

LETTERS



SEXUAL HARASSMENT

Students face deep conflict in reporting harassment

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Coopes describes steps to change the culture of bullying and harassment in Australia's medical profession.¹ We applaud the Royal Australasian College of Surgeons for its action plan to tackle such harassment,² but the problem goes much deeper than surgeons behaving badly.

In 2015 we conducted a study in New South Wales about conflicts of interest in medicine. Participants were medical students, medical educators, and other clinicians. Students and junior doctors felt conflicted between reporting others' inappropriate behaviour and protecting their own jobs or opportunities. These behaviours included bullying and harassment,¹ as well as corner cutting that compromised patient safety.

In both scenarios participants admitted that they would be unlikely to report a senior colleague. This reluctance stemmed from a deep conflict: students are taught that their responsibility is to patients, but they know that reporting a more senior doctor is very likely to harm their career. We suggest that the hierarchy of Australia's medical training means that the "silent bystander" that Coopes mentions is entrenched from the outset of medical education.

Culture change needs to recognise that students are currently made acutely aware of existing hierarchies and their vulnerable

career positions from their first years of medicine. It also needs to tackle the gender imbalance in senior roles. Numbers of female medical graduates have been similar to or greater than those of male students since 1994 in Australia,³ but, more than 20 years later, representation of women in senior medical roles remains very low.

The burden for change cannot rest solely on female doctors and students. This kind of culture change requires strong political commitment from senior male allies, who benefit from the current system, and solidarity from male medical students, who are likely to occupy senior positions in the future.

Competing interests: None declared.

Full response at: www.bmj.com/content/354/bmj.i4210/rr-2.

- 1 Coopes A. Operate with respect: how Australia is confronting sexual harassment of trainees. *BMJ* 2016;354:i4210. doi:10.1136/bmj.i4210 pmid:27587299.
- 2 Royal Australasian College of Surgeons. Building respect, improving patient safety. Nov 2015. www.surgeons.org/about-respect/what-we-have-done/building-respect,-improving-patient-safety/.
- 3 Australian Medical Workforce Advisory Committee, Australian Institute of Health and Welfare. Female participation in the Australian medical workforce. Jul 1996. <http://aihw.gov.au/publication-detail/?id=6442466793>.

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