

**INVESTIGATION REPORT NO. 17/1119**

ALLEGATIONS OF SEXUAL ASSAULT AND SEXUAL HARRASSMENT AT THE JOINT  
UNITED NATIONS PROGRAMME ON HIV/AIDS

**September 2017**

**Case No 2016/69**

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**World Health  
Organization**


OFFICE OF INTERNAL OVERSIGHT SERVICES

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JOINT UNITED NATIONS PROGRAMME ON HIV/AIDS

SEPTEMBER 2017

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EXHIBITS

1. Complaint from [REDACTED] to Dr Michel Sidibé (copied to [REDACTED] and [REDACTED]), dated 7 November 2016;
2. Email titled "Grievances" from [REDACTED] to Dr Luiz Loures (copied to Dr Sidibé, [REDACTED] and [REDACTED]), dated 3 November 2016;
3. Transcript of interview with [REDACTED] 21 Dec 2016<sup>1</sup>;
4. Notes to the transcript of interview submitted to IOS by [REDACTED] on 15 March 2017<sup>2</sup>;
5. Assignment details extracted from the GSM regarding [REDACTED];
6. [REDACTED]'s comments on statements and other documents provided to her, 6 September 2017;
7. [REDACTED]'s comment regarding the transcript of her interview, 15 March 2017;
8. Email exchange between IOS and the General Manager of the Dusit Thani hotel in Bangkok, Thailand, dated 15-21 February 2017;
9. Transcript of interview with [REDACTED], 30 January 2017<sup>3</sup>;
10. Transcript of interview with [REDACTED], 6 February 2017<sup>4</sup>;
11. Transcript of interview with [REDACTED], 2 February 2017;
12. Transcript of interview with [REDACTED], 19 February 2017;
13. Transcript of second interview with [REDACTED], 22 May 2017;
14. Transcript of interview with [REDACTED] 28 February 2017;
15. Transcript of interview with [REDACTED], 3 February 2017;
16. Transcript of interview with [REDACTED], 2 February 2017<sup>5</sup>;
17. Commentary regarding the transcript of her interview submitted by [REDACTED] to IOS on 12 March 2017;
18. Email from [REDACTED] to IOS, 30 January 2017;
19. Summary of activities on 7-8 May 2015 submitted to IOS by [REDACTED] on 30 January 2017;
20. Transcript of interview with Dr Luiz Loures, 17 March 2017;
21. Anonymous email from [unaidsmisconduct@yandex.com](mailto:unaidsmisconduct@yandex.com) to 35 recipients, dated 13 April 2016;
22. Description of location of Club floors and Executive Club Lounge Bar of the Dusit Thani hotel in Bangkok, Thailand;
23. Statement submitted to IOS by [REDACTED] dated 21 June 2017;
24. Transcript of second interview with [REDACTED], 21 June 2017;
25. UNAIDS Country Director Global Meeting Agenda for meetings in Bangkok, Thailand, in May 2015;
26. Email exchange between [REDACTED] and IOS dated 21 June 2017;
27. Email from [REDACTED] to IOS dated 28 March 2017;
28. Additional information submitted by Dr Loures to IOS on 28 March 2017;
29. Email from [REDACTED] to IOS, 24 January 2017;

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<sup>1</sup> This transcript has been redacted to remove allegations which do not relate to this investigation

<sup>2</sup> Ibid

<sup>3</sup> Ibid

<sup>4</sup> Ibid

<sup>5</sup> Ibid

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30. Biography of Dr Loures extracted from UNAIDS's website;
31. IOS memorandum to [REDACTED] regarding disclosure of interview records and other documents;
32. Transcript of second interview with Dr Loures, 12 July 2017.

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I. INTRODUCTION

1. On 7 November 2016, [REDACTED] [REDACTED] [REDACTED] UNAIDS, submitted a formal complaint by email to Dr Michel Sidibé, Executive Director, UNAIDS (copying [REDACTED] Director, Human Resources Management, UNAIDS, [REDACTED] Ombudsman WHO and UNAIDS, and [REDACTED] Senior Ethics Officer, UNAIDS), about “continued sexual harassment and abuse”, allegedly perpetrated by Dr Luiz Loures, Deputy Executive Director, Programme (DXD) (Exhibit 1).

2. In her email, [REDACTED] claimed she had been the victim of a sexual assault in May 2015 during a UNAIDS meeting of Country Directors in Bangkok, Thailand. Regarding the assault, she stated: *“In May 2015, following a reception at the occasion of a UNAIDS meeting of Country Directors in Bangkok, Thailand, I was sexually assaulted by your Deputy Executive Director, Luiz Loures. With the pretense that he was seeking a work related discussion with me on HIV prevention, I warily joined him in the hotel lounge for a conversation. Afterwards, he proceeded to sexually assault me in the hotel elevator. As the elevator opened for him to exit to his floor he insisted that I follow him to his room for sexual intercourse and tried to force me with him by pulling my arm and dragging me out of the elevator. Luckily I managed to remain in the elevator and escaped”* (Exhibit 1, paragraph 2).

3. Further, [REDACTED] alleged she was the victim of “persistent sexual harassment” by Dr Loures. [REDACTED] stated: “Since 2011 I have been subjected by Luiz Loures to numerous unwelcome remarks about my appearance, and several times I have been subjected to his unwelcome and offensive touching of my back, my hair and my neck” (Exhibit 1, paragraph 3).

4. Lastly, [REDACTED] claimed that Dr Loures retaliated against her and discriminated against her following the incident of sexual assault. (Exhibit 1, paragraph 4). *“Following the incident of sexual assault, my work environment became increasingly difficult and LL [Dr Luis Loures] started to explicitly block my work, excluded me from participation in key meetings in areas which I was leading, and systematically rejected my requests for duty travel. When I became the victim of a malicious and anonymous defamation campaign in early 2016, Luiz Loures was very hands-on about reprimanding me and immediately reassigned me to a post in one of his department which I had to reject to protect my physical integrity. I did at this point bring this to the attention to the UNAIDS Chief of staff in March 2016 and was explicit about the assault that I suffered from Luiz Loures, I*

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5. [REDACTED] stated in her email that she decided to file a formal complaint after “*facing the prospect of being placed back in the programme branch under the supervision of Luis Loures*” (Exhibit 1, paragraph 5).

## II. OBJECTIVE, SCOPE AND APPROACH

6. IOS decided to investigate the allegations made by [REDACTED] in spite of the fact that the alleged sexual assault occurred more than six months before the date of submission of the formal complaint. This decision was made in view of the serious nature of the allegations. The objective of the investigation was to establish the facts and present the evidence gathered in relation to the allegations of sexual harassment and sexual assault. IOS informed [REDACTED] that the allegation of retaliation had to be considered separately (per Paragraph 12 of the Policy on Whistleblowing and the Prevention of Retaliation and Information Note MER/Ethics 2015-1) and advised her to submit the allegations of retaliation to the Ethics Officer, UNAIDS, in accordance with the above mentioned policy.

7. The investigation included a review of relevant documentation and interviews with [REDACTED] Dr Loures, and seven witnesses.

## III. APPLICABLE LAWS

### POLICY ON THE PREVENTION OF HARASSMENT AT WHO (2010)<sup>6</sup>

8. Paragraph 3.1.1 under section I of the Policy on the Prevention of Harassment at WHO defines harassment as:

*“any behaviour by a staff member:*

- *that is directed at another staff member and has the effect of offending, humiliating or intimidating that other staff member; and*

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<sup>6</sup> Applied by UNAIDS by way of UNAIDS Information Notes 2011-1, 2011-3, and 2016.02

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- *which that person knows or reasonably ought to know would offend, humiliate or intimidate that person; and*
- *which interferes with a staff member's ability to carry out their functions at work and/or creates an intimidating or hostile work environment."*

9. Paragraph 3.2.1 states : "*sexual harassment is a form of harassment that "includes any unwelcome and unwanted sexual advance, request for sexual favours, or other unwelcome or unwanted written, verbal or physical conduct of a sexual nature."*

10. Paragraph 3.2.2 states: "*When sexual harassment is committed by a staff member who is in a position to influence the career or employment conditions of the staff member who is sexually harassed, or where sexual harassment is made an implicit or explicit condition of employment, it is more offensive."*

**ETHICAL PRINCIPLES AND CONDUCT OF STAFF**

11. Section 3.1.2 H, paragraph 25: "*Harassment means any behaviour by a staff member that is directed at and is offensive to others, which that person knows or should reasonably know, would be offensive, and which interferes with work or creates an intimidating, hostile or offensive work environment. Harassment may include conduct, comment or display related to race, religion, colour, creed, ethnic origin, physical attributes, age, gender, or sexual orientation. It may involve a group or team and may occur among and between all levels of employees. It can take many different forms, including sexual harassment. The most common origin of harassment is unresolved conflict in the workplace; it is often prolonged and malicious"*.

