NIH Workplace Climate and Harassment Survey

Key Findings

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Scientific Workforce Diversity

Background
Harassment has negative consequences for those harassed and for science, public health, and NIH

"The cumulative effect of sexual harassment is a significant and costly loss of talent in academic science, engineering, and medicine, which has consequences for advancing the nation's economic and social well-being and its overall public health."
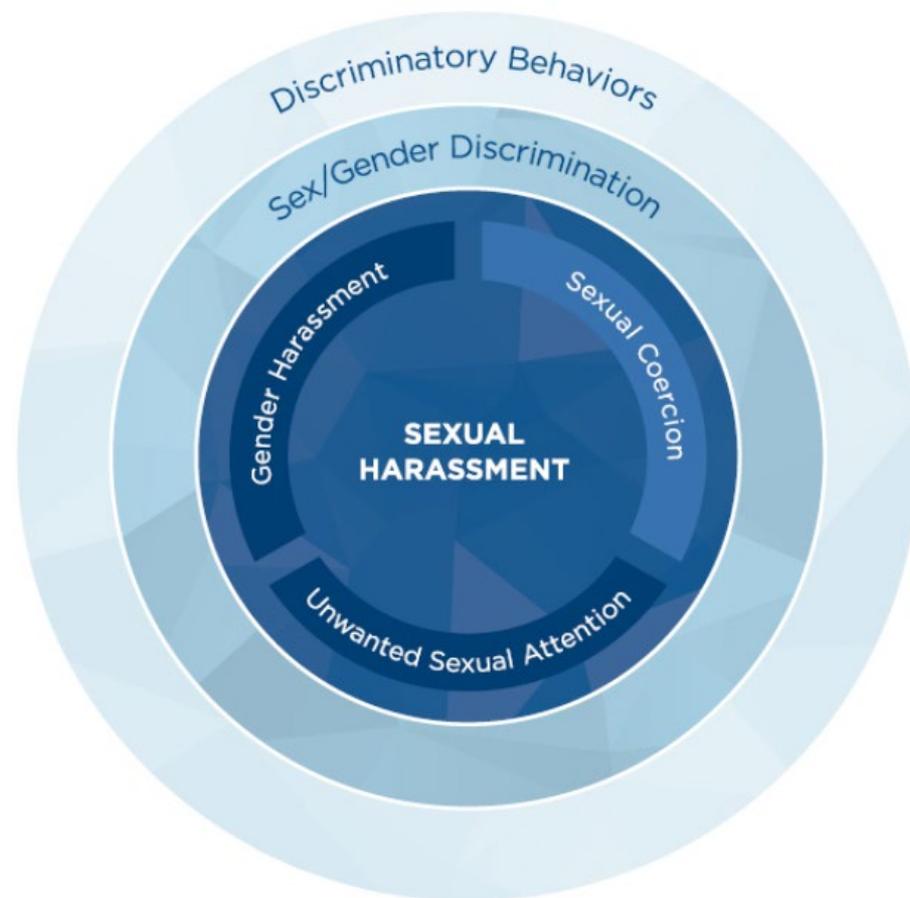
SOURCE: National Academies of Sciences, Engineering, and Medicine 2018. Sexual Harassment of Women: Climate, Culture, and Consequences in Academic Sciences, Engineering, and Medicine. Washington, DC: The National Academies Press. https://doi.org/10.17226/24994.

Survey Goals

1. Prevalence of harassment at the NIH

2. Workplace climate associated with harassment

3. Impact of harassment on mental and physical health

4. Perspectives on reporting harassment

Survey Development

- Conceptual model based on literature review and expert panel input

- Items based on existing validated survey items (e.g. Sexual Experiences Questionnaire - SEQ*) when available

- Items refined based on cognitive testing and in a pilot study with 5,000 general population participants

SOURCE: Fitzgerald, Louise F., Vicki J. Magley, Fritz Drasgow, and Craig R. Waldo. "Measuring sexual harassment in the military: the sexual experiences questionnaire (SEQ—DoD)." *Military Psychology* 11, no. 3 (1999): 243-263.

