

LAURENTIAN UNIVERSITY OF SUDBURY

Policy on Response and Prevention of Sexual Violence

Office of Administration	President and Vice-Chancellor
Approval Authority	Board of Governors
Approval Date	June 16, 2023
Next Review	June 2026
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1. PURPOSE

1.1. The overarching purposes of this Policy on Response and Prevention of Sexual Violence (the ^W } o] Ç_• Œ š} Œ ((]Œu > μŒ vš] v hv]À Œ•]šÇ }(^μ μŒÇ[• ~š safe and healthy campus for study, for campus community life and for work life for members of the University Community and its commitment to provide support to all members of the University Community affected by Sexual Violence.

Universities Act, 1990 the Occupational Health and Safety Act, 1990 and the Ontario Human Rights Code, 1990th respect to sexual violence, sexual misconduct and sexual harassment.

- 2. SCOPE
- 2.1. This Policy addresses Sexual Violence involving all members of the University community, whether they are in the hv]À Œ•]šÇ[• o Œv]vP }Œ Á}ŒI vÀ]Œ}vu všU }v }Œ }((social or other electronic media. The learning and working environment encompasses any setting where University learning, working or other activities take place, whether in the classroom, lab, in other teaching, research, study or office settings, including the online environment, in co-op or practicum placements, in a University student residence or in connection with clubs or sport teams.

3. COMPANION POLICIES

- 3.1. This Policy is part of a tetralogy of University policies that support learning and working places free from discrimination, harassment, sexual harassment, bullying, violence and sexual violence. Including:
 - 3.1.1. Laurentian University Code of Student Rights and Responsibilities;
 - 3.1.2. Laurentian University Policy and Program on a Respectful Workplace and Learning Environment; and
 - 3.1.3. Laurentian University Policy and Program on Workplace Violence Prevention.
- 3.2. This Policy does not replace or supersede existing collective agreement provisions relevant to addressing Sexual Violence except as set out in section 11.10.

4. INTERPRETATION

- 4.1. This Policy must be read and interpreted within the context of the overarching purposes referred to in section 1.
- 4.2. The following definitions are intended to assist in the interpretation of this Policy as well as other related University policies mentioned in paragraph 3.1.

5. DEFINITIONS

- 5.1. ^ }u‰o]vvš_ OE (OE•š} ‰ OE•}vÁZ} (]o• }u‰o]všμv OEšZ]•
- 5.2. ^ }u‰o]vš_ Œ (Œ•š} •μ u]šš]vP ÁŒ]šš v }u‰o]vš ~ Z •}oµ incident of Sexual Violence under this Policy for the purposes of initiating a process under this Policy.
- 5.3. ^ }v vš_ CE (CE š} v š] À U] Obus šholice Ashodagnešm OEt Coldengage in }v] any sexual activity by a person capable of consenting. These elements of consent must be present. It is not acceptable for a person who is said to have engaged in sexual violence to use their own consumption of alcohol or drugs as an excuse for their mistaken belief that there was consent. For further clarity, consent:
 - 5.3.1. Can be revoked at any time;
 - 5.3.2. Cannot be assumed nor implied;
 - 5.3.3. vv}š P]À v Ç•]o v }OE šZ v }(^v}_V
 - 5.3.4. Cannot be given by an individual who is incapable of consenting due to intoxication by alcohol or drugs;
 - 5.3.5. Cannot be given by an individual who is unconscious or asleep;
 - 5.3.6. Cannot be obtained through threats or coercion;
 - 5.3.7. Cannot be given if the person who is said to have engaged in Sexual Violence has abused a position of trust, power or authority; and
 - 5.3.8. Might not be given properly if an individual has a disability that limits their verbal or physical means of interaction **t** in such instances, it is extremely important to determine how consent will be established.
- 5.4. ^]• o}•μŒ _ Œ (Œ• š} ÁZ v•}u }v]• o}• *š} v}šZ Œ šZ š šZ Ç Violence. A Disclosure could be made to a friend, staff member or faculty member.
- 5.5. **^ Z ‰μošμŒ _ Œ (Œ š } μošμŒ] v Ấrℤc]ic壑, mݤdiảj imagiás**, ảnd •U } **] o** societal institutions implicitly or explicitly condone sexual assault by normalizing or trivializing Sexual Violence and by blaming survivors for their own abuse.
- 5.6. ^Z ‰ } v vš_ CE (CE š } v] v] Àdjm pulainot ha Podjevn en ša dÁ uZhojkeur this Policy.