12. Section 3.7.1 W, paragraph 82: "*WHO is committed to ensuring compliance with its Regulations and Rules. As such, any staff member who, in good faith, reports suspected misconduct by another staff member will be protected from retaliation in accordance with the WHO Whistleblower Protection Policy. However, the intentional filing of a false or misleading report is itself a violation of the Organization's regulations and rules that may constitute misconduct and may result in disciplinary proceedings.*

13. Section 3.1.6, Personal Relationships in the workplace, paragraph 36: "*[...] In cases where there is a hierarchical or supervisory relationship, the colleagues have an obligation to bring the relationship to the attention of their respective supervisors or Director HRD or DAF in order to decide for example whether one of the persons should be reassigned to a different work unit"*.



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STANDARDS OF CONDUCT FOR THE INTERNATIONAL CIVIL SERVICE (2013)

14. Guiding Principles, states the following:

*“5. The concept of integrity enshrined in the Charter of the United Nations embraces all aspects of an international civil servants’ behaviour, including such qualities as honesty, truthfulness, impartiality and incorruptibility. These qualities are as basic as those of competence and efficiency, also enshrined in the Charter.*

*6. Tolerance and understanding are basic human values. They are essential for international civil servants, who must respect all persons equally, without any distinction whatsoever. This respect fosters a climate and a working environment sensitive to the needs of all. To achieve this in a multicultural setting calls for a positive affirmation going well beyond passive acceptance.”*

15. Working Relationships, states the following:

*“16. Managers and supervisors are in positions of leadership and it is their responsibility to ensure a harmonious workplace based on mutual respect; they should be open to all views and opinions and make sure that the merits of staff are properly recognized. They need to provide support to them; this is particularly important when staff are subject to criticism arising from the performance of their duties. Managers are also responsible for guiding and motivating their staff and promoting their development.*

*17. Managers and supervisors serve as role models and they have therefore a special obligation to uphold the highest standards of conduct. It is quite improper for them to solicit favours, gifts or loans from their staff; they must act impartially, without favouritism and intimidation. In matters relating to the appointment or career of others, international civil servants should not try to influence colleagues for personal reasons.”*

16. Harassment and abuse of authority, states the following:

*Section 21: Harassment in any shape or form is an affront to human dignity and international civil servants must not engage in any form of harassment. International civil servants have the right to a workplace environment free of harassment or abuse. All organizations must prohibit any kind of harassment. Organizations have a duty to establish rules and provide guidance on what constitutes harassment and abuse of authority and how unacceptable behaviour will be addressed”.*

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*Section 22: International civil servants must not abuse their authority or use their power or position in a manner that is offensive, humiliating, embarrassing or intimidating to another person.*

**STAFF REGULATIONS AND STAFF RULES**

17. Staff Regulation 1.1 states: *“All staff members of the Organization are international civil servants. Their responsibilities are not national but exclusively international. By accepting appointment, they pledge themselves to discharge their functions and to regulate their conduct with the interests of the World Health Organization only in view.”*

18. Staff Regulation 1.5 states: *“Staff members shall conduct themselves at all times in a manner compatible with their status as international civil servants (...).”*

19. The Staff Rules defines misconduct as:

*Paragraph 110.8.1: “any improper action by a staff member in his official capacity”;*

*Paragraph 110.8.2: “any conduct by a staff member, unconnected with his official duties, tending to bring the Organization into public discredit”*

*Paragraph 110.8.3: “any improper use or attempt to make use of his position as an official for his personal advantage”*

*Paragraph 110.8.4: “any conduct contrary to the terms of his oath or declaration”.*

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#### IV. BACKGROUND

[REDACTED]

20. According to the GSM, [REDACTED]'s first contract with UNAIDS commenced in 2008 at grade P2 (Exhibit 5). Dr Loures was her direct supervisor from 2 January to 1 February 2013 and second level supervisor from 8 July 2013 to 1 January 2014 (Exhibit 5). From 1 July 2015 to 13 April 2016, [REDACTED] was a Technical Adviser in the Office of Special Initiatives (OSI) (Exhibit 5). [REDACTED] Chief, Office of Special Initiatives, UNAIDS, was her direct supervisor during this period whilst Dr Loures was her second level supervisor (Exhibit 5). Since 13 April 2016, [REDACTED] has been a [REDACTED], in [REDACTED] [REDACTED] (Exhibit 5). Her direct supervisor is [REDACTED], Director, Resource Mobilization, UNAIDS (Exhibit 5).

#### DR LUIZ LOURES

21. Dr Loures joined UNAIDS in 1996 and currently holds the rank of Deputy Executive Director of Programme and Assistant Secretary-General of the United Nations since January 2013. Prior to this appointment, Dr Loures was Director of the Political and Public Affairs Branch of UNAIDS, and Director of UNAIDS' Executive Office. He also managed UNAIDS' activities in the Americas and Europe as the Associate Director of the Country and Regional Support Department. Dr Loures is a medical doctor (Exhibit 30).

#### V. INVESTIGATION OF ALLEGATIONS

##### 1. Allegation of sexual harassment

22. In her complaint dated 7 November 2016, [REDACTED] alleged that she had been the victim of "persistent sexual harassment" by Dr Loures. [REDACTED] stated: "Since 2011 I have been subjected by Luiz Loures to numerous unwelcome remarks about my appearance, and several times I have been subjected to his unwelcome and offensive touching of my back, my hair and my neck" (Exhibit 1, page 2, paragraph 2).

23. During her interview with IOS, [REDACTED] stated: "So he has always been... If you are talking about that part of things, sort of non-work related, he has always been, [REDACTED], you look very good. I can see that

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*vacation has done you good..." Or I have always been looked at, like, you know, you can see when a man looks at you, you know, I don't know, stares at you, you can see when a man is looking at your chest or looking at your shape, or looking at these things, you know he has always been sort of, you know, kissing me when he sees me, holding my hair around my neck, he's always been.. I can think of a few instances. When he has said, "Oh [REDACTED] you are looking very good, I can see you are very nice, you are looking beautiful today." These types of things. Always". (Exhibit 3, paragraph 50). [REDACTED] claimed that the sexual harassment had "been going on since I came to UNAIDS Geneva in 2011" (Exhibit 3, paragraphs 50 to 52).*

24. IOS asked Dr Loures whether he recognized [REDACTED]'s statement about kissing on the cheek and physical contact when greeting someone. He stated: *"Oh yes, for sure. I have no problem at all. Of course, yes. Because I do this everybody, you know? That's my point. It's random in a way, as I said. I don't see a person for a long time, I do, but I do with men too" (Exhibit 20, paragraph 181).*

25. [REDACTED] stated Dr Loures had always been complimentary of her work, which she appreciated, but felt uncomfortable when he would compliment her on her appearance. She stated: *"I felt he was always very appreciative of my work insofar that it was... yes, that one can notice or that it is being said and things like that" (Exhibit 3, paragraph 46). "[O]f course when he compliments my work that I feel supported, there have definitely been moments when I have felt supported, that he has been supportive of me. If he compliments your intelligence or how well you are doing in a meeting or things like that, I feel supported. If he is complimenting my appearance, I feel uncomfortable" (Exhibit 3, paragraph 56).*

26. Further, [REDACTED] stated *"crossing me in the corridor, crossing me in the cafeteria, you know, "Come to see me, come to my office, come to see me, I am always here for you, I am here to support you...". Those types of things, always; always, yes" (Exhibit 3, paragraph 54). "[W]hen he says, [REDACTED] you have to come and see me, come and see me today, come to me, can I call you..." and these things, I have just been like, "Oh..." ignored it or laughed it away, and I've disappeared, stayed away" (Exhibit 3, paragraph 62).*

