References

- Agnew, R. (1993). <u>Discussion Paper 54: Equality Before the Law</u>, Australian Law Reform Commission. July 99 Elizabeth Street GPO Box 3708 Sydney NSW 2001.
- AIHW (1998). <u>Australia's Health 1998</u>. Canberra, Australian Institute of Health and Welfare.
- Bacchi, C. (1992). "Sex on campus where does 'consent' end and harassment begin." <u>Australian Universities' Review</u> 35(1): 31–36.
- Bates, E. and Linder-Pelz, S. (1990). <u>Health Care Issues</u>. North Sydney, Allen & Unwin.
- Benson, D. and Thomson, G. (1982). "Sexual harassment on a university campus: the confluence of authority relations, sexual interest and gender stratification." Social Problems 29(3): 236-251.
- Brown, R. A. and Swanson-Beck, J. (1993). <u>Medical Statistics on Personal Computers</u>. London, BMJ Publishing Group.
- Bryson, L. (1996). "No matrix magic." <u>Australian Health Review</u> 19(4): 11-17.
- Bullough, V. (1990). "Nightingale, nursing and harassment." <u>Image:</u> <u>Journal of Nursing Scholarship</u> 22(1): 4–7.
- Burgess, D. and Borgida, E. (1997). "Sexual harassment: an experimental test of sex-role spillover theory." <u>Personality and Social Psychology Bulletin</u> 23(1): 63-75.
- Carlson, M. (1998). "Gloria, Gloria." <u>TIME</u>. 151(12). http://pathfinder.com/time/magazine/1998/dom/980406/notebook/gloria_gloria.28.html
- Chapman, A. (1993). "Action against harassment." Nursing New Zealand September: 10.
- Charon, J. (1979). <u>Symbolic Interactionism: An Introduction, an Interpretation</u>, an <u>Integration</u>. Englewood Cliffs, Prentice-Hall, Inc.
- Childers-Hermann, J. (1993). "Awareness of sexual harassment: first step toward prevention." <u>Critical Care Nurse</u> February: 101–103.

- Cholewinski, J. and Burge, J. (1990). "Sexual harassment of nursing students." <u>Image: Journal of Nursing Scholarship</u> 22(2): 106-110.
- Cleveland, J. and Kerst, M. (1993). "Sexual harassment and perceptions of power: an under-articulated relationship." <u>Journal of Vocational Behaviour</u> 42(1): 49–67.
- Cloud, J. (1998a). "Sex and the Law." <u>TIME</u>. 151(11). http://pathfinder.com/com/time/magazine/1998/dom/980323/box3.html
- Cloud, J. (1998b). "Don't Try This At the Office." <u>TIME</u>. 151(14). http://pathfinder.com/time/magazine/1998/dom/980413/nation.do nt_try_this_at_30.html
- Cox, H. (1987). "Verbal abuse in nursing: report of a study." Nursing Management 18(11): 47-50.
- Dan, A., Pinsof, D. and Riggs, L. (1995). "Sexual harassment as an occupational hazard in nursing." <u>Basic and Applied Social Psychology</u> 17(4): 563–580.
- DeAngelis, T. (1993). "APA files amicus brief in sex harassment case." American Psychologists Association Monitor: 19–20, and 25–26.
- Debelle, B. (1993). "Protecting whistleblowers." <u>Australian Law Journal</u> 67(4): 249.
- Denzin, N. (1989). <u>Interpretive Interactionism</u>. Newbury Park, Sage Publications.
- Deutscher, I. (1973). What We Say: What We Do. Glenville, Ill., Scott, Foresman.
- DeVault, M. L. (1990). "Talking and listening from women's standpoint: feminist strategies for interviewing and analysis." <u>Social Problems</u> 37(1): 96-116.
- Dey, E., Korn, J. and Sax, L. (1996). "Betrayed by the academy." <u>Journal of Higher Education</u> 67(2): 149-173.
- Diamond, J. (1992). <u>The Third Chimpanzee: The Evolution and Future of the Human Animal</u>. New York, HarperCollins.
- Donald, C. and Merker, S. (1993). "Medical alert: sexual harassment in the health care industry." <u>International Journal of Public Administration</u> 16(10): 1483–1499.

- Dowell, M. (1992). "Sexual harassment in academia: legal and administrative challenges." <u>Journal of Nursing Education</u> 31(1): 5–9.
- Duffield, C. and Lumby, J. (1994). "Caring nurses: the dilemma of balancing costs and quality." <u>Australian Health Review</u> 17(2): 72-83.
- Ehrenreich, B. (1998). "The week feminists got laryngitis." <u>TIME</u>. February 9, 1998. 151(5): 68.
- Emerson, J. (1978). "Nothing unusual is happening." in <u>Symbolic Interaction: A Reader in Social Psychology</u>. J. Manis and B. Meltzer. Sydney, Allyn and Bacon, Inc.: 272-280.
- Epstein, S. (1994). "Integration of the cognitive and the psychodynamic unconscious." <u>American Psychologist</u> 49(8): 709–722.
- Farley, L. (1978). <u>Sexual Shakedown: The Sexual Harassment of Women in the Working World</u>. London, Melbourne House.
- Finnis, S. and Robbins, I. (1994). "Sexual harassment of nurses: an occupational hazard?" <u>Journal of Clinical Nursing</u> 3(2): 87–95.
- Fiske, S. and Glick, P. (1995). "Ambivalence and stereotypes cause sexual harassment: a theory with implications for organizational change." <u>Journal of Social Issues</u> 51(1): 97–115.
- Fitzgerald, L. (1990). "Sexual harassment: the definition and measurement of a construct." in <u>Ivory Power</u>. M. Paludi. Albany, New York, State University of New York Press: 21-44.
- Fitzgerald, L., Drasgow, F., Hulin, C., Gelfand, M., and Magley, V. (1997). "Antecedents and consequences of sexual harassment in organizations: a test of an integrated model." <u>Journal of Applied Psychology</u> 82(4): 578-589.
- Fitzgerald, L., Swan, S. and Fischer, K. (1995). "Why didn't she just report him? The psychological and legal implications of women's responses to sexual harassment." <u>Journal of Social Issues</u> 51(1): 117–138.
- Gardner, J. and Allen, F. (1996). "Sexual and gender harassment at university: experiences and perceptions of Australian women." <u>Australian Psychologist</u> 31(3): 210-216.
- Garner, H. (1995). <u>The First Stone: Some Ouestions about Sex and Power</u>. Sydney, Pan Macmillan Australia Pty Limited.
- Genovich-Richards, J. (1992). "A poignant absence: sexual harassment in the health care literature." <u>Medical Care Review</u> 49(2): 133-159.

