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"Gender, Work Engagement and Sexual Harassment: An Empirical Investigation"

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ABSTRACT

Research has demonstrated the growing prevalence of sexual harassment (SH) across continents, industries and occupations as well as the associated negative outcomes (Glomb et al., 1999). Not surprisingly, job satisfaction is one of the job related variables that is frequently investigated in the SH literature, with Lapierre et al. (2005) meta-analytically establishing that SH significantly diminishes job satisfaction. Other studies have argued, however, that 'satisfied' employees do not necessarily perform to the best of their abilities (Crossman, Abou-Zaki, 2003) and that work engagement is a better construct to understand what makes employees 'go the extra mile' (Hallgerg & Schaufeli, 2006; Buckingham & Coffman, 1999). This study adopted the Utrecht Work Engagement Scale (Schaufeli et al. (2002a), as an empirical gauge of the construct "work engagement" and the Sexual Experiences Questionnaire (Fitzgerald et al., 1988) to measure SH. A strong negative relationship was established in addition to significant differences in the SH experiences of men and women.

KEY WORDS

sexual harassment, equal employment opportunity, gender and work

INTRODUCTION

Research has demonstrated that sexual harassment (SH) exists across a number of levels and groups. These include (i) socioeconomic groups; (ii) all levels of education; and, (iii) in all countries, age groups, and occupations (Antecol & Cobb-Clark, 2003; Gelfand et al., 1995). Despite the progress that has been made on understanding this phenomenon there are several theoretical gaps in the literature, which this research paper attempts to fill. One unexplored area is the relationship between SH and work engagement.

Work engagement has generated significant interest by human resource (HR) professionals over recent years as several researchers claim engagement is positively related to organisational performance (such as customer satisfaction and loyalty, profit, productivity, intent to stay and safety) (Bates, 2004; Harter et al., 2002). Harter et al. (2002:276) concluded that engagement is related to "meaningful business outcomes at a magnitude that is important to many organisations". Surprisingly, no study appears to have addressed the relationship between SH and work engagement.

Another potential shortcoming in the SH literature is that most empirical models pool male and female experiences under the assumption that the independent variables operate in the same way across these two sub-samples (for example, Cogin & Fish, 2007a). However, Rotundo et al. (2001) found that women perceive harassment differently from men, and report different coping strategies.

This research addresses these gaps by examining the relationship between SH and work engagement as well as identifying differences between men and women. The study makes an important contribution to theory and practice for a number of reasons. First, the current study corroborates the three-factor structure of the recently introduced 'work engagement' instrument, the Utrecht Work Engagement Scale (Schaufeli et al., 2002a). Second, businesses are increasingly using workforce

engagement as opposed to job satisfaction as a measure of HRM effectiveness (Houldsworth & Jirasinghe 2007). In fact, engagement results are being used by large and well-established financial analysts when recommending clients buy or sell company stock (Macquarie Equities, 2005). This means that if the message highlighting organisational costs of SH is to reach boardrooms, language and measures must be utilised which board members and company executives value, understand and can act on. The identification of any factor which may lead to disengagement, such as SH should assist HR professionals gain the required support and resources to deal with it. Finally, the recognition of SH of men and different outcomes to women allows for the development of HR strategies that meet the unique needs of men.

First we begin by defining SH and work engagement. We then highlight the importance of the study by outlining the consequences of SH and the benefits of work engagement as discussed in the literature. The research methodology, results and discussion sections follow before recommendations for future research are made.

DEFINITIONS

Sexual Harassment

The HREOC (2007) define SH as containing three essential elements:

- 1. the behaviour must be *unwelcome*
- 2. it must be of a sexual nature
- 3. it must be *reasonable* in the circumstances that the person who was harassed felt offended, humiliated or intimidated.

There are two main categories of SH. SH accompanied by employment benefit or threat (known as quid pro quo harassment); and the more common SH that involves creating a hostile work environment. The legal definition of SH identifies the importance of the target's evaluation of the harassing behaviour. Behaviour that may be acceptable and even desirable to one person may be intolerable to another. In other words, courts must determine whether a subjective response of a person is 'reasonable'.