27. [REDACTED] stated that Dr Loures' behaviour towards her, which she deemed inappropriate, was recognized by others. For instance, she stated: *"my old boss [REDACTED] would be like, "Stop hitting on my staff now, Luiz." And this was in front of the Human Resource Manager [REDACTED] and it was me, [REDACTED] who is the Head of HRM, and there was Luiz Loures, and we were in a small room reviewing the organigramme, and I was carrying the bulk of the work. And at one point, [REDACTED] said, "OK, that's enough now, Luiz. Stop hitting on my staff" (Exhibit 3, paragraph 64).*

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28. Another two examples were given as follows. [REDACTED] stated: "I can tell you about a story when there was a time one day [in 2012<sup>7</sup>] when I was out in a restaurant with [REDACTED] for example. We were in an Italian restaurant just by the lake. There was the [REDACTED] and there were some other people coming to the same restaurant, and Luiz was there in a work capacity. Me and [REDACTED] were there on a private dinner. It was in the evening. And Luiz would come and he would, you know, come behind, "How are you, [REDACTED] oh you are looking great, and you have lost all your maternity weight..." this type of comments, you know. And the reason it stands out in my mind was because we had a conversation after saying that how inappropriate it is, this type of comments, how the hands are always lingering. I remember making a comment saying, "Yes, the hands always linger a little too long, and it's just a little bit too close to kisses on your mouth..." and that kind of stuff. And a more recent thing happened [in September 2016<sup>8</sup>] just when I came back from my leave, the summer leave, when I was back in September of this year, when we would stand in a garage, and it was the first day back from the leave and I bumped into, I was with [REDACTED] and I bumped into Luiz in the garage and [REDACTED] stayed talking, and he was saying that, "Oh [REDACTED] I can see you are also very, very good, I can tell that vacation for you has been very, very good." And then, you know, like touching my neck and things like that" (Exhibit 3, paragraph 78).

29. When interviewed by IOS, [REDACTED] also recalled details of their encounter with Dr Loures in the garage. He stated: "I have seen one day a total [in]appropriate and touching in the – now that you're talking about, in the garage of UNAIDS. You know, we have an underground garage. That one I have seen, you know, kind of touch and, too much, that I witness. And I've seen, and that – and I don't remember, but I just remember seeing [REDACTED] almost like a stone, and Luiz touching her like, "Oh, [REDACTED] how are you doing?" etc., etc" (Exhibit 16, paragraph 375). "[I]t was for me too affectionate. I would not, I would not do that with you. No. No, no" (Exhibit 16, paragraph 379).

30. IOS asked Dr Loures to respond to [REDACTED] and [REDACTED]'s quotes regarding their meeting in the garage. He responded: "I don't recall anything special, but I confirm it to you that we greet each other several times. [REDACTED] is another one that I kiss too" (Exhibit 20, paragraph 213). And "I recall kissing him more there. That's for sure. You know? But I'm not seeing, not specific event, but I agree we met several times in the garage, even yesterday we said hello to each other, because I was walking, he was driving there at the time" (Exhibit 20, paragraph 223).

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7 Exhibit 7, para 80.

8 Exhibit 7, para 80.

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31. Dr Loures also claimed that [REDACTED] was not a reliable source, and suggested he had ulterior motives for making allegations against Dr Loures. He stated: “[REDACTED] and [REDACTED] have a relationship. [...] in terms of [REDACTED] and the whole of the allegations, because I think this is not unlinked. [REDACTED] is not to be a credible source” (Exhibit 20, paragraph 211).

32. [REDACTED] stated that she had talked about Dr Loures’ behaviour towards her with several others. She stated: “I have spoken about this with [REDACTED] who is my friend. I have spoken about this with [REDACTED] who used to be the Deputy Department Director at the time, and who is now the Country Director in [REDACTED], and who was also a friend of mine at the time and somebody I worked with very closely. And then I discussed it also with [REDACTED] [...] who used to be my old supervisor, and I think I have also expressed it to [REDACTED], who was my since supervisor, I told [REDACTED] who used to be my colleague and friend as well” (Exhibit 3, paragraph 76).

33. IOS asked [REDACTED] how she responded to Dr Loures behaviour. She responded: “I have just been like, “Oh...” ignored it or laughed it away, and I've disappeared, stayed away” (Exhibit 3, paragraph 62). IOS asked [REDACTED] whether she had discussed her discomfort with Dr Loures, or let him know that she would like him to cease this behaviour. [REDACTED] answered: “No, I've never done that. I never went to see him. I have never encouraged anything. I have always been evasive or, you know, “Thank you, thank you.” I would say that I ducked, but I have not actually said it, “Stop, that makes me...” No, I have not” (Exhibit 3, paragraph 60).

34. When [REDACTED] was asked whether Dr Loures’ behaviour has changed over the years, she stated: “Just a little bit, I would say. I was obviously pregnant for quite a long period, as I told you. You know, in 2011, there was a period when I was pregnant and I would feel that there was less flattery during the period that I was fully pregnant and postpartum, yes. Then I think it picked up again. And I think as my weight gain went and I've regained shape, I think it intensified”. (Exhibit 3, paragraph 82).

35. Dr Loures stated: “I don’t recall seeing much in her pregnant, for some reason, and usually because of my, what I told you before, I am very linked with that, you know? I see when my staff are pregnant [...]. The comment regarding maternity leave, I don’t recall, and I don’t think there is any base there. In terms of your, I said before, in terms of coming warm to her and kissing her sometimes, hold her hand and so, definitely, I don’t deny” (Exhibit 20, paragraph 179).

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36. [REDACTED] stated that the sexual harassment continued even after the alleged sexual assault in Thailand. She stated: *"And only in Thailand for example, when I met him at the breakfast bar, like a few days after, he would say, "Oh [REDACTED] ..", like he would still come to kiss me, and this. Like the morning of the – you know, of those things in front of everybody. I don't know if, because I don't know if people were talking and there were rumours and things like that in Thailand. He was saying things like, "Oh [REDACTED], your lips look so sexy" and things. So you know, it had never stopped. There was definitely like a down period but it has always been there. It never really went away (Exhibit 3, paragraph 286).* [REDACTED] stated that the harassment "cooled off" after she made a formal complaint. She stated: *"And now since this request became formal in October, whenever I made it, he did not even say hello to me at the PCB, so that one has definitely cooled off completely now" (Exhibit 3, paragraph 82).*

37. IOS asked Dr Loures how he interacted with [REDACTED] when they met. He responded: *"Nothing special. I think as I interact with anybody, adult and professional" (Exhibit 20, paragraph 133).* IOS asked Dr Loures to be more specific in describing interactions with others. He stated: *"There are people that of course I have a more close relationship and so they're with, their time with me most of the time and so, I don't see anything special in terms of how I would relate. If your questions is, do I shake their hands, and do I kiss their face [...], probably I do both" (Exhibit 20, paragraph 144).*

38. Dr Loures described himself as welcoming to others, approachable, and that people relate to him. He suggested that being a medical doctor also encourages others to approach him. He stated: *"I am a doctor, too" (Exhibit 20, paragraph 156), ...layers are hierarchical [...]. Well, that's not for me anyway. [...] I eat in the cafeteria" (Exhibit 20, paragraph 169).* *"I have a pretty opened one relationship with staff that goes all the way to, I think, the confidence that they have to come to me very often with medical questions. So, that's not selective. It's across the organisation. People that are in other branches, or in other positions, which rather I'm very pleased with because helping them solve things of the problem of relationship. But I'm not reserved at all" (Exhibit 20, paragraph 160-164).*

39. Dr Loures was asked whether he saw any discomfort in his behaviour towards [REDACTED]. He responded: *"No way, no way, counter of that" (Exhibit 20, paragraph 195).* He further stated that he was never alone with [REDACTED]. He stated: *"The few interactions that we had, she never saw, never show any discomfort, except there was always ever somebody in the room" (Exhibit 20, paragraph 249).*

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40. During his interview, Dr Loures made reference to email correspondence between [REDACTED] and [REDACTED], in which he claimed it was stated that [REDACTED] “had a relationship with [REDACTED]” (Exhibit 20, paragraph 1853). IOS notes that Dr Loures referred to an email from an anonymous source dated 13 April 2016, which was sent to Dr Loures, senior UNAIDS staff, and external parties (Exhibit 21). An attachment to this email includes email correspondence between [REDACTED] and [REDACTED] in which [REDACTED] wrote: “But the [REDACTED] episode has had more damage than what I thought on my feelings for you. I don’t think you meant to ever hurt me – but you have. Maybe you just want fun. Or maybe you cannot stand alcohol. I am still trying to find an explanation to what happened that evening. It hurts too much [...]” (Exhibit 28, page 5).