- Goodner, E. and Kolenich, D. (1993). "Sexual harassment: perspectives from the past, present practice, policy, and prevention." <u>Journal of Continuing Education in Nursing</u> 24(2): 57–60.
- Greenhalgh, T. (1997). <u>Statistics for the Non Statistician I: Different Types of Data Need Different Statistical Tests.</u> London, BMJ Publishing Group.
- Gutek, B. (1985). <u>Sex and the Workplace</u>. San Francisco, Jossey–Bass Publishers.
- Gutek, B. and Dunwoody, V. (1986). "Understanding sex in the workplace." Women and Work: An Annual Review 2: 249-269.
- Gutek, B. and Morasch, B. (1982). "Sex-role spillover and sexual harassment of women at work." <u>Journal of Social Issues</u> 38:(4): 55–74.
- Hawkins, R. and Tiedeman, G. (1975). <u>The Creation of Deviance</u>, <u>Interpersonal and Organizational Determinants</u>. Columbus, Ohio, Charles E Merrill Publishing Company.
- Healthcover (1998). "1998, an election year: more chaos parading as reform?" <u>healthcover</u>. 8(1): 1-5.
- Hinson, S. (1995). "Sex-based harassment in high schools: a study of teacher perceptions in the ACT." James Darling House 42 Geils Court, Deakin, ACT 2605, The Australian College of Education; Occasional Paper No. 24: 1-51.
- Horsley, J. (1990). "Don't tolerate sexual harassment at work." <u>RN</u> January: 69–73.
- Hughes, T. (1992). "Gender Equality in the Justice System, Volume One, 'The Legal Profession,'" A Report of the Law Society of British Columbia Gender Bias Committee.
- Julius, D. and DiGiovanni, J. (1990). "Sexual harassment, legal issues, implications for nurses." AORN Journal 52(1): 95–104.
- Kermode, S., Emmanuel, N., and Brown, C. (1994). "A critical overview of current public policy trends and their implications for nursing." <u>Collegian</u> 1(1): 14-23.
- Kidder, L., Lafleur, R., and Wells, C. (1995). "Recalling harassment, reconstructing experience." <u>Journal of Social Issues</u> 51(1): 53–67.

- Kinard, J., McLaurin, J., and Little, B. (1995). "Sexual harassment in the hospital industry: an empirical inquiry." <u>Health Care Management Review</u> 20(1): 47-53.
- King, C. (1995). "Ending the silent conspiracy: sexual harassment in nursing." Nursing Administration Ouarterly 19(2): 48–55.
- Kitzinger, C. and Thomas, A. (1995). "Sexual harassment: a discursive approach". in <u>Feminism and Discourse, Psychological Perspectives.</u>
 <u>Gender and psychology: Feminist and Critical Perspectives.</u> S. Wilkinson and C. Kitzinger. London, Sage Publications, Inc.: 32-47.
- Knafl, K. and Breitmayer, B. (1991). "Triangulation in qualitative research: issues of conceptual clarity and purpose." in <u>Qualitative Nursing Research: A Contemporary Dialogue</u>. J. Morse. Newbury Park, Sage Publications.
- Lawler, J. (1991). <u>Behind the Screens: Nursing Somology and the Problem of the Body</u>. London, Churchill Livingstone.
- Libbus, M. and Bowman, K. (1994). "Sexual harassment of female registered nurses in hospitals." <u>Journal of Nursing Administration</u> 24(6): 26-31.
- Lippman, H. (1993). "Sexual harassment: an updated picture." RN 56(2): 61–66.
- Little, D. (1992). "Sexual harassment: faculty, student considerations." The NEA Higher Education Journal 8(1): 5–12.
- Lloyd, P. (1994). "A history of professionalisation in NSW: 1788 1950." Australian Health Review 17(2): 14–28.
- Loewenstein, G. (1996). "Out of control: visceral influences on behavior." Organisational Behavior and Human Decision Process 65(3): 272–292.
- MacKay, H. (1993). <u>Reinventing Australia</u>, <u>The Mind and Mood of Australia in the 90s</u>. Sydney, Angus & Robertson.
- MacKinnon, C. (1979). <u>Sexual Harassment of Working Women: A Case of Sex Discrimination</u>. New Haven and London, Yale University Press.
- Madison, J. (1995a). <u>Registered Nurses Perceptions of Sex-based</u>
 <u>Harassment</u>. Sustainable Nursing, Royal College of Nursing,
 Australia, Fourth National Nursing Forum, Launceston, Tasmania,
 17–19 May 1995.
- Madison, J. (1995b). <u>Sex-based and Sexual Harassment and RNs in the Australian Health Care Industry</u>. Research for Practice: Making a

- Difference, International Nursing Conference, University of Newcastle, 6–8 July 1995.
- Madison, J. (1997). "Australian RNs describe the health care workplace and its responsiveness to sexual harassment an empirical study." <u>Australian Health Review</u> 20(2): 102–115.
- Madison, J. and Gates, R. (1996). "Australian RNs and sex-based harassment in the health care industry." <u>Australian Health Review</u> 19(3): 14–27.
- Manis, J. and Meltzer, B. (1978). <u>Symbolic Interaction: A Reader in Social Psychology, Third Edition</u>. Sydney, Allyn and Bacon, Inc.
- Marquis, B., Lillibridge, J. and Madison, J. (1993). "The bachelors degree as entry into practice, a reality in Australia." <u>Nursing Outlook</u> 41(3): 135-140.
- McMillan, I. (1993a). "A disturbing picture." Nursing Times 89(8): 30–34.
- McMillan, I. (1993b). "Emotional turmoil." Nursing Times 89(8): 36-37.
- Meltzer, B., Petras, J. and Reynolds, L. (1977). <u>Symbolic Interactionism:</u> <u>Genesis, Varieties and Criticism</u>. London, Routledge & Kegan Paul.
- Minichiello, V., Aroni, R., Timewell, E., and Alexander, L. (1995). <u>Indepth Interviewing: Principles, Techniques and Analysis, Second Edition</u>. Melbourne, Longman Australia Pty Ltd.
- Morse, J. (1997). <u>Completing a Qualitative Project, Details and Dialogue</u>. Thousand Oaks, Sage Publications.
- Mrkwicka, L. (1994). "Sexual harassment is no laughing matter." <u>International Nursing Review</u> 41(4): 123–126.
- Muff, J. (1982). <u>Socialization</u>, <u>Sexism</u>, and <u>Stereotyping</u>. Prospect Heights, Illinois, Waveland Press, Inc.
- Najman, J. and Western, J. Eds. (1988). "Patriarchy and gender: theory and methods." <u>A Sociology of Australian Society: Introductory Readings</u>. South Melbourne, The Macmillan Company of Australia Pty Ltd.
- Neuhs, H. (1994). "Sexual harassment: A concern for nursing administrators." <u>Journal of Nursing Administration</u> 24(5): 47-52.
- Niland, C. (1994). Report of the Independent Inquiry into matters relating to the resignation of the former Minister of Police. Carmel Niland Commisioner, Level 13, State Office Block, Macquarie Street, Sydney 2000