Work Engagement

Work engagement has been defined in many different ways. Schaufeli and Bakker (2004:295) suggest engagement is characterised by "vigor, dedication, and absorption". **Vigor** refers to high levels of energy and mental resilience while working, the willingness to invest in one's work, and persistence in the face of difficulties (Schaufeli & Bakker, 2004). **Dedication** refers to a sense of significance, enthusiasm, inspiration, pride, and challenge (Schaufeli & Bakker, 2004). **Absorption** is characterised by being fully concentrated and happily engrossed in one's work, whereby time passes quickly and one has difficulties with detaching oneself from work (Schaufeli & Bakker, 2004).

In many ways this definition sounds like other better-known and more established constructs like organisational commitment, satisfaction and citizenship behaviour (Robinson et al., 2004). While engagement is related to these constructs it is also distinct (Robinson et al. (2004).

Luthans and Peterson (2002) suggest that engagement differs from employee satisfaction in that engagement includes a person's attachment towards their organisation. Rothbard (2001:656) also differentiates work engagement by arguing that it "includes job satisfaction; but goes further because engagement is not a momentary and specific state". Schaufeli et al., (2002a:74) expands on this point by suggesting it is "a more persistent and pervasive affective-cognitive state that is not focused on any particular object, event, individual, or behaviour".

Engagement is also distinct from job involvement. According to May et al. (2004), job involvement is the result of a cognitive judgment about the need satisfying abilities of the job and is tied to one's self-image. Engagement has to do with how individuals employ themselves in the performance of their job. Furthermore, engagement involves the active use of emotions and behaviours in addition to cognitions. May et al. (2004:12) also suggest "engagement may be thought of as an antecedent to job involvement in that individuals who experience deep engagement in their roles should come to identify with their jobs."

In summary, although the definition and meaning of engagement overlaps with other constructs, it has been defined as a distinct and unique construct that consists of cognitive, emotional, and behavioural components that are associated with individual role performance (Hallgerg & Schaufeli, 2006). In this study, we define work engagement as an emotional and intellectual commitment to an employer, which results in a persistent, positive, affective-motivational state of fulfilment (Shaw, 2005; Maslach, et al., 2001).

CONSEQUENCES OF SEXUAL HARASSMENT AND ENGAGEMENT

Sexual Harassment

SH has significant negative psychological and job-related consequences for victims that have been widely reported in the literature (see Cogin & Fish, 2007a). The potential psychological effects of a SH incident include lowered self-esteem, difficulty with interpersonal relations, increased stress, depression, frustration and anxiety (Willness et al., 2007). Those who are sexually harassed display common coping strategies: i.e., manipulation, indirect expression of anger, denial or minimisation of the incident, and compliance; as well as feelings of powerlessness, aloneness, fright, humiliation and incidence of post-traumatic stress disorder (Willness et al., 2007).

The somatic effects of SH include nausea and gastrointestinal disturbances, headaches, exhaustion, insomnia, jaw tightening, teeth grinding, and weight loss or gain. Numbness and tingling in extremities, pains in the chest and shortness of breath are also common symptoms of SH (Dansky & Kilpatrick, 1997).

The effects of SH are not limited to the individual that experiences it. Episodes of SH in an organisation exact significant financial and productivity costs. The most obvious business outcome is the direct cost associated with damage settlements and court fees (Cogin & Fish, 2007a). The U.S. Equal Employment Opportunity Commission (E.E.O.C.) recently reported that they received and resolved nearly 14,000 charges of sexual harassment, at a cost of over \$37 million in monetary benefits over and above litigation (E.E.O.C., 2005). Allegations of SH will affect a company's bottom line directly through litigation and settlement costs, redirection of management attention and loss of shareholder confidence (Cogin & Fish, 2007a).

The indirect business outcomes of SH have been estimated to be far more costly (Glomb et al., 1999). Outcomes include decreased productivity, low morale, turnover and absenteeism not only of the harassed employee but co-workers who may witness and be distracted by the situation (Fitzgerald et al., 1997). In addition, Cogin and Fish (2007a) point out that an individual who devotes work time and energy to harassing another is divesting a company of those same energies needed to perform work optimally. In a similar vein, Fitzgerald et al. (1997) report that although 50% of "victims" of SH say that they simply try to ignore it, these same "victims" experience an average productivity decline of about 10%. They also found that about 24% of harassment "victims" take leave to avoid the harasser, while 10% choose to leave their jobs at least in part because of the harassment.

