

Sexualized Violence Prevention and Response Policy

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Associated Procedures:

Sexualized Violence – Support Procedures
Sexualized Violence – Statement of Rights of Complainant and Respondent
Sexualized Violence – Investigations
Sexualized Violence – Sanctions and Appeal Procedures Where the Respondent is a Student
Sexualized Violence – Statement on Confidentiality and Privacy
Sexualized Violence – Awareness and Education
Sexualized Violence – Support Resources

DEFINITIONS

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

“Administrative Authority” means the senior individual identified at the outset of a process to have administrative responsibility for the Respondent, or decision making authority. Administrative Authorities may include but are not limited to: Vice-Presidents, Deans, Chairs, Executive Directors, Directors or, other senior positions at the University

“Complainant” means a person who makes a Report to Equity and Human Rights (“EQHR”) alleging a violation of this policy. A Survivor will be referred to as a Complainant after a Report has been filed with EQHR.

“Consent” means the voluntary agreement to engage in sexualized contact or activity and to continue to engage in the contact or activity. Consent means that all persons involved demonstrate, through words or actions, that they freely and mutually agree to participate in a contact or activity. More specifically:

- (a) Consent must be given at the outset and at all stages of sexualized contact or activity;
- (b) it is the responsibility of the initiator to obtain ongoing Consent;
- (c) Consent can be withdrawn at any time by any participant;
- (d) someone who is Incapacitated cannot Consent;

- (e) there is no Consent where one person abuses a position of trust, power, or authority over another person;
- (f) past Consent does not imply future Consent;
- (g) a person cannot give Consent on behalf of another person;
- (h) silence or the absence of “no” is not Consent;
- (i) the absence of perceived resistance is not Consent; and
- (j) there is no Consent when there is coercion, force, threats, or intimidation towards any person, or where there is fraud or withholding of critical information that could affect a person’s decision to Consent.

“Director” means the Executive Director of the Equity and Human Rights office, or delegate.

“Disclosure” means telling someone about an instance of Sexualized Violence. A Disclosure does not initiate an investigation unless a Report is made (see section 18 for how to do this).

“Incapacitated” means a person does not have the capacity to give Consent because, for instance, the person is impaired by alcohol or drugs, or is asleep or unconscious, or is experiencing a traumatic response. A person does not have the capacity to give Consent when the person cannot appreciate the who, what, when, where, why, or how of sexualized contact or activity.

“Interim Measures” means any temporary restrictions on a person’s ability to enter upon or to carry out activities upon University premises, or their ability to exercise University privileges.

“Intersectional” means the ways in which a person’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, migration status, and age). These interactions are rooted in interconnecting systems and structures of power and produce intersecting forms of privilege and oppression shaped by colonialism, racism, homophobia, ableism, patriarchy, transphobia, queer antagonism, trans antagonism, bi antagonism, and/or any other form of discrimination.

“Person Alleged to Have Caused Harm” means a person 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.

“Respondent” means a person who has a Report filed against them in EQHR, alleging they have violated this policy.

to **“Report”** Sexualized Violence means completing a “Report Form” and filing it with EQHR, with the intention of initiating an investigation.

“Retaliation” means any adverse action or threatened action, taken, or made through any means, including through social or other electronic media, against a person who engages with this policy or against a person associated with anyone who engages with this policy. Retaliation includes but is not limited to threatening, intimidating, or harassing conduct that could discourage a person from seeking support or other services, Disclosing or Reporting Sexualized Violence, participating in an investigation, or otherwise engaging with this policy.

“Sexualized Misconduct” means, for the purposes of this policy, any of the acts and behaviours identified in the definition of Sexualized Violence.

“Sexualized Violence” means, for the purposes of this policy, any non-consensual, unwanted actual, attempted, or threatened act or behaviour, that is carried out through sexual means or by targeting a person’s sex, sexual identity, or gender identity or expression. This act or behaviour may or may not involve physical contact. Sexualized Violence can take place through any form or means of communication (e.g., online, social media, verbal, written, visual). Sexualized Violence is a continuum of behaviour that includes but is not limited to all forms of sexual misconduct as set out in the *Sexual Violence and Misconduct Policy Act*. Examples of Sexualized Violence include:

- (a) salacious comments;
- (b) sexual assault;
- (c) sexual exploitation;
- (d) sexual harassment;
- (e) stalking;
- (f) Stealthing;
- (g) indecent exposure;
- (h) voyeurism; and
- (i) the distribution of a sexually explicit photograph or video of a person to one or more persons other than the person in the photograph or video without the Consent of the person in the photograph or video.

“Sexualized Violence Resource Office (“SVRO”) means the central intake office in Equity and Human Rights (“EQHR”) at the University for receiving Disclosures and for providing information, support and referrals.

“Stealthing” means the act of intentionally removing or damaging a condom or other protective device (such as a dental dam, or sponge) during sex without the Consent of the partner.

“Student” includes any of the following:

- (a) a person 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.

“Survivors” means those who have experienced Sexualized Violence. The University recognizes that some people may not identify with this terminology and have the right to determine how they will be referred to.

“Those Impacted by Sexualized Violence” means Survivors and those who have experienced Sexualized Violence, their family and friends, witnesses, and those who have received Disclosures.

“Survivor-centred” means prioritizing the safety and choices of Survivors. Survivor-centred means to treat Survivors with dignity and respect rather than blame, hostility, or suspicion and to respect their rights, interests and agency by allowing them to make decisions about whether to file a Report and the extent of their participation.

“Third Party” means, for the purposes of making a Third Party Statement under this policy, a person other than the person who experienced Sexualized Violence, and other than the Person Alleged to Have Caused Harm. A Third Party can be a witness, a friend, a colleague, a person who receives a Disclosure, or any other person.

“Third Party Statement” means when someone (e.g. friend, staff, faculty, colleague) shares information with the SVRO about Sexualized Violence on behalf of, and with the consent of, the person who experienced Sexualized Violence (see section 20).

“Trauma-informed” means incorporating an understanding of the impact that trauma, including Sexualized Violence, has on a person’s life, to minimize re-victimization, and support recovery and empowerment.

“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.

“University Community” means:

- (a) credit and non-credit students, including distance students and continuing studies students;
- (b) faculty, librarians and staff members;
- (c) anyone holding a University appointment;
- (d) post-doctoral fellows;

- (e) all persons employed under contracts with University faculty members as the employer and who provide research or administrative services directly supporting faculty members' research activities;
- (f) visiting researchers;
- (g) anyone contractually required to abide by University policies;
- (h) anyone volunteering with a University program or activity;
- (i) members of the Board of Governors and Senate; and
- (j) anyone who ordinarily resides on campus because of their relationship with the University.

“Voluntary Resolution Process” means a voluntary process facilitated by EQHR and agreed to by the Complainant, the Respondent, and the University. The purpose of a Voluntary Resolution Process is to respond to a Disclosure or Report and does not result in a determination of whether the policy has been breached.

FOUNDATIONAL STATEMENTS

1. Preamble

- 1.1 Sexualized Violence is unacceptable and prohibited conduct at the University of Victoria (“the University”).
- 1.2 The University recognizes that Sexualized Violence is a significant and systemic social and campus issue that can affect anyone at the University.
- 1.3 The University recognizes its responsibility to increase awareness of Sexualized Violence, make efforts to prevent its occurrence within the University Community, receive Disclosures, support Survivors and Those Impacted by Sexualized Violence, respond to Reports of Sexualized Violence, deal fairly with those accused of Sexualized Violence, and deal fairly and firmly with those who have been found responsible for violating this policy.

2. Purpose

- 2.1 This policy sets out the University’s framework and strategy to address Sexualized Violence. The purpose of this policy is to instill and cultivate institutional, collective, and individual responsibility to create an environment in which Consent and respect are foundational principles and practices at the University.

3. Principles of the Policy

The following principles are intended to assist in the interpretation of this policy.

- 3.1 Because anyone can experience Sexualized Violence, this policy applies to all University Community members regardless of a person’s social position or position within the University structures, hierarchies, and power relations.

- 3.2 Some individuals or groups experience Sexualized Violence at higher rates. Efforts to address Sexualized Violence should be grounded in an Intersectional understanding that each person's experience, and the relationship between those who are subject to the policy, will be affected by many factors, including but not limited to their sex; gender identity or expression; sexual identity; family status; Indigenous, racial, or ethnic background; language barrier; ability; faith; age; migration status; socioeconomic status; academic standing; as well as their position within University structures, hierarchies, and power relations.
- 3.3 Every Survivor or person who is Impacted by Sexualized Violence will engage with the University and this policy from their unique situation or position. Given existing hierarchies and power dynamics at the University, they may enter their engagement with the policy at a disadvantage.
- 3.4 Sexualized Violence does not exist or operate in isolation. Acts of Sexualized Violence can also be acts of colonial violence, racism, sexism, ableism, ageism, classism, religious intolerance, homophobia, transphobia, queer antagonism, trans antagonism, bi antagonism, and/or any other form of discrimination.
- 3.5 Sexualized Violence is a human rights violation and accordingly the principles and approaches to address Sexualized Violence must be linked to the University's broader equity and anti-discrimination initiatives and goals.

4. Expectations and Commitments

- 4.1 The University is committed to transparency and accountability with respect to the implementation of this policy and its related procedures.
- 4.2 Every individual should expect to be able to learn, work, and live in an environment in which Sexualized Violence is not tolerated. The University therefore expects every member of the University Community to practise Consent and respect for the dignity and diversity of all community members, and to foster an environment in which these are foundational principles. All University academic and non-academic administrators are expected to take active steps to incorporate these principles into their units.
- 4.3 The University is committed to addressing Sexualized Violence by implementing and actively promoting education, awareness, prevention, and training programs, in multiple formats and tailored to multiple audiences.
- 4.4 The University recognizes the serious impacts of Sexualized Violence and trauma on Survivors and Those Impacted by Sexualized Violence, the University Community, and others, and is committed to providing Trauma-informed support where possible.
- 4.5 The University is committed to supporting Survivors and Those Impacted by Sexualized Violence and will do so as outlined in section 5 of this policy. Through the SVRO, the University will:
 - a. make available to all members of the University Community clear information on Trauma-informed support options; and

- b. maintain a comprehensive and up-to-date list of on- and off-campus support resources. The SVRO, will make the list accessible to all University Community members by publishing it on the SVRO website (see Appendix G of this Policy).