Participants and Response Rates

- Survey administered from January to March 2019

- Invited all who work at the NIH
    - Federal Employees
    - Trainees
    - Contractors (with company permission)
    - Volunteers

- 44% response rate (all NIH); 56.2% (federal employees)

- Compared to all NIH federal employees, respondents were more likely to be women (62% vs. 58%) and age 18–34 (18% vs. 10%)

Assessment of Sexual Harassment

Sexual Experiences Questionnaire (SEQ)*

25 experiences – 3 Domains
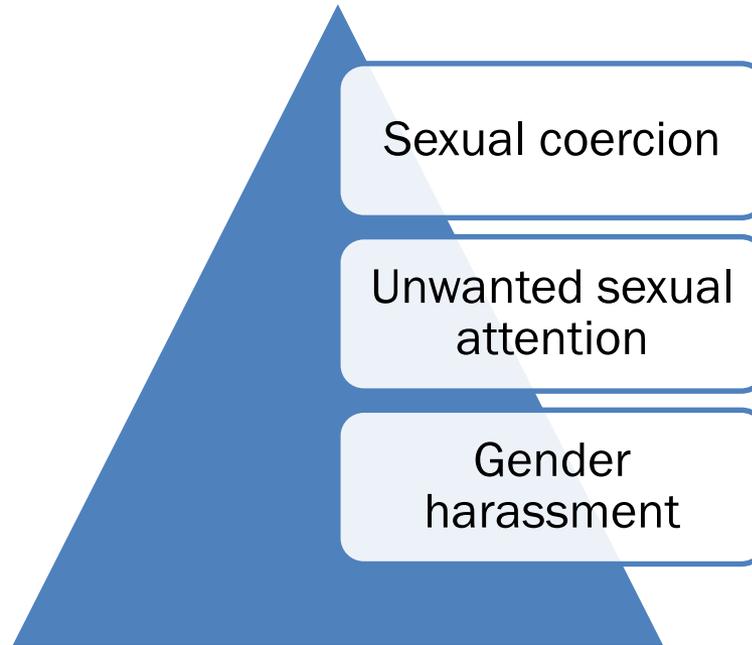
SOURCE: Fitzgerald, Louise F., Vicki J. Magley, Fritz Drasgow, and Craig R. Waldo. "Measuring sexual harassment in the military: the sexual experiences questionnaire (SEQ—DoD)." *Military Psychology* 11, no. 3 (1999): 243-263.