The negative impact of SH on work performance has also been widely documented (Glomb et al., 1999). Specifically, Glomb (1999) and her colleagues found that job performance was affected in 75% of "victims" surveyed, largely through reduced levels of concentration following sexual innuendos. A reduction in job motivation and confidence in skill levels was also reported.

Not surprisingly, job satisfaction is one of the job related variables that is frequently investigated in the SH literature, with Lapierre et al. (2005) meta-analytically establishing that SH significantly diminishes job satisfaction. While the literature consistently reports SH to be negatively correlated with all facets of job satisfaction (Willness et al. 2007), there have been studies that argue 'satisfied' employees do not necessarily perform to the best of their abilities (Crossman, Abou-Zaki, 2003) and that work engagement is a better construct to understand what makes employees 'go the extra mile' (Hallgerg & Schaufeli, 2006).

Engagement

In recent years, there has been a great deal of interest in work engagement by HRM professionals. Several researchers claim that engagement predicts performance outcomes, organisational success, and financial performance (e.g. total shareholder return) (Bates, 2004; Harter et al., 2002). In a study using data from over 360,000 employees from 41 companies, those firms described as having low overall engagement lost 2.01 percent operating margin and were down 1.38 percent in net profit margin over a three-year period (International Survey Research, 2003). During that same period, high-engagement companies gained 3.74 percent operating margin and 2.06 percent net profit margin. Engaged employees, the study argues, clearly contributed to the bottom line of their companies (International

Survey Research, 2003). Other research has demonstrated a link between employee engagement and customer satisfaction, that is, willingness to make repeat purchases and recommend a business to friends (Bates, 2004).

Kahn (1992) found that engagement leads to both individual outcomes (i.e. quality of people's work and their own experiences of doing that work), as well as organisational-level outcomes (i.e. the growth and productivity of organisations).

In addition, a recent study found that individuals who are more engaged are likely to be in more trusting and high-quality relationships with their employer and will, therefore, be more likely to report more positive attitudes and intentions toward their organisation (Cropanzano & Mitchell, 2005). There is also empirical evidence demonstrating that engagement is positively associated with intent to remain with one's organisation (e.g. Schaufeli & Bakker, 2004).

Disengaged employees, on the other hand, uncouple themselves from work roles and withdraw cognitively and emotionally. Disengaged employees display incomplete role performances and task behaviours become effortless, automatic or robotic (Hochschild, 1983). It has even been reported that disengaged employees cost business US\$300 billion a year in lost productivity (Bates, 2004; Kowalski, 2003). With this in mind it is crucial to uncover the organisational factors, which disengage employees. When companies focus on the problem or causes of disengagement (such as SH), Gopal (2006) suggests the organisation can make changes to reengage people, making it possible to increase the number of engaged employees significantly.

The literature has empirically established negative correlation of SH to job satisfaction (see Willness, et al., 2007), however with more firms using engagement results rather than satisfaction scores to drive decision making (Buckingham & Coffman, 2003), we need to investigate whether similar links can be made between SH and engagement. Unfortunately, the academic literature does not reflect the growing concern with engagement (Robinson et al., 2004), with most research coming from the practitioner literature, and no known study which investigates the relationship between work engagement and SH. However, if the message highlighting organisational costs of SH and the role of managers in eliminating it is to reach boardrooms, measures must be utilised which board members and company executives value, understand and can act on. It is believed that an empirical study linking SH with engagement will provide the evidence to shock executives or organisations into action.

Hypothesis 1: Employees that experience SH will be less engaged than those that do not experience SH.

While the majority of SH victims are women (Fitzgerald & Shullman, 1993; USMSPB, 1995, 1987), SH of men also occurs (USMSPB, 1987; Cogin & Fish, 2007b). In fact, the E.E.O.C. recently reported that there was a 15% increase of SH complaints filed by men (E.E.O.C., 2005). Surprisingly, despite this, some SH studies continue to survey large populations only to eliminate male responses in order to focus on the experiences of women (Waldo, Berdahl & Fitzgerald, 1988; DuBois et al., 1998). An important consideration in understanding SH more fully involves appreciating the differences in how

