

Chapter-VI

Summary and Conclusion

The sexual harassment is not just a workplace problem rather it is the manifestation of inequality of women with men in society. It is a long history but coined and acknowledged in the early 1970s and after that many other industrialized countries have passed laws that declared the sexual harassment illegal within their workplaces (Fitzgerald & Shullman, 1993; Luthar & Pastille, 2000; De Souza et al, 1998). The studies are on-going regarding the extent to which the act or the behaviour leading to sexual harassment and perceptions that are rooted in the cultural context. The United Nations defines violence as: 'any act of gender-based violence that results in, or is likely to result in, physical, sexual or mental harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life' (WHO, 2011). Women in public services are more prone to workplace violence due to the nature of their jobs which involves interaction with the public and colleagues (Kishore, 2011). The power quotient is accorded to one gender, herein the male, by societal norms who in order to retain the power, use violence against the other gender to bring them to submission & subjugation. According to European Commission's Council Resolution, sexual harassment means- unwanted conduct of a sexual nature of other conduct based on sex, affecting the dignity of women and men at work. This includes unwelcome physical, verbal or non- verbal conduct (NCW, 2002). Generally, most people view sexual harassment as an incident in which a supervisor creates a hostile work environment by making sexual innuendoes and attempting to force physical contact with an employee. The issue of Sexual harassment has traditionally been divided into two well known forms: *Quid Pro Quo* which means "this for that" and *Hostile work environment* which commonly involves conditions of work or behaviour towards a woman worker which make unbearable for her to work there. In 1997, the Supreme court of India guidelines defined sexual harassment in a comprehensive manner which later on incorporated in the "Sexual Harassment of Women at Workplace (Prevention, Prohibition and Redressal) Act, 2013" which aims to provide for safe, secure and

enabling environment to every woman, irrespective of her age or employment status (other than worker working at home), free from all forms of sexual harassment by fixing the responsibility on the employer as well as the district magistrate or the collector or deputy collector of every district in the state as district officer and laying down statutory redressal mechanism.

Present study was undertaken in the Government and private hospitals (run by charitable trust and hospitals which are privately managed as well) in Rohtak city of Haryana. In order to obtain a more general profile of sexual harassment in the workplace, an exploratory and descriptive type of research design has been undertaken in one type of workplace. As sexual harassment is an extremely sensitive issue, the methodology adopted in this study was entirely of qualitative nature based on the interpretations of the quantitative data of primary type. The study has been conducted upon total 120 female respondents working as nursing/paramedical staff in two govt. hospitals namely PGIMS & Civil hospital and other private hospitals managed by private persons in Rohtak city. Among the total 120 respondents, 60 are working in Govt. sector and 60 respondents in private hospitals have been selected by using snow ball and random sampling method. Thus, keeping in view the sensitivity of the problem, present study was undertaken to know the awareness among the respondents about Sexual harassment at work place. It also attempted to study the nature of Sexual harassment experienced by the respondents at their work place along with the remedial measures adopted by them. So based upon the data collect for the present study, some significant conclusions may be drawn which are follows:

Socio-economic Background of the Respondents

The data collected shows that out of 120 respondents, an equal percentage of respondents (50% each) have been sampled from the Govt. and private hospital whereby majority of the respondents (90%) were Hindus, 85.7% hailed from urban area, 44.2% belong to the age groups between 20 -25 years, 58.3% were from general category followed by 22.5% from scheduled castes and 19.2% were from backward castes. With regards to family structure 54.2% respondents were belonging to nuclear family and 60% respondents were married followed by 33.3% unmarried. Whereas 32.5% respondents came under the income slab of 1.0 – 2.0 lakh Rupees annually and

22.5%, 32.5%, 5.8% 10.8% and 17.5% respondents were having annual income of their family below Rs. 1.0 lac, between Rs.2.0- 3.0 lacs, 3.0-4.0 lacs, Rs. 4.0 -5.0 lacs respectively and 10.8% respondents have their income above 5.0 lacs per annum. On the other hand, only 22.7% respondents were in the income group of below one lac per annum. Education wise, the study found the half of the respondents as having P.G. & above degree, 38.3% were upto Sr. Secondary and 11.7% were educated upto matriculation. The maximum numbers of the respondents, i.e. 83.3% were regular, the majority of the respondents i.e. 57.5 % do works in both day & night timing and only 41.7% percent respondents were having housing facilities in the hospital campus.