41. Dr Loures stated: “Where [REDACTED] is telling [REDACTED] things like that. “We know very well how you behave. Mainly when you are drunk. You know? We know very well that me and you, we have several partners, we have things,” and so and so and so” (Exhibit 20, paragraph 1853). Dr Loures stated that this established a “pattern” of behaviour (Exhibit 20, paragraph 1855). He further claimed: “That she is the victim of harassment, and so in that case, that looks like that was actually harassing, and that’s not new for her, according to [REDACTED] engaged in different things and flirtations” (Exhibit 20, paragraph 1861).

#### Comments made by other witnesses during IOS Interview

42. During IOS interviews with other witnesses regarding the investigation of allegations of sexual assault, they were asked to describe their observations of interactions between [REDACTED] and Dr Loures.

43. When IOS asked [REDACTED] Director, Programme, Partnerships and Fundraising, UNAIDS, to describe any interaction he witnessed between Dr Loures and [REDACTED] in the past, he answered: “if I get the tone of your question, I’ve not witnessed anything that I would say, “Oh, there is something going on here, either good, bad, ugly, whatever [...]” (Exhibit 11, paragraph 103).

44. [REDACTED] also stated: “I haven’t seen anything that is, anything that’s wrong. [...] I mean, it’s, I’ve never seen anything outside that. [...] I don’t know if this is useful, but Luiz, as I said, is someone who is culturally – I mean, he’s Brazilian, he comes from, and I come from India – just to give you the contrast, I mean, for me, I always keep a distance from people, and that’s my culture, and I’m sure his culture is one where he’s much more – he takes people’s hands, he shakes it, he holds it. That he does whether it is a man or a woman. I mean, it’s



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like – I'm not sure how that – sometimes it could be interpreted as wrong, but I, but to say that, I haven't seen that happen with [REDACTED] and him, but yeah" (Exhibit 11, paragraph 109).

45. When IOS asked [REDACTED], Director, Programme Office, UNAIDS, whether he had witnessed any unusual behaviour by Dr Loures towards [REDACTED], he stated: "No. In the last two years, none whatsoever" (Exhibit 12, paragraph 287).

46. IOS asked [REDACTED], Country Director [REDACTED], UNAIDS, whether she had witnessed any interaction between [REDACTED] and Dr Loures, for instance during meetings they attended together, or chance encounters (Exhibit 15, paragraph 88). [REDACTED] stated: "I've been in meetings where both of them have met, I mean, so small meetings as well as large meetings. [...] I did not witness anything special" (Exhibit 15, paragraph 89). When IOS asked whether she had witnessed any special or inappropriate behaviour, she stated: "I've not witnessed anything extraordinary on either of them, actually, neither in terms of animosity nor friendship. Absolutely not [any inappropriate behaviour]" (Exhibit 15, paragraph 90-93).

**Findings – allegation of sexual harassment**

47. IOS found that the allegations made by [REDACTED] in her complaint and interviews with IOS did not include specific details of act(s) or conduct that could be described as sexual harassment in accordance with the definition of sexual harassment in paragraph 3.2.1 of the Policy on prevention of harassment at WHO, i.e.:

Paragraph 3.2.1:

*“sexual harassment is a form of harassment that “includes any unwelcome and unwanted sexual advance, request for sexual favours, or other unwelcome or unwanted written, verbal or physical conduct of a sexual nature.”*

48. For example, IOS found that [REDACTED] stated that she has been subject to “offensive touching of my back, my hair and my neck” and “touching my neck and things like that” but she did not provide specific details of the circumstances in which the physical contact allegedly occurred. In addition, IOS found that [REDACTED] stated he witnessed Dr Loures touching [REDACTED] which he [REDACTED] described as inappropriate and “too affectionate” but did not provide specific details of the physical contact.

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49. IOS found that Dr Loures stated he did kiss on the cheek and engage in physical contact when greeting individuals, both male and female. Dr Loures stated he did this with “everybody”. IOS also found that Dr Loures stated with respect to [REDACTED] that he engaged in “kissing her sometimes” and “hold her hand”.

50. IOS found that [REDACTED] stated that at the time she did not express offence or humiliation towards Dr Loures at any of the comments or gestures allegedly made by him which she subsequently described in her complaint as sexual harassment.

**Conclusion - allegation of sexual harassment**

51. IOS concludes that Dr Loures’ reported behaviour in kissing and engaging in physical contact with staff may be viewed as inappropriate, especially given his senior position; however, there is insufficient evidence to support [REDACTED]’s allegations that she was sexually harassed by Dr Loures.

**2. Allegation of sexual assault**

**The Global Meeting in Bangkok in May 2015**

52. The sexual assault allegedly occurred during a UNAIDS Country Director Global Meeting in Bangkok, which took place from 8 to 13 May 2015 (**Exhibit 25**). Prior to the start of the meeting there were meetings scheduled for 7-8 May 2015 with civil society representatives. During his interview with IOS, [REDACTED] described the meetings in Bangkok as follows. “*The meeting was primarily for UNAIDS country directors and senior staff of UNAIDS headquarters and regional offices. The Executive Director also asked us to organize a meeting of civil society representatives, key civil society representatives, from all over the world, ahead of this meeting. So there was that meeting, and there was another meeting that was not organized by UNAIDS but was organized by the US Government, which brought in government leaders and civil society and a few other actors on the AIDS response whom the US Government were funding for their AIDS programs in Bangkok. So there were three meetings that took place, but the meeting that UNAIDS primarily organized were two: one for civil society which was for two days, and I think it was a three or four-day meeting which was the, what we call the all-staff meeting, but it’s largely UNAIDS representatives and senior staff*” (**Exhibit 12, paragraph 39**).

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Date of the alleged sexual assault

53. [REDACTED] stated in her interview with IOS on 21 December 2016 that the sexual assault reportedly occurred on the evening of 7 May 2015 at the Dusit Thani Hotel in Bangkok. She stated *“the incident happened when we were, there was a global meeting of the Heads of UNAIDS Country Offices which happened at the Dusit [T]hani Hotel. Just before coming for this interview, I looked up the date and the agenda. It happened during the reception on 7th of May there and I checked in the agenda, it was between 6.30 and 20.00, presumably Thai time. I think it was on a Friday, but I'm not sure”* (Exhibit 3, paragraph 94).

54. [REDACTED] added: *“this is the formal reception by UNAIDS. You know, like the night before the actual whatever week of things that are going to happen. The whole meeting was from 8th to 13th May, this is the evening of the 7th. So this is supposed to be a nice kind of catch up for everybody, and then tomorrow morning we go into meetings. And I guess that it was an early kind of reception that was 6.30 to 20.00 the agenda”* (Exhibit 3, paragraph 96).

55. During her second interview with IOS on 21 June 2017, [REDACTED] stated that the reception commenced at approximately *“7 or 8 [pm], something like that”* (Exhibit 24, paragraph 66).

56. According to a summary of activities on 7 and 8 May 2015 provided by [REDACTED] (Exhibit 19), a Civil Society meeting was held on 8 May 2015, from approximately 8:30 am to 5:30 pm. An official UNAIDS reception followed. [REDACTED] stated he had dinner *“in the hotel”* with Dr Luiz and *“other common friends and colleagues”* (Exhibit 19, point 7).