- 5.7. ^^ ÆVµ] } oo v _ CE (CE š } vÇ Ƶ o š } CE š š CE P š] vP ‰ CE } v | gender expression, whether the act is physical or psychological in nature, that is committed, threatened or šš u‰š P] v•š ‰ CE } v Á]šZ } µš šZ ‰ CE } v [• } v assault, sexual harassment, stalking, indecent exposure, voyeurism, sexual exploitation, distribution of sexual images or video of a community member without their consent, and cyber stalking of a sexual nature and also encompasses the following definitions:
 - 5.7.1. **^^** Æμο •• μοš_ Œ (Œ• š} vÇ šÇ‰ }(Æμο }vš š Á]šZ}μ range from kissing and fondling to intercourse or other sexual acts. Any physical contact of a sexual nature without consent is sexual assault.
 - 5.7.2. ^ AE μ o , CE •• us: v š u v
 - 5.7.2.1. Engaging in a course of vexatious comment or conduct against a person in a workplace, learning environment and/or housing accommodation because of sex, sexual orientation, gender identity or gender expression, where the course of comment or conduct is known or ought reasonably to be known to be unwelcome, (in some cases, one incident could be serious enough to be sexual

- 5.7.3.1.2. The act infringes the right of the student under clause 7 (3) (a) of the **OntarioHuman Rights Code** be free from a sexual solicitation or advance, or;
- 5.7.3.1.3. The act constitutes Sexual Violence and/or Sexual Harassment and/or Sexual Assault as defined in this Policy or contravenes this Policy or any other policy, rule or other requirement of the University respecting sexual relations between Employees and Students, or;
- 5.7.3.1.4. Any conduct by an Employee of the University that infringes the right of the Student under clause 7 (3) (b) of the OntarioHuman Rights Code be free from a reprisal or threat of reprisal for the rejection of a sexual solicitation or advance.

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- 5.9. ^hv]À Œ=u]ıšıçv]šç_ Œ (Œ•š} oo]v]Àġnspipov+thÁsrZtġthZeUÀniversitgÆ oš] including but not limited to:
 - 5.9.1. Students, meaning individuals registered as students at the University, whether full time or part- time, at the undergraduate or graduate level;
 - 5.9.2. Employees, including all unionized and non-unionized academic, and non-academic staff
 A oo šZ}• AZF• o OEÇ]• %] šZOE}µPZ•}µCE }šZ OE = funds, such as grants, research grants and external contracts;
 - 5.9.3. Adjunct, visiting and emeritus professors; post-doctoral or clinical fellows; research trainees;
 - 5.9.4. Contractors, consultants, suppliers or other entities engaged by the University to provide services or goods when on University property or while acting in a capacity defined by their relationship to the University;
 - 5.9.5. Members of the Board of Governors, of the Senate and any of their respective committees, as well as members of any advisory committee formed to help the University achieve its goals;
 - 5.9.6. Employees of employee and student groups when on University property or while acting in a capacity defined by their relationship to the University;
 - 5.9.7. Visitors, including visiting students and volunteers or persons who serve on advisory or other committees.
 - 5.9.8. Volunteers, meaning individuals who voluntarily undertake tasks at the University as directed.

6. STATEMENT OF VALUES AND COMMITMENTS

- 6.1. The University is committed to creating and maintaining an environment where all members of the University Community can study and work free from Sexual Violence.
- 6.2. The University recognizes that Sexual V] **o** v] (μv u vš o ((CE **v**šš v **v**] Å] μ dignity and integrity.
- 6.3. The University seeks to prevent Sexual Violence, including by intervening and speaking out when the University sees it occurring.
- 6.4. The University ensures that all members of the University Community who experience Sexual Violence are supported, treated with compassion and the University will appropriately accommodate their needs. Survivors who Disclose and/or make a Complaint regarding an experience of Sexual Violence can expect to be:
 - 6.4.1. Treated with compassion, dignity, and respect;
 - 6.4.2. Provided with timely safety planning assistance;
 - 6.4.3. Informed about on- and off-campus support services and resources available to them;
 - 6.4.4. Provided with non-judgmental and sympathetic support;
 - 6.4.5. Provided with academic, recreational, employment, and housing accommodations as appropriate, including measures to prevent further unwanted contact with the alleged Respondent if the alleged Respondent is a member of the campus community;
 - 6.4.6. Allowed to determine whether and to whom they wish to Disclose their experience, including:
 - 6.4.6.1. Whether or not to pursue criminal, civil, and/or university avenues of redress;
 - 6.4.6.2. Whether or not to disclose to a support person and seek out personal counselling.
- 6.5. The University addresses acts of Sexual Violence involving members of the University Community fairly and promptly.

dedicated Laurentian University Prevention and Response to Sexual Violence website: <u>https://laurentian.ca/policies-accountability/sexual-violence</u>.