Meaning and indicators of sexual harassment

The study reveals that invitation to date outside, starring/whistling, exposure to pornographic pictures/videos/jokes and touching or attempt to touch were the main components of sexual harassment as experienced by the maximum respondents of all age groups. Maximum respondents irrespective of their educational status, reported three indicators namely sexually advances, dating outside and sexually colored remarks as the major components of sexual harassment. In reference to their nature of job and their working hours, maximum respondents (of the all types of job categories) reported that the acts of sexually coloured remarks/jokes and sexual advances/favours may be considered as sexual harassment. And the same meaning of sexual harassment at work place was perceived by the maximum respondents irrespective of their marital status. The respondents working in the private hospitals reported that sexually coloured remarks/jokes, offer for tea/coffee outside, offer for dating outside, sexual advances/favors, starring/ attempt to touch etc. as major indicators of sexual harassment. In reference to the length of the service of the respondents from 2-5 years and above, the dating outside, sexual advances/favours and sexually coloured remarks were traced as the core indicators of as sexual harassment at their work place while the respondents working from less than 1 year reported sexual advances/favours and sexually coloured remarks as such indicators.

Experience of Sexual harassment

The study shows that more than half of respondents irrespective of their age and about 2/3rd of the respondents irrespective of their educational status reported to have been the victims of sexual harassment at the work place in any form. It may be inferred that maximum respondents working on ad-hoc/temporary & contractual basis (more than 60%) were found to have more prone to the incidents of sexual harassment in comparison to their counterpart. There is no difference among the married, unmarried and widows respondents in reference to sexual harassment at their work place as more than 50% of them reported to have been encountered with the incidents of sexual harassment, almost similar responses have been received from the respondents who were working at both time i.e. day and night but the respondents performing duty in night shift were more vulnerable to the incidents of sexual harassment. It is clear that 3/4th population of the respondents working during night shift have reported the experienced of the sexual harassment at their work place. Likewise, in the study of Bayram (2012), sexual harassment was found to occur frequently within “working hours/daytime” among health workers and during “watch duty/night shift” mostly among health students. The study shows that the workers are less safe at work place in the private hospitals because maximum respondents belong to private hospitals have witnessed the sexual harassment at their work place in the sample study. The act of sexual harassment has immaterial to the length of the service of the respondents as well as irrespective of their length reported to have the experience of sexual harassment at their work place. The findings are similar to the study of Bagley et al. (1997) which found that 23% had experienced at the one event of assault (sexual touching, threats or remarks, or independent exposure); 4% had "often" experienced one or more.

Types of Sexual Harassment Experienced

The data reveals that invitation to date outside, staring/whistling, exposure to pornographic pictures/videos/jokes and touching or attempt to touch were the main forms of sexual harassment as experienced by the maximum respondents across all age groups and more than 15% of the respondents irrespective of their educational standard, accepted that of staring/ whistling at, exposure to pornographic