57. IOS attempted to clarify the date of the alleged assault in the second interview with [REDACTED] [REDACTED] stated: *“Me, I quite admittedly, I, the, whether it's the 7th or this, I don't know. I just know that it was at the reception. It was just before the opening of the actual thing”* (Exhibit 24, paragraph 176). In a subsequent email, she stated: *“I am sending you the agenda that I could find. It is indicated that the reception was on the evening of the 8th with the formal meeting starting immediately the next day”* (Exhibit 26). When IOS asked whether the alleged sexual assault occurred on the 8<sup>th</sup> of May, [REDACTED] answered *“the assault happened after the reception and it would appear to be the 8 May”* (Exhibit 26).

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Findings

58. IOS found that although [REDACTED] stated in her first interview with IOS that the alleged sexual assault occurred on 7 May 2015, she subsequently stated that it occurred on the evening of Friday 8 May 2015.

Events leading up to the alleged sexual assault

59. [REDACTED] stated during her interview: *"I was at the cocktail and I speaking [sic] to everybody. At one point, Luiz actually comes up to me, I'm about to leave, I'm standing by a table, and I finish my drink, and I'm about to leave the event. [...] And so, I was standing at the table, there is like a little bar kind of table, I had been sitting previously and discussing with some of my friends, my friend [REDACTED] who was in [REDACTED] at the time. Anyway, we stood up, and Luiz comes to me and says, "Hi [REDACTED], how are you..." and we have a chat, and he basically says hello. You have to imagine that me, I am quite formal still at this point. You know, I have worked in a Deputy Front Office, so I am not totally formal because I used to work with them, and Luiz is not a very formal person, but still it's quite formal even though the setting is [informal]"* (Exhibit 3, paragraph 94).

60. [REDACTED] stated during her second interview that she believed a conversation between herself and Dr Loures began at the reception approximately *"an hour, an hour 15 minutes"* after the start of the reception (Exhibit 24, paragraph 68). She stated that the conversation during the reception *"I think it would have lasted like, maybe 15 minutes or so"* (Exhibit 24, paragraph 82).

61. Dr Loures confirmed he spoke to [REDACTED] on the evening of the reception at the Dusit Thani hotel. He stated: *"I spoke to her during the period. I have no question that did happen. I spoke to her. I remember"* (Exhibit 20, paragraph 363). *"The reception was – if you – I mean, I'm sure it was in the ground floor, you know, in the area down there"* (Exhibit 20, paragraph 367).

62. [REDACTED] stated they started *"talking about HIV Prevention and we start talking about the agenda and he says, "Yes, I really want to have your ideas, because Prevention we really need to think about..." and at that point, I had just left the Prevention Team relatively recently. You remember I told you that I left in about early November and this is now in May. And he was saying, "The Prevention Team just isn't the same without you, I think that now we have nobody good there, and I need to really do something on Prevention and we need like you, some ideas of people that are younger, what we can do..." you know, like that. And of course I was very enthusiastic about that he asking [sic], I wanted to give him ideas, and also because I am very professionally and*

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privately very passionate about HIV Prevention. It's an area I've been working in for a long time. So even though I had left the unit, I was giving out some ideas and I was saying, and he was saying, "Yes, we really need to... I feel like we need to sex up the Prevention agenda, and not be afraid to speak about sex, because this is what this is what it's really about" (Exhibit 3, paragraph 98).

63. In her second interview with IOS, [REDACTED] also recalled that the conversation with Dr Loures commenced with talking about HIV prevention, and that Dr Loures asked her about her ideas: "and he says that, you know, that he feels that there has been a loss in the prevention team with my departure, and that there is nobody that brings new insights and ideas, and that it is, you know, and we need a new agenda, and that he feels, you know, not quite sure what to say, in his talk, the following day about it, and that he would like to seek my ideas. And so I provided some ideas" (Exhibit 24, paragraph 60).

64. Dr Loures stated he did not remember talking about HIV prevention with [REDACTED] "I could have talked, but I don't see why I would have a discussion about prevention, my view, yeah" (Exhibit 20, paragraph 380). Dr Loures added that any discussion on prevention would have included others "[This is not] usual for me. If I was to have had that discussion on prevention, I have my prevention specialists, and that would be normally what I would do, is [REDACTED], that's the Director, [REDACTED] that is a specialist on prevention. There are many other people that probably, that I would have a discussion like this as measure" (Exhibit 20, paragraph 388). Dr Loures also stated: "if she comes to me and she raise an issue of prevention, of course I will engage with anybody" (Exhibit 20, paragraph 390).

65. [REDACTED] stated that Dr Loures then initiated that they move elsewhere to continue the conversation when the reception drew to a close. [REDACTED] stated: "And so that was kind of the nature of the conversation. And at one point, it's kind of fizzling out, and we have arrived at I would say we have arrived at the end of the cocktail, so as I said, people had started to leave, I was on my way out, and needless to say I was working on a presentation that I needed to finish, so I told him, "I need to go now. It was good talking to you, Luiz, I need to go now and work on my presentation." And he was saying that, "Oh yes, this conversation is really good. I would really like to continue to hear from you, why don't you come and we can have a... why don't you join me for dinner." And I said, "No, I really cannot. I really have to work on these things." And I remember specifically telling him that I have these maps which take time. It's only two slides, but I said, "There are these maps, they are time consuming, I really need to work on those." So I had to put all the countries that had embraced, endorsed this new target, and it required quite a lot of work. So I said, "I really have to go." And he says, "No, but I really want to continue, I need to talk to you, so let me at least, if you can't come for dinner, let me at least

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*invite you for another drink to wrap up this conversation. It's really helpful and it's really helping me prepare for what I want to say tomorrow..." and things like that" (Exhibit 3, paragraph 98).*

66. According to [REDACTED], Dr Loures persuaded her to have one more drink to continue the conversation, but they had to move elsewhere because he could not be seen to leave last. She stated *"I kind of ducked it, the whole conversation, and I said that, "Maybe we can just have a quick drink and then I really have to go." Like, "I really have to go to do this other thing, to work on the presentation." And then he said but, "I am the Deputy of the Organisation, I cannot be seen to leave last." So there was an element of kind of rushed ... you know, "I am the Deputy, I can't be hanging here, and seen to be the last to leave." You know, like, you know, "Then please, let me at least take you for one quick drink then before I head out for dinner. Can I really not convince you to come?" And these things. I said No" (Exhibit 3, paragraph 104).*

67. IOS clarified whether it was Dr Loures who had suggested having a drink elsewhere. [REDACTED] stated *"Yes. So that's exactly it. So then he said, "No, because I really have to go now, I can't be seen here." And it was kind of really rushed. And so then, "Let me then at least take you for one quick drink to wrap up this conversation at the lounge bar", which was obviously the higher floor of the building" (Exhibit 3, paragraph 106).*

68. [REDACTED] further stated: *"And at that point I was still kind of, "I am not sure, Liz..." and at this point he said, "I really have to go." And so he was kind of leading me my arm out of the reception area towards the lobby" and there in the lobby there was like two colleagues waiting for him that I assume that he would... so he had a quick talk saying, "I won't be joining you. I will join you for dinner but not now. I tried to have [REDACTED] come and join us..." So at that point it seemed like actually maybe I had misunderstood the fact that he wanted to dine with me type of thing, so he just announced, "I am just going to go for a quick drink." And I can't remember the details, but anyway, I remember feeling like a little bit of comfort, because at that point, I was seen, there was, "I am just wrapping up this conversation with [REDACTED]' type of thing" [...] (Exhibit 3, paragraph 108).*

69. When IOS advised Dr Loures that [REDACTED] mentioned that both she and Dr Loures went up to the Executive Floor to have another drink, he stated: *"Not me... it would be very unusual for me to have that discussion, to move to another place to discuss prevention with [REDACTED] to – it would be, would sound awkward for me to start with" (Exhibit 20, paragraph 404).* Dr Loures added *"I don't dispute that I talked to her, [...] but the time issue, I'm sure if I spent time with her it was very short. There was no really time for in-depth conversation about anything, because I went to dinner the same evening, with a number of*

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people” (Exhibit 20, paragraph 416). When IOS asked Dr Loures whether that meant that he went straight from the reception to dinner with [REDACTED] and [REDACTED] he responded “Yeah [...]” (Exhibit 20, paragraph 436).