4.6 All persons who Disclose or Report an experience of Sexualized Violence to the University can expect from the University, in accordance with this policy and its procedures:

- (a) to be treated with compassion, dignity, and respect;
- (b) timely assistance with safety planning;
- (c) timely information about and referrals to available on- and off-campus support services and resources;
- (d) Trauma-informed, non-judgmental and empathetic communications, including not to be blamed for experiencing Sexualized Violence; and
- (e) if they decide to Report their experience, a clear explanation of the investigation and adjudication process, regular updates on the status of the process, and ongoing support where requested and available.

4.7 All those who are Alleged to Have Caused Harm and Respondents can expect from the University, in accordance with this policy and its procedures:

- (a) to be treated with compassion, dignity, and respect;
- (b) to be provided with information about and referrals to available on- and off- campus support services and resources;
- (c) a fair and unbiased process (in accordance with collective agreement provisions, where applicable);
- (d) a clear explanation of the process, options available to them, and potential outcomes;
- (e) opportunities to engage in Voluntary Resolution Processes where appropriate and permissible under this policy and applicable collective agreements; and
- (f) Trauma-informed, non-judgmental, and empathetic communications.

5. Commitment to Support Survivors and Those Impacted by Sexualized Violence

5.1 The University is committed to supporting all members of the University Community who experience or are Impacted by Sexualized Violence, regardless of who they are or where and when the incident occurred.

5.2 The University acknowledges that immediate and longer-term needs of every Survivor or person Impacted by Sexualized Violence are unique and require a personalized pathway through their support options. The University therefore commits to:

- (a) recognizing the specific barriers and power relationships that impact a Survivor in making a Disclosure or Report, and devising strategies that take such barriers and power relationships into account;
 - (b) providing supports based on the unique needs of the Survivor or person Impacted by Sexualized Violence; and
 - (c) equitably offering relevant and supportive referrals to on- and off-campus services.
- 5.3 Support to Survivors and Those Impacted by Sexualized Violence will operate based on the following principles:
- (a) The SVRO will provide information in an accessible manner;
 - (b) all University Community members Impacted by Sexualized Violence can seek information and support through the SVRO;
 - (c) Survivors and Those Impacted by Sexualized Violence can seek support regardless of when, where, or by whom they experienced Sexualized Violence;
 - (d) the SVRO will work with individual Survivors and Those Impacted by Sexualized Violence to determine their support needs and assist them in accessing these;
 - (d) Survivors and Those Impacted by Sexualized Violence who disclose may seek support but will not be required or pressured to make a Report. In some limited cases, the University may be required to take action without a Report by the Survivor (see section 18.4). If this is necessary, the University will make reasonable efforts to inform the individuals affected;
 - (e) Survivors and Those Impacted by Sexualized Violence have the right to determine what and how much they choose to disclose or report about their experience, and to decide whether they would like to make a Report to the University and/or report to the police;
 - (f) Reasonable efforts will be made to provide Survivors and Those Impacted by Sexualized Violence who are Students with the opportunity to retain their status as Students and continue with their studies at the University if they wish to do so.
- 5.4 The SVRO will assist individuals in determining their pathways through support options on- and off-campus. Faculty, librarians, and staff who are covered by a collective agreement can access support through the SVRO and through their unions.
- 5.5 The SVRO, in coordination with other offices, will work with Those Impacted by Sexualized Violence to enable their safety and wellbeing on campus (or in their relationship with the University). This may involve supporting Survivors and Those Impacted by Sexualized Violence in developing safety plans, accessing services and supports, obtaining academic or non-academic supports, and helping individuals to navigate any subsequent process in which the individual chooses to participate.

6. COMMITMENT TO SUPPORT PERSONS ALLEGED TO HAVE CAUSED HARM AND RESPONDENTS

- 6.1 The University will take an Intersectional and harm reduction approach to supporting persons Alleged to Have Caused Harm and Respondents and acknowledges that some of these individuals may have experienced Sexualized Violence themselves.
- 6.2 Persons Alleged to Have Caused Harm and Respondents may, based on their individual circumstances and as appropriate, seek information and support from the SVRO, Student Support Coordinators, the Office of the Ombudsperson, or union representatives.
- 6.3 Persons Alleged to Have Caused Harm and Respondents will be treated fairly by EQHR and will be given an explanation of the processes they are involved in under this policy, including options, where appropriate, for engaging in a Voluntary Resolution Process.

7. COMMITMENT TO EDUCATION AND TRAINING

- 7.1 The overall goal of Sexualized Violence education is to create and maintain a working, learning, living, and social environment at the University based on the principles and practices of Consent and respect through the awareness and prevention of Sexualized Violence.
- 7.2 The University will to provide access to coordinated education and training programs pertaining to preventing, and responding to, incidents of Sexualized Violence to all University Community members.
- 7.3 The University will provide education and awareness training as described in sections 7.4, 7.5 and the Appendix F: Education and Awareness. The University will create a committee to guide and support this work (See Appendix F).
- 7.4 The education and training will:
 - (a) be proactive, prosocial, sustained, and focused on creating a culture that promotes healthy and safe relationships, based in relevant best practices;
 - (b) take into account Intersectional identities and barriers, power relationships, and other relevant factors;
 - (c) be grounded in an anti-oppressive understanding;
 - (d) facilitate the dissemination of common definitions, principles, and shared values across the University Community;
 - (e) identify that Sexualized Violence is a continuum of behaviors from unwanted comments to all forms of sexual assault;
 - (f) contextualize Sexualized Violence and rape culture from its colonial, historical, and sociological roots;
 - (g) be specific, tailored, and accessible to diverse campus populations; and

(h) have learning outcomes and be regularly reviewed and assessed.

7.5 In addition, the University will provide education, which may include but is not limited to:

- (a) implementing a comprehensive education program for faculty, librarians, staff, and Students (pre-arrival, on-site orientation, and ongoing education materials, workshops, and on-line training);
- (b) implementing training with a curriculum based on consistent foundational principles for members of units and offices most likely to receive Sexualized Violence Disclosures;
- (c) making information on Trauma-informed responses to Disclosure available to all faculty, librarians, staff, and Students;
- (d) addressing harmful attitudes and behaviours that reinforce beliefs about Sexualized Violence such as rape myths and victim blaming that perpetuate an environment where violence is normalized; and
- (e) implementing harm reduction education in relation to alcohol and other substance use.

SCOPE

8. Prohibited Conduct

- 8.1 All acts of Sexualized Violence are prohibited under this policy.
- 8.2 Retaliation against a person who engages with this policy, or against a person associated with anyone who engages with this policy, is prohibited.

9. Jurisdiction of the Policy

- 9.1 This policy and its associated procedures apply to all members of the University Community.
- 9.2 All members of the University Community who are Survivors or Those Impacted by Sexualized Violence may access support under this policy, regardless of when or where the Sexualized Violence occurred, and who was involved.

10. Jurisdiction to Investigate Reports

- 10.1 The Director will determine whether the University has jurisdiction to investigate a Report.
- 10.2 The University only has jurisdiction to investigate Reports about the actions, interactions, and behaviours of a member of the University Community in an incident alleged to have occurred in one or more of the following circumstances:
 - (a) on any property that is controlled by the University and used for University purposes;
 - (b) when the Respondent is or was in a position of power or influence over the Survivor's academic or employment status at the University;

(c) While engaged in a University Activity, including but not limited to:

- (i) athletic events;
- (ii) online courses;
- (iii) placements (including co-op and practica);
- (iv) online meetings in furtherance of University business;
- (v) academic or professional conferences; and
- (vi) academic or research field work.

- 10.3 If an incident does not meet one or more of the criteria in section 10.2, the University may still take steps to mitigate the impact of the incident on the learning, living, or working environment.
- 10.4 The University does not have jurisdiction to investigate allegations against a person who is not a member of the University Community or who is not currently affiliated with the University. However, when allegations are brought forward against a visitor (i.e. 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. The SVRO can also assist a Survivor in reporting to another reporting body (e.g., police, employer, etc.).
- 10.5 The University may accept Disclosures and Reports from individuals who are not members of the University Community if the Respondent is a member of the University Community and the incident falls within section 10.2.

11. Employees of the University Covered by a Collective Agreement

- 11.1 This policy and its associated procedures are designed to complement and not conflict with the University collective agreements. Where a University collective agreement process applies to the Respondent, such as an investigation or disciplinary process, the processes in the collective agreement will be followed.

12. Impact of Concurrent Criminal, Civil or Other Proceedings

- 12.1 This policy and its associated procedures are separate from any criminal or civil proceedings. The University is responsible for determining whether a University Community member has violated this policy and is not responsible for determining violations of criminal or civil law.
- 12.2 An investigation process under this policy or its associated procedures may occur simultaneously with, prior to, or following any criminal, employment, or other proceeding. The University may proceed with an investigation into a Report of Sexualized Violence while the incident is also being investigated by the police.
- 12.3 Any University process under this policy or its associated procedures, including an investigation, may be suspended 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 Survivor, or an external body, or at the University's initiative.

- 12.4 If a University process under this policy or its associated procedures is suspended, the SVRO will continue to coordinate support to members of the University Community as described in this policy and its associated procedures.