picture/videos/jokes, touching their body or attempt thereof were the main forms of sexual harassment against them at their work place. The data shows that the acts of offer to date outside and exposure to pornographic material was reported to be experienced by the maximum of regular and ad-hoc basis respondents whereas the acts of staring/whistling at were reported to have been experienced by maximum respondents irrespective of nature of their job. In reference to dating outside, exposure to pornographic media/jokes and sexual favours as the major forms of sexual harassment, there is no significant difference between the status whether married /unmarried or widow. It was also analysed that maximum respondents irrespective of their marital status were unable to say that in what form they experience any harassment at their work place. It is observed that they are not disclosing the facts in this context. The study shows that the maximum respondents (except respondents working at day time) irrespective of their working hours reported to have experienced the act of invitation to date outside as sexual harassment while the maximum respondents working in the Govt. hospitals have experienced the touching or attempt thereof and the maximum respondents from private hospitals reported to have experienced invitation for dating outside as sexual harassment. Invitation to date outside, exposure to pornographic material/jokes, staring/whistling at and touching or attempt thereof were the main indicators of sexual harassment as reported by the respondents irrespective of their job status. Thus invitation to date outside, exposure to pornographic material/jokes, staring/whistling at and touching or attempt thereof were the main indicators of sexual harassment as reported by the respondents. The study of Bayram (2012) also have similar findings as 20.8% of health workers and 10.1% of health students were found to be exposed to sexual harassment. “Unnecessary touch and unwelcome contact” prevailed among the health workers (60%) whereas “staring at repetitively or in a suggestive manner” prevailed among the health students (70%).

Reaction of Respondents against Sexual Harassment

The data shows that maximum respondents irrespective of their age groups and educational status concealed or avoided the situation and a few filed complaint/legal action. The problem of underreporting is prevalent among the respondents. The crucial fact is that in service staff, 40.8% respondents have no idea as about the problem. On the other hand, the staring at/whistling at were the acts which were reported to have been experienced by the maximum respondents having their service less than 1 year and above 5 years whereas the invitation to date outside was reported to have been experienced by the maximum number of respondents working from 2-5 year. The study shows that only 1/5 of the respondents filed the complaints or resorted to legal action against sexual harassment on the other hand, maximum respondents continued their jobs by concealing/avoiding the situation and expressing their anger verbally and less than 5% reported to resign from their job due to sexual harassment. It show that the maximum respondents irrespective of the nature of their job reported to have concealed/avoided the situation of sexual harassment against them only 3% respondents working on regular basis in private sector resigned from their job to escape the problem. Irrespective of their marital status, maximum respondents reported to have concealed/avoided the situation followed by those who filed complaint/legal action against the act of sexual harassment. It infers that maximum respondents working in night and both shifts, have reported to have concealed/avoided the situation but maximum of the respondents working at day time filed complaint/legal action against the sexual harassment. It is inferred that night shift working is more prone to the incidents of sexual harassment in comparison to day shift. Thus, it may be concluded that maximum respondents concealed or avoided the situation and reported to have filed complaint/legal action. The study shows that the maximum respondents working in the private hospitals have concealed/ avoided the situation and verbally expressed anger against the act of sexual harassment whereas the maximum respondents of Govt. hospitals filed complaint/ sought legal action. Due to job security in govt. sector, respondents have shown the courage to file the complaint against sexual harassment which otherwise would have been a risk for the respondents working in private sector. The findings are somewhat similar to the

study of Crow (1995) where underreporting was found against the acts of sexual harassment at the workplace because fear of being scolded and humiliated in front of other colleague. Kitaneh and Hamdan (2012) are also of the same view that non-reporting of violence was a concern, main reasons were lack of incident reporting policy/procedure and management support, previous experience of no action taken, and fear of the consequences.