70. When IOS asked Dr Loures where his conversation with [REDACTED] took place, he could not remember and stated: “On this conversation, that could be in the 3rd floor, could be by the pool, could be in the room there. This is where I can’t –” (Exhibit 20, paragraph 476). “What I’m not precise is where, and it could be any of these places?” (Exhibit 20, paragraph 480). Later in his interview, Dr Loures noted that the reception had finished and that he and [REDACTED] had continued talking, but he could not remember whether it was in the pool bar area or on the third floor. Dr Loures stated: “There was no reason, if the reception was over, to be there, and there would be a lot of people. If it was on the 3rd floor, if it was by the pool that I remember that there was a bar, that’s where I’m not sure” (Exhibit 20, paragraph 562). Dr Loures stated the conversation did not take place in [REDACTED]’s room (Exhibit 20, paragraph 582), and did not take place in the area where the reception had been held (Exhibit 20, paragraph 613). IOS asked Dr Loures whether he remembered getting into an elevator to go up a few floors to a bar. Dr Loures answered “No, I did not go up to— because, I mean, not, if I was in the Executive Floor, if I was in the 3rd floor, I do not go up – I would only go down, because I went to this dinner, and that I recall well (Exhibit 20, paragraph 597). He stated: “It was a natural movement of being in reception, then sitting down somewhere and talk a little more, and then you’re off to the dinner” (Exhibit 20, paragraph 618).

71. [REDACTED] stated she was apprehensive, but also eager to talk about HIV prevention. She stated: “I felt eager of the opportunity of selling my own kind of ideas of how we can do Prevention in UNAIDS, and that one felt important to me because, you remember I had come to see him in June 2016 asking to leave the Prevention Team because I felt that the ideas on Prevention wasn’t going anywhere and there was at the time then some complaints regarding our manager” (Exhibit 3, paragraph 100). [H]e has always been respectful about what I can contribute to the Organisation, but at the same time I also know that he isn’t appropriate, he is a lady’s man, and I felt pursued. So I would certainly never consider going with him to dinner, let’s say (Exhibit 3, paragraph 102).

72. IOS asked Dr Loures whether he had to leave the reception, because of decorum that he should not stay until the end. Dr Loures answered “I don’t follow these protocols. I mean, contrary. I’m usually very often the last one to leave, you know, this kind of receptions. Exact the contrary. And I remember very well staying there a long time as a member of staff” (Exhibit 20, paragraph 428). Dr Loures added:

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"Usually they stay, and I would have stayed. I mean, on this kind of situation, internal reception, with civil society, with my own people there, and the staff and so, I would not see any reason to be leaving before as a protocol issue. No way" (Exhibit 20, paragraph 434).

73. According to [REDACTED], Dr Loures then said, "Let me then at least take you for one quick drink to wrap up this conversation at the lounge bar.", which was obviously the higher floor of the building" (Exhibit 3, paragraph 106).

74. As mentioned above, [REDACTED] stated that while passing through the lobby, Dr Loures mentioned to colleagues who were waiting for him to go to dinner that he would be late because he was going for a quick drink with [REDACTED] [REDACTED] stated that "the two colleagues were [REDACTED] and [REDACTED]" (Exhibit 3, paragraph 110).

75. IOS asked [REDACTED] whether he recalled that Dr Loures told him during any evening of the meeting to go ahead for dinner with [REDACTED] because he (Dr Loures) was going to have a discussion with [REDACTED] first. [REDACTED] responded "No, I don't recall that" (Exhibit 11, paragraph 59).

76. IOS asked whether [REDACTED] witnessed Dr Loures leaving with [REDACTED] on any evening during the conference in Bangkok in the manner described above. He stated: "in my recollection, no, what you just mentioned, in terms of the sequence of what you said. Absolutely no?" (Exhibit 11, paragraph 81).

77. [REDACTED] also stated that he could not recall having a conversation with Dr Loures in which Dr Loures stated he would be late for dinner, because he was going for a drink with [REDACTED]. "I don't recollect him saying he's going to be late for dinner or asked us to go ahead" (Exhibit 12, paragraph 165). IOS asked [REDACTED] whether he recalled seeing Dr Loures leave with [REDACTED] at any point in time during these meetings. [REDACTED] answered: "No, no I didn't. I – if that had happened, I would remember" (Exhibit 12, paragraph 167).

78. Dr Loures stated he could not recall running into [REDACTED] and [REDACTED] during the reception prior to their having dinner, to tell them he would join them at a later stage. Dr Loures stated: "No, I don't recall that. Probably not. I don't see why I did, you no [sic], we had appointment, we had set the dinner, you know what I mean? We knew that I had to be there anyway" (Exhibit 20,



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paragraph 1484). When IOS further asked Dr Loures if he could recall speaking to [REDACTED] and [REDACTED], to say he would join them later because he was going to have a drink with [REDACTED] Dr Loures responded: "I don't recall at all" (Exhibit 20, paragraph 1488).

79. [REDACTED] stated that after Dr Loures had mentioned to [REDACTED] and [REDACTED] that he would join them shortly, but would have another drink with [REDACTED] first, [REDACTED] then warned her. [REDACTED] stated: "I had not been totally in the conversation about the dinner and all of these things, but I remember that [REDACTED] said to me, "Be careful, [REDACTED]" And the only reason I remember it because I thought about it not then at all, well, in fact I was conscious because I interpreted it as, "Luiz is such a womaniser, you don't want to be seen as ... associated..." That's how I interpreted it then, but not knowing like he has misjudged me. That's how I interpreted it then. You know, I interpreted as like, "I know what I am doing, because I would never do something like that." (Exhibit 3, paragraph 110).

80. [REDACTED] was asked whether he recalled warning [REDACTED] during that evening. He responded that he did not and stated: "I would have never said something like that, for two reasons. One, I – I mean, if I had to protect her, I would have told her not to go. I would have accompanied her. I mean, that's the way I am. If I feel that a person is at risk, I would not leave the situation. Second, I worked with Dr Luiz for about four years in [inaudible] [24:39] and then for – and I've known him for eight years. He would not be a person who would ever, that I would ever go and tell somebody "Be careful of him". (Exhibit 12, paragraph 109).

81. In an email to IOS dated 24 January 2017, [REDACTED] wrote: "I am very surprised and shocked by what [REDACTED] has attributed to me, as there was no conversation about Luiz. What i did tell her was to be careful about [REDACTED] She probably under the influence of alcohol, seems to have switched and manipulated names [sic]. And this conversation happened when staff were having a social meeting" (Exhibit 29).

82. [REDACTED] stated she agreed to move the conversation to another location in order to wrap up the conversation. She stated: "I agreed to go with him to just wrap up, I was convinced to go with him and just wrap up as quickly this quick conversation, have a last drink, because it was with a rush, because you remember he said like several times, two or three times, he said, "I am the Deputy, I really cannot not be seen, I really have to be going now." And he was almost getting kind of like agitated, as if he felt embarrassed, and so I just kind of went with that, because I was going anyway" (Exhibit 3, paragraph 110).

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83. [REDACTED] stated he did not see Dr Loures leave with [REDACTED] (Exhibit 12, paragraphs 166 & 167). In an email to IOS dated 24 January 2017, he stated: “*I never saw [REDACTED] enter a lift with Luiz and did not at any point of time warn her to be careful of him. Should I have had any apprehensions to that effect, I would have not left her alone*” (Exhibit 29).

84. [REDACTED] stated that the conversation was moved from the reception area to the Lounge Bar. She stated: “*We went up to this lounge bar, and I feel more comfortable, because there on a distant table, I see the other Deputy*” (Exhibit 3, paragraph 114). [REDACTED] stated she felt relatively safe, because: “*And again then I go through this thing where I am thinking, oh this is not that bad, again when I think that, because we are not alone. I remember thinking, we are not alone here, there is other colleagues, and there was about a hundred and something, I would say maybe more than a hundred people of my colleagues, and presumably they would have scattered around the hotel, so it's not as if they couldn't be anywhere*” (Exhibit 3, paragraph 114).

