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	WHISTLEBLOWER AND PROTECTION FROM RETALIATION POLICY	VERSION: 03
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1. INTRODUCTION

The Alliance of Bioversity International and CIAT (hereafter “the Alliance”) is committed to the highest standards of ethics and integrity in all business activities. It is the intent of this Policy to support the Alliance’s goal of legal compliance. The support of all employees is essential to achieving that commitment and upholding our continued success and reputation.

Our Code of Ethics and Conduct, the Fraud Prevention Policy, the Research Ethics Policy, and any other related policies guide our everyday conduct and professional responsibility to speak up and report unethical behavior. This document has been reviewed to ensure alignment with the CGIAR Integrated Partnership Policy on Whistleblowing and Protection from Retaliation.

2. PURPOSE AND OVERARCHING PRINCIPLES

In line with the Alliance commitment to open communication, this Policy aims to provide an avenue for employees to report knowledge of or concerns about misconduct, violation of law or of Alliance policies, fraud, dishonesty, and corrupt practices. It further describes the protections available from reprisal or victimization for whistleblowing, what matters are reportable, how to report concerns or information without fear of detriment, and what support can be expected from the Alliance.


The Whistleblower and Protection from Retaliation Policy of the Alliance is underpinned by the following principles.

Accessibility: It sets out an established mechanism to be followed by all individuals and stakeholders that are connected to the Organization.

Duty to report: All employees have a duty and are encouraged to report suspicions of misconduct, unethical behavior, and actual or possible violations of laws, policies, or Alliance rules as soon as possible after the relevant event.

Accuracy and reporting : The Whistleblower Reporting Mechanism should be accurate and have a clear sequence of events.

Confidentiality: All concerns reported will be treated with the highest level of confidentiality, with information shared on a need-to-know basis, ensuring the protection of due process, adherence to applicable law, and the rights of individuals. To the fullest extent possible, a complainant’s identity will be kept confidential. This restricts access to and dissemination of information, requiring that information be available only to a limited number of authorized people for the purpose of concluding investigations. For situations in which the Alliance might be required, when pursuing legal actions relating to non-compliance on a matter that cannot be resolved without revealing the whistleblower’s identity, the Organization will advise the whistleblower on actions that

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will be taken prior to their commencement. In certain circumstances, when a breach of duty must be confirmed upon the conclusion of an investigation, that confidentiality could be lifted by the Alliance’s Director General or the Board Chair.

The identity of Alliance employees or other persons external to the Alliance who are the subject of reports provided under this Policy shall, at all times, be protected from when the report is first made by those making the report and by those receiving and investigating the report. Breaches in this regard will be treated as serious violations subject to disciplinary action.

Non-retaliation: It is against the Alliance’s Policy for any employee, officer, manager, or director to discharge, demote, suspend, threaten, harass, or discriminate against any individual for making a report in good faith under this Policy. Any such retaliation or harassment could subject an employee to disciplinary action up to and including discharge.

Reporting “in good faith”: Employees making reports in good faith are discharging their duty to protect and serve the Organization. Reports are considered “in good faith” when the employee has reasonable grounds to believe or suspect that a fraud or other dishonest or corrupt act has been committed, even if the belief or suspicion later proves to be unsubstantiated.

Timeliness: Follow-up on allegations and agreed actions must be guaranteed in a timely fashion.

Protection measures/relief: The Senior Ethics Officer in consultation with HR can recommend appropriate measures to the Director General/Managing Directors to safeguard the interests of and protect the whistleblower from retaliation at any time from the moment the whistleblower comes forward. Protection measures are recommended with the consent of the whistleblower.

3. SCOPE


This Policy applies to

- All categories of employees, including full-time and temporary staff, consultants, interns, and all those who have an employment and/or contractual relationship with the Organization.
- All members of the Board of Trustees.
- Third parties such as contractors, vendors, and partners engaged by the Alliance.
- Subsequently, all covered parties are generally referred to as “Personnel.”