- NRBNSW (1997). Project to Review and Examine Expectations of Beginning Registered Nurses in the Workforce 1997, Nurses Registration Board of New South Wales.
- Padgitt, S. and Padgitt, J. (1986). "Cognitive structure of sexual harassment: implications for university policy." <u>Journal of College Student Personnel</u> 27: 34–39.
- Paglia, C. (1998). "A call for lustiness." <u>TIME</u> 151(11): http://pathfinder.com/time/magazine/1998/dom/980323/box5.html
- Palmer, G. and Short, S. (1989). <u>Health Care & Public Policy: An Australian Analysis</u>. South Melbourne, The MacMillan Company.
- Paludi, M. (1990). <u>Ivory Power, Sexual Harassment on Campus</u>. New York, State University of New York Press.
- Patton, M. (1987). <u>How to Use Qualitative Methods in Evaluation</u>. Newberry Park, Sage Publications, Inc.
- Pelletier, D., Donoghue, J., Duffield, C., and Adams, A. (1998). "The impact of graduate education on the career paths of nurses." <u>Australian Journal of Advanced Nursing</u> 15(3): 23-30.
- Picone, D. (1996). "The nurses welcome new services but question the cost to the community." <u>Notations</u> 75 June : 2.
- Polit, D. and Hungler, B. (1991). <u>Nursing Research, Principles and Methods</u>. Philadelphia, J.B. Lippincott.
- Ramsay, E. (1995). "Management, gender and language, who is hiding behind the glass ceiling and why can't we see them?" in <u>Gender and Changing Educational Management</u>. B. Limerick and B. Lingard, Hodder Education, a division of Hodder Headline Australia: 174-185.
- Ridgway, B. (1984). "Sexual harassment, it's not a compliment." <u>The Lamp</u> September: 19–21.
- Roberts, K. (1996). "A snapshot of Australian nursing scholarship." <u>Collegian</u> 3(1): 4-10.
- Roberts, K. (1997). "Nurse academics' productivity: framed by the system, facilitated by mentoring." <u>Australian Journal of Advanced Nursing</u> 14(3): 5-14.
- Ryan, J. and Kenig, S. (1991). "Risk and ideology in sexual harassment." Sociological Inquiry 61(2): 231–241.

- Schucher, K. (1994). "Achieving a workplace free of sexual harassment: the employers obligations." <u>Canadian Labour & Employment Law Journal</u> 3(2): 171-200.
- Scott, R. (1995). "Counting the cost of harassment." Sydney Morning Herald. Sydney: May 6 1995: 25A.
- Soloman, D. and Williams, M. (1997). "Perceptions of social-sexual communications at work: the effects of message, situation, and observer charateristics on judgments of sexual harassment." <u>Journal of Applied Communications Research</u> 25(3): 196-216.
- Sommers, C. (1994). Who Stole Feminism? New York, Simon & Schuster.
- Spender, L. (1991). <u>The Law Handbook</u>. Chippendale, The Redfern Legal Centre Publishing Ltd.
- Stockdale, M., Ed. (1996). "Sexual Harassment in the Workplace: Perspectives, frontiers, and response strategies." Women and Work. Thousand Oaks, Sage Publications.
- Stockdale, M. S. (1993). "The role of sexual misperceptions of women's friendliness in an emerging theory of sexual harassment." <u>Journal of Vocational Behavior</u> 42(1): 84–101.
- Stockdale, M. S. and Hope, K. (1997). "Confirmatory factor analysis of U.S. Merit Systems Protection Board's survey of sexual harassment: the fit of a three-factor model." <u>Journal of Vocational Behavior</u> 51(3): 338-357.
- Symons, D. (1987b). An Evolutionary Approach: Can Darwin's View of Life Shed Light on Human Sexuality? New York, Plenum Press.
- Taft, J. (1987). Women and Symbolic Interaction. Sydney, Allen & Unwin, Inc.
- Talbot, M. (1998). "Sell-out sisters." <u>The Weekend Australian</u>. Focus. February 7-8 1998. Sydney: 21.
- Thomas, E. and Isikoff, M. (1997). "Clinton v. Paula Jones." Newsweek January 13 1997: 26-34.
- U.S.MSPB (1981). (A report of) 1981, Ruth T. Prokop Chairwoman of the Merit Systems Protection Board, Washington, D.C. USA 20419., Merit Systems Protection Board Office of Merit Systems Review and Studies. Government Printing Office

- U.S.MSPB (1988). Sexual Harassment in the Federal Government: An Update, 1988, U.S. Merit Systems Protection Board Office of Merit Systems Review and Studies. Government Printing Office
- Ussher, J. (1992). "A sick joke." Nursing Times 88(52): 34–35.
- Vecchio, R., Hearn, G. and Southey, G. (1996). <u>Organisational Behaviour</u>. Sydney, Harcourt Brace.
- Watson, L. (1995). <u>Dark Nature</u>, A <u>Natural History of Evil</u>. Great Britain, Hodder & Stoughton.
- Williams, K. B. and Cyr, R. (1992). "Escalating commitment to a relationship: the sexual harassment trap." Sex Roles 27(1/2): 47-71.
- Wood, B. (1995). <u>Confronting Research with Connected Methodologies</u>. Qualitative Research: Beyond the Boundaries, First Pacific Rim Interdisciplinary Conference, Fremantle, Western Australia, 21-22 November.
- Worrall-Carter, L. (1998). "Nurse academics warned of burnout." <u>Nursing</u> <u>Review</u> July: 11.

Appendix A

Survey Questionnaire

2 February 1995

Dear Colleague

Thank you for agreeing to participate in this survey which is part of my PhD study program in the University of New England Graduate School of Business Administration. As a fellow Registered Nurse, I am interested in conducting the first scientific study of sexual harassment in the Australian Health Care industry as perceived by Registered Nurses. This survey is intended to find out whether uninvited and unwanted sexual attention is a problem in the health care industry, how different Registered Nurses feel about the behaviour, and if it is a problem, what should be done about it. This is your opportunity to establish the facts about the subject.

Both men and women are urged to complete this questionnaire. I need answers from those who have not experienced unwanted sexual attention as well as from those who have. Likewise, I need answers from those who do not think a significant problem exists, as well as from those who do. Do not ask anyone else to fill out your questionnaire.