men and women experience it. Rotundo et al. (2001) reported that women are more likely to perceive that harassment has taken place and typically rate the behaviour as more severe, inappropriate, and offensive than do men. However, in an earlier smaller study, we found formative data to suggest that even though the SH prevalence of men was lower, when men do experience a SH episode the consequences may be more severe (Cogin and Fish (2007b). Barling et al. (1996) call for future research examining the SH experiences and consequences for men as they note that gender may predicate differences in the experience of SH because men and women interpret behaviours in the workplace differently. Willness et al., (2007) point out that further research is needed to understand the negative outcomes of SH for men and suggest important and unanswered questions exist as to whether the outcomes of SH differ for men and women, both in characteristics and in magnitude. With the numerous calls for further research on the SH experiences of men and our formative data suggesting men who are harassed suffer more significant negative outcomes than women (Cogin and Fish, 2007b) we extend on our earlier work and contend that:

Hypothesis 2: Men who experience SH will have lower levels of work engagement than women who experience SH

METHODS

The health-care setting was chosen as a context to study SH because we had access to data, which is a challenge when the topic is SH. The population for this study is potentially all registered, enrolled or student nurses working in an Australian hospital. For the purpose of this research, and in order to ensure a manageable research cohort, the population has been restricted to Australian public hospitals in New South Wales and Victoria (city and rural areas). In addition, student nurses were restricted to those who have spent a minimum of six months training in a public hospital in Sydney, New South Wales. In the full course of a nursing degree, students spend no more than 12 months in a hospital. Data was collected via a questionnaire that was mailed to each nurses' home address by their employing hospital or university.

607 responses were obtained from the 2489 questionnaires mailed, giving a response rate of 24.3 per cent. 40 of the responses were returned from nursing clerks that could not be considered part of the targeted population, so were disregarded. The usable responses were then 538 (21.6%). Responses were obtained from nurses' working in eight different hospitals in city and rural regions.

The data available from the Australian Institute of Health and Welfare (AIHW) and the Australian census clearly describes the total nursing population and allows for assessment of the representativeness of the sample. Despite a relatively low return rate for the questionnaire, confidence in the representativeness of the usable questionnaires was supported by demographic comparisons with the targeted population. For example, the age groups and gender characteristics of the sample were an excellent match with the full population. Moreover, by sampling a geographic area containing a variety of specialty areas in both city and rural hospital settings, generalisation of the findings was improved. In

light of the information available the representativeness of the research sample was considered good. Respondent characteristics are given in table 1.

Table 1 Full Sample Characteristics	
Gender	
Female	442 (82.2%)
Male	96 (17.8%)
	n = 538
Age	
18 – 21 years	154 (28.6%)
22 – 29 years	189 (35.1%)
30 – 39 years	67 (12.5%)
40 – 49 years	91 (16.9%)
50 + years	37 (6.9%)
Years experience as a nurse	
Student nurse at university with a minimum of 6 months and maximum 12	
months hospital training experience	251 (46.7%)
Qualified less than 1 year	23 (4.3%)
Qualified between 1 and 3 years	29 (5.4%)
Qualified between 3 and 5 years	47 (8.7%)
Qualified between 5 and 10 years	62 (11.5%)
Qualified more than 10 years	126 (23.4%)
Note: Some percentage values do not add up to 100% due to rounding	

MEASURES

Sexual Harassment

The most frequently used measure of SH is the Sexual Experiences Questionnaire (SEQ; Fitzgerald et al., 1988). The SEQ is generally considered the most psychometrically sound measure of SH (Willness et al., 2007; Arvey & Cavanaugh, 1995). The questionnaire measures the frequency of exposure to SH and is designed to address varying levels of severity as well as both the legal and psychological conceptualisations of SH. One of its defining characteristics is that it does not use the term "sexual harassment" in any of its items with the exception of the last. The measure is composed of scales: (a) gender harassment¹, the most common form of which includes verbal, physical, or symbolic behaviours that convey hostile, offensive, and misogynist attitudes; (b) unwanted sexual attention², which includes both verbal and nonverbal incidents such as sexual imposition, touching, or repeated requests for dates; and (c) sexual coercion³, where the target's job or rewards are contingent on sexual cooperation. All SH behavioural items were listed against a five-item Likert type scale (never, rarely, sometimes, often, all the time). Gender harassment and unwanted sexual harassment are comprised of behaviours that legally constitute hostile environment harassment, whereas the third subscale, sexual coercion includes those behaviours under the legal definition of quid pro quo harassment. See appendix for all gender harassment, unwanted sexual attention and sexual coercion items.