DISCLOSURES AND REPORTS

13. Immediate Assistance

- 13.1 The University encourages, but does not require, Survivors to seek immediate assistance. Seeking assistance promptly may be important to ensure physical safety, to obtain medical care or emotional support, or to preserve evidence. The SVRO website and Appendix G contain detailed information on immediate assistance available on and off campus, including current contact information [*add link here*].

14. Process Options

- 14.1 The SVRO will provide Survivors with information about their options and the processes available to them, and with referrals where appropriate. Process options for Survivors may include:
- (a) a Disclosure to a member of the University Community;
 - (b) a Report to the University;
 - (c) a statement to the University through a Third Party;
 - (d) a grievance through their union;
 - (e) a report to the police through an approved agency;
 - (f) a report of a crime directly to the police;
 - (g) a human rights complaint to the BC Human Rights Tribunal;
 - (h) a civil suit.

15. Timing of Disclosures and Reports to the University

- 15.1 The University recognizes that Survivors may not be ready to make a Disclosure or Report immediately after an incident of Sexualized Violence. Disclosures or Reports of Sexualized Violence can occur immediately after the incident or several months or years later. In the latter case, they may be triggered by another experience.
- 15.2 There is no time limit to an individual Disclosing or Reporting their experiences and accessing support under this policy and its associated procedures. University support systems are designed to be flexible and open to a diversity of experiences and needs.

- 15.3 There is no time limit to an individual Reporting their experiences to the University with the intention of initiating a process but where there is a significant lapse of time, the University's ability to investigate may be limited. For example, as outlined in section 10, the University may not have jurisdiction to investigate an incident if one or more of the parties involved are no longer affiliated with the University.
- 15.4 While evidentiary and procedural challenges may arise if a Report is significantly delayed, the delay in and of itself will not be considered as an indication that the incident did not occur.

16. Disclosures

- 16.1 A Disclosure is not a Report and will not initiate an investigation.
- 16.2 Survivors and Those Impacted by Sexualized Violence may disclose their experiences to any member of the University Community. The University acknowledges that individuals may find it easier to disclose to a member of the University Community who they trust or with whom they feel safe. Individuals may disclose for a variety of reasons, including to access support.
- 16.3 The University encourages anyone who receives a Disclosure to seek advice from the SVRO and/or to refer the individual making the Disclosure to the SVRO for coordinated information and support.
- 16.4 A University employee who receives a Disclosure should take steps to inform the discloser of this policy and of the option to seek further assistance from the SVRO.
- 16.5 A University employee who receives a Disclosure may need to share it with others, in order to properly perform their employment duties (see E10.00). In such cases, the University employee should first inform the person who made the Disclosure.
- 16.6 In some circumstances, members of the University Community who receive a Disclosure are required to share the Disclosure with others including where:
- (a) a person is at risk of self-harm or of harming others;
 - (b) there is an imminent risk of harm to the University Community and/or the broader community;
 - (c) the Disclosure involves sexual harassment in the person's place of employment and is therefore required under the *Workers Compensation Act*;
 - (d) a person under the age of 19 is endangered; or
 - (e) disclosure is otherwise required 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

Survivor 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 SVRO.

- 16.7 University offices, Campus Security, the Office of Student Life, Residence Services, who receive a Disclosure and create a record of it must forward the record of the Disclosure to EQHR for confidential retention. EQHR retains Disclosures for the purposes of providing coordinated information and support, assessing patterns and risk, and aggregating statistics for the purposes of the annual report referred to in section 26 of this policy.

17. Voluntary Resolution Processes

- 17.1 A person who has made a Disclosure or Report may, at any time after the Disclosure is made, request EQHR to facilitate a Voluntary Resolution Process.
- 17.2 A Voluntary Resolution Process is any voluntary process that may address the matter. Filing a Report is not a pre-requisite to engaging in a Voluntary Resolution Process and engaging in such a process is not a pre-requisite to filing a Report.
- 17.3 EQHR will discuss the Voluntary Resolution Process options with the Survivor, and if the Survivor agrees, with the Person Alleged to Have Caused Harm.
- 17.4 All participants must voluntarily agree to the Voluntary Resolution Process. Before the Voluntary Resolution Process is considered initiated, the Person Alleged to Have Caused Harm will be invited to a preliminary meeting with EQHR to discuss the Voluntary Resolution Process options.
- 17.5 The University, through a Response Coordination Team (“RCT”) (see section 24) process, reserves the right to decline a request for a Voluntary Resolution Process. The university will only do so if in circumstances where it is satisfied that such a process may be inappropriate.
- 17.6 A person against whom a Disclosure or Report has been made may, at any time after they become aware of the Disclosure or Report, request EQHR to facilitate a Voluntary Resolution Process.
- 17.7 At any time after an investigator has been appointed, a Complainant or Respondent may request a Voluntary Resolution Process. The Voluntary Resolution Process may occur before, during, or after an investigation.
- 17.8 Voluntary Resolution Processes are not disciplinary and will not determine whether or not the policy has been violated.
- 17.9 A Voluntary Resolution Process is often designed through a single meeting or a series of meetings. When discussing Voluntary Resolution Process options with EQHR, the Survivor may request a specific option. The Person Alleged to Have Caused Harm will also have input into designing the Voluntary Resolution Process and agreeing to the process selected. Options for requesting a Voluntary Resolution Process include, but are not limited to:

- (a) Requesting support from EQHR in letting the Person Alleged to Have Caused Harm know the alleged behaviour was unwanted.
- (b) Requesting the Person Alleged to Have Caused Harm to take Consent training or another form of training focussed on Sexualized Violence prevention
- (c) Seeking a voluntary apology. A voluntary apology by a Respondent is not considered to be an admission of guilt or fault and will not be used as a basis for discipline.
- (d) Making a non-disciplinary request of the Person Alleged to Have Caused Harm to avoid contact, avoid certain areas of campus, or the like.
- (e) Making reasonable requests for academic or work related changes that will not impact academic progress or limit the rights of the other party.
- (f) Requesting mediation, facilitated conversation, conflict coaching, or any form of culturally supportive and appropriate resolution.
- (g) Requesting negotiating a behavioural agreement or a voluntary letter of agreement, where appropriate.

17.10 An in-person meeting between parties will not be a requirement for a Voluntary Resolution Process.

17.11 If a Voluntary Resolution Process results in a resolution that the Person Alleged to Have Caused Harm, the University, and the Survivor (if participating) agree to, the resolution will be put in writing and signed. A copy of the terms of resolution shall be confidentially retained by EQHR.

Terminating a Voluntary Resolution Process

17.12 Participation in a Voluntary Resolution Process is voluntary and either party may withdraw from the process at any time.

17.13 The University may terminate the Voluntary Resolution Process if EQHR or an RCT determines that no useful purpose will be achieved by continuing.

17.14 If a Voluntary Resolution Process is terminated by the University, or by the withdrawal of either party, the Survivor may pursue, or the University may initiate or resume, an investigation process.

18. Reports

18.1 To Report Sexualized Violence means completing a “Report Form” and filing it with EQHR, with the intention of initiating an investigation. A Report may be made to EQHR at any time.

- 18.2 For the purposes of this policy, a Survivor will be referred to as a Complainant after a Report has been filed with EQHR, and the Person Alleged to Have Caused Harm will be referred to as a Respondent.
- 18.3 A Report may be made to EQHR by:
- (a) a member of the University Community who has experienced Sexualized Violence;
 - (b) a person who is not a member of the University Community who has experienced Sexualized Violence, where the Respondent is a member of the University Community and the incident falls within section 10.2.

The University May Act as Complainant

- 18.4 The University may act as the Complainant whether or not a Report has been made. In such cases, the Survivor may choose not to participate in the investigation.
- 18.5 The Director may, on their own initiative or in consultation with a RCT (see section 24), initiate an investigation under this policy with the University acting as the Complainant where the Director is aware of an alleged incident or series of incidents of Sexualized Violence, is satisfied there is enough evidence to proceed, and:
- (a) there is a significant risk to the health or safety of one or more members of the University Community; or
 - (b) an investigation is in the best interests of the University or is required by law or by University policy.

Responding to Reports of Sexualized Violence

- 18.6 The University will promptly respond to Reports of Sexualized Violence.
- 18.7 All University investigations and adjudicative processes under this policy and its procedures will follow principles of fairness and natural justice, including the right to be heard and to be judged fairly and impartially, and will respect the rights of the Complainant, the Respondent, and witnesses.
- 18.8 Complainants, Respondents, and witnesses have the right to and are welcome to involve a support person of their choice at any point in the process, and they may also engage a union representative and/or legal counsel (at their own cost) in any meetings or processes related to a Report of Sexualized Violence. A support person may be internal or external to the University. A person who is a witness to the reported incident cannot be a support person to the Complainant, Respondent, or to another witness. A support person's role is to provide emotional, spiritual, and/or cultural support. A support person must agree in writing to maintain confidentiality in accordance with this policy and its associated procedures.

- 18.9 The Complainant has the right to withdraw participation any stage in the process. However, there are circumstances when the University will be compelled to proceed with an investigation without the Complainant's involvement, for reasons which may include but are not limited to those listed in section 16.6 and 18.5.
- 18.10 The Complainant has the right to choose how they participate in the investigation, including the right not to participate; however, if the Complainant decides not to participate, the University's ability to investigate may be limited. Complainants may choose to be kept informed about the outcome of the investigation whether or not they participate.
- 18.11 For the purposes of this policy and its associated procedures, "participants in an investigation" include the Complainant(s), Respondent(s), and witnesses.
- 18.12 The University will treat all participants in an investigation in a manner that is respectful, Trauma-informed, and procedurally fair. All participants in an investigation have the right to:
- (a) ask questions about the investigation process;
 - (b) receive information about available supports; and
 - (c) communicate their own experiences (see Appendix E, sections E14.00 and E15.00) without fear of Retaliation and with the expectation that those experiences will be dealt with in confidence, subject to the limitations described in sections 16.5 and 16.6 of this policy.
- 18.13 If, after reviewing a Report of Sexualized Violence, the University decides not to take action or investigate, this should not be seen as a judgment against any person or a denial that the incident occurred.