Key Finding 1
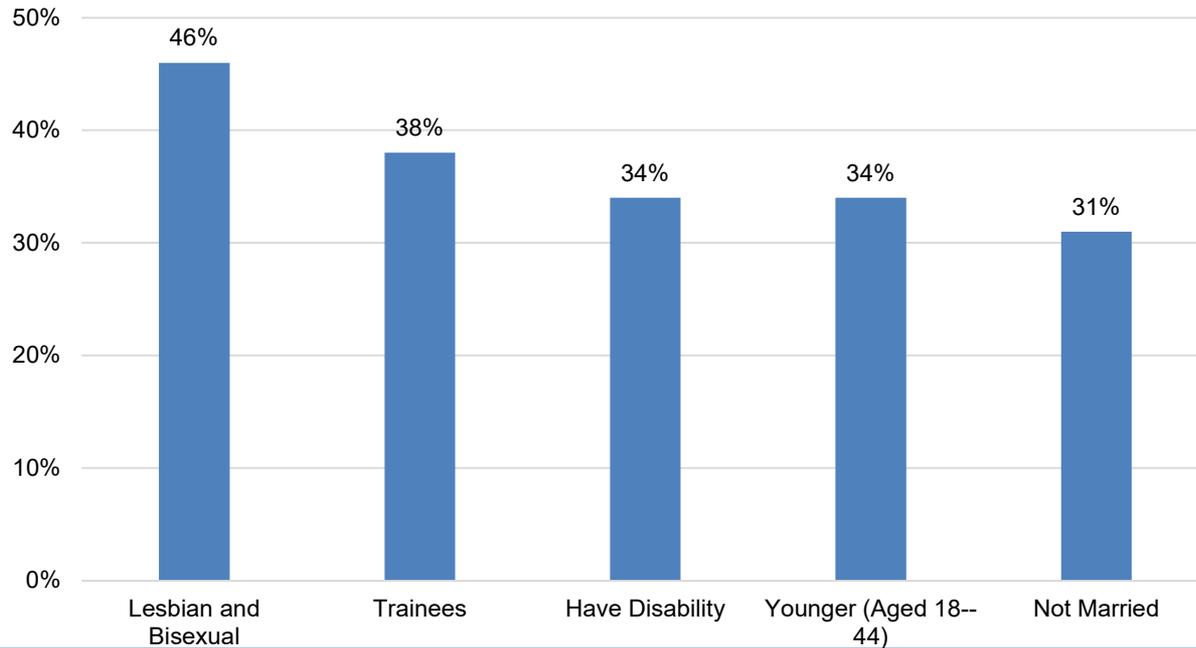## One in five respondents had at least 1 incident of sexual harassment in past 12 months
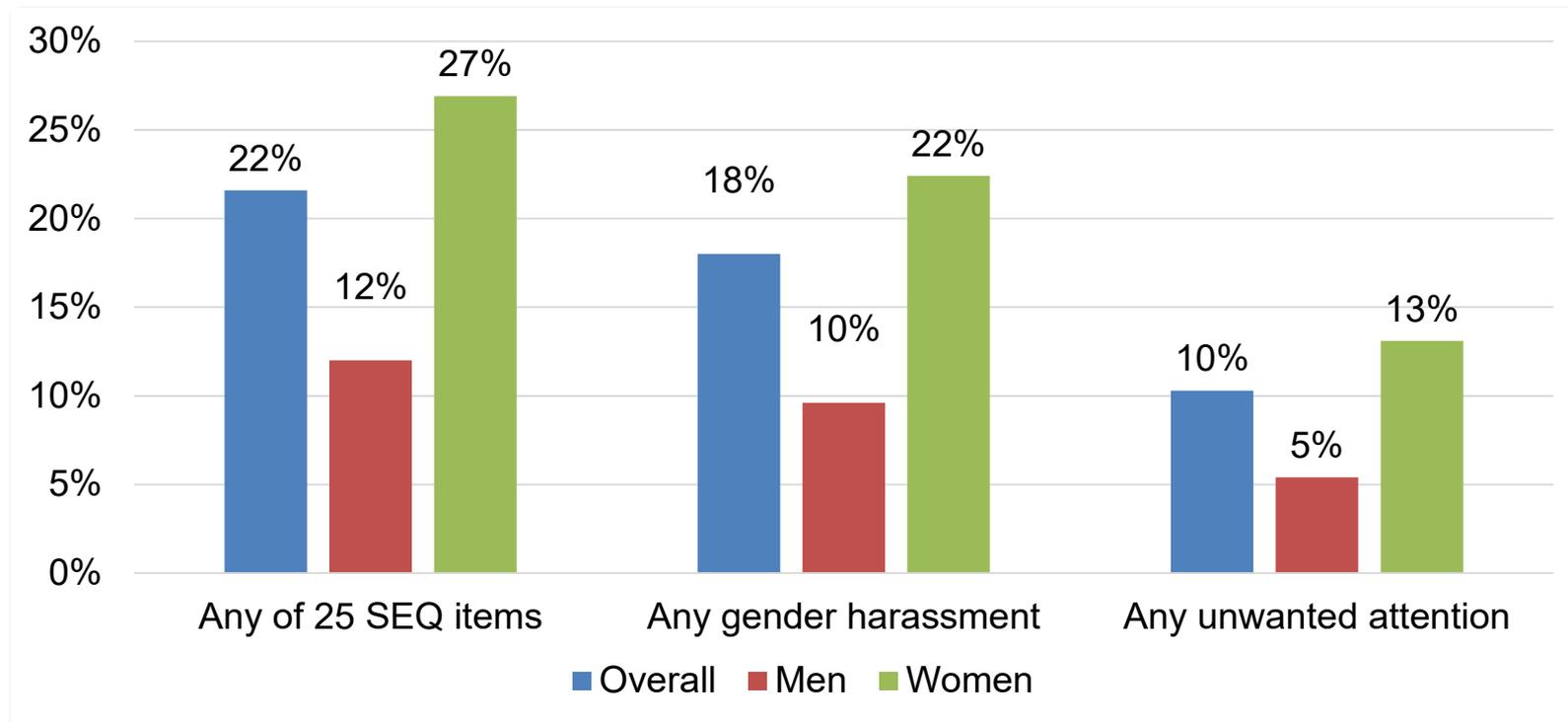
Implications for Action: Continue anti-harassment awareness education, track and publicize sanctions, and encourage culture change for zero tolerance policy.

