This paper reports on findings of a research questionnaire in which both male and female pharmacists were surveyed about their own experiences of sexual harassment. Of the 35 responses received, 25 (23 males and 2 females) reported that they had not been subjected to any kind of sexual harassment. Ten (4 males and 6 females) reported that they had. The various strategies used by the pharmacists in response to the harassment are discussed. The strongest message coming from the results was that the victims of harassment wanted to feel that they maintained at least some control over their lives; that they could make choices even when they were being victimized. Copies of the questionnaire and the author's cover letter to the pharmacists are included. (DB)
SECOND THOUGHTS ABOUT RESPONSES TO SEXUAL HARASSMENT:
A SURVEY OF MALE AND FEMALE PHARMACISTS

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INTRODUCTION

Because there are too many aspects of sexual harassment to be examined in a single seminar-length paper, I have chosen to focus upon the ways in which victims respond to sexual harassment and how they feel about their responses. I think their assessment of the value of their own responses is particularly important for two reasons. First, people learn from experience: both effective and ineffective responses are analyzed, and effective responses are remembered and repeated, while ineffective responses are remembered, modified, and retested when similar situations appear in the future. Second, sexual harassment threatens a person’s self concept and his/her ownership of this self-concept. It is very personal, very powerful, and potentially very damaging. It is very important that a person have some sense of empowerment, the empowerment that comes from knowing that one is able to respond effectively when victimized again.

The comprehensive study, Sexual Harassment: Research and Resources, prepared by The National Council for Research on Women, reports that the most common response of women is to do nothing and hope that the harassment stops. Women’s strategies for coping with
sexual harassment are classified as Internally Focused or Externally Focused. Internally Focused strategies include detachment, denial, relabeling, illusory control (attributing the harassment to one's clothing or actions), and silent endurance. Externally Focused strategies include avoidance, assertion/confrontation, seeking institutional help, social support, and appeasement. If we look at these strategies as conflict resolution techniques, only three of the ten strategies are potentially productive in actually resolving the conflict/harassment: assertion/confrontation, social support, and seeking institutional help. None of the other seven strategies address the responsibility of the harasser for his/her behavior nor do they allow the victim any power other than illusory power, at best.

Why do victims so seldom choose strategies that might empower them? This same report answers that all too often women feel that speaking out, actually doing something about the harassment, will either be ignored or, even worse, will simply produce a new crop of problems. Sexual harassment is seen as a "lose-lose" situation.

In investigating the ways in which victims responded to harassment and how they felt about their responses, I decided to ask men as well as women because they, too, are potential victims of sexual harassment. I also decided to focus my investigation on pharmacists because this provided an opportunity to study people practicing a profession that is not male-dominated like engineering or female dominated like nursing; pharmacy is a profession in which men and women are more likely to interact as equals. I tried to
avoid the inherent imbalance of power that might be found in traditional relationships like doctor-nurse or manager-secretary.

METHOD

I sent the questionnaire on the following page to 500 pharmacists, along with the cover letter, which appears on the page following the questionnaire. Notice that I did not ask about the actual nature of the harassment (though several respondents described the harassment they experienced), I asked only if the pharmacist had been subjected to sexual harassment. I was not interested in whether the event(s) would be judged to be actual instances of harassment by a third party, I was interested only in whether or not the pharmacist felt that he/she had experienced harassment. Note also that I did not ask whether the pharmacists were male or female until I had asked about the questions about their responses; I did this to minimize the importance of the sex of the victim.

RESULTS

So far 35 pharmacists have responded. Twenty five (23 males and 2 females) reported that they had not been subjected to any kind of sexual harassment. Ten (4 males and 6 females) reported that they had. The preponderance of male respondents does not
QUESTIONNAIRE: RESPONSES TO SEXUAL HARASSMENT

1. Have you ever been subjected to any kind of sexual harassment?

2. What did you actually do in response to the harassment?

3. Why do you think this was -- or was not-- an effective response?

4. If you found yourself in this situation again, how would you respond?

5. Why would you choose this response?

6. Are you male or female?

Thank you,

Nancy Hoar
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Dear Pharmacist:

I am writing to ask if you would take a minute or two to fill out the enclosed questionnaire. I am a Professor of English and Communication at Western New England College and an active member of the Speech Communication Association (the communication professional's equivalent of the American Pharmaceutical Association).