85. [REDACTED] stated that she and Dr Loures took an elevator to get to the Lounge Bar (Exhibit 3, paragraphs 110 and 112). [REDACTED] stated that the conversation at the bar remained work related, but more personal. She stated: “*I think we ended up having two drinks. I remember having two drinks. We were having a conversation about prevention, and I remember laying out some ideas and what I was thinking and all of that. And it seems to be with interest, and then yes, you know, after a while when you have kind of finished it became more of a casual type conversation, that's still work-related. Kind of work-related but casual, it's like, "How are you doing in your new role, it can't be easy..." you know. It became that kind of – how can I say... It's work-related but it's like a little bit more trusting. So I am like, "How are you in your new job, how are you feeling... the Organisation... the agenda..." Those types of things. Like more personal reflection, but job-related kind of thing* (Exhibit 3, paragraphs 121 and 123). “[I] here was a bit of a conversation about kind of – how can I say – it wasn't like explicit but it was a conversation about, “How do you balance work and personal life...” I can't remember exactly what he was asking me, but that was the nature of the type of conversation that we had” (Exhibit 3, paragraph 123).

86. During her second interview with IOS, [REDACTED] was asked to provide more details about her conversation with Dr Loures at the bar. She stated: “*We continued to talk about the prevention agenda, and you know, the same type of conversation. I don't remember in great details – just I remember my own position, and I remember that he's thinking that it was a good idea, that we need to involve more young people in the response, that we have to be, like we would have to be bold to speak about sexuality, that we need to not have like, the medical perspective, how doctors address like patients, that we cannot have a HIV prevention agenda that is, but*

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needs to be much more sexual and reproductive health and rights, you know? And it's in orientation rather than being a disease focused. And then we spoke a little bit about the disconnect that I felt – yeah, and that we did not do enough, I think that we have to have a much better understanding regarding the risk perspectives of young people, and that we need to change, that something is wrong when we're investing every year in sexuality education, and that we're not seeing the kind of impact in terms of increased knowledge etc., that maybe could be something to do with the, how we do the questions we ask, basically, the KAP indicators, which is Knowledge, Attitude and Practice. So there was a bit of that. And then after that, and he was sort of listening and in agreement, and this, and he also said that he did really think that it's time to sex up HIV prevention. I remember he said that, and he said several times in public fora, so that was not anything strange. And that, then he was saying a little bit that he did not feel that – I think I said that I think it was clear that I was also giving a critique on the way that, since I had left the unit, you know, that I did not feel that the agenda, from an ideological perspective, was a very conservative and included, for example, abstinence approaches, which I feel are non-evidence-based, which are not evidence-based, etc., and that I struggle with that, and he sort of affirmed to me that he also saw, he saw the same challenges, and that's why he was so keen to seek my inputs and that I was a loss for the team, etc" (Exhibit 24, paragraph 114).

87. [REDACTED] stated that towards the end of the discussion, the conversation was more personal, but still work related. She stated: "it ~~finzles~~ because you're kind of covering that, and so you know it becomes more of a – so you know, and otherwise "How are you in your new job? How are you finding it? How am I finding it in your team?" How is he finding it, even though his job is not totally new. He is, you know, he's – I don't see him very often, you know, so I don't, you know, I'm asking, "How are you settling in?" I mean, at this point, let's say he's a few months into the job, and he's obviously inherited a whole branch, and I think that it's something that I at that point, I could relate to, that I know that the job in the Deputy Executive Office can be challenging, and I saw [REDACTED] you know, some of the issues he had, because you remember I used to work in the Deputy, for the former, very very closely with the former Deputy Executive Director. So you know, it was just kind of like that, "How are you finding," like a kind of management type of conversation. And then that's what I mean, but like, "How are you coping, how are you...?" you know what I mean? That type of "How are you settling in?" conversation" (Exhibit 24, paragraph 116).

88. When IOS asked [REDACTED] how she was feeling during this conversation, she stated: "I'm feeling fine. At this point I'm still feeling fine, yeah" (Exhibit 24, paragraph 118).

89. [REDACTED] added that the conversation moved towards a discussion about work-life balance and included the following: "How are you balancing?" then "How is it changing your travel schedule?" and you know, "Are you finding time?" You know, remember [REDACTED] used to work at weekends, and he

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was saying to me that, he was asking, "And you, I understand you have three children, and how do you do that? You're such a hard worker. Like, you're managing to," you know, those – it's like that, basically, that's the level of conversation" (Exhibit 24, paragraph 122).

90. [REDACTED] stated that the conversation then veered towards personal issues and she was less comfortable with this. She stated: "But it's moving out of the work-life balance conversation, a little bit about yes, and I feel like he's a little bit in my private sphere. I cannot talk, recall vividly, you know, any specific questions – just how the conversation went. And I remember my own feeling, feeling that not at all alarmed, but just feeling that "Oh, it's okay, like work-life," maybe I was just on my guard, you know. Nothing that was directly inappropriate at this point, yeah" (Exhibit 24, paragraph 124).

91. Dr Loures noted "but I think she had drunk a little bit too much this night. That was one of the aspects" (Exhibit 20, paragraph 508). IOS tried to determine how [REDACTED] behaved that led to Dr Loures concluding that she had drunk "too much". When asked whether perhaps she had been "emotional" (Exhibit 20, paragraph 521), he stated: "I think so, in some way, yes. I would say so. That's a good word. That's a good word. She talked to me about her kids in the beginning" (Exhibit 20, paragraph 522). He added "It's not like she was uncomfortable or sad or anything like that, not at all, on the contrary of that, I think she was more in a positive mood" (Exhibit 20, paragraph 524).

92. As stated above, [REDACTED] also suggested [REDACTED] might have "been under the influence of alcohol", which had affected her memory of her conversations with [REDACTED] (Exhibit 29).

93. [REDACTED] stated during her second interview with IOS that she had had had "one glass of white wine" during the reception, and "two beers, small beers" at the bar (Exhibit 24, paragraph 94 and 96).

94. IOS asked Dr Loures whether he had consumed alcohol that evening. He responded: "I had, but nothing – I never go too far, because I don't like. Probably I had some wine and so, but nothing more than this. I don't think if your question that I was drunk, definitely not. But I had some drinks of course. We had a reception together, with friends that I had not seen for a long time and so for sure" (Exhibit 32, paragraph 115). He added "usually in, if I sit with anyone and in a conversation, so a glass of wine is usually sufficient for me. I never go more than this. I never go. I am a slow

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*drinker, let's put it like that. I don't go for too much. But I'm sorry, I don't remember actually in detail how many I had. But it was not many, for sure"* (**Exhibit 32, paragraph 123**).

**Alleged sharing of personal information by** [REDACTED]

95. During his interview with IOS, Dr Loures stated that during his conversation with [REDACTED] she shared with him information that he considered personal and confidential, and that he was unable to share this information with IOS. Dr Loures stated: "*about her own, about herself*" (**Exhibit 20, paragraph 442-467, 558**). When IOS summarized: "*sometime between the reception and dinner, you had a one-to-one meeting with her, and she came up with a very confidential issue that we are not discussing yet?*" (**Exhibit 20, paragraph 501**), Dr Loures responded: "*it's absolutely right. That's exactly that*" (**Exhibit 20, paragraph 502**). IOS asked Dr Loures why [REDACTED] would confide something of a personal and confidential nature with him, considering they did not have a close personal relationship (**Exhibit 20, paragraph 585-587**). He stated: "*remember that I told you before that I am pretty much available. It's not, she's not the first one to share anything confidential with me and personal. Actually, it's a day-by-day issue almost*" (**Exhibit 20, paragraph 590**). Dr Loures refused to disclose details of this personal element of the conversation, stating: "*I need to ask you, [if I tell you...], that's why I ask in the beginning the transcript, and so, if that can be kept confidential. [...] and I had the reasons to do so, and do it as a doctor*" (**Exhibit 20, paragraph 442**). "*I don't want that to be shared [...] with anybody*" (**Exhibit 20, paragraph 446 and 448**).

96. During the second interview with [REDACTED] on 22 June 2017, IOS asked whether a personal, confidential and emotionally charged conversation took place with Dr Loures. She denied this and stated: "*No. I don't remember that at all*" (**Exhibit 24, paragraph 126**). She further added "*I have no idea what this would be at all*" (**Exhibit 24, paragraph 130**). [REDACTED] further stated: "*I was not emotional with him, and quite on the contrary, my experience is that we had a conversation what I just told you, where we basically went to the, you know, like not even having a personal conversation, but like, only on the boundaries of private life like this, but very, very vague, to the point that I cannot even remember exactly what it was, and I certainly cannot remember, and I know for a fact that I did not, and I would still not, ever have told him anything neither in confidence nor personal, no*" (**Exhibit 24, paragraph 132**).