Key Finding 2

Most vulnerable populations with highest incidence are…

Women who are trainees (fellows and students), younger individuals, sexual and gender minorities, and individuals with disabilities

Small N, but 30 of 67 (44.8%) of respondents with other gender identities experienced sexual harassment

Bar chart:
- Lesbian and Bisexual: 46%
- Trainees: 38%
- Have Disability: 34%
- Younger (Aged 18--44): 34%
- Not Married: 31%

Women overall = 27%

Implications for Action: Target primary prevention programs for vulnerable groups; design targeted intervention programs for vulnerable groups; issue sanctions consistently and equitably to ensure zero tolerance.

Key Finding 3

Over half did not talk to anyone about their experience

Many respondents did not talk about sexual harassment because they believed it was <u>not serious enough (78%)</u>; 65% cited concerns about <u>career repercussions</u>.

Of those who did talk to someone (could choose more than one):

- 61.7% talked to a co-worker
- 24.0% talked to supervisor or manager
- 7.3% talked to CIVIL or EDI
- 3.5% talked to someone at the Ombudsman office
- 3.4% talked to someone in an outside organization or agency

<u>Implications for Action</u>: Education regarding resources for reporting and/or obtaining supportive counseling. Create safe and civil workplace that cultivates trust.

Key Finding 4

- Those who did not consider their supervisor supportive are more likely to experience sexual harassment.

- Those experiencing bullying are more likely to experience gender and sexual harassment.

Percent of respondents experiencing any sexual harassment
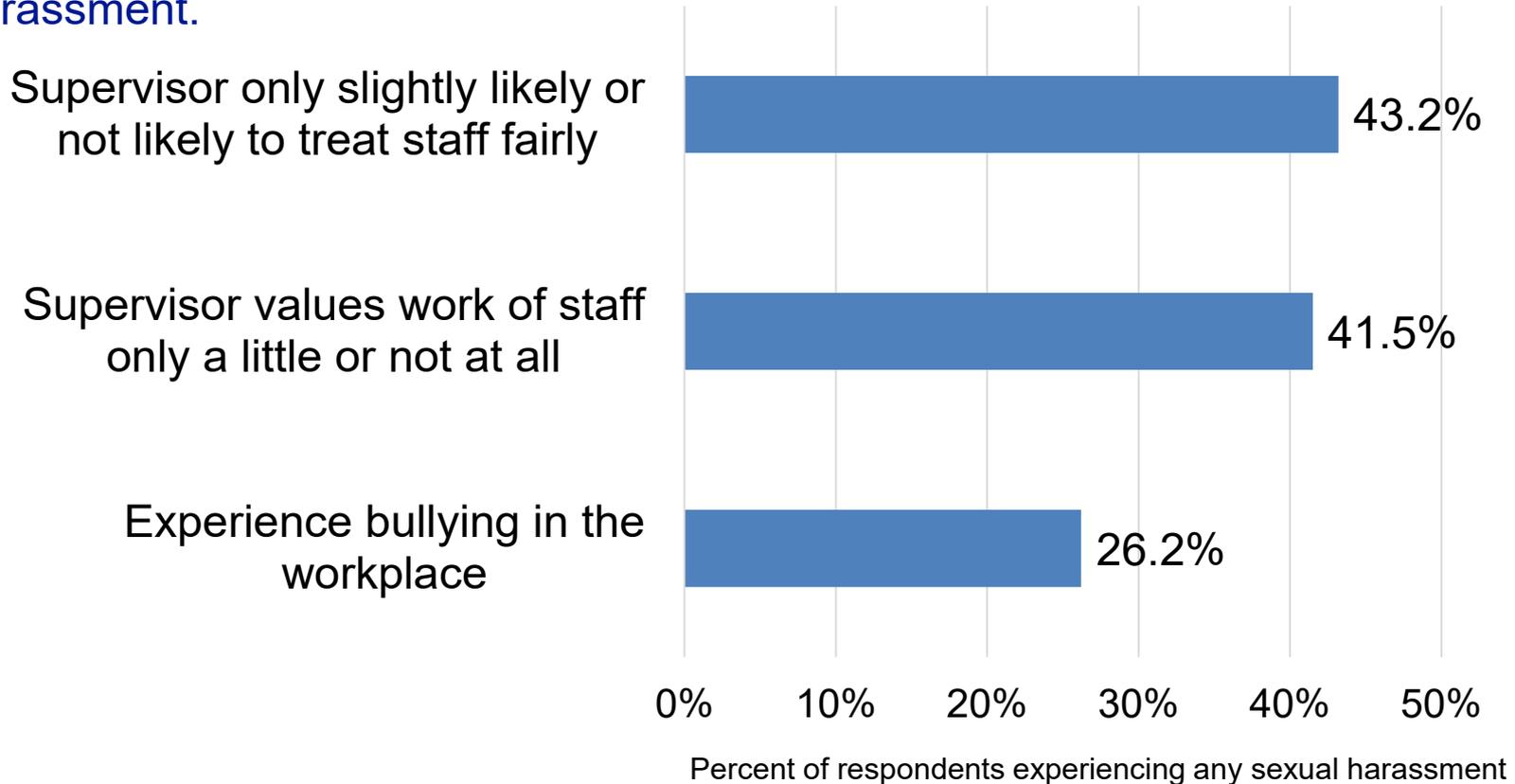
Implications for Action: Train supervisors and managers to treat employees equitably in the workplace, and to address bullying and incivility effectively.