I am leading a seminar on communication factors in sexual harassment. This seminar was chosen from many submissions and will have nationwide participation at our 1992 meeting in October in Chicago. As part of my opening remarks I would like to address the aspect of how people feel about the ways they have responded to situations in which they perceived themselves to have been sexually harassed.

I have chosen to ask pharmacists about their experiences because pharmacy is a profession that includes approximately equal numbers of male and female practitioners and because pharmacists interact with a broad cross-section of people.

I am enclosing a self-addressed label with the questionnaire to make it easier for you to respond. I hope you will take a minute or two right now -- or in the next day or so -- to fill in the questionnaire.

Many thanks for your help with the seminar.

Cordially,

Nancy Hoar
Professor of English and Communication
reflect the male-female ratio within the profession, but instead the ratio within the professional society whose mailing list I used.

The major findings of this survey are:

* All the males reported using internally focused strategies, which included ignoring the harassment, treating it as a joke, or changing the subject.

* All of them used more than one of these internally focused strategies.

* Two reported using more externally focused strategies; one kept a clerk nearby and the other had begun telling the harasser that the harassment was offensive.

* All of these male pharmacists felt that their responses were effective and would continue to use the same responses.

* Three of the six female pharmacists who had been subjected to sexual harassment responded with internally focused strategies.

* Two of these three did not feel that their responses were effective and would report future incidents of harassment.

* The third would not report it because she didn't think "it would do any good to pursue it further to <her> male superiors."

* Three of the female pharmacists responded with externally focused strategies, though one of these strategies was to "cry and leave the neighborhood." This woman felt it was a successful response only because she got away from her harasser, but didn't know what might have been more effective.

* The remaining two responded more forcefully. One told the harasser that she did not like his behavior and would leave if he
continued. She thought her leaving would raise embarrassing questions for the harasser. She considered this to be an effective response and stated that she would do it again and probably threaten legal action as well.

* The other (in response to a physical move by a male pharmacist) not only jabbed her harasser so hard with her elbow that she "nearly knocked him out," but she also dared him to touch her again. He didn't. She said she would do this again if anyone harasses her because it was so successful.

To summarize, both males and females used internally and externally focused strategies. The most frequent reason given by both males and females for not confronting the harasser was that it would be disruptive and that a weaker response kept the situation under control. That is, they felt that joking, relabeling, and enduring was a choice that gave them some measure of control in the situation. Even the woman who would not report the incident to her male supervisors said that "I can handle it myself. I don't need to involve someone else." Most of the victims, whether male or female, wanted to feel that they had choices, that they were not powerless.

CONCLUSION

The strongest message coming from these results is that these people wanted to feel that they maintained at least some control over their lives, that they could make choices, even when they were being victimized. If they initially made responses which proved to
be ineffective, they could find a contextual rationale for these responses. They could also explain their reasons for making different responses in the future.

In addition to this primary finding, I gathered three interesting secondary perspectives, which are not atypical of what we already know about sexual harassment:

* Power is a factor in preventing sexual harassment. One of the two female pharmacists who had not been harassed said, "Having always been in an ownership or managerial position, my situation was unique rather than average."

* Sexual harassment was not as visible to males as it was to females. One male reported, "In my 42 years in pharmacy, I have never seen anyone subjected to sexual harassment. I have seen love affairs between pharmacists and female clerks. Some have ended up in marriages."

* Sometimes the victim is blamed. One male said, "I have never witnessed in my long career as a hospital pharmacist any harassment to myself or to any of my peers. It is my personal conviction that much <sic.> of the sexual harassment claims in today's world are either attempts for attention, or the result of past rejection, i.e. Anita Hill."

Finally, this survey shows that 1) responses to sexual harassment within the profession or pharmacy is qualitatively similar to responses to sexual harassment in general, and 2) male responses to sexual harassment are similar to female responses (with the exception of the female who jabbed her harasser with her elbow; this is not a socially acceptable option for a male being
I recommend that studies of sexual harassment include males as well as females, especially in those areas where males and females are equally represented. I also recommend finding ways in which male and female victims can interact and share their experiences and perspectives. This would provide a new context for discussing the problem of sexual harassment and would provide a means for finding new ways to talk about and respond to this corrosive problem.