97. IOS asked [REDACTED] whether Dr Loures might be aware of any personal or confidential or medical information about her that she may have shared with him at some other point in time.

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She responded: “No, I’ve never shared anything about my private life with him” (Exhibit 24, paragraph 134).

98. In an email to IOS dated 21 June 2017, [REDACTED] stated: “In relation to your question and Luiz’ hesitancy and reluctance to disclose the contents of an alleged conversation that took place between us, let me categorically state that I have never had a doctor patient relationship with Luiz Loures. Therefore our conversations are not privileged, and there is no need for me to release or prohibit Luiz from revealing to you what I allegedly said, nor would I have the right to do so. I also categorically deny that I had any discussion with him about medical and/or personal issues at the alleged time. If he continues to refuse to respond to your inquiries on the basis of a purported doctor patient privilege with me, he is simply being dilatory and obstructive. Moreover, as I stated to you during the interview, such a conversation about medical and/or personal issues never happened and therefore for him to suggest that it had is in and of itself dilatory and obstructive. Should he now make further allegations to you about such a non-existent conversation, please let me know what he alleges so I may expressly refute same” (Exhibit 23).

99. IOS conducted a second interview with Dr Loures on 12 July 2017 and informed him about [REDACTED]’s response described above. Dr Loures responded he felt he was now able to share with IOS what [REDACTED] allegedly confided in him. He stated: “You know, I think the situation change with her statement that I can be free” (Exhibit 32, paragraph 33).

100. Dr Loures stated [REDACTED] had discussed two personal issues: “She’s basically was telling me two things about – we start talking about family issues, including kids and bla bla bla, and then she moved to some difficulties that she may have in the point of view of, how to put that, in the – that she was basically sometimes looking for some help in terms of her own, have to use the right words here, [REDACTED] in, that she was basically sometimes doing, looking for some help in, to keep her [emotionally] stable, and so, what I think is not a big deal – all of us we have, time to time, we may need some assistance to keep stable” (Exhibit 32, paragraph 35 and 37). Dr Loures further added: “But the most important part, when she start to tell me about herself, and then these things move about her sexual behaviour. Okay? That was the part that was more difficult to me to disclose” (Exhibit 32, paragraph 39). Dr Loures further explained: “the nature of the things is delicate, because you are saying how she likes to engage, how she does not like to engage, that she is, that she is – that’s a difficult one, that she’s [sexually] violent?” (Exhibit 32, paragraph 41 and 47). Dr Loures further added: “But she basically explained that to me, and that was the – she engaged in a clear conversation about, in the end came for her family to her, how the way then to how she behaves sexually, what she likes, what she does not like, and so, and telling me things like, “You can never handle me – you could never handle me,” for instance, things like this, and so,

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you know?... That was the time that I decide to stop.” (**Exhibit 32, paragraph 47**). Dr Loures clarified: “She didn’t put that as part of a problem for her. She was just telling me how she does, how she behaves sexually” (**Exhibit 32, paragraph 55**). Further, Dr Loures clarified: “[she told me] how she behave in a sexual relationship. You know what I mean? In a sexual act, basically this. Not as a, not how she approach one another and so, but basically she was telling, she describing to me, let’s put it like that, in a very graphic way, how she, her, how she behave in a sexual act” (**Exhibit 32, paragraph 135**).

101. IOS asked Dr Loures how the conversation moved from a casual discussion about family matters to sexual content. Dr Loures answered “She move it there. There was no, we were just talking, and that moved to it. I don’t think there was any – any special sequence. There was not any special trigger. It was just during the conversation. She was telling me basically about herself” (**Exhibit 32, paragraph 51**).

102. IOS asked Dr Loures why [REDACTED] gave him details of her sexual behaviour (**Exhibit 32, paragraphs 60, 66 and 68**). Dr Loures did not answer the question other than to state: “Could be. I think this is not usually part of – yeah, it’s not a usual topic, mainly on that way, in a conversation. Could be. Could be. But I don’t want to judge” (**Exhibit 32, paragraph 65**). Dr Loures added: “I think there was this issue, I think she was probably, her mind was more free because of the drinks, the evening, and so, but more than this, if she was being forward, that could be too” (**Exhibit 32, paragraph 67**). IOS asked Dr Loures whether he felt attracted to [REDACTED]. He responded: “No, not really. No, not really” (**Exhibit 32, paragraph 247**). Dr Loures added “in contrary of feeling attracted... I felt more uncomfortable and that’s it... because if each time that I talk to a woman and she share with me personal issues, if I feel attracted, I’d be breaching all what I was trained for” (**Exhibit 32, paragraph 259**).

103. IOS asked Dr Loures how he perceived the discussion with [REDACTED]. He stated: “I perceive it as not the best conversation for me. That’s clear, you know what I mean? That’s exact why I detach [...]” (**Exhibit 32, paragraph 71**). When IOS asked how the discussion made him feel, Dr Loures answered that it made him “in a way uncomfortable” (**Exhibit 32, paragraph 219**). When IOS asked for further details as to how this made him feel, Dr Loures added “nothing really special, but it’s not the kind of conversation that I was expecting for sure, yes” (**Exhibit 32, paragraph 215**). Later, he added “I was not shocked” (**Exhibit 32, paragraph 241**).

104. When IOS asked Dr Loures what his response was to [REDACTED]’s comments, he stated: “I just decide to stop [...]” (**Exhibit 32, paragraph 59**). However, when IOS asked him whether he told [REDACTED] he did not wish to continue the conversation, Dr Loures responded “No. I, no,

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*no. I would not do. I never do. It would be not my way, even if – I don't remember exactly, but it would be not my way, you know? I'd say no, we don't talk about this, I talk and so. I hear all kinds of things, [...] as I told before. But I would like to stress this point you raised, and I think it's important: [...] I took very much from how I treat in general these issues, from a professional standing point" (Exhibit 32, paragraph 85).* Dr Loures further stated that the conversation was moved to a "softer" issue before it ended. He stated "I'm almost sure that way that it finished. That we came back to some softer issue, put like that, before ending. That's what I would do at least in a situation like that" (Exhibit 32, paragraph 105).

105. When IOS asked Dr Loures whether there might have been a cause and effect relationship between the recounting of a personal matter and ██████████'s subsequent emotional state later that evening, Dr Loures stated: "I definitely do. Definitely do" (Exhibit 20, paragraph 1409). However, when discussing such a possible relationship further, Dr Loures also stated: "I can confirm, in that meeting she was not distressed at all. Not distressed. Spoke to me about the thing, but after that she was very, pretty open, but not, she, not in this state that is described in the allegations after, not at all" (Exhibit 20, paragraph 1419). During his second interview with IOS, Dr Loures stated: "there were some drinks between, for sure, and I think she was behaved as anyone in that situation behave. I don't think it's anything very special, you know?" (Exhibit 32, paragraph 109). He added "No, she was okay" (Exhibit 32, paragraph 111).

106. IOS asked Dr Loures whether he had any physical contact with ██████████ (during their conversation). He stated: "No, not at all. No. That I definitely recall" (Exhibit 20, paragraph 831). IOS suggested that considering his description of himself as a warm, approachable person who is physical in his gestures with staff (for instance, "it's very natural for you to, you know, maybe pat on the shoulder or something like that" (Exhibit 20, paragraph 834), and whether he made any comforting gestures to ██████████ while she was confiding in him, he stated: "No, I don't think so. I mean, no, I don't think so, I'm sorry" (Exhibit 20, paragraph 843).

107. ██████████ stated she initiated the departure from the bar. She stated: "[S]o at this point, I am thinking now it is time to leave. So I said, "I really have to get back to my maps now" (Exhibit 3, paragraph 123). ██████████ added that a short discussion followed and stated: "And then after that, as I said, I see the other one ██████████ ██████████ [██████████, UNAIDS, and her colleagues] leaving, and we leave very shortly thereafter. You know, just order the bill and then go, and I said, "Now, I really have to go."" (Exhibit 3, paragraph 123).