- 7.1.4. The person to whom a Disclosure is made may also be significantly affected by the Disclosure of Sexual Violence and may be in need of support.
- 7.1.5. If an affected member of the University Community or other person requests that the University not act on a Disclosure of Sexual Violence, the University must weigh that

7.4.1.2.

- 8.1.5. General: If an individual has experienced Sexual Violence, options are available that offer Employees and Students an opportunity to choose a course of action that meets their needs. Resolution options fall into three (3) broad categories:
 - 8.1.5.1. Personal Resolution (self-managed or assisted): This can involve steps taken by the Complainant directly if they feel comfortable doing so, or with the assistance of other University personnel e.g. professors, instructors, coaches, managers or supervisors or individuals in authority in their unit, such as their Dean and/or Director.
 - 8.1.5.2. Informal Resolution Process: This refers generally to a process and options other than a Formal Resolution Process and can include mediation, negotiation, facilitation, conflict resolution conferences and other dispute resolution techniques (sem0 g0 G[Dean)3(and/t5) 1 14 Ad6.05liq0..72 q0.w14(4q0.00000912 0 612 792 rel

- 8.1.9.1.3. Proceed on their own with a personal (self-managed or assisted) resolution; or
- 8.1.9.1.4. Take no further action.

8.2. Filing a Complaint

- 8.2.1. The EDHRO is responsible for receiving and handling Complaints of Sexual Violence. Only a Survivor who discloses experiencing Sexual Violence can choose to file a Complaint µv Œ šZ]• W}o] Ç ~šZ ^ }u‰o]v vš_•X
- 8.2.2. A Complaint can be filed with the EDHRO if the individual who is said to have engaged in Sexual Violence is a member of the University Community and was a member of the University Community at the time of the incidents alleged in the Complaint (the ^Z ‰ } v š _ X
- 8.2.3. A Complainant must submit a written complaint setting out the name of the Respondent, the nature and the details of the circumstances, including detailed facts, specific dates and names of potential witnesses (Case Resolution Request Form). The EDHRO will acknowledge receipt of any Complaint received, review it and if necessary, seek

8.3.4. If the EDHRO considers that the conduct complained of does not fall within the

techniques. The parties are not required to attend any face-to-face meetings unless they both consent to do so.

9.4. If the parties are able to reach a resolution, the EDHRO will advise both parties in writing of the resolution and related terms, if appropriate/applicable. In certain cases, a written record of the resolution may be appropriate. A copy of the written resolution will be provided to both parties, and to appropriate University officials on a need to know basis if required to implement the terms of the resolution. If there is a failure to comply with the terms of resolution agreement, the complaint may proceed to the formal process under section 10.

10. FORMAL RESOLUTION PROCESS

10.1.

the Respondent while simultaneously achieving the intended goals of the measures.

10.2.5. An interim measure imposed shall remain in place until a decision is made at the conclusion of an investigation, unless otherwise ordered by the Equity, Diversity and Human Rights Office.

10.3. Notification:

- 10.3.1. Once the Equity, Diversity and Human Rights Office has accepted the Complaint for investigation based on the criteria noted above, it shall:
 - 10.3.1.1. Notify the Respondent in writing that a complaint has been lodged. The Respondent will be provided with a copy or summary of the allegations, identifying the Complainant. The Respondent will also be provided with a copy of the Policy;
 - 10.3.1.2. Where appropriate, inform the relevant Direct Supervisor for each party that a complaint has been filed and an investigation initiated. In addition, where appropriate, the Equity, Diversity and Human Rights Office will also recommend and/or discuss the need for Interim Measures;
 - 10.3.1.3. Inform the relevant Union or Employee Association for each party that a complaint has been filed and an investigation initiated.

