



INTERNATIONAL TROPICAL TIMBER COUNCIL

COMMITTEE ON FINANCE AND ADMINISTRATION

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DRAFT POLICY DOCUMENTS

1. ITTO continues to seek ways to strengthen governance and bring ITTO into greater alignment with the accreditation criteria of certain multilateral donor funds. As a recent example, it was observed that the Green Climate Fund had indicated in their accreditation criteria that accredited Organizations should have a policy on combatting fraud and corruption and a policy on receiving complaints. Policies such as code of ethics and anti-harassment policies, which are common in Organizations similar in nature to ITTO are also lacking. Furthermore, a recent Pillar Assessment by the European Union concluded this year indicated that a formal data protection policy should be endorsed by Council to better comply with their latest regulations.
2. The Committee on Finance and Administration may wish to examine these draft policies which were prepared based on examples from UN-based and other intergovernmental organizations and consider whether they are appropriate for the Organization and recommend to the Council to adopt the new policies for the Organization.

POLICY PROHIBITING AND COMBATTING FRAUD AND CORRUPTION

Section 1

Preliminary Provisions

General Introduction

This statement of ITTO's Policy Prohibiting and Combatting Fraud and Corruption affirms ITTO's long-standing zero tolerance for all forms of fraud and corruption, and outlines the steps to be taken in response to good faith reports of possible fraud.

Applicability

Executive Director, Staff and Non-Staff Personnel

1.1 The Executive Director, all staff members and non-staff personnel are required to comply with this Policy.

(a) The "Executive Director" is the chief administrative officer of the Organization appointed by the International Tropical Timber Council in accordance with Article 12 of the International Tropical Timber Agreement, 2006, and is responsible to the Council for the administration and operation of the Agreement.

(b) A "staff member" is any person holding a Letter of Appointment to ITTO signed under the authority of the ITTO Executive Director.

(c) "Non-staff personnel" includes any person who is working with ITTO as a volunteer, under Stand-by Personnel arrangements in emergencies, under a reimbursable loan, internship, through an employment agency, or any similar arrangement; it does not include staff members or individual consultants or contractors.

Vendors (including Consultants) and Executing Agencies

1.2 ITTO individual consultants and contractors are expected to maintain the highest standard of conduct in connection with their engagement with ITTO. A commitment to the highest ethical standards is a major consideration in the selection of individual consultants and contractors at ITTO.

1.3 ITTO vendors (including individual and institutional consultants) and Executing Agencies are expected to adopt and enforce robust policies combatting fraud and corruption. Those policies are expected to be no less stringent than this Policy.

Definitions

1.4 In this Policy, "fraud" means the actual or attempted use of deceit, falsehood, or dishonest means (including willful omission) to secure direct or indirect financial or material gain, personal advantage or other benefit, and includes fraudulent, corrupt, collusive, coercive and obstructionist conduct (as defined below). It includes attempted fraud (even if unsuccessful).

(a) "Fraudulent conduct" is any act or omission, including a misrepresentation, that knowingly or recklessly misleads, or attempts to mislead, a party in order to obtain a financial or other benefit or to avoid an obligation;

(b) "Corrupt conduct" is the offering, giving, receiving, or soliciting (in each case,

directly or indirectly) anything of value in order to influence improperly the actions of another party;

(c) "Collusive conduct" is the proposing or entering into an arrangement between two or more parties designed to achieve an improper purpose, including influencing improperly the actions of another party;

(d) "Coercive conduct" is the impairing or harming, or threatening to impair or harm, directly or indirectly, any party or the property of the party in order to influence the actions of that party or another; and

(e) "Obstructive conduct" is (i) any act which deliberately and in an effort to compromise an investigation, destroys, falsifies, alters or conceals information or documents that may be relevant to a fraud and corruption investigation, or material that could become evidence as a result of such investigation; or (ii) the making of false statements to investigators during such an investigation which obstructs the course of justice.

Section 2

Policy against Fraud

2.1 The Executive Director, ITTO staff members and non-staff personnel are not to engage in fraud.

2.1 (a) Fraud against ITTO will constitute misconduct and will be grounds for dismissal. It may lead to actions to recover any losses sustained by ITTO as a result of such fraud (including referral to law enforcement authorities).

2.1 (b) Fraud against others will also constitute misconduct, being conduct unbecoming of an international civil servant, and will also be grounds for dismissal.

2.2 ITTO vendors (including individual consultants and contractors, and institutional consultants) and executing agencies are not to engage in fraud.

2.2(a) Fraud against ITTO will constitute grounds for termination of the relationship with ITTO. It may lead to actions to recover any losses sustained by ITTO as a result of such fraud (including referral to law enforcement authorities). ITTO will maintain a list of vendors (including individual consultants and contractors, and institutional consultants) and executing agencies terminated for fraud and will make this list available to Council.

2.2(b) Fraud against others will disqualify such vendor/s (including individual and institutional consultants and contractors) or executing agencies from further engagements with ITTO.

2.3 ITTO [Senior Management](#) will investigate all credible allegations of fraud involving or impacting on ITTO. Where fraud is established, ITTO will determine the appropriate steps to take in response, including possible dismissal or sanctioning of any relevant staff or non-staff personnel, exercising termination and other contractual rights against external parties, and recovery of losses. ITTO, through established international procedures, will refer cases to law enforcement authorities where it determines a referral is appropriate.

US Comment: Include the appropriate entity or individual charged with investigating allegations. The reporting procedure should be clearly articulated. Consider detailing how allegations against the Executive Director will be managed.

Secretariat Note – The appropriate entity is stated to be ITTO or where appropriate, will be law enforcement authorities. In the case of ITTO, the text has been amended to state Senior Management to cover the eventuality that it could be the Executive Director or any member of Senior Management being reported on/investigated, leaving some flexibility in the policy for the Organization to determine the most suitable investigator, depending on the circumstances. It may be best not to name a particular individual, in the eventuality that particular individual is/was involved in fraud/corruption and it could be a conflict of interest under some circumstances if alleged fraud involved this particular individual and another known internal/external person/entity being investigated.

Section 3

Reporting Procedures and Subsequent Actions

Reporting

3.1 The Executive Director, ITTO staff and non-staff personnel are required to report all reasonable suspicions of fraud involving or impacting on ITTO in accordance with the ITTO Whistleblower Policy as soon as possible.

3.2 ITTO vendors (including individual consultants and contractors, and institutional consultants) and executing agencies are also required to report to [the Executive Director or to Senior Management](#) in good faith suspicion of fraud involving or impacting on ITTO as soon as possible. [If in fear of retaliation, the individual and/or entity reporting may invoke the ITTO Whistleblower policy as contained within the ITTO Staff regulations and Rules.](#)

3.3 Reports must be made in good faith. Making a false or malicious allegation is not permitted or protected, and may result in disciplinary action (in the case of staff), or termination of contract for cause (in all other cases).