Reaction of the authority

It is clear that maximum number of the respondents irrespective of their age and educational status were found less aware as only 1/10th respondents reported to have taken the action by the authorities against harasser otherwise either the victims compensated or blamed. It is concluded that majority of the harasser/offenders of sexual harassment get themselves escaped from the punishment/action. The study shows that the more number of the contractual respondents reported to have been sought action by the authorities against the harasser than the rest categories of respondents whereby the regular and the ad-hoc/temporary employees get compensated by the authorities. The study shows that the hospital authorities did not take any action against the complaint of sexual harassment of maximum of unmarried and married respondents except the one fourth widow respondents who reported to get compensated by the authorities. It was also found that no reaction / compensation was given by the authorities of private hospitals as reported by maximum respondents. The study also shows that the maximum sexually harassed respondents irrespective of the length of their service either there were blamed being the victims or did not get any action against the harasser. Approximately 1/10 of the respondents (less than 1 year service) reported to have taken action against the harasser by the authorities. It is clear that maximum number of the respondents irrespective of their educational status were found to have been less aware about the punishment against the acts of sexual harassment at work place. Thus, the educational standard of the respondents has no significant correlation with the level of awareness against sexual harassment. The study shows that more respondents working on regular and ad-hoc/temporary basis were aware about the punishment against the sexual harassment than the respondents working on contract. It may be concluded that the nature of employment has direct

relationship with the awareness and maximum respondents of widow and unmarried category didn't know about any type of punishment against the act of sexual harassment but one third of married respondents were found known to. Irrespective of the working hours, nearly half of the respondents know about the punishment against the act of sexual harassment. The study indicates that the more respondents belonging to private hospitals were found significant to know that there is any type of punishment for against the sexual harassment than their counterparts. The study also shows that those respondents whose annual income is less than 2 lacs is significantly aware to the punishments of sexual harassment than their counterpart. It shows that maximum of the respondents did not report any action by their employer rather the maximum number of respondents were got blamed even being victims and only one third of respondents irrespective of the length of their service have asserted that there is punishment against the acts of sexual harassment. On the other hand, the equal number of respondents i.e. 35% have the mixed response about the knowledge about punishment against sexual harassment and who did not know about the punishment.

Authorities approached

The data shows the reaction of the hospital authorities after the incidents of sexual harassment against the respondents as maximum respondents irrespective of their age did not report any action of their employer against the harasser rather maximum respondents from the age group 31-35 years get blamed even being victims. It was noted from the study that the respondents educated upto Sr. Secondary level education approached their employers after the incidents of harassment in the hospital whereas those who acquired graduation & above graduation degree of education approached their union and police after happening the events of sexual harassment in the hospital. Maximum respondents working on regular and the contractual basis have approached their union and the ad-hoc/temporary to their employer after the incidents of sexual harassment against them. It was found that maximum of unmarried and married respondents reported to their union where it existed and the widow respondents approached their employers against the sexual harassment. The study indicates that maximum respondents irrespective of their working hours reported to their union where it existed against the act of sexual

harassment. The respondents belong to private hospitals approached reported to their employer and other persons while govt. hospital's respondents approached their union after the incident of harassment. It can be drawn from study that police is not approached by respondents as significantly. The study also indicates that the maximum respondents preferred to report their union (where it exists) irrespective of their job status and length of service followed by those who reported to their employer. Thus, the maximum respondents preferred to report their union (where it exists) followed by those who reported to their employer. The findings are contrary to the studies of Hibino (2006) and Celik (2007) who found that nurses who faced such problem usually would do nothing, assumed nothing had happened.

Reaction of the authorities

It is clear that a meagre number of respondents from all age groups reported to approach the police after the incident of sexual harassment against them. Nearly 1/10th respondents reported to have taken the action by their authorities against harasser. The study shows that the more number of the contractual based respondents reported that their authorities have sought action against the harasser than the rest categories of respondents. Whereby more the regular were get blamed even being the victims and the ad-hoc/temporary employees get compensated by the authorities. The data shows that the hospital authorities did not take any action against the complaints of sexual harassment of maximum of unmarried and married respondents whereas one fourth widow respondents reported to get compensated by the authorities. Irrespective of their working hours, a sizable number of respondents reported that the hospital authorities did not take any action against the offender rather 21.3% respondents were blamed even being the victims. It is reported that no action was taken / compensation was given by the authorities of private hospitals while govt. hospitals 'blamed the victim'. The study shows that the maximum respondents of having their length of service less than 1 year were compensated against the act of sexual harassment but the respondents from 2-5 years and above 5 years service length were denied so. Thus, it may be concluded that maximum of the respondents held that where there existed any employee union, the majority of them got the active support of that against the act of sexual harassment.