19. Ending the relationship with the University

- 19.1 If the Respondent ends their relationship with the University during an investigation, the University may decide to temporarily or permanently suspend the investigation or to continue the investigation. This decision will be informed by the University's assessment of whether a full and fair investigation is possible.
- 19.2 If the Complainant ends their relationship with the University during the investigation, the Complainant can continue to participate in the investigation or choose to withdraw participation from the investigation. The University may decide to suspend the investigation or to continue it without the Complainant's participation. This decision will be informed by the University's assessment of whether a full and fair investigation is possible.

20. Anonymous Allegations and Third Party Statements

- 20.1 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 Community;
 - (b) identifying whether it is appropriate for the University to take action; and
 - (c) compiling Sexualized Violence statistics wherever possible.
- 20.2 EQHR'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 experienced Sexualized Violence.
- 20.3 The Director will consider the allegation or statement and determine whether any steps can and should be taken. The Director may choose to engage a RCT (see section 24) to make that determination.
- 20.4 Where sufficient information exists, the Director may decide to take action, including to proceed with an investigation. In such cases, the person who experienced the Sexualized Violence has the right to choose not to participate in the investigation.
- 20.5 If EQHR does not investigate, a record of the anonymous allegation or Third Party Statement will be retained by the Director under restricted access.

21. Interim Measures

- 21.1 The University may impose Interim Measures where the University believes it must act to protect University Community members' health or safety, or University property, or when requested by an individual for safety reasons. 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).
- 21.2 Interim Measures seek to mitigate risks to the health and safety of individuals and the University Community and to protect the integrity of processes under this policy and its associated procedures. The need for Interim Measures, and which measures are imposed, will be determined on a case by case basis, taking into account the circumstances of each situation.
- 21.3 Any decision to impose Interim Measures will not be construed as a decision or discipline against the parties and will not be weighed against the Respondent in a discipline process.
- 21.4 Interim Measures will remain in effect for as long as is reasonably required pending the outcome of an investigation.
- 21.5 Individuals affected by Interim Measures may request, in writing, a review of such measures.
- 21.6 Interim Measures may include but are not limited to:
- (a) separating the Complainant and Respondent to minimize or prevent encounters in living, working, and learning environments;

- (b) for Students living in Residence, moving to another room or being removed from Residence;
- (c) implementing no-contact or limited contact agreements;
- (d) prohibiting the Respondent from being on some or all of the University premises and from engaging in University-affiliated activities;
- (e) denying or restricting access to any facilities operated by the University, including computer and communication systems;
- (f) imposing a suspension on a Respondent who is a Student; or
- (g) imposing on a Respondent who is an employee any Interim Measures that are permissible under, and imposed in accordance with, any applicable collective agreement.

21.7 A breach of Interim Measures is prohibited conduct and will be taken seriously. A breach of Interim Measures will be addressed by the University as a separate matter under applicable universities policies, processes, or collective agreements by the University Administrative Authority with oversight for the Respondent’s misconduct.

22. Amnesty

22.1 The University recognizes that some Survivors may be reluctant to come forward. One reason may be a fear of being sanctioned for their personal use of alcohol or other substance use. The University seeks to remove barriers to Disclosing and Reporting incidents of Sexualized Violence. Hence, the University will not subject any individual who Discloses or Reports or witnesses Sexualized Violence to disciplinary action for their personal use of alcohol or substance use occurring at or near the time of the incident(s).

23. Retaliation

23.1 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 University Administrative Authority with oversight for the Respondent’s misconduct.

23.2 Allegations of Retaliation can be made before, during or after a process under this policy. Allegations of Retaliation can be brought forward to the SVRO/EQHR who will provide them to the appropriate Administrative Authority for consideration under applicable University policies, processes, or collective agreements.

24. Response Coordination Team

24.1 The University may form a Response Coordination Team (“RCT”) to review risk, coordinate support and services, consider recommendations for Interim Measures, if appropriate consider alternative or additional policy or processes, provide advice to the Director on whether Voluntary Resolution Processes are appropriate, and provide advice to the Director under

sections 18.5 and 20.3. The RCT will include appropriate individuals based on the nature of the Disclosure or Report.

25. Confidentiality and Privacy

- 25.1 Confidentiality is an important part of fostering an environment where individuals feel safe disclosing incidents of Sexualized Violence and seeking support. The University respects the privacy of all members of the University Community. Personal information received by the University will be kept confidential subject to limitations outlined in Appendix E: Statement on Confidentiality and Privacy.
- 25.2 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.
- 25.3 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.

GENERAL

26. Annual Report

- 26.1 The President will provide information to the Board of Governors each year on the implementation of this policy. The University will provide an annual update to members of the University Community. The annual report will include:
 - (a) Statistics on Disclosures, Voluntary Resolution Processes, and Reports;
 - (b) Progress on education and prevention; and
 - (c) Other major initiatives.

27. Review of Policy

- 27.1 The University will continue to monitor best practices and research, and will review and update this policy and its associated procedures whenever it is reasonable to do so.
- 27.2 In any event, the University will review this policy at least once every three years, and when directed to do so by the provincial government. This should include consultation with Students, staff, faculty, and librarians.

28. Retention and Disposal of Records

- 28.1 Information and records must be retained and disposed of in accordance with the records retention schedule in the directory of records.

29. Authorities and Officers

- 29.1 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

[*Sexual Violence and Misconduct Policy Act, SBC 2016, c 23*](#)

[*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 \(IM7200\)](#)

[Discrimination and Harassment Policy \(GV0205\)](#)

[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](#)

APPENDIX A

Sexualized Violence – Support Procedures

Procedural Authority: President

Procedural Officer: University Secretary

Parent Policy: [Sexualized Violence Prevention and Response Policy \(GV0245\)](#)

Effective Date: January 2021

Supersedes:

Last Editorial Change:

Purpose

A1.00 These procedures give effect to the University’s commitment to provide support to members of the University Community who experience or are Impacted by Sexualized Violence, as expressed in sections 5 and 6 of the Sexualized Violence Prevention and Response Policy (“the Policy”).

Definitions

A2.00 The definitions in the Policy apply to these procedures.

Confidentiality

A3.00 The Statement on Confidentiality and Privacy referred to in section 25 of the Policy and appended to it as Appendix E applies to these procedures.

Immediate Support

A4.00 The Sexualized Violence Resource Office (“SVRO”) website and Appendix G of the Policy and contain detailed information on immediate assistance available on and off campus, including current contact information [*insert link to website here*]

A5.00 The University may establish a Response Coordination Team (see Policy, section 24) to assist with matters arising from a statement, Disclosure, or Report, including but not limited to:

- (a) providing coordinated support; and/or
- (b) protecting the safety of individuals and the University Community.

General Information and Support

A6.00 Information and support will be made available to Survivors and Those Impacted by Sexualized Violence, as well as to people who are alleged to have cause harm and Respondents.

A7.00 Anyone who is unsure of their relationship to or position in the University and has questions about potential support options should contact the SVRO.

A8.00 Information and support are provided so that individuals can make informed decisions at all stages of any of the processes established by the Policy and its associated procedures.

A9.00 In all meetings or processes conducted under the Policy and these procedures, an individual may bring a support person of their choice, who may be internal or external to the University. A person who is a witness to the reported incident cannot be a support person to the Complainant, Respondent, or to another witness. A support person's role is to provide emotional, spiritual, and/or cultural support. A support person must agree in writing to maintain confidentiality in accordance with the Policy and these procedures.

A10.00 The University will make available Student Support Coordinators to provide support for Students, but individuals participating in a process have the right to choose their support person.

A11.00 Support can be coordinated by the SVRO, who will collaborate with units in Student Affairs, Human Resources, Faculty Relations, Indigenous Academic and Community Engagement, and other appropriate University units as well as student society unions or groups such as the Anti-Violence Project.

A12.00 Information and support may include but is not limited to:

- (a) information, resources, and planning for personal safety and immediate safety needs (e.g., emergency medical attention, housing, etc.);
- (b) information about medical services used in Sexualized Violence incidents to assess injuries and/or gather information, and about specialized community support services;
- (c) information about reporting options available, and what to expect when making a Report to the University or a report to police;
- (d) assistance accessing information and completing administrative forms;
- (e) information on how to access union or legal representation;
- (f) working with Campus Security and others to assist with ongoing safety planning;
- (g) assistance with making connections to campus safety programs (e.g., Personal Safety Coordinators, Safewalk);
- (h) referral to other campus or community resources including faith-based and culturally specific supports;
- (i) referral to other campus or community services and/or resources that can provide support for the emotional, spiritual, and physical impacts of Sexualized Violence; and/or
- (j) referrals to off-campus health and/or counselling support.

Information and Support – Credit Students

A13.00 In addition, for credit students, possible non-academic supports may include but are not limited to:

- (a) accessing the on-campus Student Wellness Centre;
- (b) identifying any options that may be available in relation to on-campus housing;
- (c) adjusting a student's work schedule when the student is also an employee of the University;
- (d) assistance with connecting to resources to understand the implications and options regarding student visas;
- (e) assistance with making connections to other campus and community resources including faith-based and culturally specific supports; and/or
- (f) support in engaging with University units and external institutions when a student's post-secondary funding arrangements such as grants, scholarships, bursaries, band funding, student loans, teaching assistance or other employment income, and research/teaching grants are impacted.