What Else Did We Learn About Harassment at the NIH?

- Less than **50%** experiencing sexual harassment talked to others about it

  – **co-workers** most frequently

- Reasons for <u>not</u> talking to someone

  – Not serious enough
  – Career might suffer
  – Nothing helpful would result from talking

- **88%** of sexual harassment - in a building owned or leased by NIH

- Harassment was associated with poorer physical and mental health and lower job satisfaction

Understanding of NIH Policies
81% of respondents understand the NIH policies at least moderately well

Not well at all
9%

Extremely well
17%

Slightly well
10%

Very well
34%

Moderately
well
30%
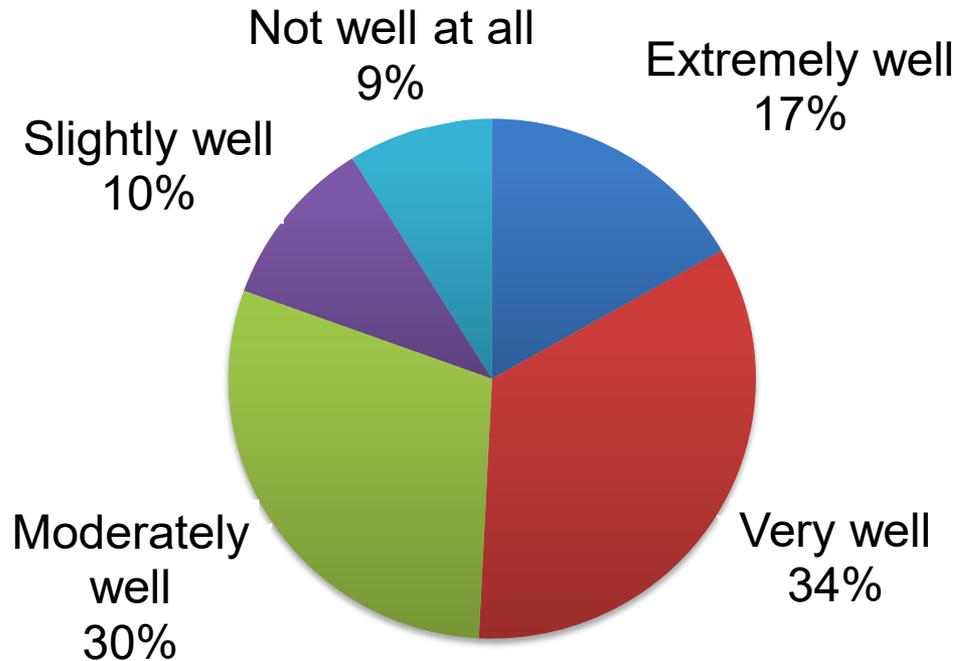
15,215 survey respondents answered this question, which asked about their level of understanding of the *NIH Manual Chapter 1311: Preventing and Addressing Harassment and Inappropriate Conduct* as well as the *NIH Policy Statement: Personal Relationships in the Workplace.*

