.1 An individual who believes they have experienced Personal Harassment, the following options available to them after making a Disclosure to EQHR. Options include:

(a) requesting EQHR keep a record with no further action;
(b) requesting a Voluntary Process (see Appendix B - Voluntary Process Procedures);
(c) completing and filing a Report (see Appendix C – Procedures for Filing a Report).

17. Harassment Based on a Protected Characteristics

17.1 An individual who believes they have experienced Harassment Based on a Protected Characteristics the following options available to them after making a Disclosure to EQHR. Options include:

(a) requesting EQHR keep a record with no further action;
(b) requesting a Voluntary Process (see Appendix B - Voluntary Process Procedures);
(c) completing and filing a Report (see Appendix C – Procedures for Filing a Report).

18. Microaggressions

18.1 An individual who believes they have experienced Microaggressions, the following options are available to them as after making a Disclosure to EQHR. Options include:

(a) requesting EQHR keep a record with no further action;
(b) requesting for a Voluntary Process (see Appendix B - Voluntary Process Procedures).

18.2 Because of the everyday and often subtle nature of Microaggressions a Report to the University (and associated investigation) is not a process option to address Microaggression. Repeated incidents may cumulatively meet the definition of Direct Discrimination and/or Harassment Based on a Protected Characteristic where a Report to EQHR is a process option.
18.3 The initial response to alleged Microaggressions will most often focus on education and accountability.

18.4 Microaggressions are included within the Policy because the University acknowledges that their negative impact on the retention, advancement and success of University Community Members.

18.5 An environment in which Microaggressions are persistent, permitted and/or tolerated, and/or where there is a supervisory failure to acknowledge and respond can constitute a Hostile Working or Learning Environment (see section 20.3).

19. Timing of Disclosures and Reports to EQHR

19.1 The University recognizes that a Person Who Has Experienced Harm may not be ready to make a Disclosure or Report immediately after an incident occurs.

19.2 There is no time limit to an individual making a Disclosure or filing a Report concerning their experiences or accessing information and support under the Policy. Where there is a significant lapse of time, the University’s ability to address a Report may be limited and evidentiary and procedural challenges may arise. This may affect the University’s decision to investigate. Any delay, or a decision not to investigate, in and of itself will not be considered an indication that the incident did not occur.

20. University Initiated Processes

20.1 The University may, through a RCT that includes, at a minimum, EQHR and the Administrative Authority of the Respondent (see section 25), initiate an investigation under the Policy or other relevant procedures (e.g., University policy or collective agreement). In such cases, the Person Who Has Experienced Harm may choose whether or not to participate in the investigation.

20.2 To initiate an investigation pursuant to section 20.1, there must be no Complainant willing to file a Report, and one of the following conditions must be satisfied:

(a) there is a significant risk to the health or safety of one or more University Community Members; or

(b) an investigation is in the best interests of the University; or

(c) an investigation is required by law or by other University policies or collective agreement.

20.3 The University may initiate an Environmental Assessment when EQHR has received information that leads them to suspect a unit or department is a Hostile Working or Learning Environment.

20.4 The University may initiate a review of a policy or program when EQHR has received information that leads them to suspect Systemic Discrimination.
21. Responding to Reports of Direct Discrimination, Systemic Discrimination, Personal Harassment and Harassment Based on a Protected Characteristic

21.1 University investigations, reviews and adjudicative processes under the Policy and its associated procedures will respect the rights of the Complainant, the Respondent, and Third Parties and will follow principles of fairness and natural justice, including the right to be heard and to be judged fairly and impartially.

21.2 See the Reporting Procedures for how to Report Direct Discrimination, Systemic Discrimination, Personal Harassment and Harassment Based on a Protected Characteristic.

22. Interim Measures

22.1 The University may impose Interim Measures where the University believes it must act to protect University Community Members’ health or safety or University property.

22.2 University Community Members may request Interim Measures for safety reasons.

22.3 The University may impose Interim Measures to maintain the integrity of an investigation.

22.4 Interim Measures will be imposed, by the Administrative Authority, in accordance with any applicable collective agreement or University policy, such as Response to At-Risk Behaviour (SS9125).