A14.00 Information and support can include helping students to access academic support options which may include but are not limited to:

- (a) adjusting a student's academic schedule, course, exam dates, academic supervisor, or instructor;
- (b) withdrawal from a course without penalty;
- (c) academic concession requests (e.g., deferring a final exam, assignment, or other course work; backdated course drops or withdrawals; alternative form of assessment; etc.);
- (d) applications for leaves of absence; and/or
- (e) referral to other academic resources and available supports.

A13.01 Information and support can be provided to help students understand the implications of relevant timelines for academic concessions. Additional Information on academic concessions are contained in the Undergraduate and Graduate Academic Calendars.

Information and Support – Faculty, Librarians, and Staff

A15.00 The process for evaluating faculty, librarian, and staff requests for supports will differ depending on the type of support requested. Faculty, librarians, and staff are encouraged to work with the SVRO, their supervisor, and/or their union representative to learn about the available support options and how to access them. Supports that may be requested include but are not limited to:

- (a) adjusting a work schedule for University employment;
- (b) having work performance supervised and assessed by an alternative supervisor;
- (c) requesting that the Director initiate an Environmental Assessment under the [Discrimination & Harassment Policy](#);

- (d) applying for a leave of absence or an extension of leave from University employment;
- (e) moving to a different work location; and/or
- (f) transferring to a different position within the University.

A16.00 Faculty, librarians, and staff may also access support through the employee assistance program.

Appendix B

Statement of Rights of Complainant and Respondent

Purpose

B1.00 The purpose of this document is to list the rights that the Complainant and Respondent can expect to have under the Sexualized Violence Prevention and Response Policy and its associated procedures in order to preserve the fairness and impartiality of the process.

Complainant's Rights

B2.00 A Complainant has the following rights:

- (a) to be treated with fairness, dignity, and respect;
- (b) to be given access to available support and resources throughout the process;
- (c) to timely assistance with safety planning;
- (d) to timely information about referrals to available on- and off-campus support services and resources;
- (e) if the Complainant is a Student, to seek independent consultation at any point from the University Ombudsperson;
- (f) to have the process explained to them in an accessible manner, including the possible outcomes;
- (g) to have their personal information kept confidential (except when disclosing it is required by law or University policy);
- (h) to be informed that any information collected may be disclosed in criminal or civil proceedings;
- (i) to present their side of the story, and to respond to other participants' information;
- (j) to be accompanied by a support person (see A9.00);
- (k) to legal representation (at the Complainant's cost);
- (l) if the Complainant is a unionized employee, to seek support, consultation, and representation by their union;

- (m) to decline to participate in aspects of the investigation;
- (n) to request a review or grieve a decision by the Director not to investigate;
- (o) to regular updates on the status of the process;
- (p) to opportunities to engage in Voluntary Resolution Processes where appropriate;
- (q) to written notice of any resolution that directly affects the Complainant; and
- (r) to written notice of the outcome of any appeal or grievance.

Respondent's Rights

B.3.00 A Respondent has the following rights:

- (a) to be treated with fairness, dignity, and respect;
- (b) to be given access to available support and resources in alignment with the Policy;
- (c) to receive timely notice and information about the allegations against them;
- (d) to know the identity of the person who made the Report;
- (e) if the Respondent is a Student, to seek independent consultation at any point from the University Ombudsperson;
- (f) to be presumed to have not violated this policy until a fair investigation is completed;
- (g) to have the process explained to them in an accessible manner, including the possible outcomes and consequences;
- (h) to have their personal information kept confidential (except when disclosing it is required by law or University policy);
- (i) to be informed that any information collected may be disclosed in criminal or civil proceedings;
- (j) to present their side of the story, and to respond to other participants' information;
- (k) to be accompanied by a support person (see A9.00);
- (l) to legal representation (at the Respondent's cost);
- (m) if the Respondent is a unionized employee, to seek support, consultation, and representation by their union;

- (n) to decline to participate (however, the process may still proceed in the absence of the Respondent);
- (o) to opportunities to engage in Voluntary Resolution Processes where appropriate;
- (p) to written notice about the outcome of an investigation and any sanctions; and
- (q) to appeal or grieve the decision, as applicable, (within the appropriate time frame) and to receive written notice of the outcome of any appeal or grievance.

Appendix C

Sexualized Violence – Investigations

Procedural Authority: President

Procedural Officer: University Secretary

Parent Policy: [Sexualized Violence Prevention and Response Policy \(GV0245\)](#)

Effective Date: January 2021

Supersedes:

Last Editorial Change:

Purpose

- C1.00 These procedures describe the process that the University will follow to investigate a Report of Sexualized Violence. Investigators and investigations will adhere to the principles and commitments expressed in section 18 of the Sexualized Violence Prevention and Response Policy (“the Policy”).

Definitions

- C2.00 The definitions in the Policy apply to these procedures. In addition, the following definitions apply:

“participants in an investigation” include the Complainant(s), Respondent(s), and witnesses.

Review of Report

- C3.00 When the EQHR receives a Report, the Director will determine whether or not to take action, including whether or not to initiate an investigation.
- C4.00 In determining whether or not to initiate an investigation, the Director is guided by the understanding that the University will usually investigate if the University has jurisdiction to do so, and if there is sufficient information (from the Report and other sources) in order to proceed.
- C5.00 The Director may decline to initiate an investigation in cases where the Director reasonably believes that:
- a. there is insufficient information to proceed with an investigation;
 - b. the passage of time has made investigation impractical;
 - c. it would be more appropriate to proceed under another University policy, process, or collective agreement;
 - d. the allegation has already been adequately addressed by another process;
 - e. the allegation should be put in abeyance pending the resolution of another process (including but not limited to a criminal investigation);

f. the allegation is not consistent with the principles and intent of the Policy; or

g. an investigation is not an appropriate response to the Report.

Director's Decision to Investigate

C6.00 If the Director decides to initiate an investigation of a Report of Sexualized Violence, the Director will appoint one or more investigators. The Director will notify the Complainant and Respondent in writing.

Notification of Director's Decision Not to Investigate

C7.00 If the Director decides not to proceed with initiating an investigation, the Director will notify the Complainant in writing within five (5) University business days of receiving the Complainant's Report, unless the Director considers it reasonable to extend that time limit. The Director will include reasons for making the decision not to investigate.

C8.00 The Complainant may seek a review of the Director's decision not to investigate only where:

(a) relevant information emerges that was not available at the time of the decision; or

(b) the Complainant reasonably believes that the decision to not investigate was biased.

C9.00 The Complainant should submit their request for review to the Equity and Human Rights office. A review of the Director's decision not to initiate an investigation is conducted by a committee of not fewer than three (3) Administrative Authorities appointed by the University Secretary. If the committee decides that one of the conditions in section C8.00 above may exist, the committee will review the Director's decision and issue a ruling.

C10.00 The review must be requested within five (5) University business days of receiving the Director's written reasons, unless the committee considers it reasonable to extend that time limit.

Investigators

C11.00 The University will compile and maintain a roster of external investigators who:

(a) are trained in Trauma-informed investigation;

(b) have the requisite skills, experience, and knowledge of administrative law to conduct an investigation;

(c) understand the University context; and

(d) will adhere to the principles of the Policy.

C12.00 In most cases investigators will be an independent party, external to the University.

C13.00 In all cases, even when investigators have Trauma-informed training, the University will provide and require training on Sexualized Violence, this policy and its procedures, and the University context.

- C14.00 Investigators must undergo a conflict of interest check before beginning an investigation.
- C15.00 Investigators will conduct an investigation according to their mandate, and in compliance with the Policy and these procedures.
- C16.00 If the University appoints multiple investigators, the investigators must assign responsibility for fact-finding to one investigator, or else agree to conduct fact-finding by consensus.
- C17.00 Complainants or Respondents may raise reasonable allegations that an investigator is biased. Such allegations must be made in a timely manner and no later than five (5) University business days following receipt of notice from the Director that the investigator has been appointed.

Investigation

- C18.00 The Director will provide the investigator with a mandate. Where the Director is of the opinion that a Respondent may also have engaged in behaviour that violates another University policy, the investigator may be asked to reach findings under that policy as part of their mandate.
- C19.00 If appropriate for the circumstances, a Respondent's conduct may also be investigated under other University policies and/or collective agreements. Investigations under this Policy will respect a Respondent's rights under other policies or collective agreements. In cases where more than one policy or process may apply, the Director will consult with General Counsel, and others as appropriate, to determine jurisdiction, and will work with appropriate offices to co-investigate if appropriate.
- C20.00 The University recognizes that participating in an investigation process may be difficult. EQHR will work with participants in an investigation and with on- and off-campus supports to address plans for well-being.

Timeline for Investigation

- C21.00 Normally an investigator will complete their report ("Investigator's Report") and submit it to the Director within 90 days of being appointed.

Notice to Respondent

- C22.00 After the decision to investigate a Report has been made, the Respondent will receive written notice from EQHR sufficient to allow the Respondent to understand the details of the Report.

Process Explained to Participants

- C23.00 The implications of initiating, and participating in, an investigation will be explained to Complainants and witnesses so that they may make informed decisions.
- C24.00 The Complainant and the Respondent will be given an opportunity to be informed about the investigation and resolution process and potential outcomes, and to have any procedural questions answered. The Complainant and Respondent will each be asked to sign a written acknowledgement that their rights have been explained to them and that they understand the process.

Choice to Participate

- C25.00 The Complainant may choose whether or not to participate in these processes, though a decision not to participate may impact the investigation, Interim Measures, and final resolution.

C26.00 The Respondent may choose whether or not to participate in these processes, but is encouraged to provide all relevant information and materials that will support their position.

C27.00 Anyone has the right to decline to participate in the investigation; however, the investigator may proceed to complete the investigation without that individual's participation.

Right to Support

C28.00 At any process (e.g., investigation interview, meeting with EQHR) conducted under these procedures, any participant in an investigation may bring a support person of their choice, who may be internal or external to the University. A support person is separate from a union or legal representative (see C34.00).