¹ In this study, Cronbach Alpha coefficient = .81 ² In this study Cronbach Alpha coefficient = .91

³ In this study Cronbach Alpha coefficient = .95

Respondents were asked whether they had experienced any of the behaviours listed that were accompanied by feelings of humiliation, embarrassment or discomfort in the previous 24 months.

Work Engagement

Work engagement was assessed using the Utrecht Work Engagement Scale (UWES), which was first introduced, by Schaufeli et al. (2002a) as an empirical gauge of the construct "work engagement". The instrument includes three subscales: vigor, dedication and absorption.

Vigor was assessed with six items, dedication was measured with five items and absorption was assessed with six items. Items were rated on a 7-point scale, ranging from 0=never to 7=always. Several studies have demonstrated the (cross-national) validity, reliability, and stability of the UWES (e.g Schaufeli & Bakker, 2004; Schaufelia et al. 2002b). In the current study the internal reliability (as measured by Cronbach's alpha) was .90 for vigor .83 for dedication and .86 for absorption.

ANALYSIS AND RESULTS

The first stage of the analysis employed descriptive statistics to determine frequency of SH and the differences among men and women. The second and third stages included factor analysis and the identification of any association between SH and work engagement. The following discussion provides an overview of the results.

Stage 1 - Descriptive Statistics

The data from the questionnaires were entered into an SPSS file and the descriptive statistics examined. The sample of 538 included 442 (82.2%) women and 96 (17.8%) men. The results suggest that prevalence of SH in nursing is high, with more than 60% of respondents experiencing an incident (in the two years prior to the study) that may be described as SH.

Prevalence was higher for student nurses (77%) than qualified nurses (45%), a significant point as the student nurse respondent group reported in this research had only limited work experience in a hospital, in all cases less than 12 months. As the student nurses were working in a trainee and learning role, their duties are theoretically, fully supervised.

The questionnaire results highlight patients as being the main perpetrator with 57% of the 305 respondents who experienced a SH incident naming a patient as the perpetrator. This was followed by physicians (23%), work colleagues (13%) and visitors to the hospital (3%). These results were not altered in any significant way when the experiences of men and women were analysed separately. Table 2 details the prevalence rate of the different types of SH for men and women.

Table 2: Descriptive Statistics of Prevalence of SH for Men and Women						
	N	Sexual	Unwanted	Gender	At least one	
		Coercion	Sexual	Harassment	type of Sexual	
			Attention		Harassment	
Female	442	112 (25.3%)	185 (41.9)	225 (50.9)	267 (60.4%)	
Male	96	13 (13.6%)	30 (31.25)	19 (19.8)	33 (34.4%)	

A surprising result in these figures is the prevalence of the subscales gender harassment, unwanted sexual attention and sexual coercion. Of the 60.4% of women who are sexual harassed the most common type is gender harassment. Of the 34.4% of men who are harassed the most common type is unwanted sexual attention. See figure 1 for these results.

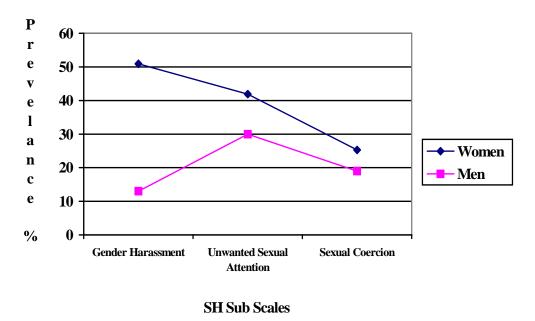


Figure 1: Prevalence of SH by Gender and Sub-Scales (full sample)

The results indicate that women are more likely than men to be sexually harassed. However, the pattern for men differs in an important respect. The two most common forms of SH of men are unwanted sexual attention and sexual coercion (the most severe types) and in this environment men who were harassed had greater likelihood than women of experiencing such incidents. This can be seen by plotting the prevalence of each of the SH subscales for only respondents that experienced SH (see figure 2).