3.4 Reports can be made anonymously, though anonymous reports that lack specific details will be reviewed but may not be pursued further if the report does not include sufficient supporting material.

Protection of “Whistle blowers” against Retaliation

3.5 To encourage reporting of fraud, ITTO has a policy protecting “whistle—blowers” to ensure that those reporting good faith suspicions of fraud involving ITTO are not penalized or retaliated against for doing so. The policy is set out in the ITTO Whistleblower Policy. ITTO expects its institutional consultants and contractors, suppliers and vendors, and executing agencies, to have similar appropriate “whistle-blower” policies in place. [The ITTO Director of Operations and the ITTO Finance/Administrative Officer will bear primary responsibility to ensure the possibility of vendors meeting these expectations.](#)

US Comment: Note who in ITTO will ensure vendors have whistleblower policies that meet ITTO standards.

Secretariat Note: Please refer to suggested amendments in blue above, worded to afford some flexibility as not all vendors may have such policies in place (as it is not yet a legal requirement in many jurisdictions).

Investigations of Possible Fraud

3.6 The officials responsible for taking appropriate action, defined in the ITTO Whistleblower Policy, will determine whether reports of fraud involving ITTO are frivolous or non-frivolous. The responsible officials are the ITTO Division Directors and in the event such fraud involves one of the Directors, the report should be made to the Executive Director. In the event the fraud is suspected to involve the Executive Director, the report should be made to ITTC Council officers such as the ITTC Chairperson, ITTC Vice-Chairperson or any of the Chairpersons of the ITTO Committees. Depending on the circumstances, further steps to be taken are as detailed in the ITTO Whistleblower Policy within the ITTO Staff Regulations and Rules.

US Comment: 3.6 Officials/offices charged with investigations should be listed in this policy.

Secretariat Note: Please refer to suggested amendments in blue above.

3.7 An individual wishing to report fraud should do so

3.7 Non—frivolous allegations either (a) that a ITTO staff member or non-staff personnel has engaged in fraud, or (b) of fraud involving ITTO, will be investigated in accordance with the ITTO Whistleblower Policy. The responsible officials may also initiate an investigation of possible fraud on their own determination, including as a result of an internal audit exercise. Non-frivolous allegations against any Government official will be referred by ITTO to the appropriate authorities within the Government in question with a request for follow up action.

3.8 All staff members and non-staff personnel, and individual consultants and contractors, are required to cooperate fully with investigations by ITTO. ITTO vendors and executing agencies are required to ensure that their personnel and agents (including their attorneys, accountants, and other advisers) also cooperate fully with such investigations.

Follow-up Action

3.9 ITTO will take appropriate action, in the circumstances of each case, where it determines that a staff member or non-staff personnel has engaged in fraud, and where it determines there has been fraud involving ITTO. Actions can include dismissal or termination of relationship with ITTO and reasonable efforts to recover financial losses by way of (for example) internal administrative proceedings, and contractual claims for recovery. Referrals to Member State law enforcement authorities for criminal investigation will be made in appropriate situations, including in accordance with relevant Council decisions in the case of criminal conduct by ITTO staff members or individual consultants.

The responsible ITTO officials to take appropriate action are the ITTO Division Directors and in the event such fraud involves one of the Directors or ITTO staff members, the most appropriate action is to be taken by the Executive Director, in line with the ITTO Staff Regulations and Rules. In the event the fraud is suspected to involve the Executive Director, the most appropriate action is to be taken by the Chairperson and/or the International Tropical Timber Council. Depending on the circumstances, further steps to be taken in relation to external parties are as detailed in the ITTO Whistleblower Policy within the ITTO Staff Regulations and Rules.

US Comment: Detail who will be charged with taking follow up actions when fraud is found.

Secretariat Note: Please refer to suggested amendments in blue above.

Section 4

Disclosure; Confidentiality; Public Statements

4.1 Fraud cases investigated by ITTO will be reported to the International Tropical Timber Council (ITTC).

4.2 The report of ITTO's investigation of such reports of fraud is a confidential document; neither the report, nor any summary of the report, will be disclosed other than to law enforcement in the case of any referral to law enforcement.

4.3 ITTO may decide to make public disclosure of the fact that it has received reports indicating it may have been the victim of fraud and of the status of any response to such reports.

4.4 All disclosures relating to reports that ITTO may have been the victim of fraud and the status of ITTO's response (including reports to the ITTC/[Committee on Finance and Administration](#)) will be made in accordance with the following principles:

(a) In order to ensure the probity of any investigation of possible fraud, to maximize the prospect of recovery of funds, and to respect the due process rights of all involved, information relating to reports of fraud and investigation and handling of such reports is to be treated confidentially and with utmost discretion even within ITTO.

(b) All disclosure of information will be subject to the relevant decisions of the ITTC.

(c) [The Executive Director is responsible for the administration, revision, interpretation and application of this policy. The policy will be reviewed periodically and revised as needed.](#)

US Comment: Include a reporting requirement to the Committee on losses due to fraud and provide a regular update on the number of cases and potential losses being investigated annually.

Other suggested inclusions (compiled from various policies):

"Managers at all levels of the Organization have an overall responsibility for preventing fraud. They are expected, with the assistance of relevant staff members, to adhere to the established system of internal control to prevent fraud and, in particular, to:

- a. monitor and assess any internal and external risks of fraudulent, corrupt and/or collusive practices and employ existing risk-control mechanisms to prevent such practices or propose additional mechanisms where appropriate;
- b. raise awareness of risks of fraudulent, corrupt and/or collusive practices through on-going training of, and guidance to, staff members; and
- c. adhere to the terms of this Policy in exercising their delegated authority to enter into recruitment decisions and contractual arrangements with any cooperating partners, suppliers and/or other third parties;
- d. take prompt and reasonable action to recover misappropriated funds or losses caused by fraudulent, corrupt and/or collusive practices.

Managers who fail to take appropriate actions in this connection or who directly or indirectly tolerate or condone improper activity under this Policy may be held accountable for violations of this Policy and relevant Organization's Regulations and Rules, including the Standards of Conduct for the International Civil Service."

Secretariat Note: The reporting requirement is already included, please see suggested amendment in blue above. The only change from suggested text from the US is for the policy to be reviewed 'periodically' rather than 'annually' as the Secretariat does not anticipate frequent incidences of fraud within its operations.

On the list of suggested additional inclusions, Secretariat defers to the discussions to be held under the to be established member-led Working Group to determine and decide on any additional inclusion from the list above.

International Tropical Timber Organization – EXTERNAL COMPLAINTS POLICY

US Comment: Consider changing the title to External Complaint Policy

Secretariat Note: Done

1. Purpose

The purpose of this policy is to ensure transparency and accountability to all stakeholders in relation to complaints regarding ITTO and its operations. It seeks to make clear the mechanisms available for making complaints and the way in which complaints will be handled and resolved.