C29.00 A person who is a witness to the reported incident cannot be a support person to the Complainant, Respondent, or to any other participant in an investigation.

C30.00 A support person's role is to provide emotional, spiritual, and/or cultural support.

C31.00 A support person may not act instead of a Complainant, Respondent, or witness. Information must come directly from the Complainant, Respondent, or witness (unless the investigator decides otherwise).

C32.00 A support person must agree in writing to maintain confidentiality accordance with the Policy and these procedures.

C33.00 To ensure equitable access to the investigation process, individuals who require accommodation in order to fully participate in the investigation should notify the Director to discuss their needs.

Right to Representation

C34.00 At any process (e.g., investigation interview, meeting with EQHR) conducted under these procedures, any participant in an investigation may be represented by their union or their legal counsel (at their own cost). A union or legal representative is separate from a support person (see C28.00).

C35.00 If an individual intends to be represented by legal counsel, they must provide the Director or the investigator with a minimum of three (3) University business days' notice in advance of any interview or meeting.

Information Gathering

C36.00 The investigator will give all participants in the investigation the opportunity to provide information relating to the Report.

C37.00 The investigator may interview witnesses at the investigator's discretion, including witnesses suggested by a Complainant or Respondent.

C38.00 The investigator may ask questions about the incident(s) that are the subject of the Report but will not normally ask questions about the Complainant's past sexual history.

Opportunity to Test Information

C39.00 The Complainant and Respondent will not be required to meet with the other. There is no general right to cross-examination. However, the Respondent will be given an appropriate opportunity to test the relevant information (see section C40.00 below), keeping in mind the nature of the allegations, any conflicts in the information, and the importance of ensuring the safety and security of the Complainant and witnesses.

C40.00 An investigation under these procedures is not an adversarial process and the investigator must ensure that it is conducted in a manner that is not aggressive or confrontational. The investigator may disallow any question that is not necessary to ensure a fair process.

Interim Summary of Information

C41.00 Once the investigator has concluded the initial information collection stage of the investigation, and has considered all statements and documents provided, the investigator will create an interim summary of information collected. This will include:

- (a) summaries of interview statements from parties and witnesses; and
- (b) other information gathered during the investigation.

The investigator will provide the interim summary of information to the Complainant and the Respondent, and each will be given an opportunity to respond.

C42.00 Upon receiving the interim summary, the Complainant may choose to respond by submitting written comments to the investigator regarding the interim summary of information. The Complainant may also provide comments that address the impact of the harm caused by the Sexualized Violence incident.

C43.00 Upon receiving the interim summary, the Respondent may choose to respond by submitting written comments to the investigator regarding the interim summary of information or may seek an opportunity to test the information contained in the interim summary.

C44.00 If a party does not respond to the investigator within ten (10) University business days of receiving the interim summary then, unless the investigator decides that it is reasonable to extend this timeline, the investigator may proceed to complete the investigation without that party's response.

C45.00 If a party does provide a response to the interim summary of information, the investigator may decide it is necessary to seek further input from the parties in accordance with principles of procedural fairness.

Decision and Investigator's Findings

C46.00 After concluding their investigation, the investigator will determine whether the Sexualized Violence Prevention and Response Policy has been violated.

C47.00 The investigator will make their findings using the balance of probabilities standard of proof. This means that the information must show that it is more likely than not that the Respondent violated the Policy.

C48.00 If, as directed under section C18.00, the investigator considered whether Respondent may also have engaged in behaviour that violates another University policy, the investigator may be asked to reach findings under that policy.

C49.00 In making a finding, it is expected that the investigator will review and consider all relevant facts and information including but not limited to the Complainant's Report and any response to it, written submissions or information provided by a party, notes from a meeting with a party or a witness.

C50.00 The investigator will prepare the investigation findings in writing ("Investigator's Report"), which will include:

- (a) the information that the investigator considered relevant to their determination;
- (b) any findings of credibility;
- (c) any findings of fact relevant to their determination;
- (d) the investigator's findings as to any policy violations, responding to each element of the Complainant's Report, or to requests of the Director under C18.00; and
- (e) reasons for the investigator's findings.

C51.00 The investigator may conclude that:

- (a) the information does not show, on a balance of probabilities, that the Respondent violated the Policy;
- (b) the information shows, on a balance of probabilities, that the Respondent's conduct constituted Sexualized Violence or Sexual Misconduct, and the Respondent thereby violated the Policy; or
- (c) based on the information assessed, a determination that the Policy was violated could not be reached.

C52.00 The Director will provide the Investigator's Report to the Complainant and the Respondent within five (5) University business days of its receipt. Under certain circumstances, the University may redact information in response to health or safety concerns expressed by participants in the investigation.

C53.00 If the investigation finds one or more policy violations, the Administrative Authority will determine sanctions, in accordance with any applicable collective agreement.

Confidentiality and Privacy

C54.00 The Statement on Confidentiality and Privacy referred to in section 25 of the Policy and appended to it as Appendix E applies to these procedures.

APPENDIX D

Sanctions and Appeal Procedures Where the Respondent is a Student

Procedural Authority: President
Procedural Officer: University Secretary
Parent Policy: [Sexualized Violence Prevention and Response Policy \(GV0245\)](#)

Effective Date: January 2021
Supersedes:
Last Editorial Change:

Purpose

D1.00 These procedures describe the process that the University will follow to adjudicate allegations that a Student has violated the Sexualized Violence Prevention and Response Policy (“the Policy”). These procedures also describe how the University will impose sanctions in such cases, and the appeal process.

Definitions

D2.00 The definitions in the Policy apply to these procedures. In addition, the following definitions apply:

“the Associate Vice-President Student Affairs” also includes their delegate.”

“Administrative Authority” means the Office of Student Life.”

Scope

D3.00 These procedures apply to adjudication, sanctions, and appeals where the Respondent is a Student. If a Student Respondent has multiple roles at the University, then these procedures will apply with such changes as the Director in consultation with a Response Coordination Team (see Policy, section 24) as necessary, determines are appropriate under the circumstances.

Sanctions

D4.00 The Administrative Authority may impose sanctions up to, but not including, temporary or permanent suspension from the University. If the Administrative Authority determines that suspension may be an appropriate sanction, they will refer the matter to the President to decide sanctions. If the President subsequently decides that a lesser sanction is appropriate, the President may refer the matter back to the OSL with direction.

D5.00 No aspect of these procedures can limit the President’s authority to deal summarily with any matter of student discipline, or to suspend a Student, a member of the teaching or administrative staff, or any officer or employee of the University.

D6.00 The President or Administrative Authority who makes the sanctioning decision (the “decision maker”) will consider all relevant factors including but not limited to the nature of the harm; the Complainant’s statement regarding the impact of the harm; and the interests of the University Community. A Respondent’s willingness to participate and take responsibility for their actions may have a mitigating effect on the sanction imposed.

D7.00 Sanctions may include but are not limited to one or more of the following:

Sanction Examples	
Type	Description
Written Warning or Reprimand	A letter from the University that provides details on the policy violation and a warning to the Respondent that an additional violation will result in a more severe sanction(s).
No-Contact Directive	A directive prohibiting a person from contacting (whether face-to-face, electronically, through a third party, or otherwise), and from being in the same area as, a specified individual. This may involve a restriction from entering all or part of University premises at specified times.
Behavioural Contract	An agreement specifying the University's behavioural expectations of the Respondent, which may include conditions for continued participation in University activities or continued access to University property.
Written Apology or Participation in an Alternative Dispute Resolution Process	Respondent provides a written apology to a member of the University Community, a third party, or other individual(s) affected by the Respondent's conduct. Respondent participates in an alternative dispute resolution process such as conflict coaching, facilitated dialogue, restorative justice, or mediation.
Education/Training or Project	Respondent completes a specified education/training program (such as Consent training), or completes an assignment (such as a research or reflection paper).
Referral	Respondent is referred to appropriate community resources.
Community Service	Respondent completes a designated number of hours of volunteer service within the University or in the broader community.
Suspension or Denial of Specified University Privileges	Suspension or denial of specified University privileges for a defined period of time.
Residence Relocation	A Student Respondent is required to vacate their current University residence and relocate to other on-campus housing.
Eviction from Residence	Loss of the privilege of living in any University housing or visiting the Residence complex at any time. Eviction may be permanent, or a Student Respondent may be permitted to re-apply to live in Residence after a specified period of time and/or after specific conditions have been met.
Time-Limited Suspension	Loss of academic or other University privileges, which may include a restriction on entering all or segments of University property, for a specified period of time.

Permanent Suspension	Permanent loss of academic or other University privileges, which may include a restriction on entering all or segments of University property.
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D8.00 Suspensions (permanent or time-limited) will be documented on a Student’s transcript for the duration of the suspension.

D9.00 If the decision maker decides that a sanction (which does not include a suspension from the University) may be appropriate, the decision maker will inform the Respondent that a sanction is being considered and will provide the Respondent with five (5) University business days to make submission on the appropriate sanction.

D10.00 After deciding on the sanction, the decision maker will provide the Respondent with the decision, which will include the investigator’s findings and the decision maker’s sanctioning decision. The decision maker will set out their decision, and the reasons for it, in writing. The written reasons will include a summary of the information relied upon in making the decision.

D11.00 If the President decides that an appropriate sanction may include suspension, the President will inform the Respondent that a sanction including suspension is being considered and provide the Respondent with five (5) University business days to make submissions on the appropriate sanction before the President makes the sanctioning decision. After deciding sanctions, the President will provide the Respondent with the sanctioning decision and reasons.

D12.00 In all cases, after the sanctioning decision has been made, the Complainant will be informed about sanctions that directly affect the Complainant’s health or safety (see the Statement on Confidentiality and Privacy appended to the Sexualized Violence Prevention and Response Policy).