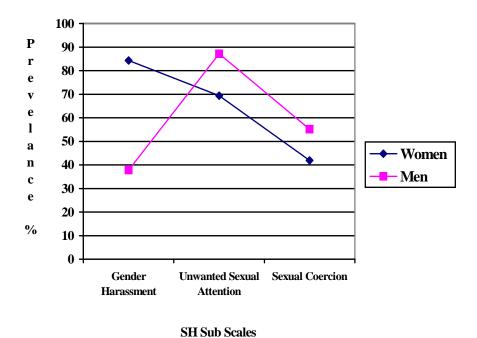


Figure 2: Proportion of SH by Gender and Sub-Scales (sample that experienced SH)

Stage 2 - Factor analysis

The 13 item Likert scale measuring 'work engagement'; was analysed using Principle Components Analysis and Maximum Likelihood and Varimax Rotation to reduce the large number of variables to a smaller set of factors. Factor loadings less than 0.50 and cross loadings were dropped from the list and only factors with eigen values greater than 1 were selected. Factor reliability was determined to be acceptable when the Cronbach's alpha value was 0.60 or greater (Haire et al., 1998).

Results of this study confirmed the original three-factor structure of the UWES (Schaufeli's et al., 2002a) to explain the construct "work engagement". We have retained the names 'vigor', 'dedication' and 'absorption' for consistency. As can be seen from Table 3, results were found to be significant (p < 0.5). The Kaiser score, which tests for sample adequacy, was 0.92. The identified solution for 'vigor' explained a total variance of 53.379 %, the solution for 'dedication' total variance was 65.824% with a total variance of 75.604% for 'absorption'. Factor constructs were extracted through Maximum Likelihood. The rotated factor loadings, together with means, standard deviations, Eigen values, variance percentages and factor construct and Cronbach alphas are presented in Table 3.

Table 3 – Work Engagement Validation of the Constructs – Reliability and Multidimensionality						
Construct	Item	Loading	œ	Eigenvalue	Cumulative Variance %	
Vigor	When I get up in the morning, I feel like going to work	.955	.90	5.872	53.379	
	At my work, I feel bursting with energy	.824				
	My work, I always persevere, even when things so not go well	.647				
	I can continue working for very long periods at a time	.678				
	At my job, I am very resilient, mentally	.654				
	At my job I feel strong and vigorous	.646				
Dedication	To me, my job is challenging	.858	.83	1.369	65.824	
	My job inspires me	.679				
	I am enthusiastic about my job	.660				
	I am proud on the of the work that I do					
	I find the work that I do full of meaning and purpose	.637 .591				
Absorption	When I am working, I forget everything else around me	.819	.86	1.076	75.604	
	Time flies when I am working	.699				
	I get carried away when I am working					
	It is difficult to detach myself from my work	.652				
	I am immersed in my work	.676				
	I feel happy when I am working intensely	.659 .712				
KMO = .848; $Var = 75.604$; $\infty = .91$				lness of Fit 868; df = 25; p	- Chi-square = < .001	

Stage 3 – Independent t tests

An initial analysis was conducted to compare work engagement levels between two groups. 1). Those that were sexual harassed, and 2). Those that had not experienced SH. Independent *t* tests found significant differences between the two groups. Table 4 displays the results for the three work engagement constructs and gender harassment.

Table 4 - Independent Samples Test for Equality of Mean - Gender Harassment and Work							
Engagement	Engagement						
	T	Df	p value(2-	Mean	Std error		
			tailed)	difference	difference		
Vigor	-12.933	505	.000***	91935	.07109		
Dedication	-8.948	505	.000***	43164	.04824		
Absorption	-10.970	505	.000***	62733	.05719		

^{***} p < .001, ** p < .01, * p < .05

Table 5 displays the results for the three work engagement constructs and unwanted sexual attention.

Table 5 - Independent Samples Test for Equality of Mean – Unwanted Sexual Attention and Work Engagement						
	T	df	p value (2-	Mean	Std error	
			tailed)	difference	difference	
Vigor	-6.712	506	.000***	53781	.08013	
Dedication	-6.764	506	.000***	34426	.05089	
Absorption	-7.783	506	.000***	47721	.06131	

^{***} p < .001, ** p < .01, * p < .05

Table 6 displays the results for the three work engagement constructs and sexual coercion.