ITTO acknowledges the value of feedback as an important tool in understanding and responding to stakeholder's expectations. We therefore welcome feedback and will respond constructively and in a timely manner to complaints.

Complaints may come from our supporters, donors, the general public, beneficiaries, official bodies and our partners. This policy deals only with external complaints made in good faith and does not cover internal issues and/or complaints by staff, interns or volunteers.

Guiding Principles

Confidentiality: ITTO is committed to ensuring that all information related to complaints and their resolution will remain confidential. The privacy of individuals will be maintained and personal information will not be divulged.

Accessibility: complaints procedures should be easily accessible and well publicised to the people we work with and other stakeholders. Information relating to the process is accessible and options exist to make a complaint to ensure no complainants are disadvantaged.

Objectivity: complaints are treated with respect in a fair and equitable manner. Conflicts of interest will be identified to ensure objectivity.

Responsiveness: complaints are dealt with in a manner that is timely, responsive and will be taken seriously. Complainants will be kept informed on the progress of their complaint through the process.

2. Definitions

ITTO defines a complaint as an expression of dissatisfaction about the standards of service, actions or lack of actions by ITTO. It could be:

- Concern about the behaviour of staff, volunteers, committee members, suppliers, partners or others acting on ITTO's behalf,
- Concern over inappropriate use of funding,
- Any breach of the ITTO Code of Conduct,
- Organizational practices, policies or procedures
- Complaints about ITTO supported development programs and/or operations of partner Country Offices.

A complainant is any person or organisation making a complaint.

3. Compliance

The consequence of not complying with the policy and procedures ranges from disciplinary action to performance management to cessation of employment or contract agreement, dependent on the seriousness of the non-compliance.

4. Policy Statement

ITTO seeks to have any complaint or dispute raised and received in a constructive and open manner and resolution achieved in a timely and effective way.

Any complaint or dispute about an aspect of ITTO's operations or practices will be dealt with confidentially, effectively and with the appropriate degree of urgency.

All complaints will be managed to ensure there is procedural fairness to all parties, there is no conflict of interest by either party, there is no victimisation or retaliation and confidentiality is assured throughout the process.

5. Procedures

5.1 Complaints Handling Process

ITTO will receive and respond to all complaints made in good faith irrespective of who makes them or the nature of the complaint. It is acknowledged that some complaints are of a more minor nature and can be resolved quickly and informally (informal resolution).

Where a complaint cannot be resolved easily and informally, the Complaints Handling Process described below should be followed.

5.1.1 Making and receiving a complaint

How can a complaint be made?

At ITTO we welcome feedback from our stakeholders, and we take complaints very seriously. All stakeholders should be clear on how to raise a complaint with the organisation.

ITTO's Complaints Policy is published on the ITTO website where the contact form which is the central point for all complaints is also located.

To ensure no disadvantages or barriers to making a complaint, where necessary, language interpreters may be required to help establish the nature of the complaint.

Who can receive a complaint?

Complaints lodged electronically will be received through the ITTO's general administration e-mail at itto@itto.int and logged through ITTO's established general internal administration procedures. Upon initial assessment by the Division of Operations, a complaint assessed to have been made in good faith will be referred to the manager responsible for the relevant area for appropriate action. In the event of a complaint being made verbally, it is important the staff member clarifies the issues, listens to what the complainant has to say and makes a brief and accurate written summary of the complaint. The staff member should also establish if the complainant needs assistance in making the complaint.

The employee receiving the complaint will record the following details:

- ☐ The name of the person/s making the complaint
- ☐ The date, time and location the complaint is received
- ☐ A brief description of the complaint and the expectations of the complainant

The primary officer in charge of investigating genuine complaints made in good faith will be the Director of Operations or alternatively, the head of any other division if the complaint relates to a particular division/staff member. If a complaint is made against the Executive Director, the complaint will be referred to the ITTC Chairperson who will take appropriate action as necessary.

A complaint lodged through an ITTO member shall be sent by the member to the ITTO Executive Director, who will take the necessary action as appropriate and report back to the ITTO member. If the complaint lodged by an ITTO member is against the Executive Director, the complaint will be referred to the ITTC Chairperson who will determine in consultation with

the ITTC on appropriate action to be taken, if any.

In some instances, a complainant may request that their identity is not divulged however it should be acknowledged this may restrict the resolution of the complaint.

US Comment 5.1.1: Complaints should be sent to a central location where there can be accountability on how the cases are managed. Later steps can involve the manager of the area concerned. This is an effort to avoid conflicts of interest. Consider detailing how complaints sent to member states should be handled.

Secretariat Note: Please refer to amended text in blue above.

5.1.2 Acknowledging a complaint has been received

Each complaint must be acknowledged as it is received. Acknowledgement will also include an outline of the next steps. If an oral complaint is received the staff member should take the name and contact details so the outcome can be communicated without breaching privacy or confidentiality.

5.1.3 Registering Complaints

All complaints dealt with under the Complaints Handling Process, whether verbal or written are recorded in a Complaints Record log. These records will be used to ensure complaints are dealt with effectively, to monitor trends and to ensure continuous improvement of the complaints handling process and our work.

5.1.4 Assessing and reviewing a complaint

When a complaint is received and addressed through the Complaints Handling Process, an assessment must be made on the legitimacy of the complaint and the appropriate course of action that may need to be taken. The initial assessment will be made by the Director of Operations, and where appropriate, in consultation with senior management and/or the Executive Director. This can only be achieved through investigation.

US Comment 5.1.4: The office or person in charge of investigating complaints should be detailed in the policy.

Secretariat Note: This is covered under para 6 below and please refer to amended text in blue above, to be consistent with para 6.

To conduct an investigation the person handling the complaint will:

Establish the facts and gather the relevant information; and if necessary and/or practicable, interview those involved.

Ascertain if the complaint warrants further action or an investigation.

Once the investigation is completed a recommended course of action will be made by the person handling the complaint to senior management.

If the outcome of the investigation is that there should be action taken in relation to an employee then the appropriate disciplinary and other organizational policies and procedures will be followed.

If the outcome of the investigation is that no further action is needed, then the complainant shall be informed and the process brought to closure.

5.1.5 Remedy or System Improvement

At times, remedy and systems improvement may arise out of complaints dealt with under either Informal Resolution or under the Complaints Handling process. This procedure will be initiated by the relevant manager using the following steps. It also applies to suggestions.

1. Assess if remedy and/or systems improvement is warranted or no action is required.
2. Implement immediate remedy/system improvement or plan future implementation of remedy/system improvement.
3. Inform complainant of outcome

Remedy is action taken to correct or rectify a situation for an individual where it identified he/she has been treated poorly or unfairly by the system. Remedy may involve one or more of:

- providing explanation and reasons if not previously provided
- dismissing the complaint if the decision accords with relevant policy or procedure
- concluding that the complaint has been substantially resolved
- reaching a compromise solution
- giving an apology or providing a service not previously provided
- addressing or referring the issue for system improvement.