Your open and honest answers to this questionnaire will be kept strictly confidential. Do not put your name anywhere on the questionnaire. There is no identifying number on the questionnaire. All answers will be combined so that individual responses cannot be identified. Do not be daunted by the number of pages. Depending on your experience, some participants will not need to complete every section. Read the instructions carefully.

Please be reminded that your participation is completely voluntary and you are free to withdraw from this study at any time. Your names will not be recorded and the return of the questionnaire is considered consent to participate in the study. The questionnaire should take about 30 minutes to complete if you have not experienced an incident of sexual harassment and about 45 minutes if you have

If during (or after) the completion of this questionnaire, you have any questions or would like to talk to me I will be available at the back of the room. Due to the sensitive nature of this topic, if you would like to speak to a professional counsellor I will see that you are given a list of appropriate counsellors from which to chose.

I strongly urge you to take advantage of the opportunity to participate in this landmark study. The overall findings will be presented in appropriate journal and conference publications. Thank you again for participating in this survey.

Sincerely,

Jeanne Madison, Lecturer
Department of Health Services Management and Public Health
University of New England
Armidale NSW 2351
Australia

Sex-Based Harassment in the Health Care Industry Is it a Problem?

This is the first study of sexual harassment in the Australian Health Care industry. The first part of this questionnaire asks how you feel about relationships among people who work together. This is followed by questions about your opinion of various remedies for sexual harassment. Following this section I ask about your own experience with sexual harassment. Finally, I ask for some demographic information such as your sex, age, work area and education. The questions you are answering in this survey relate only to the Health Care industry and not to other experiences you may have had outside the Health Care industry. I appreciate your taking the time to complete this questionnaire.

The following questions ask how you feel about relationships among people who work together. People feel very differently about what should or shouldn't happen at work. These questions ask your opinion and perceptions about different kinds of sexual behaviour that can happen at work.

1. How much do you agree or disagree with each statement below? For each statement, please "X" the box which best describes your opinion.

How Much You Agree Or Disagree

	Statement	Strongly Disagree	Disagree	No Opinion	Agree	Strongly Agree
a.	I think it's all right for people to have sexual affairs with people they work with.					
b.	Morale at work suffers when some employees seem to get ahead by using their sexuality.					
c.	Women in positions of power are just as likely as men in such positions to sexually bother the people who work for them.					
d.	There's nothing wrong when women use their sexuality to get ahead on the job.					
e.	Unwanted sexual attention on the job is something people should not have to put up with.					
f.	People who receive annoying sexual attention have usually asked for it.					
g.	People shouldn't be so quick to take offence when someone expresses a sexual interest in them.					
h.	Nearly all instances of unwanted sexual attention can be stopped if the person receiving the attention simply tells the other person to stop.					
i.	I would call something sexual harassment even if the person doing it did not mean to be offensive.					
j.	When people say they've been sexually harassed, they're usually just trying to get the person they accuse into trouble.					
k.	There's nothing wrong when men use their sexuality to get ahead on the job.					
1.	Those who sexually bother others are usually seeking power over those they bother.					
m.	The issue of sexual harassment has been exaggerated most incidents are simply normal sexual attraction between people.					
n.	I think that women need their jobs as much as men $ \mathrm{do}.$					

The following questions ask more about how you feel about relationships among people who work together. I would like to know what you would think if the following behaviours happened to you or someone else at work. For each behaviour listed below, please "X" ONE box for each question.

	Statement	Definitely Not	Probably Not	Don't Know	Probably Yes	Definitely Yes
2a. Unin	vited pressure for sexual favours:					
a.	If a supervisor did this, would it bother you?					
b.	If a supervisor did this, would you consider this sexual harassment?					
c.	If medical officer did this, would it bother you?					
d.	If medical officer did this, would you consider it sexual harassment?					
e.	If another health care professional did this, would it bother you?					
f.	If another health care professional did this, would you consider it sexual harassment?					
	wited and deliberate touching, leaning over, nering, or pinching:					
a.	If a supervisor did this, would it bother you?					
b.	If a supervisor did this, would you consider this sexual harassment?					
c.	If medical officer did this, would it bother you?					
d.	If medical officer did this, would you consider it sexual harassment?					
e.	If another health care professional did this, would it bother you?					
f.	If another health care professional did this, would you consider it sexual harassment?					
2c. Unin	vited sexually suggestive looks or gestures:					
a.	If a supervisor did this, would it bother you?					
b.	If a supervisor did this, would you consider this sexual harassment?					
c.	If medical officer did this, would it bother you?					
d.	If medical officer did this, would you consider it sexual harassment?					
e.	If another health care professional did this, would it bother you?					
f.	If another health care professional did this, would you consider it sexual harassment?					
	wited letters, phone calls, or materials of a sexual ure:					
a.	If a supervisor did this, would it bother you?	П	П	П	П	П
b.	If a supervisor did this, would you consider this sexual harassment?	П	П	П	П	П
c.	If medical officer did this, would it bother you?	$\overline{\Box}$	$\bar{\Box}$	П	П	Ħ
d.	If medical officer did this, would you consider it sexual harassment?	П	П	П	П	П
e.	If another health care professional did this, would it bother you?	П		_		
f.	If another health care professional did this, would you consider it sexual harassment?					

2e. Uni	nvited pressure for dates:					
a. b.	sexual harassment?					
C.	•	Ш	Ц	Ц	Ц	L
	d. If medical officer did this, would you consider it sexual harassment?					
e.	it bother you?					
f.	If another health care professional did this, would you consider it sexual harassment?					
2f. Unii	nvited sexual teasing, jokes, remarks, or questions:					
a.	If a supervisor did this, would it bother you?					
b.	If a supervisor did this, would you consider this sexual harassment?					
c.	If medical officer did this, would it bother you?					
d.	If medical officer did this, would you consider it sexual harassment?	П		П	П	П
e.	If another health care professional did this, would it bother you?	П	_ П	П	_	_
f.	If another health care professional did this, would you consider it sexual harassment?					
2g. Ster	reotypical or demeaning comments					
a.	If a supervisor did this, would it bother you?					
b.	If a supervisor did this, would you consider this sexual harassment?					
c.	If medical officer did this, would it bother you?					
d.	If medical officer did this, would you consider it sexual harassment?					
e.	If another health care professional did this, would it bother you?	П	П		_	П
f.	If another health care professional did this, would you consider it sexual harassment?					
In this	section, I would like your views on what actions would be ace.	useful in rec	ducing or pr	eventing s	exual hara.	ssment in the
	ost cases, which of the following do you think are the most othering them sexually? Please "X" ALL the boxes that a		tions for emp	ployees to t	ake to mak	e others stop
1	gnoring the behaviour		1			
1	Avoiding the person(s)		2			
1	Asking or telling the person(s) to stop		3			
-	Threatening to tell or telling other workers		4			
l	Reporting the behaviour to the supervisor or other officials		5			
1	Filing a formal complaint		6			
r	There is very little that employees can do to make others stop bothering them sexually		7			
(Other, please specify		8			