All are encouraged to report concerns or complaints regarding misconduct by Alliance staff, regardless of their level (SMT members, managers, etc.). Anyone who has observed reportable misconduct and/or action has an obligation to report it.

This policy governs

- All Alliance operations, including fieldwork and research.

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- Conduct of Personnel during and outside of work hours, for both professional and private activities that might affect the Alliance’s reputation, interests, or mission, regardless of where the activities occurred.

HR/personal work-related grievances do not fall under the scope of this Policy. See Section 5.1.1.

4. DEFINITIONS AND ACRONYMS

Definitions of key concepts are provided in Annex 1.

BOT: Board of Trustees

CGIAR: CGIAR is a global research partnership for a food-secure future dedicated to reducing poverty, enhancing food and nutrition security, and improving natural resources.

HR: Human Resources

LO: Legal Office


SMT: Senior Management Team

5. REPORTING PROCESS

5.1 When and what to report

Alleged misconduct is reportable when it occurs, or is likely to occur, and can be either an act or failure to act. Examples include the following:

- Illegality
- Current or potential waste of Alliance resources
- Abuse of power or authority
- Incorrect financial reporting and fraud
- Fraudulent billing for services not performed or not delivered
- Misuse of Alliance assets
- Activities that are not in line with Alliance policies, including the Code of Ethics and Conduct
- Scientific fraud (data falsification, plagiarism, or ethical violation, i.e., use of data, authorship rights, etc.)
- Gross mismanagement
- Improper conduct and conflict of interest
- Deliberate covering up of violations


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- Non-adherence to government laws or Alliance rules, regulations, policies, or procedures (e.g., Accounting, Procurement, Human Resources, etc.)
- An unethical or unlawful act that is already known to, but is not being diligently reviewed and acted upon by, Alliance managers
- A substantial and specific danger to health and safety or risk to the Organization’s reputation and integrity
- Unfair discrimination during employment or in the provision of services

5.1.1 *Personal work-related grievances*

A personal work-related grievance is a report of behavior that has implications for the discloser personally. Examples include an interpersonal conflict between you and another employee or a decision relating to your employment or engagement, such as a transfer, promotion, or disciplinary action.

These will be reviewed in accordance with the specific HR policies and procedures established by the Alliance for these types of matters.

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5.2 Reporting channel

Lighthouse Services is the Alliance’s external, independent, anonymous, and secure whistleblower service, which is available 24 hours a day, seven days a week. Lighthouse Services has the ability for a complainant to ask for updates and to exchange messages with the Ethics Unit’s staff handling the case, all while maintaining anonymity. Staff can report any allegation through the following five channels:

1. *On the website:* Go to <https://www.lighthouse-services.com/AllianceBVIandCIAT>, click on the “Report an Incident” icon, and follow the instructions.
2. *By telephone:*
 - Find and dial your country number. Country numbers are available at <https://www.business.att.com/collateral/access.html>.

After connecting to your country number, dial the hotline number 800-603-2869.


3. *Via email:* Send an email to reports@lighthouse-services.com, including the name of the Alliance of Bioversity-CIAT in the subject and content of the email.
4. *Via mail:* Send the report to Lighthouse Services, Inc., 1710 Walton Rd., Suite 204, Blue Bell, PA 19422, USA. Be sure to include the Alliance’s name in the report.
5. *Via fax:* (215)-689-3885. Be sure to include the Alliance’s name in the report.