D13.00 If the President decides to suspend a Student, the President (or designate) will inform:

- (a) Campus Security;
- (b) the Associate Vice-President Student Affairs;
- (c) the Office of the Registrar;
- (d) the Dean of the Student’s Faculty; and
- (e) the Senate Committee on Appeals.

D14.00 If a sanction includes temporary suspension from the University, the University may request additional information from the Respondent prior to permitting a Respondent to return. This information will help the University to foster a safe learning, living, and working environment, and to determine whether the University can uphold conditions from any applicable criminal or civil proceedings.

D15.00 If a sanction includes restricting or revoking a Respondent’s access to the University, the University may impose re-entry conditions as appropriate prior to restoring the Respondent’s access.

D16.00 Failure to comply with a sanction may result in the imposition of further sanctions, which may include restricting a Student’s access to programs, services, or locations on campus, and/or placing an administrative hold on a Student’s account preventing the Student from registering for classes.

Appeals

D17.00 A Respondent who wishes to appeal their sanction, or a decision that led to their sanction, must submit their appeal to the Equity and Human Rights office, who will direct it to the appropriate appeal body. A Respondent must submit their appeal within ten (10) University business days of receiving notice of the decision and reasons (or within two months if the Respondent has been suspended). An extension of time to submit an appeal may be granted by the appeal body in exceptional circumstances.

D18.00 Appeals of the President's decision to suspend a Student from the University are heard by the Senate Committee on Appeals.

D19.00 Appeals of an Administrative Authority's decision under these procedures are heard by the Associate Vice-President Student Affairs (for credit students) or Dean of Continuing Studies (for non-credit students) ("Appellate Authority").

D20.00 Any sanctions will remain in force until the appeal is decided.

D21.00 An appeal under these procedures is a pure appeal only, not a re-hearing. The appeal body will review the information available to the decision maker, but will not hear new information (e.g. new witness statements).

Participation in a Student Appeal

D22.00 Participation in an appeal process is voluntary; however, the choice not to participate may impact the process and the outcome of the appeal.

D23.00 No individual who has a direct interest or prior involvement in the Report, investigation, decision, or conduct under appeal will hear an appeal of a Sexualized Violence decision. Individuals hearing the appeal or representing parties in the appeal must disclose any actual or perceived conflicts of interest as soon as possible before the start of the appeal process.

D24.00 The University will provide training on myths and stereotypes about Sexualized Violence (such as myths about relationship status, dress, prior sexual history, lack of resistance, delayed disclosure, demeanor while giving testimony, or participation in counselling or therapy), and on Trauma-informed responses, to all individuals who will hear appeals under these procedures. No individual who has not received this training will hear an appeal.

Appeal Procedures Where a Suspension was not Imposed

D25.00 A Respondent may appeal the University's handling of an investigation, or a sanction other than suspension, when (a) and/or (b) of the following applies:

- (a) there was a serious procedural error, which prejudiced one of the parties or may have substantially affected the final decision; or
- (b) the sanction was unreasonable or unsupportable and will have the effect of deregistration, removal or restriction from campus, or suspension.

D26.00 The Appellate Authority may summarily dismiss an appeal that, in their judgment, does not raise a valid ground for an appeal.

D27.00 A Student who wishes to appeal must first file a written statement of appeal with the Equity and Human Rights office that includes:

- (a) a statement of the grounds for appeal;
- (b) a statement of facts relevant to the grounds for appeal;
- (c) a statement of the remedy or relief sought; and copies of relevant documents that support the Student's appeal.

D28.00 The Appellate Authority will review the written statement of appeal and all other material submitted and will determine if there are sufficient grounds to hear the appeal.

D29.00 The Appellate Authority will normally decide an appeal on the basis of written materials only. However, the Appellate Authority may exercise their discretion to convene a meeting with the Student and the Administrative Authority, if either of them requests it.

D30.00 If the Appellate Authority decides to convene a meeting, they shall provide the Student with at least five (5) University business days notice of the time of the meeting. The Student may request that the meeting be rescheduled within reasonable timeframes and under reasonable circumstances.

D31.00 The Student may be accompanied by a support person (see A9.00). Where the Student intends to be represented by legal counsel, the Student must provide the Appellate Authority with a minimum of three (3) University business days notice in advance of the meeting. The Appellate Authority may request that University legal counsel be present to observe or provide advice as required.

D32.00 The Appellate Authority may request that other individuals attend the meeting as required.

D33.00 The Appellate Authority will review relevant information and decide an appeal normally within fifteen (15) University business days after receiving all written submissions or the date of a meeting convened under section D29.00, whichever is later.

D34.00 The Appellate Authority may, after reviewing the relevant information:

- (a) uphold the original decision and/or sanction(s);
- (b) reverse the decision and/or sanction(s);
- (c) modify the sanction(s); or
- (d) determine that a procedural error occurred and refer the matter back to the EQHR for re-investigation or referral to a separate investigative process (e.g. under a collective agreement).

D35.00 The Appellate Authority's decision is final. The Equity and Human Rights office will communicate this decision to the appellant in writing within five (5) University business days of the decision being made. The Equity and Human Rights office will also notify the Complainant of the outcome of the appeal, and any changes in sanctions that directly affect the Complainant's health and/or safety.

Senate Appeal Procedures

D36.00 The Senate Committee on Appeals conducts appeals according to its own Terms of Reference and Procedural Guidelines. Except where these procedures state otherwise, appeal hearings will follow the Senate Committee on Appeals hearing procedures, including the grounds for appeal.

D37.00 The appellant, the University, and any other parties involved in an appeal have the right to retain counsel or other advisors to represent them, at their own expense. The Senate Committee on Appeals may also retain counsel. Notice of counsel's or advisor's names will be provided to all other

parties and to the Senate Committee on Appeals at least three (3) University business days before the hearing date, unless the Senate Committee on Appeals allows otherwise.

D38.00 The Senate Committee on Appeals is not bound by strict legal procedures nor strict rules of evidence. It will proceed fairly in the disposition of the appeal, ensuring that all parties are:

- (a) aware of the information to be considered;
- (b) provided copies of all relevant documents to be considered by the Senate Committee on Appeals; and
- (c) given an opportunity to be heard during the process.

D39.00 The Senate Committee on Appeals will consider all relevant information and will apply the balance of probabilities standard of proof.

Senate Appeal Decision

D40.00 After an appeal hearing concludes, the Senate Committee on Appeals will render a decision. Their decision will be in writing, and will include written reasons setting out the basis for their decision. The Equity and Human Rights office will provide the Senate Committee on Appeals' reasons to the appellant. The Equity and Human Rights office will also notify the Complainant of the outcome of the appeal, and any changes in sanctions that directly affect the Complainant's health and/or safety. The Senate Committee on Appeals' decision is final.

D41.00 The Senate Committee on Appeals does not have the authority to make any order for payment of costs.

APPENDIX E

Statement on Confidentiality and Privacy

Procedural Authority: President
Procedural Officer: University Secretary
Parent Policy: [Sexualized Violence Prevention and Response Policy \(GV0245\)](#)

Effective Date: January 2021
Supersedes: New
Last Editorial Change:

E1.00 This statement on Confidentiality and Privacy applies to the Sexualized Violence Prevention and Response Policy (“the Policy”) and to its associated procedures. This statement elaborates on section 25 of the Policy.

E2.00 Confidentiality is an important part of fostering an environment where individuals feel safe disclosing incidents of Sexualized Violence and seeking support. The University respects the privacy of all members of the University Community. Personal information received by the University will be kept confidential subject to limitations outlined in this Appendix.

E3.00 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.

E4.00 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.

E5.00 For the purposes of this statement on confidentiality and privacy and in accordance FIPPA, “disclose” means to transmit, provide, or make available personal information to someone other than a University employee who requires the information in the performance of their duties.

Collection of Personal Information

E6.00 In administering this policy and its associated procedures, the University collects information for the purposes of:

- (a) ensuring the integrity and fairness of the process;
- (b) providing appropriate information to the Complainant and the Respondent;
- (c) conducting a proceeding or investigation that could lead to a sanction; and
- (d) statistical data collection and reporting

Use and Disclosure of Personal Information

E7.00 FIPPA restricts the kinds of information that the University is permitted to share with the Complainant, the Respondent, and the public. FIPPA allows the University to use or disclose personal information where:

- (a) it is authorized by the person the information is about;
- (b) the University determines compelling circumstances exist that affect any University Community member's health or safety as authorized by the University's General Counsel (or delegate);
- (c) it is authorized or required by a law or University policy; for example, an incident involving a minor, occupational health and safety legislation, and human rights legislation;
- (d) it is for the purpose of preparing or obtaining legal advice for the University;
- (e) it complies with a subpoena, a warrant, or an order issued by a court, person, or body in Canada with jurisdiction to compel the production of information;
- (f) the University uses or discloses the information for the purpose for which the information was obtained or compiled, or a consistent purpose (for example, where it is necessary to fulfill the University's duty of procedural fairness or where necessary for the conduct of the investigation);
- (g) a University employee who needs the information to perform their employment duties;
- (h) the information is disclosed to a law enforcement agency in Canada to assist in a specific investigation;
- (i) the information is being disclosed to the Complainant, the Respondent, or another person, under conditions consistent with section E10.00; or
- (j) for public comment under section E17.00.

E8.00 Should the University be compelled to disclose confidential information, Survivors will be informed to the extent permitted or compatible with the purpose of the demand for information.

E9.00 Should the University be compelled to disclose confidential information, Respondents will be informed to the extent permitted or compatible with the purpose of the demand for information.