	th of the following do you think are the most effective action cassment? Please "X" ALL the boxes that apply.	ns for an org	ganisation's	manageme	nt to take re	egarding se	xual
Estal	olish and publicise policies which prohibit sexual harassmer	nt.	1				
	duct swift and thorough investigations of complaints of sexuarassment.	<u> </u>					
	rce penalties against managers who knowingly allow this be continue.	ehaviour	 3				
Enfo	rce penalties against those who sexually bother others.		4				
Publi	icise the availability of formal complaint channels.		5				
	olish a special counselling service for those who experience arassment.	sexual	6				
Prov	ide awareness training for employees on sexual harassment		7				
	ide training for managers and EEO officials on their responder decreasing sexual harassment.	sibilities	8				
	e is very little that management can do to reduce sexual har on the job.	assment	□ 9				
None	e of the above.		10				
Other,	please specify						
the actio	o know whether you think the following actions are available on swould be effective in helping those employees. For each Statement Lesting an investigation by employing organisation.	action list Y	ed below, pi	lease ''X'' (ise to Beha	NE box fo	r each que	
a.	Is this remedy available to employees where you work?						
b.	Would this be effective in helping these employees?						
5b. Requa.	uesting an investigation by an outside agency. Is this remedy available to employees where you work? Would this be effective in helping these employees?						
5c. Lodg a. b.	ging a grievance or adverse action appeal. Is this remedy available to employees where you work? Would this be effective in helping these employees?						
5d. Lod _i a. b	ging a discrimination complaint. Is this remedy available to employees where you work? Would this be effective in helping these employees?						
	ging a complaint through special channels set up for sexual rassment complaints. Is this remedy available to employees where you work? Would this be effective in helping these employees?			R			

The following questions ask about any experience you may have had with uninvited and unwanted sexual attention on the job from persons of either sex.

6. Have you received any of the following uninvited sexual attention from someone where you work in health care? Please "X" ONE box for each Item.

					Frequency		
Uni	invited Sexual Attention		Never	Once	Once a Month or Less	2-4 times a Month	Once a week or More
a.	Actual or attempted rape or	sexual assault.					
b.	Unwanted pressure for sex	ual favours.					
c.	Unwanted deliberate touch cornering, or pinching.	ing, leaning over,					
d.	Unwanted sexually sugges	tive looks or gestu	ires 🔲				
e.	Unwanted letters, phone casexual nature.	alls, or materials o	f a				
f.	Unwanted pressure for date	es.					
g	Unwanted sexual teasing, j questions	okes, remarks, or					
terms of experience. 7. Is the	ne experience that is either mathat experience. Please compored uninvited and unwanted sexperience you are about to datest effect on you? Please "Y	lete these question exual attention on escribe the most re	as even if you dealt with to the job please skip to que ecent one, or is it the one	he situa uestion	ition yourself 29 .		
Thi Thi	is was my only experience. is was my most recent experie is was the experience that had is experience is still continuin	the greatest effec	t on me.	1 2 3 4			
	g any particular experience, a verience you describe here, wh						
Unv Unv Unv Unv	ual or attempted rape or sexual wanted pressure for sexual fave wanted and deliberate touching wanted sexually-suggestive low wanted letters, phone calls, or wanted pressure for dates.	ours. g, leaning over, cooks or gestures. materials of a sex	ual nature.	1 2 2 3 3 4 4 5 5 6 6 6 7 5			
9. How o	often did the unwanted sexual	attention occur? I	Please "X" ONE box.				
	ce a month or less times a month	1 2 3	Every few days Every day		4 5		
10. H ow	long did this unwanted sexua	ll attention continu	ne? Please "X" ONE bo	x.			
Les	ss than one week veral weeks	1 2	One to six months More than six months		3		

Describe yourself when you experienced this	unwanted sexual atte	ntion.	
a. AGE (at time of incident)			
Older than the person who sexually bothered	you	1	
Same age as the person who sexually bothere	ed you	_ 2	
Younger than the person who sexually bother	red you	3	
b. MARITAL STATUS (at time of incident) Married	<u> </u>	Single, never married	
Divorced, separated, widow	3	defacto	
Unknown	5		
c. At the time of the incident were you a			
Director of Nurses (DON)	1		
Deputy Director of Nurses (DDON)	_ 2		
Nurse Unit Manager (NUM)	☐ 3		
Clinical Nurse Consultant	4		
Clinical Nurse Specialist	5		
Registered Nurse	6		
Registered Nurse Midwife	7		
Unknown	8		
Other, please describe	9		
d. At the time of the incident were you			
The supervisor of the person who sexually be			
The peer of the person who sexually bothere			
The subordinate of the person who sexually	•	<u></u> 3	
The person who sexually bothered you was a health care professional	another 4		
Unknown	5		
Other, please describe	_		
	6		
e. Heightat time of incident	lent. (Please identify	whether feet and inches or cm)	
f Weight at time of inci-	dent (Planca identific	whather stones to an noveda	
f. Weightat time of incidents	dent. (Please identify	whether stones, kg or pounds)	

12. How did you respond to this unwanted sexual attention? Please "X" ALL the boxes that apply.

13. For each action that you took, what effect did it have? Please "X" the box for each action that you took.

A 41			Effect of Response hings Making No Making Thing			
Action		Worse	Difference	Making Things Better		
I ignored the behaviour or did nothing.	1					
I avoided the person(s)	2					
I asked or told the person(s) to stop.	3					
I threatened to tell or told other workers	4					
I reported behaviour to supervisor or other officials.	5					
I made a joke of the behaviour.	6					
I went along with the behaviour.	7					
I transferred, disciplined or gave a poor work performance rating to the person.	8					
I requested a transfer	9					
I did something other than actions listed above.	10					
please specify						
14. Did you think that any of the following would happen unwanted sexual attention? Please "X" ALL the box		l not go along with	the			
My working assignments or conditions would get wo	orse.		$\prod 1$			
The person(s) or other workers would be unpleasant	or would embarr	ass me.	\prod_{2}			
I would be unable to get a promotion, salary increase or reference.	e, good performa	nce rating,	☐ 3			
I would lose my job.			☐ 4			
I did not think anything would happen			$\overline{\square}_{5}$			
I would be blamed			6			
15. Did you think that any of the following would happen sexual attention? Please "X" ALL the boxes that a		g with the unwante	ed			
My working assignments or conditions would get be	tter.		 1			
The person(s) would become more pleasant.						
I would get a promotion, salary increase, good rating	, or reference.		☐ 3			
I would get a better job.			□₄			
I did not think anything would happen.			□ 5			
16. Did any of the following changes happen in your work unwanted sexual attention? Please "X" ALL the box		sult of this				
My working assignments or conditions got worse.			$\prod 1$			
I was denied a promotion, salary increase, good perfo	ormance rating, o	or reference.	$\overline{\square}$ 2			
I was reassigned or fired.			<u> </u>			
I transferred or quit to take another job.			<u> </u>			
I quit without having another job.			<u></u>			
My working assignments or conditions got better.			$\overline{\square}_{6}$			
I received a promotion, salary increase, good perform	nance rating, or r	reference.	$\overline{\square}_{7}$			
No changes happened in my work situation.			<u> </u>			