- 10.4.4. The Respondent will be ‰Œ}À] Á]šZ •μuu ŒÇ}(šZ }u‰o]v vš[• (this stage of the process.
- 10.5. Investigation Initiation:
 - 10.5.1. Once the Complaint is accepted for investigation, the EDHRO will appoint an investigator, who is impartial and unbiased and who is trained in Sexual Violence investigation techniques, to conduct a fair, thorough and complete investigation of the complaint.
 - 10.5.2. The Complainant or Respondent(s) may challenge the appointment of the investigator on the ground that the proposed investigator has a potential conflict of interest or that having the proposed investigator conduct the investigation raises a reasonable apprehension of bias. The challenge must be submitted in writing to the EDHRO as soon as possible after the potential issue is identified and the Office will make a decision on the challenge within five (5) working days of having received it. That decision will be final.
 - 10.5.3. Once the investigator has been appointed, the EDHRO shall provide all documentation relevant to the Complaint to the investigator. The investigator will then devise a written investigation plan outlining the process to interview the Complainant, the Respondent, and all witnesses whom the investigator determines to have any information relevant to the complaint. In addition, the investigator shall include in the report the names of any potential witnesses that had no relevant information, or were not available to be interviewed. If it appears to the investigator that other persons not named by the parties may have information related to the complaint, every effort will be made to interview those potential witnesses. It may also be necessary to re-interview the parties before issuing the report.
 - 10.5.4. The investigator is solely responsible for determining the scope of the investigation, including which witnesses, if any, are to be interviewed. The investigator shall collect, review, analyze and assess the facts with respect to the allegation(s). The investigator shall be permitted to draw inferences and to assess the credibility of the persons interviewed.
 - 10.5.5. A typical investigation involves, but is not necessarily limited to, the information gathered in the complaint/response process, supplemented by interviews, if necessary, with the Complainant, Respondent and witnesses (in that order) and the review of any applicable documentary, physical, corroborative or contemporaneous or other evidence. Witnesses may include anyone who can provide information, records or details regarding an allegation or the circumstances surrounding a complaint. When material facts are not in dispute, interviewing witnesses may be unnecessary.
 - 10.5.6. There is an obligation on members of the University Community to cooperate in the investigation of a Complaint.
 - 10.5.7. If a Respondent declines to participate in the investigation process, in most cases it will be both possible and appropriate to proceed with an investigation without a statement

(response) or interview of the Respondent.

10.5.8. The investigator shall use best efforts to complete the investigation within forty (40) working days from the time the investigator has been appointed. Where the investigation goes beyond this timeframe, the parties will be advised and will be provided with reasons for the delay.

11. INVESTIGATION RESULTS AND REPORTS

- 11.1. The investigator shall determine on a balance of probabilities whether or not the Respondent has violated this Policy. If appropriate, the investigator shall decide whether or not the complaint was frivolous, vexatious, or made in bad faith. A Complaint may be deemed to be made in bad faith if it is deliberately and maliciously invented in order to damage the reputation of the Respondent. This is not to be confused with a complaint made in good faith that is found without merit. A complaint made in bad faith is a violation of the Policy and the Complainant may be subject to corrective measures/disciplinary action.
- 11.2. The investigator shall prepare a written report summarizing the results of the investigation and š Z] v À • š] P š } Œ [• š Œ ig] tor šh]a] I suXsmidt Zhe v] rivit Àn • esport to the EDHRO.
- 11.3. Within five (5) working days of the conclusion of the investigation and receiving the written report, the EDHRO, after reviewing the report, will submit same to one of the following decision makers as follows, depending on the parties involved in the investigation:
 - 11.3.1. The Associate Vice-President, Human Resources and Organizational Development if it is an employee other than a faculty member; or
 - 11.3.2. The Provost and Vice-President, Academic, if it is a member of faculty; or
 - 11.3.3. The Associate Vice-President, Student Affairs, Registrar and Secretary of Senate, if it is a Student; or
 - 11.3.4. The Vice-President, Finance and Administration if it is an Administrator; or
 - 11.3.5. The President and Vice-Chancellor if it is a Senior Administrator, other than the President and Vice-Chancellor; or
 - 11.3.6. The Chair of the Board of Governors if it is the President and Vice-Chancellor of Laurentian University.
- 11.4. In cases where a conflict of interest or a reasonable apprehension of bias is declared by either one of the parties or by the decision marker, another individual on the above list will be called upon to make the decision.
- 11.5. The EDHRO will prepare an Investigative Report Summary which shall include a summary of the evidence as aggregate information that does not identify individuals. The /vÀ •š]P š]À Z ‰}CEš ^µuu CEÇ •Z œod subject CE the confidentiality provisions set out below. The Investigative Report Summary shall be sent by the EDHRO to the Complainant and Respondent within (5) working days of receipt of the written report from the investigator the parties shall also be informed who has been appointed the decision maker on

their complaint.

11.6. Within fifteen (15) working days of receiving the report from the EDHRO the decision maker who receives the report will decide, except where otherwise noted, in accordance with this Policy and any applicable collective agreements:

towards a Student and the University discharges the Employee for that act or the Employee resigns from their employment, the University shall not subsequently re-employ the Employee.