5.3 Alternative reporting channels

Alternatively, staff can make a direct report through the following additional channels:

6. **The immediate supervisor:** Convey your concerns in writing to your immediate supervisor.
7. **Lever/Department Directors/Office Heads:** If your concern relates to your supervisor or if your supervisor has not acted on earlier similar complaints, you can make a written report to your Lever/Department Director/Office Head.
8. **Members of the Senior Management Team:** Managing Directors, Associate Director General, Global Directors, Organizational Development or Legal Office Head, and Director General.
9. **The Chair of the AFRC:**

A report can be submitted directly to the Chair of the AFRC if you

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- have grounds to believe that you will be subject to retaliation by the persons you should report to under the established reporting mechanism or alternative reporting mechanisms;
- consider it likely that evidence relating to the misconduct will be concealed or destroyed if it is reported under the established reporting mechanism or alternative mechanisms;
- have previously reported the same information through the established reporting mechanism or alternative mechanisms and believe that the Organization failed to take appropriate action within a reasonable period; or
- if the reportable concerns/misconduct involve a member of the Senior Management Team (including the DG).

The Chair of the AFRC will decide whether an investigation should be carried out and what form this should take. The Chair of the AFRC might also recommend to the whistleblower that the case instead be reported using the established reporting or alternative mechanisms if, in his/her opinion, it does not meet the criteria to be handled at the Board level. The Chair of the AFRC shall report to the Chair of the Board of Trustees regarding any whistleblower report submitted to him/her.

5.4 *Anonymous reports/complaints*

Although it is preferred and recommended that employees identify themselves when reporting under the above confidential options in order to assist with the investigation of the matter being raised, an employee could also choose to remain anonymous. In the case of an anonymous complaint, the following will apply:

- Such complaints will be subject to careful review, and will be investigated only if the report contains enough information to indicate that there is a basis for the complaint.
- No person subject to such complaints will have to defend himself/herself unless a subsequent investigation independently identifies that he/she has a case to answer.
- If a decision is made to investigate an anonymous complaint, if possible, this will be done as part of the routine audit of the area. The main purpose of such investigations is to see whether there is some control weakness that would plausibly allow the behavior being reported and, if so, then look further. If at any time the complaint appears unfounded, the investigation will stop and be reported to the Board Chair.

Reporting outside the Alliance

Personnel are expected to report suspicions of misconduct through the above-established channels. Protection from retaliation will be extended to an individual who reports his/her concerns externally to the Alliance only if a report was previously made of the same information through the established internal channels, but the Alliance failed to inform the individual of the status of the matter within six months of the report, and the external reporting is necessary to avoid any of the following:

- Imminent danger to the public interest
- Substantial damage to Alliance operations

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- Violations of law

6. PROTECTION AGAINST RETALIATION

Reports of retaliation: Employees who have reasonable grounds to believe that retaliation has been taken against them, or will be taken against them, for having engaged in a protected activity can seek redress by submitting a retaliation complaint through the internal reporting channels listed above as soon as possible, and no later than six months following the adverse action. Retaliation complaints will be responded to in a timely manner based on the seriousness, severity, and urgency of the complaint.

Immediate protections: Based on a preliminary assessment of the complaint, the Alliance can implement interim measures to protect whistleblowers, such as reassignment, offering remote working arrangements, honoring a request to take leave, and/or suspension of reported retaliatory actions. Interim measures can be requested by the complainant in his/her written submission and must be agreed to by the Alliance before they are implemented.

Scope of protection:


- Applies to individuals reporting misconduct, participating in investigations, or assisting whistleblowers.
- Extends to external reporters when internal mechanisms are proven ineffective or pose risks to public safety or organizational integrity.

Accountability for retaliation: Individuals found to have engaged in retaliatory actions will face disciplinary measures, up to and including termination of employment or contracts.

Resolution: Complaints of retaliation are resolved following the procedures established by the Alliance, ensuring adherence to due process and confidentiality.

7. FEEDBACK TO THE WHISTLEBLOWER – INSTITUTIONAL RESPONSE

- i. Whistleblowers are entitled to receive information about the status of their case. The Senior Ethics Officer will acknowledge receipt of an incident report and communicate with the whistleblower to define the immediate next steps within five days of receipt and, within 15 days of the receipt of a report, provide an indication of the period of time considered necessary to undertake the preliminary review.
- ii. The Alliance acknowledges the right of the whistleblower to receive confirmation that the matter has been properly addressed. Therefore, he/she will be given as much feedback as is appropriate

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under the circumstances and, subject to legal constraints, will be informed of the outcome of the process.