17. Did you talk	about this with anyone? Please "X" ON	E box.			
No	□ 1				
Yes	<u> </u>				
Who?(husb	and, friend, coworker, etc.)				
18 Did you tak	e any formal actions? Please "X" ONE b	ον.			
•	•				
No	Then Skip to question 22	2			
Yes	□ 2				
	ll actions did you take? K'' ALL the boxes that apply.		20. For each action that yo difference? Pleas	e ''X'' for each	group talked to:
			Differ	ence formal act	tion made
For	rmal Action		Made Things Worse	Made No Difference	Made Things Better
I request	ed an investigation by my organisation.	1			
I request	ed an investigation by an outside agency.	2			
I lodged	a grievance or adverse action appeal.	3			
I lodged	a discrimination complaint or lawsuit.	4			
None of	the above.	5			
Other, pl	ease specify.	6			
Found my Found my Corrected Took action Were host Did nothin The action Separated Recomme I don't know	n is still being processed.			1 2 3 4 4 5 5 6 6 7 7 8 8 9 10	hat apply.
apply.	y our round not need that go any rounds do a		iso it itself the boxes to		
	formal action.				skip to question 23
	know what action to take.			2	
	need to report it.			∐ ³	
	want to hurt the person who bothered me.			∐ ⁴	
	embarrassed.			∐ ⁵	
	hink anything would be done.			<u>□</u> 6	
	it would take too much time and effort.			7	
	it would be held against me or that I would		ned.	8	
I thought	it would make my work situation unpleasa	nt.		9 9	

23. How did the unwanted sexual attention affect you? For each statement listed below, please "X" the box which best describes how you were affected?

How you were Affected

		now you were Affected					
Statement		Became Worse	Had N Effect		Became Better		
a. My feelings about work							
b. My emotional or physical cond	lition						
c. My ability to work with others	on the job						
d. The quality of my work							
e. The quantity of my work							
f. My time and attendance at wor	rk						
g. My closeness to fellow colleag	gues						
24. How did the unwanted sexual attention a the people you worked with on a day-to "X" the box which best describes ho	o-day basis? For	each stateme					
How Others were Affected							
Statements		Became Worse	Had No Effect	Became Better	Not Sure		
a. Morale of the immediate work grou	ıp						
b. Productivity of the immediate work	c group						
c. Camaraderie/work friendship							
25. Please describe the person(s) who sexua	ally bothered you	ı. Please ''X'	' ONE box f	or each lin	ıe.		
a. SEX							
Male	1	F	emale			2	
Two or more males	3	Т	wo or more i	females	\prod	4	
Both males and females	<u> </u>	U	Jnknown			6	
b. AGE							
Older than you	1	S	ame age as y	ou		2	
Younger than you	Π_3	ν	arious ages		\Box	4	
Unknown	<u></u>		3				
c. ETHNIC STATUS							
Same as you	1	Γ	ifferent ethic	group from	m you	2	
Some the same and some different	3	U	Jnknown			4	
d. MARITAL STATUS							
Married	1	S	ingle			2	
Divorced, separated, widowed	3	В	oth married	and not ma	arried .	4	
Unknown	5						
26. Was the person(s) who sexually bothered	d you: Please "X	X'' ALL the	boxes that a	pply.			
Your immediate supervisor(s)	1	A	medical off	icer(s)		П 6	
Other higher level supervisor(s)	$\prod_{i=1}^{n} 2$				om you report	ш	
Your co-worker(s)	☐ 3		consultant t				
Your subordinate(s)	☐ 4		patient	3			
Other employee(s) (other department)	☐ 5		ther, please i	identify_			
• • • • • • • • • • • • • • • • • • • •	_		-				

27. Do you know whether the pone box.	person(s) has (have) sex	cually bothered of	others at work? Please "X"
No, this person has not se bothered others at work. I don't know. Yes, this person has sexua		1 2	
others at work.		□ 3	
28. At the time of this experien	ice, how much did you	need this job? P	lease "X" ONE box.
Not at all	Q	uite a bit	4
A little 2	A	great deal	5
Some 3			
This ends the questions about t I am also interested in knowing			nue. In this next series of questions tually bothering someone else.
29. Has anyone said that you w	vere sexually bothering	them? Please "	X'' ONE box.
No	1 Then skip to qu	estion 37	
Not sure	2 Then skip to qu	estion 37	
Yes	☐ 3		
If you have been accused of sex recent or had the greatest effect experience. 30. Did you think that the charge	ct on you and answer th	ne questions in ti	
No			
Not sure	☐ ¹		
Yes	☐ ²		
	_		
31. Why do you think it was ur	nfair? Please "X" ALL	the boxes that	apply.
There was nothing wrong	with what I did.		1
The person who accused i	me misunderstood my i	notives.	□ 2
The person who accused i	me wanted to create tro	uble.	☐ 3
My organisation's manag	ement found the charge	e to be false.	4
32. Please describe the person	who accused you. Pleas	se "X" ONE bo	ox for each question.
a SEX			
A male			1
A female			
b. AGE			
Older than you			1
Same age as you			
Younger than yo	u		□ 3
c. ETHNIC IDENTIFICA	ATION		
Same ethnic grou	ıp as you		1
Different ethnic	group from you		

d. MARITAL STATUS	
Married Single Divorced, separated, widowed	☐ 1 ☐ 2 ☐ 3
Don't know	4
33. Was the person who accused you: Please "X" ONE box.	
Your immediate supervisor	□ 1
Other higher level supervisor	2
Your co-worker	3
Your subordinate	4
Other employee (another department)	5
A medical officer	6
Other health care professional	7
Other or unknown	8
Please specify	
34. Were any formal actions taken by the person who accused you? P	lease "X" ONE box.
No	1
I don't know.	2
Yes	☐ 3
35. Do you know whether this person has accused others at work? Ple	ease "X" ONE box.
No, this person has not accused others at work.	 1
I don't know.	<u> </u>
Yes, this person has accused others at work.	<u> </u>
36. Was your work productivity affected as a result of this experience	? Please "X" ONE box.
Became worse	□ 1
Had no effect	<u> </u>
Became better	∃ 3
	_

This ends the questions about this particular experience. Please continue. In the following series of questions I ask about your work setting. If you received unwanted sexual attention or if you were accused of bothering someone sexually, please answer these questions in terms of the job where that occurred. If you did not identify either of the above, please answer these questions in terms of your present job.