Offender's reaction

The study reveals that the maximum respondents from the higher age group i.e. above 40 years reported to get blamed even being the victims and in rest of age group neither type of reaction of the harasser was found as reported by the respondents of the study. The majority of the respondents irrespective of their educational status reported to have not shown any reaction by the offenders after committing sexual harassment. The data reveals that maximum respondents working on ad-hoc/temporary reported the feeling of guilt in the offender of sexual harassment whereas in the other category of respondents did not find any type of reaction of the harasser and maximum respondents irrespective of their marital status did not get any reaction of the offender of harassment against them. It is reported that maximum of the respondents irrespective of their working hours did not find any reaction of the offenders of the sexual harassment. The study shows that approximately one third respondents irrespective of their length of service did not find any reaction of the offender of the sexual harassment after committing the act of harassment and only one fifth of the respondents found the offender with guilty feeling. The data shows that the maximum respondents of govt. and private hospitals reported that the offender did not expressed any reaction against his act. It can be rightly said that there is a significant difference between annual income of the respondent's family and the reaction of the harasser person. Thus, there did not found any reaction of the offender of the sexual harassment as reported by maximum of the respondents.

Reaction of the Employees Union

The study discloses that maximum of the respondents irrespective of their age and educational status did not get any assistance from their union only $\frac{1}{4}$ of the respondents got the assistance from union which is very low. It is clear that more ad-hoc/temporary based respondents were provided more support by their union than their counterparts but maximum married and widow respondents did not get any support of their union. The data shows that maximum of the respondents irrespective of their working hours got active support of their union against the act of sexual harassment. The maximum respondents working in Govt. hospitals have reported to get the active support of their union against the act of sexual harassment as compared

to their counterpart. The study shows that majority of the respondents irrespective of their status (Nursing/paramedical and Service staff) held that where there exist any employee union, the majority of them got the active support of that against the act of sexual harassment. The respondents working from 2-5 year & less than 1 year categories have reported to have received active support from their union (where it existed) against the act of sexual harassment against them.

Role of the Dress Pattern

It may be concluded that majority of the respondents irrespective of their age, income, educational background, marital status, nature of service, type of hospitals, service length and working hours were agree that the dress and the behavior are the major aspects of sexual harassment. But there found a mixed response among the respondents in reference to their service length as the maximum respondents from 2-5 year and above were agree but one third respondents each of less than 1 year service were agreed and disagreed respectively on the role of the dress pattern and behavior of the women is responsible upto some extent for sexual harassment. Thus, it may be inferred that attractive/uneven pattern of dress induces for sexual harassment. The findings of the present study are similar to some extent with the study of Sikri (1999) who found the personality and personal appearance and physical attractiveness as a factor for harassment.

Knowledge of Guidelines to prevent Sexual Harassment

The study depicts that majority of the respondents of all age groups (except the higher age groups of respondents of above 40 years where by equal response were reported thereby) did not report any knowledge about the rules/ policies or court guidelines for the prevention of sexual harassment at work place. On the other hand, majority of the respondents of all educational and marital status have the knowledge about the guidelines for the prevention of sexual harassment. So there is a direct link between education and knowledge. The data shows that maximum respondents working on regular & ad-hoc/temporary basis and irrespective of their working hours reported to have the knowledge of the guidelines for the prevention of sexual harassment at work place as compared to their counterpart. But maximum of the respondents from the service tenure above 5 year did not have any knowledge