22.5 Processes for and examples of Interim Measures are outlined in Appendix C – Procedures for Filing a Report.

23. Anonymous Allegations and Third Party Statements

23.1 EQHR will accept Anonymous Allegations or Third Party Statements for the purposes of:

(a) determining whether there is evidence of a safety concern for the University and/or any University Community Member;

(b) identifying whether it is appropriate for the University to take action; and

(c) pattern identification and data collection and annual reporting.

23.2 The University’s ability to act on or investigate Anonymous Allegations or Third Party Statements is limited if the information it receives is incomplete and University is unable to follow up with the Person Who Has Experienced Harm.

23.3 EQHR will consider the Anonymous Allegations or Third Party Statements and determine whether any steps can and should be taken. EQHR may choose to engage a RCT (see section 25) to make that determination.
23.4 Where sufficient information exists, the University may decide to take action, including to proceed with an investigation. In such cases, the Person Who has Experienced Harm has the right to choose not to participate in the investigation.

23.5 If the University does not investigate, a record of the Anonymous Allegation or Third Party Statement will be retained by EQHR under restricted access.

24. Retaliation

24.1 Retaliation is prohibited conduct and will be taken seriously. Retaliation will be addressed by the University as a separate matter under applicable University policies, processes, or collective agreements, by the supervisor with oversight for the University Community Member alleged to have engaged in Retaliation.

24.2 Allegations of Retaliation can be made before, during or after a process under the Policy. Allegations of Retaliation should be brought forward to EQHR who will provide them to the appropriate supervisor for consideration under applicable University policies, processes, or collective agreements.

25. Response Coordination Team

25.1 The University may form a Response Coordination Team (RCT) to review risk, coordinate support and services, consider recommendations for Interim Measures, to consider alternative or additional policy or processes, provide advice to EQHR on whether a Voluntary Process is appropriate, and provide advice to EQHR under sections 20 and 23. The RCT will include appropriate individuals based on the nature of the concern or Report.

POLICY RELATED ROLES AND RESPONSIBILITIES

26. Responsibilities of University Community Members

26.1 It is the responsibility of all University Community Members to strive to create an environment free of Discrimination and Harassment in their areas of responsibility and in their interactions with others. To do this, they are responsible for building their awareness and understanding of what constitutes Discrimination and Harassment and the rights and responsibilities within the Policy.

26.2 University Community Members are expected to model respectful behaviour, uphold the Policy principles, and refuse to engage in or condone behavior contrary to the Policy.

26.3 University Community Members are encouraged to participate in any of the process options under the Policy and its associated procedures. The University acknowledges that some University Community Members may not participate in processes under the Policy for health and/or safety reasons. University Community Members are expected to receive Disclosures in a non-judgemental, empathetic and supportive manner and in adherence with confidentiality
obligations (see Statement on Confidentiality and Privacy). The University encourages anyone who receives a Disclosure to seek advice from an Individual with Supervisory Responsibility or EQHR and/or to refer the individual making the Disclosure to EQHR for coordinated information and referrals to support.

26.4 University employees who receive a Disclosure should take steps to inform the Person Who Has Experienced Harm of the Policy and of the option to seek further information from EQHR.

27. Responsibilities of Individuals with Supervisory Responsibilities

27.1 Individuals with Supervisory Responsibility bear the primary responsibility to maintain a working and learning environments free from Discrimination and Harassment by initiating positive measures and taking prompt remedial action should Discrimination and/or Harassment occur. This includes, but is not limited to:

(a) advancing the purpose and principles of the Policy;

(b) educating themselves and employees under their supervision with respect to Discrimination and Harassment and what are the Prohibited Grounds of Discrimination including the underlying conscious or unconscious biases, prejudices and behaviours that need to be actively addressed and unlearned;

(c) acquiring the skills to receive Disclosures of Discrimination and Harassment and make appropriate referrals. This should include accessing training offered under the Education and Awareness Procedures;

(d) responding to Disclosures of Discrimination and Harassment that occur in the unit or learning environment in a timely and confidential manner and keeping appropriate documentation of action taken; and

(e) taking the initiative to seek appropriate advice and guidance, as appropriate from EQHR, Faculty Relations or Human Resources, to carry out their responsibilities with respect to preventing and responding to Discrimination and Harassment.

27.2 It is not the responsibility of Individuals with Supervisory Responsibility to determine whether there has been a breach of the Policy.

27.3 Individuals with Supervisory Responsibility are expected to participate in any procedures initiated under the Policy and procedures. Decision to not participate may lead to EQHR informing their direct supervisor.