37. Below are a series of statements that may or may not generally describe your immediate work group, that is, the people with whom you work(ed) most closely on a day-to-day basis. How much do you agree or disagree with each statement? For each statement, please "X" the box which best describes your opinion.

How Much You Agree or Disagree

	Statement a. I feel (felt) free to bring up general work-related			Strongly Disagree	Disagree	No Opinion	Agree	Strongly Agree		
		concerns or sugges supervisor.	tions to my	y imr	nediate					
	b.		my supervisor would correct elated concerns or suggestions							
	c.	At work I feel (felt) l am (was	s), ex	pected to flirt.					
	d.	At work I feel (felt) I am (was) expected to make sexual comments about the opposite sex.								
	e.	Uninvited and unw (was) a problem fo								
	I.	Employees use(d) their sexual favours for advancement on the job at work. My organisation makes (made) every effort to stop unwanted sexual attention amongst its employees.								
	g.									
38.	Does :	your organisation ha	ive a forma	al pol	icy for dealing with sex-	based harass	ment in the	workplace	?	
			1	j	No Yes Don't know					
			Have you	u eve	r used the formal policy	for dealing v	vith sex-bas	ed harassm	ent?	
			1	j	No Yes Other, please describe_				_	
39.	Does : esta	your organisation enablished procedure?	courage er	mplo	yees to formally protest a	igainst haras	sing behavi	our through	n an	
			1]	No Yes Don't know					
40.	Would	d you agree or disag	ree that you	ur or	ganisation seems to reser	nt dealing wi	th sex-base	d harassme	nt?	
			1		Disagree Agree Don't know					

harassment?	anisation been formally	y trained concerning what constitutes sex-based		
1	No No			
2	Yes			
3	Don't know			
42. Has the medical staff associated v based harassment?	with your organisation	been formally trained concerning what constitutes sex-		
1	□ No			
2	Yes			
3	Don't know			
				
43. Does the medical staff associated with your organisation have a formal policy to govern relationships among medical staff and employees in your organisation?				
1	□ No			
2	Yes			
3	Don't know			
This last section asks for information the workplace. Please answer		n understanding the nature of sex-based harassment in s about yourself.		
44. Age				
——————————————————————————————————————	years			
45. Gender	. =			
		Male		
	2	Female		
46 Company of the second second (4) In	-11 41-41-1			
46. Current employment status (tick	all that apply)			
	0	None		
	1	Full-time		
	2	Part-time		
	3	Casual		
47. Current employment				
	1 🗖	Hospital (acute care hospital more than 100 beds)		
	2	Hospital (acute care hospital less than 100 beds)		
	3	Convalescent Hospital/Long Term Care/Nursing Home		
	³ □	Community Health		
	5 П	Home Health		
	³ П	School (primary through secondary/high school)		
	7 🔲	Tertiary Institution /College/University		
	8	Other, please identify		
48. Please identify the 'specialty' (medical ward, surgical ward, theatre etc.) area of your employment.				

49. Unemployed				
	1		unable to find employment	
	2	片	taking 'time out'	
		닏		
	3	Ш	full time home maker	
	4		not applicable	
50. How long have you been working as a F	Registered	Nurse	?	
		_years		
51 TJ-wife ways high act modification				
51. Identify your highest qualification				
	1		Certificate	
	2	П	Post Graduate Certificate	
	3	$\overline{\Box}$	Diploma	
	4	Ħ	Bachelors	
	5	H	Honours	
	6	H	Masters	
		님		
	7	Ш	Other, please identify	
necessary). I welcome and encourage	е шеѕе ац			
53. May I contact you later this year to discuss your further participation in this study of sex-based harassment? I would be discussing with you the possibility that you maintain a journal over a 6 month period, noting incidence of sex-based harassment. Absolute confidentiality of all journal content will be maintained.				
1 🗖	No			
2	Yes			
- L				
			er participating in an in depth interview regarding care? Absolute confidentiality of all interview	
1 🗖	No			
2 🗖	Yes			
55. Would you like a summary of the finding	ngs of this	survey	questionnaire?	
1 🔲	No			
2 🗖	Yes			

If yes to either 53, 54 or 55, please complete the tear-off (next) page of this questionnaire and place it in the receptacle at the door labelled 'MORE INFORMATION'; the separated, completed questionnaire can be placed in the receptacle labelled 'QUESTIONNAIRES'.

Thank you.

PLEASE DETACH FROM QUESTIONNAIRE PLACE THIS SINGLE PAGE IN THE RECEPTACLE AT THE BACK OF THE ROOM LABELLED 'MORE INFORMATION'

Yes, I would consider participating in further study regarding my experiences with sex-based harassment in health care. ___I would like to discuss keeping a journal ___I would like to discuss an in depth interview ___I would like to discuss either or both ___I would like a summary of the findings of this survey questionnaire I can be reached at: Name: _____ City or town: ____ Home phone: Work phone: FAX: _____ Thank you very much for your participation in this survey. Jeanne Madison School of Health Department of Health Services Management and Public Health University of New England Armidale NSW 2351 Australia WORK PHONE: 067 733665 HOME PHONE: 067 783178

FAX: 067 733666

EMAIL: jmadison@metz.une.edu.au

Appendix B

Plain Language Statement for Interview Participants (Registered Nurses)

Hello, my name is Jeanne Madison and I am a Registered Nurse presently enrolled in a Doctor of Philosophy degree at the University of New England. Part of my research project which is entitled *Sex-based Harassment in the Australian Health Care Industry* is being undertaken at this time.

I would like to invite you to participate in this research study and would be very grateful if you decide to do so.

The aim of this research is to explore the perceptions of Registered Nurses regarding sex-based harassment in the Australian Health Care Industry. If you agree to participate, you would be asked to share with me your views about, and experiences with, sex-based harassment in the health care work environment. The interview lasting about 1 hour will be completely confidential and neither you nor your employer will be identified in any way in the results of the study. All interviews will be recorded on audio tape and written transcriptions of these recordings will be made. No names will be attached to the tapes. Only a code number will be used to identify the tapes and any information which could link them to you will be kept in a separate place in case I need to contact you again before the end of the study.

If during the interview, you wish to continue at another time or discontinue the interview completely, you are free to ask me to leave, even if you have agreed, at an earlier time, to be interviewed. Please understand that any information given will remain confidential. Due to the sensitive nature of this topic if you feel at any time you would like to speak to a professional counsellor I will see that you are directed to a list of appropriate counsellors from which to chose.