- iii. When breaches of duty are confirmed to have occurred, based on an investigation of a report made under this Policy, appropriate action will be taken to correct the failure and avoid similar events in the future.
- iv. For cases directly reported to the Chair of the AFRC, on the basis of the outcome of the investigation conducted, the AFRC Chair will request the Director General to decide what action is appropriate (e.g., disciplinary action against the wrongdoers involved) and ensure that the necessary steps to implement his/her decision are taken. If the case involves wrongdoing by the Director General, the Board Chair will decide what action to take.

8. ADMINISTRATIVE AND DISCIPLINARY ACTIONS

- i. In a case of alleged misconduct involving a staff member, if it is considered that the staff member's continued performance of functions is likely to prejudice the interests of the Organization, the staff member can be placed on administrative leave pending a conclusion on the allegation of misconduct or other actions as required by local laws. Such administrative leave can be with or, exceptionally, without pay.
- ii. Based on investigation results, the Director General/Managing Director can initiate disciplinary proceedings in accordance with local laws when this is a requirement.
- iii. Disciplinary measures are defined in the context of the Disciplinary Policy.
- iv. The use of confidential communication channels to make reports in bad faith, that is, without any basis in fact, for the deliberate purpose of victimizing someone or making malicious allegations as misconduct or disrupting the operations of the Alliance will not be tolerated. Breaches in this regard will be treated as serious violations subject to the Alliance's disciplinary provisions.

9. CONFLICT OF INTEREST

- If the whistleblower has any personal interest in the matter, he/she must make this clear at the time the alleged misconduct is reported. The act of whistleblowing will not shield whistleblowers from reasonable consequences flowing from any involvement in misconduct. A staff member's liability for his/her own conduct is not affected by his/her disclosure of that conduct. However, in some circumstances, an admission might be a mitigating factor when considering disciplinary or other action.

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10. ROLES AND RESPONSIBILITIES

Board of Trustees (BOT): The Board has overall responsibility to ensure that management has sound policies, mechanisms, and procedures for whistleblower disclosures. Specifically, the BOT, through its Audit, Finance, and Risk Committee, will oversee management’s practices.

Audit, Finance, and Risk Committee: Specifically, the AFRC will oversee management’s practices and procedures related to whistleblower disclosures and reporting. It should review the investigation log of cases regularly and report any significant matters to the BOT. If a staff member of senior management is involved in a disclosure or incident report, the AFRC Chair should be notified by the Senior Ethics Officer in the case of Code of Ethics and Conduct violations and take on the role of leading the investigation.

Director General: The DG has the overall responsibility for implementing an effective prevention and management system and promoting the highest standards of conduct. He/she will ensure that all employees are aware of and trained on this Policy and shall act decisively on breaches of this Policy and ensure protection for whistleblowers.


The DG decides, based on the information received, whether an investigation is required upon consultation with the Senior Ethics Officer. The DG authorizes notification/escalation to other stakeholders as appropriate (donors, System Organization, etc.) and informs "how" the investigation will be commissioned: through an internal or an external investigation group. Based on the investigation results, the Director General can initiate disciplinary proceedings after consultation with HR and/or the Legal Office.

Senior Ethics Officer: The Senior Ethics Officer leads the investigatory process as it relates to Code of Ethics and Conduct violations, and makes recommendations to the DG. The Senior Ethics Officer will ensure appropriate communication and dissemination of this Policy and lead capacity development initiatives to ensure awareness.

Managing Directors: Based on investigation results and following consultation with the Senior Ethics Officer, the Managing Directors in the regions can initiate disciplinary proceedings within the framework of the delegation of authority.

