Workplace Sexual Harassment in Hospitals

Dr. Nira Singh Shrestha, MD

Associate Professor, Department of Obstetrics and Gynaecology Kathmandu Medical College Teaching Hospital, Kathmandu, Nepal

In a country like Nepal until very recently it was a taboo to talk about sexual harassment at workplace and most of the women did not discuss such problem openly. Prevalence of sexual harassment at workplace in Nepal is very high as suggested in a study by International Labour Organization (ILO)¹. Although research on sexual harassment in hospital setting in Nepal is scarce it is believed that it is a huge problem among health care workers. Studies from abroad show prevalence of workplace sexual harassment to be very high in hospitals^{2,3}.

United Nation Convention for the Elimination of all forms of Discrimination Against Women (UN CEDAW) defines workplace sexual harassment as "Such unwelcome sexually determined behavior as physical contact and advances, sexually coloured remarks, showing pornography and sexual demands, whether by words or actions"⁴.

Workplace sexual harassment by above definition may be verbal, physical or both. Examples of verbal sexual harassment are addressing female co-workers by unwelcome and offensive terms, cracking dirty jokes in front of female co-workers or sub-ordinates, passing unwelcome comments or asking question about body parts, appearance, sex life, menstruations etc., sending e-mails, SMSes which contains offensive messages. Examples of physical sexual harassment are being brushed against or touched in ways that is unwelcome and disturbing, being forcibly kissed or hugged, or being forcibly made to touch someone, or being stood very close to or cornered in a way that is unwelcome and discomforting⁴.

Studies on sexual harassment cases and experiences of women have shown two dominant types of workplace sexual harassment: one where sexual favours are demanded for employment benefits (i.e. *quid pro quo* harassment), and the other which involves a constant abuse of power, unrelated to favours, to demean a victim and create hostile working conditions for her (i.e. hostile working environment harassment)⁵.

As women form a large proportion of workforce in health sector, prevalence of sexual harassment seems to be high in this sector. While nurses, female medical students, interns, and junior residents are the most vulnerable group, women in higher levels also experience harassment from their male co-workers.

Sexual harassment at workplace is believed to occur due to hierarchical nature of our society which is reflected in health sector more than in any other sector. Patriarchal mindset of males in this society makes them believe they are superior to females and have right to dominate, intimidate, and harass women. At the same time women in our society are brought up with the mindset "Women are like Mother Earth, they must tolerate everything."

Workplace sexual harassment affects its victim in several ways. Its victim can have emotional stress, humiliation, anxiety, depression, anger, powerlessness, fatigue, and physical illness. The victim may lose her job or feel compelled to resign. The sufferings of the victim can have a direct effect at workplace as sexual harassment practices can create tension, inefficiency in team work and collaboration, lowered work performance, absenteeism and decreased productivity¹.

Globally attempts to combat sexual harassment at the workplace are increasing and law against such crime is in place in most of the countries. Even most of the Asian countries have law against sexual harassment at workplace but currently there is no such law in Nepal⁶.

Recently, with growing awareness on gender based violence, women have started to feel the need of breaking the silence and raising voice against this inequality at workplace. But due to lack of law and policies Nepalese women are forced to tolerate such acts of crime.

As Nepal is going through political instability, formulation of law against workplace harassment is unlikely to be in place in near future. In such circumstance, responsibility to deal with sexual harassment at workplace falls on the

institutes. To tackle this problem, institute must take this issue seriously and start preventive measures like awareness programs which will bring change in males' attitude towards their female co-workers and help them treat women at workplace with dignity. It should develop and enforce rules and regulation within the organization, develop mechanisms of reporting, and punish the perpetrators if found guilty.

As women form large proportion of workforce in hospitals and their contribution in health sector is crucial for appropriate delivery of health services, prompt actions should be taken at the institute level to ensure that the workplace is free of sexual harassment and women health care worker enjoy right to equal employment opportunity, dignity, and security at the workplace.

REFERENCES

- Sexual Harassment at the Workplace in Nepal. International Labour Office and Forum for Women, Law and Development; 2004. 73 p.
- 2. Libbus MK, Bowman KG. Sexual harassment of female registered nurses in hospitals. J Nurs Adm. 1994 Jun;24(6):26-31.
- 3. Celik Y, Celik SS. Sexual harassment against nurses in Turkey. J Nurs Scholarsh. 2007; 39(2):200-6.
- 4. CEDAW Committee's General Recommendation No19;1992. para 18.
- Sexual harassment in the workplace: Opportunities and challenges for legal redress in Asia and the Pacific. International Women's Rights Action Watch Asia Pacific. IWRAW ASIA PACIFIC OCCASIONAL PAPERS SERIES; .2005. 34p. "Report NO.: 7."
- Subedi A. Lawmakers discuss bills on sexual harassment. Republica [internet]. 2012 Apr 23 [cited 2013 Mar10]; action=news: [about 2 screens]. Available from: http://www.myrepublica.com/ portal/index.php?action=news_details&news_ id=34203