about the rules/policies or court guidelines for the prevention of sexual harassment at work place but maximum respondents from other categories of lesser service than this have the same. The study shows that the respondents belong to private hospital were found significant on the knowledge of the rules/ policies or court guidelines for the prevention of sexual harassment at work place than their counterparts. Thus, it may be concluded that majority of the respondents were aware about the guidelines for the prevention of sexual harassment at work place. The findings are not similar to the study of Chaudhary (2007) where the majority of students 39.1% were not aware of the provisions of the prevention of sexual harassment at work. The finding of the present study may be supplemented by the findings of Sakshi (2008) that mere 9% offices in Delhi, has constituted the Committee for disposal of the cases relating to the sexual harassment. Most of the private Sexual harassment of women at work place continues unabated and government entities were not even aware of the ruling of the Apex court.

Existence of Gender Sensitization Committee

The study shows that maximum respondents from all age groups (except the lowest age group of 20-25 years) did not have any knowledge about the existence of gender sensitization committee for the prevention of sexual harassment at their hospital and almost was in a position of can't say/don't know response and very less respondents irrespective of their education, marital status, income, working hours, nature of hospitals and service length have the knowledge about the existence of gender sensitization committee against sexual harassment at their work place. It shows that the maximum respondents irrespective of the nature of their job reported to be unknown about the existence of Gender Sensitization Committee in the hospitals. The study resembles with the findings of Teymourzadeh, Rashidian, Arab, Sari, and Kakimzadeh (2014) where 40% of nurses were unaware of any existing policies within the hospital for reducing violence. Sanhita (2006) is also of the view that till date, many public and private organisations have not even set up complaints committees or amended the service rules, as mandated by the guidelines.

Effectiveness of Gender Sensitization Committee

The sampled data reveals that maximum respondents from all age groups (except the lowest age group of 36-40 years) did not consider the effective working of the gender sensitization committee for the prevention of sexual harassment at their hospital. It was found that in all, majority of the respondents have minimal knowledge about the effectiveness of Gender sensitization committee in their hospitals. It may be inferred that the maximum respondents irrespective of their marital status, nature of their employment, working hours, type of hospitals and service length reported to have ineffective working of the Gender sensitization committee.

The data shows that majority of the respondents held that women working in public/government sector are less prone to the incident of sexual harassment in comparison to private sector at work place. The study resembles with the study of Gunthey (1999) who found that private sector working women perceive direct stresses like insecurity of jobs, excess work and less freedom due to which their emotional balance, adjustment process and tolerance level was under great threat which influenced their mental health as compared to women working in public sector.

Suggestions

Some vital suggestions were also offered by some of the respondents for curbing the menace of sexual harassment at workplace which are as under-

- There should be zero tolerance policy at the organisational level from top to bottom. It will help in creating such a workplace environment in which harassment is not be tolerated must start at the very top of the organization.
- The Gender Sensitisation Committees to be constituted in letter and spirit and there should be the system of regular evaluation of such committees.
- Apart from the managerial/supervisory level, the staff members working in the hospital should be sensitized to have the dignity and respect for their female colleagues. So that they may dare to intervene when they witness such behavior at their workplace.

- The policies to prevent the sexual harassment at workplace and procedures to report/complain should be communicated to the each employee from time to time with the amendments, if any.
- Accountability of the person working as Bosses/ managers should be fixed as how the incidents of workplace harassment happened (even in case of third party harassment) and how they responded to the complaints of sexual harassment. Their duty must be fixed for the conducive work environment for the female workers and also the safety & security of female staff working in night or late evening shift.
- Victims not to sustain on the prevention is better than cure policy, at the first instance tell the person to stop any behaviour leading sexual harassment. This is not a time to conceal or avoid the situation
- If the victim is unable to report, she may share his grievance to the other confidential colleague for further help and support.
- Keep the record of the electronic transactions of messages/media with the harasser for ready reference and further action.
- The special cell be established at the police stations to deal the incidents of sexual harassment and the dealing staff should be properly trained to redress the grievances of the victims.