Retaliation Policy Reporting
(Policy SC18)

2021-2023 Annual Report

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BACKGROUND

Retaliation Policy

UBC’s Retaliation Policy (SC18) requires the VPHR and the VPS to prepare a report each year regarding the complaints of retaliation, the investigation of such complaints and the actions taken following any findings of retaliation. Since the policy was implemented in April 2020, this is the second annual report produced.

In order for the VPHR and VPS to produce the annual report, the policy requires Designated Recipients to submit details of any reported retaliation complaints and details regarding subsequent investigations and the findings of those investigations. As part of the reporting process, the Offices of the VPHR and VPS reached out to the Designated Recipients in July and August 2023 as a reminder of their reporting requirements and then consolidated the information and anonymized it.

Reporting

Given that the University did not report on this policy during COVID, this report includes the summary from fiscal year 2021 to 2022, along with the reporting from 2022 to 2023. In addition, since the IO also investigates allegations of Retaliation, the annual reporting is being consolidated in the IO annual report:

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th>Number of Reports of Retaliation Received (9.2.1)</th>
<th>Number of Instances of Anticipatory Protective Measures taken (9.2.2)</th>
<th>Number of Investigations of the alleged retaliation (9.2.3)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2021-2022</td>
<td>3</td>
<td>2</td>
<td>3</td>
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<tr>
<td>2022-2023</td>
<td>5</td>
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<td>3</td>
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Further to policy requirement 9.2.4, in fiscal 2021-2022 there were no findings of retaliation after the investigations were completed. However, in 2022-2023, there were findings of retaliation as follows:

1. In response to two RES complaints, a Respondent filed counter-complaints against two Disclosers that were retaliatory in nature. In response, the University imposed measures to limit the interactions between the Respondent and the two Disclosers and issued a written warning. The Respondent was required to not engage with the Disclosers and any concerns would be vetted through an alternate individual for a period of two years.

2. In response to a sexual misconduct report, the Respondent attempted to dissuade a witness from participating in the investigation and made negative statements about the Discloser. In response, the Respondent was directed not to contact the Discloser or witnesses for the duration of the investigation. This file remains in progress.

Per the requirements of the policy, this annual report is being posted on the HR website.