- 11.10.2.2. If the University determines that it has re-employed an individual contrary to subsection 11.10.2.1, the University shall discharge the Employee and clause 11.10.1. shall apply to the discharge.
- 11.10.3. Agreement
 - 11.10.3.1. Subject to subsection 11.10.4., an agreement between the University and any person, including a collective agreement or an agreement settling existing or contemplated litigation, that is entered into on or after July 1, 2023 OR the day section 3 of Schedule 1 to the

- 11.12. The Complainant and Respondent will be provided an opportunity to make written submissions with respect to the Investigative Report Summary in advance of the meeting with the decision maker.
- 11.13. Following its meeting with the Respondent and/or Complainant, as the case may be, the decision maker will consider the representation of the Respondent and/or Complainant, as the case may be, and their Union or Employee Association, if applicable, prior to making a final decision in regards to corrective measures/disciplinary action.
- 11.14. Within five (5) working days of the meeting noted above, the decision maker shall notify the Respondent and/or Complainant, as the case may be, and Union or Employee Association, if applicable, in writing as to whether corrective measures shall be taken and/or discipline shall be imposed, the nature of the corrective measures/disciplinary action, the reasons for it and the events being relied upon to support it.
- 11.15. The decision maker shall also notify the EDHRO in

- 12.2.2.3. There is new relevant evidence available that was not possible to obtain previously.
- 12.2.3. The other party in the case will be notified that an appeal has been requested, and will

- 13.1. Confidentiality is required in all procedures under this Policy. Because of the particular sensitivity of Sexual Violence and its consequences, confidentiality is of the utmost importance and will be maintained at all times, unless the safety of members of our community are at risk or subject to the disclosure requirements under this policy and/or the Freedom of Information and Protection of Privacy Act990 or any other applicable legislation and/or provisions of applicable collective agreements. Maintaining confidentiality benefits everyone involved in the complaint process. Those making complaints shall not discuss the matter other than with the appropriate parties. Those involved in dealing with the complaints or those who receive a Disclosure and/or report of Sexual Violence will disclose information only where absolutely necessary and the Complainant will be consulted before any disclosure of information is made. The importance of confidentiality will be stressed to all those involved in an investigation and everyone will be strictly required not to discuss the complaint with colleagues.
- 13.2. Confidentiality does not mean anonymity. In the instance of acting on a Complaint, a fundamental principle is that the Respondent must be informed of who has made the allegations, and the specific nature of the allegations, and the relevant evidence in the possession of the University.
- 13.3. In limited situations it may be necessary to convey appropriate information to the administration in order for the University to fulfill its obligation as employer and policy enforcer.
- 13.4. The University will make every reasonable effort to maintain confidentiality when it becomes aware of an incident of Sexual Violence and will limit disclosure of information about individuals to those within the University who need to know for the purposes of, or those consistent with, addressing the situation, investigating or taking corrective action. Under the following circumstances, however, the University might face additional legal obligations and may not be able to guarantee complete confidentiality if:
 - 13.4.1. An individual is at risk of self-harm;
 - 13.4.2. An individual is at risk of harming an identified individual;
 - 13.4.3. Members of the University Community or the broader community may be at risk of harm; and/or
 - 13.4.4. Reporting or investigation is required by law.

14. NOTICE OF COLLECTION OF PERSONAL INFORMATION UNDER THIS POLICY

14.1. Any personal information about an individual collected in respect of this Policy in the course of university business, is pursuant to **The Laurentian University of Sudbury Act, 1960** the information will only be used for the purposes and functions outlined in the policy. If you have any questions about the collection, use, and disclosure of this information please contact the senior administrator responsible for the Policy.

15. POLICY REVIEW, AMENDMENTS AND EXCEPTIONS

- 15.1. The EDHRO is responsible for the review and implementation of this Policy. This Policy will be reviewed at least once every three years.
- 15.2. Revisions to the Policy will be sent for comment to the student associations, unions and employee groups, and any other stakeholder, as determined by the EDHRO, to ensure the provision and consideration of input from a diverse selection of students and employees.
- 15.3. Updates to the following information contained in this Policy do not require approval of the Board of Governors:
 - 15.3.1. The supports and services referred to in paragraph 7.5. of this Policy;
 - 15.3.2. The identity of officials, offices, and departments at the University that provide information about supports, services and accommodation or that receive Disclosures or Complaints.

15.3.3.