Next Steps for Workplace Climate and Harassment Survey

- Executive report

- Share with NIH workforce

- Further analyses – Data Access Committee

- Explore plans for follow-up survey

- Follow Action Plans for each of the key findings

Recommendations to Address Survey Findings
NIH Anti-Harassment Steering Committee

The culture will never change if people don't think leadership is taking this seriously

- Educate leadership so that they are very clear on their <u>legal and moral responsibilities</u> as leaders.

- Establish PMAP element for all supervisors related to ensuring the Anti-Harassment program and policies.

- Hold leaders accountable for ensuring that reporters are not punished for reporting.*

- Hold leaders accountable for protecting the people they are leading **

- Under no circumstances should leaders be protecting the harasser (regardless of the harassers' status).

Survey: * People fearful about reporting; **experience negative consequences of reporting

Recommendations to Address Survey Findings NIH Anti-Harassment Steering Committee

- Educate NIH community; what is a reportable offense
  - Survey: 78% didn't think it was serious enough to report.

- "Witness/bystander training" so that more people know that they can report something they witnessed or were told.*
  - Survey: 60% of people did not report but told a co-worker
  - Dispel concerns that career might suffer

- Address concerns that supervisors contribute to perception that they are not being responsive, supportive, or equitable

- Enhance communication about civility and harassment
  - Provide training* and resources on how to treat someone who has experienced or reported harassment

* NIH Training Center to identify services for customize training on harassment, bullying, unconscious bias

Recommendations to address Survey Findings
NIH Anti-Harassment Steering Committee

- Publicize annual anonymized data on intake and adjudication of cases.

  - Survey: nothing would happen or complaints were not taken seriously

- Publicize anonymized case studies that highlight not only the outcome but the entirety of the process so that the NIH community understands there is due process and complaints are handled in a very thorough and serious manner.

- Identify and implement appropriate incentives and acknowledgements, to promote progress and to avoid an overemphasis on sanctions that can deter communication

Recommendations to Address Survey Findings NIH Anti-Harassment Steering Committee

Action Plan for Vulnerable Groups: Trainees

- Coordinated start dates and mandatory centralized orientations

- "Steps NIH is taking": Program of mandatory training for all trainees: Launch in Dec of 2019
  - Anti-harassment and relationship policies
  - Emphasis on trainees rights and the reporting procedures
  - Protecting young scientists and their career trajectories is NIH priority

- Education on keeping everyone safe on campus
  - Process for reporting harassment and other behaviors

- Special emphasis on trainees at non-main campus locations:
  - Shady Grove, Twinbrook, Frederick, Baltimore, NIEHS, RML, etc.

Recommendations to Address Survey Findings NIH Anti-Harassment Steering Committee

Action Plan for Vulnerable Groups: Sexual and Gender Minorities

- Mandatory Bystander and Safe Zone training for all NIH employees, including trainees and contractors

- Collect demographic data, including sexual orientation and gender identity, on individuals who report harassment

- Representation of vulnerable groups on the Anti-Harassment Steering Committee (Trainee, LGBT, Disabled)

- Annual research symposium on science of workplace incivility

- Engage NIH Employee Resource Groups meaningfully to:
  - Demonstrate support for identified vulnerable communities
  - Gather input on potential interventions/initiatives focused on eliminating harassment of specific populations

QUESTIONS AND DISCUSSION

National Institutes of Health
Office of the Director
Scientific Workforce Diversity

www.diversity.nih.gov