Systems improvement is an opportunity to improve policies, procedures, organizational culture, or similar issues to prevent future problems. Systems improvement may involve one or more of:

- referral for consideration of policy change
- policy development or revision
- process improvement, such as changes to procedures and workplace practices
- program review
- expert assistance, staff development or performance improvement
- improved implementation, such as issuing updated documentation or reminders
- monitoring compliance
- other action to ensure that the matter is handled appropriately in future.

5.1.6 Informing complainant of outcome

Once the complaint has been resolved, the complainant will be advised of the outcome ensuring the privacy of any individual involved in the matter.

5.1.7 Timeframe for Response

ITTO will seek to resolve complaints as quickly as possible and ensure complainants are regularly updated as to the progress or outcome of their complaint.

5.1.8 Appeals Process

If the complainant is unhappy about the responses received from ITTO or if they believe action has not been implemented, they may appeal to the next management level. If the matter involves a Director, it should be referred immediately to the Executive Director (ED). If the complaint involves the Executive Director, it should be referred to the Council Officers.

5.2 Publication of the Policy

ITTO will provide clear information to its stakeholders and members of the public on how to make a complaint and the ability to make a complaint for suspected breaches of the Code by a signatory organization.

This information will be made public on the ITTO website. ITTO staff will inform relevant stakeholders of the policy where appropriate and provide copies of the policy on request.

5.3 Training of Policy

New staff will be provided with the policy as part of their induction to the organization. The policy will also be available for all staff on a nominated share drive and placed on ITTO's website.

Training and/or communication will also be provided following an update or change to the policy.

6. Responsibilities

ITTO's Senior Management is responsible for ensuring that ITTO responds to complaints according to the policy and procedures.

The Executive Director (ED) is ultimately responsible for complaints which cannot be resolved by management.

The Council Officers are responsible for managing complaints relating to the ED. The Director of Operations acts as the Complaints Handling Officer and is responsible for:

- Initial assessment of complaints and identifying those which are to be actioned upon and those which can be dealt with informally and those which are clear, serious, or complex complaints to be addressed according to the complaints handling procedure; o Ensuring complaints are appropriately referred, resolved and that follow up actions have taken place;
- Maintaining the Complaints Log.

CODE OF ETHICS FOR INTERNATIONAL TROPICAL TIMBER ORGANIZATION (“ITTO”) PERSONNEL

PREAMBLE

Reaffirming the purposes, values and principles of ITTO as enshrined in the International Tropical Timber Agreement, and the importance for ITTO to secure the highest standards of efficiency, competence and integrity from Secretariat personnel;

Recognizing that it is imperative for ITTO to cultivate and nurture a culture of ethics, integrity and accountability and thereby enhance the trust in, and the credibility of ITTO;

Reaffirming the Standards of Conduct for the International Civil Service as well as standards of conduct provided for in the relevant Staff Regulations and Rules, and other relevant issuances of ITTO;

This Code of Ethics sets out the values and principles to guide the conduct and behaviour of ITTO Secretariat personnel.

VALUES

Independence

ITTO personnel shall maintain their independence and shall not seek or receive instructions from any government or from any other person or entity external to ITTO and shall refrain from any action which might reflect negatively on their position as ITTO personnel responsible only to ITTO.

Loyalty

Loyalty to the purposes, values and principles of ITTO is a fundamental obligation of all ITTO personnel. They shall be loyal to ITTO and shall, at all times, discharge their functions and regulate their conduct with the interests of ITTO only in view.

Impartiality

ITTO personnel, in the performance of their official duties, shall always act with impartiality, objectivity and professionalism. They shall ensure that expression of personal views and convictions does not compromise or appear to compromise the performance of their official duties or the interests of ITTO. They shall not act in a way that unjustifiably could lead to actual or perceived preferential treatment for, or against particular individuals, groups or interests, internally and/or externally.

Integrity

ITTO personnel shall maintain the highest standards of integrity, including honesty, truthfulness, fairness and incorruptibility, in all matters affecting their official duties and the interests of ITTO.

Accountability

ITTO personnel shall at all times be accountable for the proper discharge of their functions, and for their decisions and actions. In fulfilling their official duties and responsibilities, ITTO personnel shall make decisions in the interests of ITTO.

They shall be subjected to scrutiny, in line with the ITTO Staff Regulations & Rules, as required by their position.

Respect for human rights

ITTO personnel shall fully respect the human rights, dignity and worth of all persons and shall act with understanding, tolerance, sensitivity and respect for racial, cultural and religious diversity and without discrimination of any kind.

PRINCIPLES

Conflict of interest

ITTO personnel shall prevent any conflict of interest arising between their private and official interests in carrying out their official duties and responsibilities for ITTO; if such a conflict does arise, such conflict shall be disclosed and resolved in favour of the interests of ITTO.

Abuse of authority

ITTO personnel shall not abuse the authority entrusted to them, in particular by taking advantage of colleagues, beneficiaries or other individuals or groups for personal, financial, political, sexual or other gain.

Gifts, honours, favours, or other benefits

ITTO personnel shall not solicit or accept gifts, honours, favours and/or other benefits from sources external to ITTO which may bring into question their independence, impartiality and integrity, unless the acceptance of such gifts, honours, favours and/or other benefits is pursuant to applicable policies and regulations.

ITTO resources

ITTO personnel shall only use or allow the use of ITTO's resources, including its property, directly or indirectly, for authorized purposes.

Confidentiality of information

ITTO personnel shall not use information that is not generally publicly available, for private or financial gain or otherwise, to benefit themselves, or others with whom they have personal, family or other ties, nor shall they disclose such information to the public without authorization. This duty continues to apply after the expiration of their service with ITTO.

Post-employment

ITTO personnel shall not act in such a manner as to take improper advantage of their official functions and positions, including privileged information obtained from such functions and positions, when seeking employment or appointment after leaving their service with ITTO.

ADMINISTRATION OF THE CODE

This Code of Ethics will be applicable to all ITTO personnel.

For the purposes of this Code, ITTO personnel includes ITTO staff and related personnel such as ITTO volunteers, personnel or employees of non-ITTO entities or individuals who have entered into a cooperative arrangement with ITTO, including interns, international and local consultants, as well as individual and corporate contractors) and experts involved in various ITTO missions.

The values and principles contained in this Code of Ethics shall be reflected in the applicable standards of conduct provided for in the relevant Staff Regulations and Rules, and other relevant issuances of ITTO, including the obligation to report any breach of the Organization's regulations and rules to the officials whose responsibility it is to take appropriate action.

[This Code will be reviewed periodically and updated as appropriate and necessary.](#)

US Comment 5.1.4: The Code should include language on regular review and updating.

Secretariat Note: Please refer to sentence in blue above.

