What should I do if I witness a colleague sexually harassing another member of staff?

Ingrid Torjesen finds out how to support a colleague who is the target of sexual banter or unwanted advances

Ingrid Torjesen

Doctors need to know that they will be supported

Jo Wren, head of outreach for the General Medical Council, says, “Hearing accounts from people who were sexually assaulted by a colleague is harrowing and the GMC absolutely condemns such behaviour. There can be no place for misogyny, sexism, or any form of sexual harassment in the medical profession. “Good Medical Practice” states that doctors must tackle discrimination and encourage their colleagues to do the same.1 Recently we consulted on updating this core guidance, setting out a zero tolerance approach to sexual harassment. It includes two explicit duties for doctors: they should find any form of abuse or discrimination unacceptable, and they must act and support others if they witness or learn of harassment, bullying or discrimination.

“Some doctors may find it hard to report a colleague’s inappropriate behaviour for fear that nothing will be done or that raising a concern may cause problems for colleagues or have a negative impact on your working relationships and career. That is why we have produced support materials to help doctors identify and tackle misconduct.2

“If you are hesitant to report a concern, you should bear in mind that you don’t need to wait for proof—you’ll be able to justify raising a concern if you do so honestly, based on a reasonable belief, and through appropriate channels, even if you’re mistaken.3

“It’s vital that leaders create safe and supportive working environments in which it’s the norm for doctors to call out a colleague’s unacceptable behaviour. Not only for doctors’ welfare, but also to empower doctors to express other concerns, so they know they’re being listened to and will be supported.”

Offer your support and a listening ear

Becky Cox, GP and co-founder of the Surviving in Scrubs campaign, says, “My first piece of advice is not to ignore it and carry on with your work duties. Check in with the colleague targeted. Ask how they are and how they feel about what just happened to them. Sexual harassment is often disguised as banter, and the person subject to it might not even recognise what happened to them. “If the person feels comfortable, ask if this is something that has happened before. In many cases sexual harassment isn’t an isolated incident with either repeated attacks from the same person or a team harassing an individual.

“Offer your support and a listening ear. For your colleague, having a friendly and supportive team member can make a lot of difference. “Ask if they want to report it. Having a witness can help with a complaint, but this is an individual decision so don’t pressure them. Whether or not to report is a tough decision; it’s not just the process of reporting and fear of reprisal from the perpetrator, but also relationships with other colleagues, career progression, and their wellbeing at stake. “Importantly, thank them for sharing with you. Say that you believe them and do not share any details without consent.

“As a witness, if you are concerned there is a wider persistent pattern of sexual harassment in your team or department you can consider raising this with your supervisor, directorate, or hospital management without naming the people involved. This, however, can be difficult if the perpetrator or perpetrators are involved with any leadership teams. You can also seek advice from the BMA and your indemnity provider.”

Ask for any offensive comment to be repeated

Tamzin Cuming, chair of the Women in Surgery forum, Royal College of Surgeons of England, says, “In a BMA survey last year, 91% of women reported experiencing sexual harassment,4 so it’s very likely a doctor will witness, if not experience, sexual harassment. “My first thought is for the victim. Be there to talk to and offer support, including with reporting, if they wish to. To help, there’s the Speak Up app,5 confidential helplines, and our website6 with details of legal advice and finding a sexual assault and rape centre.

“Keeping a contemporaneous private record of events is important, as is anonymously adding testimony to the Surviving in Scrubs website,7 which will be used to shake up the current culture that is permissive of sexual misconduct, improve reporting, and push for real consequences for perpetrators. “There is an increased likelihood of sexual assault in a workplace where sexual harassment is tolerated—the perception of acceptability mattering more than any institutional rules. Speaking up—standing up for yourself as well as the victim—is something we all need to do.
“If you’re the focus of an offensive comment and aren’t in a position to push back directly, ask for it to be repeated. This draws attention to it and can bring support from others. You can also ask why it’s funny. Clearly stating that something said isn’t acceptable can serve as a warning.

“Many women’s decision to leave an intended career in surgery is likely to be because of either outright sexual misconduct or to the atmosphere created by a culture that does not welcome or respect women.”

Helplines: RCS England (0800 028 0199) and BMA (0330 123 1245) for members and non-members

Have you experienced sexual harassment or abuse from a colleague or patient? The BMJ would like to hear your story. To talk in confidence, please contact itsorjesen@bmj.com