Table 6 - Ind	ependent Sa	amples Test for	Equality of Mean	- Sexual Coerc	cion and Work
Engagement					
	T	df	p value(2-	Mean	Std error
			tailed)	difference	difference
Vigor	-7.023	508	.000***	63839	.09090
Dedication	-5.762	508	.000***	33786	.05864
Absorption	-3.758	508	.000***	27393	.07289

^{***} p < .001, ** p < .01, * p < .05

In summary, these results indicate that nurses who experience any type of SH were statistically significantly less engaged than those that did not report a SH episode confirming hypothesis 1: Employees that experience SH will be less engaged than those that do not experience SH.

Another series of independent t tests were employed to determine whether there was a difference in engagement levels of men that were sexually harassed and women that were sexually harassed. The results are given below in table 7.

Table 7 - Independent Samples Test for Equality of Mean – Gender and Work engagement for those who experience SH					
	t	df	p value(2-	Mean	Std error
			tailed)	difference	difference
Vigor	1.394	508	.164	.12940	.09284
Dedication	-4.781	508	.000***	27656	.05785
Absorption	.600	508	.549	.04329	.07218

^{***} p < .001, ** p < .01, * p < .05

The results demonstrate that men who experience SH have statistically significant *lower* levels of 'dedication' than women who are harassed. There appears to be no significant differences in 'vigor' and 'absorption' for men and women. To further test this hypothesis, another series of t tests were employed to determine if men who do not experience SH have lower levels of engagement than women who do not experience SH. The results are given below in table 8.

Table 8 - Independent Samples Test for Equality of Mean – Gender and Work engagement for						
those who do not experience SH						
	T	df	p value(2-	Mean	Std error	
			tailed)	difference	difference	
Vigor	-2.410	229	.409	1569	.06508	
Dedication	-2.781	229	.208	1672	.05661	
Absorption	-2.227	229	.810	1573	.07061	

The results demonstrate no statistically significant differences in levels of engagement for men and women who do not experience SH.

This result partially confirms *Hypothesis 2: Men who experience SH will have lower levels of engagement than women who experience SH.*

DISCUSSION

This study confirms the findings of other research on the prevalence of SH (Willness et al. 2007). Women were found to be the most likely target with more than 60% of female nurses being sexually harassed in the two-year period prior to this study. The SH of men is also of concern though, with more than 34% of men experiencing SH in the same period.

The results revealed that the type of SH experienced by women and men differ. The most common type of SH experienced by women was gender harassment, whereas men reported increased incidence of the more severe, unwanted sexual attention. This result calls for the need to determine the origin of this difference. For instance, are these differences innate or a product of socialisation and a person's value system? Men and women may be socialised to perceive gender harassment as appropriate or inappropriate. Therefore, it is conceivable that a series of behaviours may be perceived as flattery by men and as harassment by women solely on the basis of one's value system, how one is socialised or another reason. Further study is needed on this, which should be fed into any SH awareness-training program in an organisation.

The results support Grieco's (1987) study, which found the most likely perpetrator of SH of nurses to be patients. In this study, 57% of SH episodes were initiated by patients followed by physicians (23%), work colleagues (13%) and visitors to the hospital (3%). These results did not change significantly when analysing men and women separately or trained and student nurses and highlight the importance of educating patients in acceptable behaviours. The well documented coping strategies of SH targets, such as reduced communication with the harasser, increased anxiety and distraction or distancing from work commitments (Dan et al. 1995) presents potentially disastrous outcomes considering the life saving role played by nurses and the large number of patient perpetrators. The large numbers of student nurses who reported a SH raise important questions about supervision of trainees and suggests that health organisations may need to develop or review their supervisors' training on SH and have a policy on the supervisors' obligations regarding students' safety.

The results also highlight important data in terms of work engagement. Both men and women who are sexually harassed show statistically significant lower levels of engagement than those that are not harassed. With increasing numbers of organisations using engagement scores to measure the effectiveness of HRM (Houldsworth & Jirasinghe, 2007) this will provide direction for practitioners who seek to improve engagement scores and address the so-called "engagement-gap." It also provides the substantiation, which is often required in a business context to invest resources into managing SH.