28. Responsibilities of Administrative Authorities

28.1 Administrative Authorities bear the primary responsibility for making the systemic changes needed to maintain working and learning environments free from Discrimination and
Harassment by initiating positive measures and taking prompt remedial action in response to Reports. This includes, but is not limited to:

(a) implementing the recommendations when required by the outcome of a Report.

(b) where a violation of this Policy or other breach of a duty is found, engaging in appropriate remediation or discipline processes;

(c) where no violation of the Policy is found, assess the findings of facts made by the investigator to determine whether the Respondent’s behaviour, based on the findings, requires further action and/or should be assessed through another policy or process;

(d) assess the findings of facts made by the investigator, with the support of EQHR where requested, and determine whether there are appropriate opportunities for unit or group-level learning and change. This could include, but is not limited to:

(i) education for a unit or subgroup of a unit;

(ii) changes to policy or practice;

(iii) working with EQHR to make recommendations to a unit.

29. Confidentiality and Privacy

29.1 Confidentiality is an important part of fostering an environment where individuals feel safe disclosing incidents of Discrimination and Harassment and seeking support. The University respects the privacy of all University Community Members. Personal information received by the University will be kept confidential subject to limitations outlined in Appendix G: Statement on Confidentiality and Privacy.

29.2 The University must and will act in compliance with British Columbia’s Freedom of Information and Protection of Privacy Act (FIPPA) which regulates the collection, use, disclosure, storage, and retention of personal information.

29.3 The information and records created and received to administer this Policy are subject to the access to information and protection of privacy provisions of British Columbia’s FIPPA legislation, and the University’s Protection of Privacy Policy (GV0235) and Records Management Policy (IM7700). The information and records will be treated as highly confidential, in compliance with FIPPA, with applicable University policies and with the applicable collective agreement.

29.4 In some circumstances, University Community Members who receive a Disclosure are required to share the Disclosure with others including where:

(a) an individual is at risk of self-harm or of harming others;
(b) there is an imminent risk of harm to University Community Members and/or the broader community;

(c) an individual under the age of 19 is endangered; or

(d) disclosure is otherwise required by another University policy or by law.

In these instances, the minimum amount of information needed to meet legal or other obligations should be shared with others, and reasonable efforts should be made to involve the Person Who Has Experienced Harm in decision-making and to mitigate any associated risks. Any University Community Member who is unsure about their responsibility to share a Disclosure should seek advice from the EQHR.

GENERAL

30. Annual Report

30.1 While maintaining confidentiality where required by the Policy, EQHR shall submit an annual report to the President. This report will be publicly available and will contain:

(a) available statistics on Disclosures and Reports to EQHR (including available demographic details)

(b) observed trends related to Discrimination and Harassment at the University

(c) recommendations based on trends.

31. Review of Policy

31.1 The University will continue to monitor best practices and research related to Discrimination and Harassment and will review and update this Policy and its associated procedures whenever it is reasonable to do so.

31.2 In any event, the University will review this policy in accordance with the Policy on University Policies and Procedures (GV0100).

32. Retention and Disposal of Records

32.1 Information and records must be retained and disposed of in accordance with the records retention schedule in the Directory of Records.

33. Authorities and Officers

33.1 The following is a list of authorities and officers for this policy:

(a) Approving Authority: Board of Governors
(b) Designated Executive Officer: President

(c) Procedural Authority: President

(d) Procedural Officer: University Secretary

RELEVANT LEGISLATION

Declaration on the Rights of Indigenous Peoples Act, RSBC 2019, c 14
Freedom of Information and Protection of Privacy Act, RSBC 1996, c 165
Human Rights Code, RSBC 1996, c 210
Workers Compensation Act, RSBC 1996, c 492

RELATED POLICIES AND DOCUMENTS

Acceptable Use of Electronic Information Resources (IM7200)
Employment Accommodation Policy (HR6115)
Policy on Human Rights, Equity and Fairness (GV0200)
Prevention of Violence in the Workplace (SS9120)
Protection of Privacy Policy (GV0235)
Records Management Policy (IM7700)
Resolution of Non-Academic Misconduct Allegations (AC1300)
Response to At-Risk Behaviour (SS9125)
Employee Collective Agreements
Residence Community Living Standards
Residence Contract
Family Housing Agreement