Respect for Privacy

E10.00 In some circumstances, University faculty, librarians, or staff who receive a Disclosure or Report of Sexualized Violence or who are involved in addressing or investigating it must disclose it without the consent of the person from whom the information was received (see Policy, section 16.6). Otherwise, University faculty, librarians, or staff who receive a Disclosure or a Report of Sexualized Violence or who are involved in addressing or investigating it must:

- (a) protect personal information from disclosure and maintain confidentiality;
- (b) collect the minimum amount of information about individuals, ensuring it relates directly to and is necessary for responding to a Disclosure or Report

- (c) use the information about individuals only for the purposes of, or for purposes consistent with, responding to a Disclosure or Report, seeking advice from appropriate University resources, investigating, or taking disciplinary action;
- (d) limit disclosure of information about individuals to those within the University who need it to perform their duties as a faculty member, librarian, or staff member; and
- (e) disclose personal information in all other circumstances only as permitted under FIPPA.

E11.00 Information may be used by University faculty, librarians, and staff only if necessary for the performance of their duties, such as to seek appropriate advice from another employee, to facilitate support or Interim Measures, to respond to a Report, implement this policy, or take corrective or disciplinary action resulting from these processes.

Disclosure to Ensure Fair Investigation and Related Processes

E12.00 The University may disclose information in order to ensure that Reporting and investigation processes are fairly conducted, in accordance with the following principles:

- (a) the Respondent has the right to know the identity of the person who made the Report and the material details of the allegation;
- (b) during the investigation, the Complainant and the Respondent will each receive a summary of the information collected;
- (c) the University will disclose the investigator's findings to the Complainant and the Respondent but reserves the right to withhold third party personal information if disclosing it would threaten anyone's safety or mental or physical health or interfere with public safety.
- (d) the Complainant has the right to know and will be informed of the outcome of the investigation, but the Complainant is not entitled to know whether the Respondent was disciplined, or which sanctions were imposed. Under FIPPA, any discipline or sanction is the Respondent's personal information and only the Respondent may decide to release it.
- (e) The Complainant will be informed of any restrictions that the University imposes on the Respondent if those restrictions directly affect the Complainant's health and/or safety.
- (f) Witnesses will receive their own statements but will not receive any other information unless required to give effect to this policy, or where it is necessary for health or safety reasons.
- (g) University employees are bound by FIPPA. Throughout an investigations, adjudication or appeal process, University employees will only be given the information that is necessary to perform their duties and must treat such information as highly confidential.
- (h) Persons other than Complainants, Respondents, and witnesses do not normally have the right to know any confidential information except to the extent required to give effect to this policy or where it is necessary for health or safety reasons.

Witnesses

E13.00 Witnesses must keep any information that they learn solely as a result of participating in the Reporting or investigation process strictly confidential.

Sharing information

E14.00 Complainants, Respondents, and witnesses are free speak about their own experiences, but must not disclose information that they learn solely as a result of a Disclosure, a Voluntary Resolution Process, a Report, or an investigation, because this is personal information that belongs to another person. Contact EQHR for guidance about confidentiality and privacy.

E15.00 University Community members must not disclose information that they learn solely as a result of a Disclosure, a Voluntary Resolution Process, a Report, or an investigation, because this is personal information that belongs to another person. Contact EQHR for guidance about confidentiality and privacy.

E16.00 Individuals are advised that, should they choose to share information about a Disclosure, a Voluntary Resolution Process, a Report, or an investigation (including on social or other electronic media), they may compromise the process or the investigation or be putting themselves at risk of civil lawsuits by those who believe they have been defamed or have had their privacy rights violated. Individuals should exercise care and judgment when deciding to share information or make public statements and should seek legal or other advice if unsure.

E17.00 Any public statements made by the University about a Disclosure or Report, including campus safety bulletins and statements to the media, will be Trauma-informed, Survivor-centred, and otherwise consistent with the principles of this policy, and will not disclose the personal information of the Survivor, the Complainant, or the Respondent, without the consent of that person. Notwithstanding the above, the University reserves the right to correct misleading or inaccurate public information.

APPENDIX F

Sexualized Violence – Awareness and Education

Procedural Authority: President
Procedural Officer: University Secretary
Parent Policy: [Sexualized Violence Prevention and Response Policy \(GV0245\)](#)

Effective Date: January 2021
Supersedes: New
Last Editorial Change:

Definitions

F1.00 The definitions in the Policy apply to these procedures.

Prevention and Education Committees

F2.00 The University will create a Sexualized Violence Education and Awareness Advisory Committee and invite student, staff, and faculty representatives to participate. The purpose of the committee is to support the vision and shape the direction of Sexualized Violence prevention and response at the University by serving as a key consultation point for major Sexualized Violence initiatives and programs that relate to students, staff, and faculty.

F3.00 The University will support and participate in a student-focused Sexualized Violence Special Events Committee of which the focus is to work collaboratively to prevent Sexualized Violence at the University of Victoria. The committee actively works to raise awareness among the student population specifically. It provides them with information and tools to support them in preventing the occurrence of Sexualized Violence, and to know what to do, and where to go, when it does occur.

Awareness Raising

F4.00 The Sexualized Violence Resource Office will create and disseminate accessible information about the policy, the support and response options as well as training opportunities through information guides and online resources.

F5.00 The Sexualized Violence Resource Office will create and maintain a Sexualized Violence Prevention Website that will provide information about the Policy as well as support and response options and an up to date list of events, campaigns, and training opportunities.

Prevention Programming

F6.00 Sexualized Violence education and prevention work is a shared responsibility and therefore various units, offices, and departments may initiate Sexualized Violence prevention efforts in various formats (e.g., lectures, online learning modules, handouts, workshops, etc.). Any unit, office, or department wishing to create or implement training or education regarding Sexualized Violence should consult with the Sexualized Violence Resource Office for information, advice, and resources and to ensure all University committee members are drawing on consistent

principles, definitions, and approaches to the work of preventing and responding to Sexualized Violence.

- F7.00 The Sexualized Violence Resource Office will both develop and collaborate in the design of sexualized violence prevention and response education. This will include tailored programming for specific populations. An up to date list of current education can be accessed through the Sexualized Violence Prevention website (www.uvic.ca/svp).

APPENDIX G

Sexualized Violence – Support Resources

Procedural Authority: President
Procedural Officer: University Secretary
Parent Policy: [Sexualized Violence Prevention and Response Policy \(GV0245\)](#)

Effective Date: January 2021
Supersedes: New
Last Editorial Change:

SUPPORT RESOURCES FOR THOSE IMPACTED BY SEXUALIZED VIOLENCE

If you or someone you know has experienced Sexualized Violence and there is an immediate health or safety concern, call 9-1-1. If the immediate health or safety concern happened on campus, you should also call Campus Security at [250-721-7599](tel:250-721-7599); they are available 24/7 for information and options for support.

UVic provides a variety of different information and support options for Those Impacted by Sexualized Violence. We recommend that if you are impacted, you contact the Sexualized Violence Resource Office in Equity and Human Rights (EQHR). Their services are for all student, staff and faculty members at UVic.

The Sexualized Violence Resource Office:

- provides information about support options on- and off- campus as well as direct referrals
- provides information and advice about options under the Sexualized Violence Prevention and Response Policy (GV0245)
- receives Disclosures
- coordinates on- and off- campus supports
- is the place on campus to file a Report that could lead to an investigation under the Sexualized Violence Prevention and Response Policy (GV0245)
- coordinates education and prevention efforts on campus for students, faculty and staff
- creates and delivers prevention workshops and presentations

ON-CAMPUS

Office	Location	Contact
Sexualized Violence Resource Office	Sedgewick C119, located in Equity and Human Rights office	250-721-8021 www.uvic.ca/svp

Anti Violence Project	Virtual	778-400-5007 www.antiviolenceproject.org/
Centre for Accessible Learning (CAL)	Campus Services Building, Room 150	250-472-4947 www.uvic.ca/services/cal/
Counselling Services	Health and Wellness Building	250-721-8341 www.uvic.ca/services/counselling/
Equity and Human Rights Office	Sedgewick Building C-Wing, Room C115	250-721-8786 www.uvic.ca/equity/
Office of Indigenous Academic & Community Engagement	First Peoples House, 140	250-472-4913 www.uvic.ca/services/indigenous/house/
Health Services	Health and Wellness Building	250-721-8492 www.uvic.ca/services/health/
International Student Services (ISS)	University Centre, Room B272	250-721-6361 www.uvic.ca/international/index.php
Multifaith Services	Health and Wellness Building	250-721-8338 www.uvic.ca/multifaith/
Ombudsperson	Student Union Building B205	250-721-8357 www.uvicombudsperson.ca
Office of Student Life (OSL)	University Centre, Room B202	250-472-5617 www.uvic.ca/services/studentlife/

OFF-CAMPUS

Service	Location	Contact
Employee and Family Assistance Program	Virtual	1-844-880-9142 (24/7) www.efap.ca/
Greater Victoria Citizens' Counselling Centre	941 Kings Road, Victoria, BC, V8T 1W7	250-384-9934 www.citizenscounselling.com/

Island Sexual Health	101-3960 Quadra Street Victoria V8X 4A3	250-592-3479 https://www.islandsexualhealth.org/
KUU-US Crisis Line Society	Virtual	1-800-588-8717 (24/7) www.kuu-uscrisisline.ca/
Men's Therapy Centre	102-1022 Pandora Ave., Victoria, BC V8V 3P5	250-381-6367 Toll-free: 1-866-793-6367 www.menstrauma.com/
Trans Lifeline	Virtual	1-877-330-6366 https://translifeline.org/
Vancouver Island Crisis Society	Virtual	1-888-494-3888 (24/7) Crisis Text-Message: 250-800-3806 www.vicrisis.ca/
VictimLink	Virtual	1-800-563-0808 https://www2.gov.bc.ca/gov/
Victoria Sexual Assault Centre	3060 Cedar Hill Road #201, Victoria, BC V8T 3J5	250-383-3232 (M-F reg. office hours) https://vsac.ca/