Policy on Prohibition of discrimination, harassment, sexual harassment and abuse of authority

This policy seeks to ensure that all individuals working at ITTO are treated with dignity and respect and are aware of their role and responsibilities in maintaining a workplace free of any form of discrimination, harassment, sexual harassment or abuse of authority.

Section 1 Definitions

1.1 For the purpose of this directive, the following definitions apply:

(a) Discrimination is any unfair treatment or arbitrary distinction based on a person's race, sex, religion, nationality, ethnic origin, sexual orientation, disability, age, language, social origin or other status. Discrimination may be an isolated event affecting one person or a group of persons similarly situated, or may manifest itself through harassment or abuse of authority.

(b) Harassment is any improper and unwelcome conduct that has or might reasonably be expected or be perceived to cause offence or humiliation to another person. Harassment may take the form of words, gestures or actions which tend to abuse, demean, intimidate, belittle, humiliate or embarrass another person or which create an intimidating, hostile or offensive work environment. It includes harassment based on any grounds, amongst others, such as race, religion, color, creed, ethnic origin, physical attributes, gender or sexual orientation. Harassment normally involves a series of incidents.

(c) Sexual harassment is any unwelcome sexual advance, request for sexual favor, verbal or physical conduct or gesture of a sexual nature, or any other behaviour of a sexual nature that might reasonably be expected or be perceived to cause offence or humiliation to another, when such conduct interferes with work, is made a condition of employment or creates an intimidating, hostile, or offensive work environment. While typically involving a pattern of behaviour, it can take the form of a single incident.

Sexual harassment may occur between persons of the opposite or same sex. Both males and females can be either victims or offenders.

(d) Mental and psychological harassment includes any kind of abuse that is emotional rather than physical in nature. It can include anything from verbal abuse, constant criticism to more subtle tactics such as intimidation, manipulation, insults, putdowns, arbitrary and unpredictable behavior, and gaslighting (e.g. the denial that previous abusive incidents occurred).

(e) Abuse of authority is the improper use of a position of influence, power, or authority against another person. This is particularly serious when a person uses, or threatens to use, his/her influence, power, or authority to improperly influence the career or employment conditions of another, including, but not limited to, appointment, assignment, contract renewal, performance evaluation or promotion.

Abuse of authority may also include conduct that creates a hostile or offensive work environment, and such conduct can include (but is not limited to) the use of intimidation, threats, blackmail or coercion.

1.2 Disagreement between a staff member and supervisor on work performance or on other work-related issues is normally not considered harassment or abuse of authority and is not dealt with under the provisions of this directive but in the context of performance management.

Section 2

General principles

2.1 In accordance with the provisions of ITTO Staff Regulation 1.12, every staff member has the right to be treated with dignity and respect, and to work in an environment free from harassment and abuse.

Consequently, any form of discrimination, harassment, sexual harassment and abuse of authority is prohibited.

2.2 All staff members are expected to act with tolerance, sensitivity and respect for diversity. They have the obligation to ensure that they do not engage in, condone or tolerate behaviour which would constitute discrimination, harassment, sexual harassment or abuse of authority. Any form of discrimination, harassment, sexual harassment or abuse of authority in the workplace or in connection with work is a violation of these principles and may lead to disciplinary action, irrespective of whether the discrimination, harassment, sexual harassment or abuse of authority takes place at a ITTO office, in the course of official travel or an official mission, or in other settings in which it may have an impact on the workplace.

2.3 Managers are expected to act, at all times, as role models by upholding the highest standards of conduct and by promoting a harmonious working environment, free of any form of discrimination, harassment, sexual harassment and abuse of authority. They have to ensure that complaints of discrimination, harassment, sexual harassment or abuse of authority are promptly addressed in a fair and impartial manner while upholding the confidentiality of the matter as required under this directive. This includes explaining to an individual alleging harassment the processes available under this directive. Failure on the part of managers to fulfill their obligations under this directive may be considered a breach of duty, and, if established, will be reflected in their performance evaluation and may be grounds for administrative or disciplinary action, as appropriate.

2.4 Heads of Office/Division are responsible for the implementation of this directive in their respective office/division and for holding all managers accountable for compliance with its terms but are not the sole reporting avenue. Please refer to Section 5 below for more detailed guidance on available applicable procedures.

US Comment 2.4: While Heads of Office/Division are responsible for the implementation of this directive, it should not seem they are not the sole/main reporting avenue. This should be clarified by referring to the process in Section 5.

Secretariat Note: Please see suggested amendment in blue above.

Section 3

Applicability

3.1 This directive applies to all staff members of ITTO, including the Executive Director and other non-staff personnel who are alleged to have committed sexual harassment who will be subject to action in accordance with the terms and conditions of their contract and of other applicable policies regarding such non-staff personnel. Action of the reports will depend on the status of the alleged offender. In this context non staff are volunteers, interns, consultants, vendors, etc.

. Complaints of discrimination, harassment, sexual harassment or abuse of authority may be made by any person, who may have been subject to discrimination, harassment, sexual harassment or abuse of authority by a ITTO staff member. In cases where the complainant works for another organization, ITTO will conduct the investigation in consultation with the other organization.

US Comment 3.1: The policy should apply to all including the Executive Director or other types of non-staff and this should be stated. For example, the UN model policy states:

“Non-staff personnel who are alleged to have committed sexual harassment will be subject to action in accordance with the terms and conditions of their contract and of other applicable policies regarding such non-staff personnel. Action of the reports will depend on the status of the alleged offender.” In this context non staff are volunteers, interns, consultants, vendors, etc.

Secretariat Note: Please see amended text in blue above.

3.2 This directive does not apply to cases where the complainant is an ITTO staff member or other individual working for ITTO, paid or unpaid, and files a complaint against another organization of the United Nations common system. However, ITTO will ensure, to the extent possible, that the interests of its staff members and other individuals working for ITTO are protected by the other organization.

Section 4

Preventive measures

4.1 ITTO has the duty to take all appropriate measures towards ensuring a harmonious work environment, and to protect staff from exposure to any form of discrimination, harassment, sexual harassment or abuse of authority through preventive measures and the provision of effective remedies when prevention has failed.

4.2 ITTO conducts mandatory awareness programmes for all staff to raise awareness of its zero tolerance of discrimination, harassment, sexual harassment and abuse of authority, to provide guidance on the relevant policy and procedures and to foster the creation of a harmonious working environment. Heads of office/division are responsible for ensuring that their staff undertake and complete the mandatory training programme on prevention of discrimination, harassment, sexual harassment and abuse of authority in the workplace.

4.3 Staff members are responsible for familiarizing themselves with this directive and the related provisions and resources, including the ITTO Whistleblower Policy, which protects complainants against any retaliation.

4.4 In order to resolve problems which could potentially give rise to discrimination, harassment, sexual harassment or abuse of authority, managers will maintain open channels of communication and ensure that staff members who wish to raise their concerns in good faith can do so freely and without fear of adverse consequences.