All staff: In addition to complying with this Policy, every employee has a role to play in supporting the highest standards of conduct through the reporting of any suspected or actual misconduct through available channels. Under this Policy, every employee shall cooperate fully with investigations while maintaining confidentiality and also participate in ethics training and awareness campaigns.

This Policy does not override, but rather complements, any responsibility of Alliance employees to report concerns externally to local health and safety or law enforcement authorities in cases of immediate danger to life and safety, or when criminal action is taking place.

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11. MONITORING AND REPORTING

- The Alliance shall ensure that all employees receive training on this Policy during onboarding and at regular intervals.
- The DG and the Chair of the AFRC shall monitor on behalf of the Board of Trustees the adequate implementation of this Policy, including reviewing periodic summary reports to be prepared on the number of reports made under this Policy to the Board, the types of concerns and complaints made, the status of the investigations of the reports, the results of investigations completed, and the corrective, punitive, and preventive actions taken, if any.

12. RELATED POLICIES/REFERENCES FOR MORE INFORMATION

- a. Code of Ethics and Conduct
- b. Research Ethics Policy
- c. Delegation of Authority Policy
- d. Disciplinary Policy
- e. Grievance Policy
- f. Enterprise Risk Management Policy
- g. Intellectual Assets and Intellectual Property Rights Policy
- h. Fraud Prevention Policy
- i. Procurement Policy
- j. Cybersecurity and Privacy Policy


For the latest version of the policies, please consult the Policies and Guidelines Dashboard [available here](#).

13. POLICY AUTHORITY

This Whistleblower Policy shall be approved by the Board of Trustees and will be managed and reviewed by the Senior Ethics Officer. The effective date of this revised Policy is **15 March 2021**. This Policy supersedes previous policies regarding this subject matter and previous policies are considered rescinded.

14. VERSION CONTROL

VERSION	DATE OF APPROVAL OF THE NEWEST VERSION	DESCRIPTION OF CHANGE	PREPARED BY
00	17 February 2021	First version of the Whistleblower Policy	Rose Taremwa


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			Maria Fernanda Bedoya
01	18 July 2024	Changed the URL of Lighthouse Services reporting line on p. 8 from www.lighthouseservices.com/cgiar to https://www.lighthouseservices.com/AllianceBVIandCIAT	Nicole Demers
02	29 November 2024	Second version of the Whistleblower Policy changed responsibilities from Human Resources to the Senior Ethics Officer	Noukam, Franck Eric Approved by the Board of Trustees
03	12/06/2025	The whole document was reviewed to ensure alignment with the CGIAR Integrated Partnership Policy on Whistleblowing and Protection from Retaliation	Noukam, Franck Eric

Reviewed by:

Approved by:

	Approved on 17 February 2021
Ingrid Lambert Director, Human Resources Vanessa Riveros, Head, Organizational Development Unit	Senior Management Team (SMT)
	12/06/2025
Vanessa Riveros, Head, Organizational Development Unit Senior Management Team Executive Committee of the Board of Trustees	Board of Trustees

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ANNEX 1: DEFINITIONS

1. **Whistleblower:** An individual who reports in good faith a reasonably held suspicion of misconduct or violation of policies, procedures, or applicable laws within the Alliance.

2. **Retaliation:** Any unjustified adverse action recommended, threatened, or taken against an individual for engaging in protected activities, including reporting misconduct or cooperating with investigations. Examples include but are not limited to
 - Termination of employment
 - Unjustified demotion or reduction in base salary
 - Denial of opportunities for promotion
 - Unwarranted poor performance appraisals
 - Changes in job duties or other negative decisions affecting the individual’s terms and conditions of employment
 - Withholding of resources for work assignments
 - Deliberately causing professional harm within the scientific community
 - Unjustified denial of authorship on publications or research papers

3. **Protected activity:** Activities such as reporting misconduct, assisting whistleblowers, or cooperating in investigations or grievance processes, carried out in good faith and with reasonable grounds.