Finally, this study answered the numerous calls for further research in understanding the

differences in consequences of SH for men and women (Willness et al. 2007; Barling et al. 1996). We found that men who were sexually harassment had statistically significant lower levels of 'dedication' than women who were sexually harassed. This means that men found less purpose, enthusiasm and inspiration in their work following a SH episode than women. HRM strategies to assist those who have been harassed should account for the differing needs of men. Further, different initiatives should be directed to reengage men following a SH incident. Significant results were not found for the two other factors of work engagement 'vigor' and 'absorption'.

LIMITATIONS

A potential limitation inherent in this study includes the use of self-report data. First, it must be considered whether the sole use of self-report data influences the findings in any way. Also, common method variance always remains a possible explanation for results obtained using self-report data.

A second potential limitation concerns the low response rate obtained from the questionnaire. However since the questionnaire sample is representative of the full nursing population; and a large sample size has been obtained, it is suggested that the findings are not a function of the response rate.

A third limitation is that half of the sample comprises student nurses, which are arguably the most vulnerable to harassment.

FURTHER RESEARCH

While empirical work on SH in nursing is sparse, it is reasonable to conclude that SH does exist. Some researchers may want to explore SH in health care compared to other fields. SH and work engagement could be empirically tested against data from other professions.

A causal model should be developed exploring the generalised path of SH, engagement to outcomes (e.g. turnover, productivity, etc). In addition, there are a number of opportunities to study how men and women perceive different sexual behaviours as appropriate or inappropriate. Is this the result of socialisation or due to a person's value system?

The HRM and psychological literature outlines the effects of SH on work performance. Such studies need to be extended to the nursing profession. In light of the global nursing shortage (Daly, Speedy & Jackson, 2004) such research may pinpoint areas for future attention. Further, such investigation may reveal that SH affects a nurse's quality of care of patients. Previous research has identified that a SH experience results in lowered self-esteem (Willness et al. 2007). This is a cause for concern as it is difficult to imagine a person with these kinds of feelings enthusiastically and competently providing adequate health care in a medical setting, let alone performing critical lifesaving tasks.

Four areas for future investigation are the effect of SH on recruitment, communication, increased anxiety and distraction or distancing from work commitments.

There are many unexplored areas related to engagement as a result of limited attention in the academic literature. For example, how do human resource practices such as flexible work arrangements,

training programs, and incentive programs build engagement or whether factors other than SH impede engagement? Future research could include a broader range of predictors of engagement and disengagement.

CONCLUSION

Research confirms that work engagement ignites talent and skill, and disengagement shuts it down. According to International Survey Research (2003), the ratio of engaged to disengaged workers drives the financial outcomes of any organisation. Despite this, work engagement has rarely been studied in the academic literature and relatively little is known about its antecedents and consequences. This study adopted the Utrecht Work Engagement Scale (Schaufeli et al. (2002a), as an empirical gauge of the construct "work engagement" and the Sexual Experiences Questionnaire (Fitzgerald et al., 1988) to measure SH. A strong negative relationship was established in addition to significant differences between men and women who experience SH in the workplace.

This study confirmed that like other occupations the prevalence of SH in nursing is high with 60.4% of female nurses and 34.4% of male nurses reporting a SH incident in the 2 year period prior to the study. The nature of SH was found to differ across men and women. Male nurses who had been sexually harassed reported lower levels of 'dedication' than female nurses who were sexually harassed. In addition, while more than 50% of female nurses reported an incidence of gender harassment, less than 20% of men experienced a gender harassment episode, reporting unwanted sexual attention as the most common type of SH.

APPENDIX

Sexual Harassment Measures

Gender Harassment

- Suggestive stories or jokes (verbal, written or email) or sexual material in the workplace (e.g. cartoons, calendars etc.)
- Suggestive remarks about appearance or sexual activity
- Staring or leering
- Being asked out on a date or "to get together for a drink"

Unwanted Sexual Attention

- Crude sexual remarks
- Attempts to draw another into a discussion about personal or private sexual matters
- Propositions for sexual activity
- Being deliberately touched

Sexual Coercion

- A person deliberately exposing their genitals and / or breasts
- A person making attempts to fondle, touch or grab
- Forceful attempts to touch, fondle, kiss or grab
- Poor treatment for not cooperating sexually
- Implied career benefits for sexual cooperation
- Attempts made to have sexual intercourse
- Forceful attempts made to have sexual intercourse

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