4.5 If there is a need for confidential guidance or advice on matters which could give rise to instances of discrimination, harassment, sexual harassment or abuse of authority, staff members and other individuals working for ITTO, paid or unpaid, may consult the responsible officials designated under the ITTO Whistleblower Policy. [The responsible officials will be Senior Management of the ITTO and/or a senior female or male colleague at the Secretariat.](#)

US Comment 4.5: Officials to be contacted should be listed here for clarity.

Secretariat Note: Please see amended text in blue above.

Section 5

Corrective measures

5.1 Individuals who believe they are victims of discrimination, harassment, sexual harassment and abuse of authority (“complainants”) are encouraged to address the issue as early as

possible after it has occurred. The complainant may do so through an informal or formal process, as explained below. The complainant may attempt, in the first instance, to resolve the situation informally or he/she may decide to submit a formal complaint directly. The processes described below are not mandatory, nor are they listed in priority order. They describe the options available to the complainant, who decides which option is the most appropriate for his/her situation.

Individuals need not use the informal complaint process before electing to use the formal complaint process.

5.2 Regardless of the approach (formal or informal), all reports of discrimination, harassment, sexual harassment, or abuse of authority will be handled with sensitivity and confidentiality to protect the privacy of all individuals concerned.

Informal process

5.3 An informal approach offers the opportunity to resolve a complaint or grievance in an open, honest, non-threatening and non-contentious manner including:

5.4 Approaching the alleged offender: A person who feels he/she has been the victim of discrimination, harassment, sexual harassment or abuse of authority [may on a voluntary basis, if they feel comfortable and safe doing so, approach alleged offenders about inappropriate behaviour or instances of possible sexual harassment](#). That person may not be aware that his/her behaviour is offensive and, having had this pointed out, may change behaviours in a positive manner. There are situations where a person who feels he/she has been the victim of discrimination, harassment, sexual harassment or abuse of authority will be reluctant to approach the alleged offender, including situations of disparity in power or status, hence there is no requirement to take this particular step.

US Comment 5.4: *should give serious consideration*" should be replaced as it makes it seem it is a victim responsibility to resolve a harassment on their own. The model UN policy uses this language: "Targets/victims/affected individuals [may on a voluntary basis, if they feel comfortable and safe doing so, approach alleged offenders about inappropriate behaviour or instances of possible sexual harassment](#)".

Secretariat Note: Please see suggested amendment in blue above.

5.5 Involvement of a third party: Either the person who feels he/she is a victim of discrimination, harassment, sexual harassment or abuse of authority or, once the matter has been brought to his/her attention, the alleged offender, may choose to involve a third party in trying to resolve the situation. This third party should be a neutral individual, without close connections to either party, and is expected to help facilitate a calm and respectful discussion between the parties and to offer suggestions for a way forward. The third party can be, for example, the complainant's manager or another supervisor; a human resources professional at the duty station; a staff counselor; a peer support volunteer; or a staff representative of the office/division concerned.

5.6 It is vital that the third party ensures that confidentiality is respected at all times. The third party should be fully familiar with this directive. The third party should be aware that sometimes the best form of assistance is a referral to a more appropriate resource within ITTO. The third party should always act with complete neutrality towards both the complainant and the alleged offender. If a third party is uncertain about what suggestions to make to the parties, he/she should withdraw.

5.7 An unsuccessful attempt to resolve the matter informally does not preclude it from being formally pursued under the following provisions.

Formal process

5.9 The formal process follows the general provisions on investigation and disciplinary process of the ITTO Whistleblower Policy, unless stated otherwise in this directive.

Reporting misconduct through established internal/external mechanisms

5.9.1 Reports of misconduct should in practice be made through the established internal mechanisms of ITTO. It is the duty of the Administration to protect the confidentiality of the reporting individual's identity and all communications through those channels to the maximum extent possible.

5.9.2 Protection against retaliation will be extended to an individual who reports misconduct to an entity or individual outside of the established internal mechanisms of ITTO, where the criteria set out in subparagraphs (a), (b) and (c) below are satisfied:

(a) Such reporting is necessary to avoid: Substantive damage to ITTO's operations; or Violations of national or international law; and

(b) The use of internal mechanisms is not possible because:

At the time the report is made, the individual has grounds to believe that he/she will be subjected to retaliation by the person(s) he/she should report to pursuant to the established internal mechanism; or

It is substantially likely that evidence relating to the misconduct will be concealed or destroyed if the individual reports to the person(s) he/she should report to pursuant to the established internal mechanisms; or

The individual has previously reported the identical information through the established internal mechanisms, and ITTO has failed to inform the individual in writing of the status of the matter within six (6) months of such a report; and

(c) The individual does not accept payment or any other benefit from any party for such report.

5.9.3 Individuals unable or unwilling to make a report of misconduct due to the circumstances described in paragraph 5.9.1 or 5.9.2 are encouraged to make the report to one of the Council officers (Council Chair, Council Vice-Chair or the Chairperson, Committee on Finance and Administration). Current contact information for Council Officers shall be maintained and posted in a place accessible to all ITTO staff members.

Reporting Retaliation

5.9.4 Individuals who believe that retaliatory action has been taken or may be taken against them because they have reported misconduct or cooperated with a duly authorized and transparent investigation should forward all information and documentation available to them substantiating their complaint to one of the Council

Officers (Council Chair, Council Vice- Chair or the Chairperson, Committee on Finance and Administration (CFA) as soon as possible. Complaints may be made in person, by regular mail, fax or by e-mail.

- 5.9.5 The functions and responsibilities of the Council Officers described in paragraph 6.1 with respect to protection against retaliation for reporting misconduct or cooperating with a duly authorized investigation are as follows:

To receive complaints of retaliation or threats of retaliation; To keep a confidential record of all complaints received; and

To conduct a preliminary review of the complaint to determine if (i) the complainant engaged in a protected activity; and (ii) there is a prima facie case that the protected activity was a contributing factor in causing the alleged retaliation or threat of retaliation.

These processes will be undertaken in a collaborative manner.

Individuals making the disclosure will be offered and afforded confidential liaison with the Council Officer to whom the disclosure was first made. That Council Officer will serve as the principal point of contact for the duration of these actions.