You should note that you are free to withdraw this consent at any time during the study for any reason. If this happens, then any information which has already been collected from you, will be destroyed if you so wish.

Any questions concerning the project, which is titled *Sex-based Harassment* in the Australian Health Care Industry can be directed to Jeanne Madison, Postgraduate Student, Graduate School of Business Administration, University of New England, Armidale, NSW 2351. Phone 067 733665.

If you decide that you would like to assist me by participating in this research, please read the following statement and sign below.

I,	, have				
read the information above and any questions	I have asked have been				
answered to my satisfaction. I agree to participat	e in this activity, realising				
that I may withdraw at any time. I agree that research data gathered for the					
study may be published, provided my name is not	used.				
Participant or Authorised Representative	Date				
Investigator	Date				

Appendix C

Letter to Focus Group Participants

30 January 1998

Dear

Thank you for agreeing to assist once again in my PhD research project entitled Sex-based and Sexual Harassment in the Australian Health Care Industry, by participating in a telephone focus group discussion in March. The aim of this research is to explore the experiences and perceptions of Registered Nurses regarding sex-based and sexual harassment in the health care workplace. You will find enclosed here two chapters from the research project that include the interview coding and analysis. These chapters follow a literature review, the research project conceptual and theoretical framework, and the findings associated with the survey questionnaire conducted in January 1995.

I hope that you will be able to read the attachment and be prepared to listen and discuss with other interview participants your perspective and comments on the manuscript. Feel free to write on the manuscript itself. It is a draft document and will be revised upon completion of the telephone focus group discussion. This telephone focus group discussion will be a conference call that will include six of the original seventeen interview participants. With your permission I would like to record the discussion so that I can transcribe and review it later. This will assist in any revisions or clarifications in the manuscript that become evident from the discussion.

You will see there are basically 6 areas of analysis:

LABELLING: how the RN informants label the event of harassment

RECOGNITION: how the RN informants recognise harassment may be imminent: what were some of the features or benchmarks

CLASSIFICATION: what classifications could be used to describe the harasser RESPONSE: emotional and physical responses of the RN informants' experiences with harassment

RATIONALISATION: what rationalisations the RN informants used to explain their and their harassers actions or inactions

POLITICAL CONSEQUENCE: how harassment can be politicised for the profession and individual RN informants

I would like to know if you agree or disagree with my interpretations of the issues and if they make sense to you. Can you confirm the validity of my

thinking? I would appreciate your thoughts where you understand or recognise a 'truth' from your experience or perceptions. Do you have alternative ways of interpreting or looking at the interview information? Wherever possible if you can think of examples to support your interpretation or suggestions this would be helpful. I would hope the telephone focus group discussion can identify, explore and expand other implications of the issues. Finally I would hope to develop some ideas about how you see the practical implications of this research in light of the discussion and your thinking.

I will call you during the week following March 13 and organise a mutually convenient evening and time that will bring the seven of us together on the telephone. I would suggest the call might take an hour, possibly more. As you can see, I have sent you two copies of this letter and a postage paid envelope. Your signature below indicates you have agreed to participate and that you know the conversation will be tape recorded. If you would like to be identified by a code name during the telephone focus group discussion, please indicate below a suggested pseudonym. I would be most grateful if you could kindly sign one of these letters and return it to me to arrive prior to the telephone focus group conference call. Retain the copy for your files.

I'm most grateful for your participation in this research project.

Regards,
eanne Madison Jniversity of New England
Your signature

Appendix D

Focus Group Trigger Questions

Hello Everyone!

I'm happy you could all make it and want to repeat my thank you to each of you for participating tonight in a discussion about Sexual Harassment and RNs. Each of you have read about 100 pages of my research draft that discusses the interview portion of the project, that each of you participated in. What I'm hoping happens tonight is that we can take the analysis to a new level, greater depth. I need to see if what I've said makes sense to you? Can you add things I've missed? Have I interpreted comments as you might have?

As way of introduction, I'll just say that there are 6 of you on the line tonight, plus me. All six of you are female, all are RNs, all are in your 30's or 40's... except me! I'm assuming that people will maintain confidentiality about what is discussed by anyone tonight. That said, let's start. Whenever you can remember, could you just identify yourself by name before you talk, to help people follow who is talking. We'll pause at the one hour mark to assess peoples fatigue level. We'll work our way through them first by going around to each of you for a reaction or comment then open it up for discussion. If people tire we may need to organise another conference call. Just to begin with, do any of you happen to have a burning issue that you want up front in the first place or need to get off your chest?

1. OK, let's just start at the beginning and work through the different sections. You read about how the interview participants 'labelled' different episodes of harassment. Mary start with some of your thoughts about the way labelling is dealt with in the paper.

Bess

Franc	res
Paula	
Sarah	ı
Lucy	
Mary	
with	1
some	
some	

Lucy

Mary

5. OK, let's move on to 'rationalisation'. Paula would you like to start us off on a discussion about the various rationale or explanations for the behaviour of the harasser as well as the harassed?

Bess

Frances

Paula

Sarah

Lucy

Mary

- 6. OK, the broader concepts associated with political consequences. Let's take them one by one.
 - a. Silence, anyone have a comment to begin a discussion Frances?
 - b. Absence of supportive behaviours Mary?
 - c. Lack of education Lucy?
 - d. Perpetuating the myths Bess?

Bess

Frances

Paula

Sarah

Lucy

Mary

7. My supervisor brought up an interesting question in our last session together saying that he was having a hard time with my concept of 'silence' alongside the media interest that was generated by the survey part of this research project. He asked how can I say the issue is 'silent' when it seems to

generate such interest from the media? I know that nurses talk about inappropriate behaviour of co-workers, colleagues, doctors, patients, privately, in our tea rooms or exclusively nurse groups, but I also know it isn't on any professional meeting agenda... it isn't in our journals..., we haven't formally researched it... What would you say to my supervisor about silence and harassment?

Bess

Frances

Paula

Sarah

Lucy

Mary

8. OK, let's step way back and take a 'big picture'. Do you have any general comments about the scope and depth of the interview research?

Bess

Frances

Paula

Sarah

Lucy

Mary

9. Any, ANY other comments are areas that you would like to discuss or comment on?

Bess

Frances

Paula

Sarah

Lucy

Mary

I'd like to bring this to a close now, with another thank you. I appreciate your taking the time to be available and to participate this evening, it has been very helpful. I will be transcribing and analysing our discussion soon. If, for any reason you wish to discuss any concerns in the next few days, do not hesitate to call me, at work or at home. I remain available to talk with you further should you feel the need to 'debrief' or add some after-thoughts.