- 5.9.6 The Council Officers will seek to complete a preliminary review within 45 days of receiving the complaint of retaliation.
- 5.9.7 All officers and staff members shall cooperate with the Council Officers and provide access to all records and documents requested by the Council Officers, except for medical records that are not available without the express consent of the staff member concerned.
- 5.9.8 If the Council Officers find that there is a credible case of retaliation or threat of retaliation, they will normally refer the matter in writing to the Executive Director for investigation and will immediately notify in writing the complainant that the matter has been so referred. The Executive Director will seek to complete his investigation and submit a report to the Council Officers at the next session of the Council. If the Council Officers have concerns that the Executive Director cannot or will not act impartially, the case will be referred to the Council Chair and Vice-Chair.
- 5.9.9 Pending the completion of the investigation, the Council Officers may recommend that the Executive Director take appropriate measures to safeguard the interests of the complainant, including but not limited to temporary suspension of the implementation of the action reported as retaliatory and, with the consent of the complainant, temporary reassignment of the complainant within or outside the complainant's office or placement of the complainant on special leave with full pay.
- 5.9.10 Once the Council Officers have received the investigation report, they will inform in writing to the complainant of the outcome of the investigation and make their recommendations on the case to the Executive Director. The recommendations may include disciplinary actions to be taken against the retaliator.
- 5.9.11 If the Council Officers find that there is no credible case of retaliation or threat of retaliation but find that there is an interpersonal problem within a particular office, they will advise the complainant to seek recourse via informal mechanisms of conflict resolution within ITTO.

- 5.9.12 If the Council Officers determine that there is a managerial problem based on the preliminary review of the complaint they will advise the Executive Director accordingly.
- 5.9.13 Where, in the opinion of the Council Officers, there may be a conflict of interest in ITTO conducting the investigation, they may recommend to the Executive Director that the complaint be referred to an alternative transparent investigating mechanism.

Protection of the person who suffered retaliation

- 5.9.14 If retaliation against an individual is established, the Council Officers may, after consultation with the individual who has suffered retaliation, recommend to the Executive Director appropriate measures aimed at correcting negative consequences suffered as a result of the retaliatory action. Such measures may include, but are not limited to, the rescission of the retaliatory decision, including reinstatement, or, if requested by the individual, transfer to another office or function for which the individual is qualified, independently of the person who engaged in retaliation. If requested, the individual shall be provided with professional counseling to be paid for by ITTO.

Action against the person who engaged in retaliation

- 5.9.15 Retaliation against an individual because that person has reported misconduct on the part of one or more ITTO officials or cooperated with a duly authorized investigation of the ITTO constitutes misconduct which, if established, may lead to disciplinary action and/or transfer to other functions in the same or a different office.

Prohibition of retaliation against outside parties

- 5.9.16 Any retaliatory measures against a Consultant, Contractor or its employees, agents or representatives or any other individual engaged in any dealings with the ITTO because such person has reported misconduct by ITTO staff members will be considered misconduct that, if established, will lead to disciplinary or other appropriate action.

US Comment 5.9: The formal process should be described here for clarity.

Secretariat Note: Please refer to blue text above, extracted from the ITTO Whistleblower policy as contained within the ITTO Staff Regulations and Rules..

Filing a complaint

5.10 Any person may file a complaint in good faith. If the person making the report chooses to report on an anonymous basis, the reporter must provide sufficient information concerning the basis of the allegations and sufficient detail or supporting factual basis that the matter can be pursued responsibly. Otherwise the matter typically cannot be pursued further.

US Comment 5.10: We support an avenue for anonymously filing complaints and suggest this language "If the person making the report chooses to report on an anonymous basis, the reporter must provide sufficient information concerning the basis of the allegations and sufficient detail or supporting factual basis that the matter can be pursued responsibly. Otherwise the matter typically cannot be pursued further."

Secretariat Note: Please see amended blue text above.

5.11 The complaint should be submitted in writing, be signed and dated, to the Director, Division of Operations or a Director of another Division if appropriate, with a copy to the Executive Director, within six months from the most recent alleged incident. The complaint should state:

- (a) the name of the alleged offender;
- (b) the date(s) and location(s) of the alleged incident(s) of discrimination, harassment, sexual harassment, or abuse of authority;
- (c) the names of witnesses and any physical and/or documentary proof in support of the allegation (e.g., e-mails, message recordings, photos, letters, medical exams); and
- (d) any other relevant information.

5.12 The filing of a complaint only upon notification of an administrative decision that the complainant wants to challenge may cast doubt on the credibility of the allegations of discrimination, harassment, sexual harassment or abuse of authority, if no documented informal resolution or formal reporting of harassment-related incidents was made prior to the decision.

Preliminary assessment

5.13 Upon receipt of a formal complaint, the Director will do a preliminary assessment of the complaint and discuss with the complainant the benefits of considering an informal resolution.

5.14 The complainant will be interviewed by the Director or another person designated by that Director in order to:

- (a) clarify the allegation(s) is made in good faith;
- (b) ensure that the complaint pertains to allegations of discrimination, harassment, sexual harassment or abuse of authority;
- (c) ensure that all available evidence is submitted; and
- (d) consider the possibility of informal resolution.

5.15 If the Director concludes that the complaint in question is credible and merits a comprehensive review, he/she will notify the alleged offender and will provide that person with the details of the complaint and the name of the complainant. The alleged offender will be invited to respond and will be given fifteen (15) calendar days to provide a written response, including any explanations, relevant materials and/or the names of witnesses who might be able to assist in a possible investigation.

5.16 Unless the Director concludes on the basis of the complaint, the response of the alleged offender, and the material submitted by both parties that the complaint is unfounded, the Director will proceed to investigate the complaint.

Interim measures

5.17 When necessary, the Director may suggest to the Executive Director, as applicable, that interim measures be taken on a temporary basis, for example measures to physically or hierarchically separate the alleged offender and the complainant on a temporary basis. This may include the identification of alternative duties, the consideration of special leave for either the alleged offender or the complainant, or administrative leave for the alleged offender."

Investigation

5.18 The Director will conduct the investigation in accordance with established procedures as outlined in the ITTO Whistleblower Policy.

5.19 On the basis of the outcome of the investigation, the Executive Director, shall take either of the following actions:

(a) where the Executive Director deems that there is insufficient evidence to support the allegation of discrimination, harassment, sexual harassment or abuse of authority, he/she shall close the case with a closure memo and inform the alleged offender and complainant that the case is closed and share with them a summary of the findings and conclusions of the investigation, as appropriate;

(b) where the Executive Director deems that there is evidence that discrimination, harassment, sexual harassment or abuse of authority has occurred, he/she shall coordinate with the Director, Division of Operations, for further action.

Procedures following the investigation

5.20 On the basis of the report, the Executive Director will take either of the following actions:

(a) If the report indicates that there was a factual basis for the allegations but that, while not sufficient to justify the institution of disciplinary proceedings, the facts would warrant managerial action, the Executive Director will decide on the type of managerial action to be taken, inform the staff member concerned, and make arrangements for the implementation of any follow-up measures that may be necessary. Managerial action may include mandatory training, reprimand, a change of functions or responsibilities including re-assignment, counselling or other appropriate corrective measures. The Executive Director will inform the complainant of the outcome of the investigation and of the action taken;

(b) If the report indicates that the allegations were well-founded and that the conduct in question amounts to possible misconduct, the Executive Director will initiate disciplinary action pursuant to the ITTO Staff Regulations and Rules. The Executive Director will inform the complainant of the outcome of the investigation and of the action taken.

5.21 If at any stage of the process it is determined that the allegations of discrimination, harassment, sexual harassment and abuse of authority were unfounded and based on malicious intent, the Executive Director may decide to initiate disciplinary or other appropriate action against the complainant.

5.22 Where a complainant or alleged offender has grounds to believe that the procedure followed in respect of the allegations of discrimination, harassment, sexual harassment or abuse of authority was improper, he/she may appeal pursuant to chapter 8 of the ITTO Staff Regulations and Rules, even if there was no administrative decision.

Section 6

Miscellaneous

6.1 Resignation of the alleged offender: If the alleged offender opts to resign from ITTO pending investigation, ITTO cannot force him/her to remain employed if he/she wishes to resign. In such an event, a note for the record will be placed in the Personnel File of the staff member, disclosing that he/she resigned while under investigation for allegations of discrimination, harassment, sexual harassment or abuse of authority.

Such an individual will be banned to work with ITTO under any contractual modality unless he/she is fully cleared from the allegations of misconduct raised against him/her. If a staff member resigns during investigation, the Executive Director will ensure that the investigation is concluded despite the resignation of the alleged offender.

US Comment 6.1: Investigations should be concluded regardless of the employment status of the individuals involved.

Secretariat Note: Please see suggested amendment in blue above.

6.2 Investigation without formal complaint: The Executive Director has the authority to initiate an investigation into allegations of discrimination, harassment, sexual harassment or abuse of authority at his/her own initiative, including without reference to a written and signed complaint.

6.3 Referral to ITTO's Legal Adviser: ITTO's Legal Adviser will be kept advised of the progress of the investigation and of the matter generally, and will at relevant times determine whether a referral to criminal authorities is appropriate. Any such referral will be made in accordance with standard procedures for such referrals.

Section 7

Monitoring

7.1 The Director, Division of Operations, in collaboration with Heads of Division, will provide periodic reports as necessary to the Executive Director, which will include an overview of all preventive measures taken with a view to ensuring a harmonious work environment and protecting staff from prohibited conduct, and corrective measures taken under section 4, as well as any evaluations or assessments relating to such measures and/or activities.

7.2 In the interest of transparency, the Executive Director **may** inform the International Tropical Timber Council on decisions taken, including those in relation to discrimination, harassment, sexual harassment and abuse of authority, in the course of the preceding year. He/she may from time to time publish a circular of cases of discrimination, harassment, sexual harassment and abuse of authority that have been investigated and have led to the imposition of a disciplinary measure.

US Comment 7.2: Suggest changing "may" to "will inform."

Secretariat Note: We defer this point to the discussion to be held under the to be established Working Group.

Data Protection Policy

US Comment: The policy should include language on regular review and updating.

Secretariat Note: Reporting is covered under Section 2 (c) – please see suggested amendment in blue text in that section.

International Tropical Timber Organization (ITTO)

Last updated	13 November 2021
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Definitions

Organization	The International Tropical Timber Organization (ITTO)
GDPR	The General Data Protection Regulation 2018 (GDPR)
Responsible Person	The Director of Operations
Register of Systems	Register of all systems or contexts in which personal data is processed by the Organization

1. Data protection principles

The Organization is committed to processing data in accordance with its responsibilities under the GDPR.

Article 5 of the GDPR requires that personal data shall be:

- a. processed lawfully, fairly and in a transparent manner in relation to individuals;
- b. collected for specified, explicit and legitimate purposes and not further processed in a manner that is incompatible with those purposes; further processing for archiving purposes in the public interest, scientific or historical research purposes or statistical purposes shall not be considered to be incompatible with the initial purposes;
- c. adequate, relevant and limited to what is necessary in relation to the purposes for which they are processed;
- d. accurate and, where necessary, kept up to date; every reasonable step must be taken to ensure that personal data that are inaccurate, having regard to the purposes for which they are processed, are erased or rectified without delay;
- e. kept in a form which permits identification of data subjects for no longer than is necessary for the purposes for which the personal data are processed; personal data may be stored for longer periods insofar as the personal data will be processed solely for archiving purposes in the public interest, scientific or historical research purposes or

statistical purposes subject to implementation of the appropriate technical and organisational measures required by the GDPR in order to safeguard the rights and freedoms of individuals; and

- f. processed in a manner that ensures appropriate security of the personal data, including protection against unauthorised or unlawful processing and against accidental loss, destruction or damage, using appropriate technical or organisational measures.”

2. General provisions

- a. This policy applies to all personal data processed by the Organization.
- b. The Responsible Person shall take responsibility for the Organization’s ongoing compliance with this policy.
- c. This policy shall be reviewed at least annually [and updated as appropriate and/or necessary](#).
- d. The Organization shall register with the Information Commissioner’s Office (ICO) as an organization that processes personal data.

3. Lawful, fair and transparent processing

- a. To ensure its processing of data is lawful, fair and transparent, the Organization shall maintain a Register of Systems.
- b. The Register of Systems shall be reviewed at least annually.
- c. Individuals have the right to access and rectify or erase their personal data, the right to data portability and the right to confidentiality of electronic communications, and any such requests made to the Organization shall be dealt with in a timely manner.

4. Lawful purposes

- a. All data processed by the Organization must be done on one of the following lawful bases: consent, contract, legal obligation, vital interests, public task or legitimate interests ([see ICO guidance for more information](#)).
- b. The Organization shall note the appropriate lawful basis in the Register of Systems.
- c. Where consent is relied upon as a lawful basis for processing data, evidence of opt-in consent shall be kept with the personal data.
- d. Where communications are sent to individuals based on their consent, the option for the individual to revoke their consent should be clearly available and systems should be in place to ensure such revocation is reflected accurately in the Organization’s systems.

5. Data minimisation

- a. The Organization shall ensure that personal data are adequate, relevant and limited to

what is necessary in relation to the purposes for which they are processed.

6. Accuracy

- a. The Organization shall take reasonable steps to ensure personal data is accurate.
- b. Where necessary for the lawful basis on which data is processed, steps shall be put in place to ensure that personal data is kept up to date.

7. Archiving / removal

- a. To ensure that personal data is kept for no longer than necessary, the Organization shall put in place an archiving policy for each area in which personal data is processed and review this process annually.
- b. The archiving policy shall consider what data should/must be retained, for how long, and why.

8. Security

- a. The Organization shall ensure that personal data is stored securely using modern software that is kept-up-to-date.
- b. Access to personal data shall be limited to personnel who need access and appropriate security should be in place to avoid unauthorised sharing of information.
- c. When personal data is deleted this should be done safely such that the data is irrecoverable.
- d. Appropriate back-up and disaster recovery solutions shall be in place.

9. Breach

In the event of a breach of security leading to the accidental or unlawful destruction, loss, alteration, unauthorised disclosure of, or access to, personal data, the Organization shall promptly assess the risk to people's rights and freedoms and if appropriate report this breach to the ICO ([more information on the ICO website](#)).

END OF POLICY