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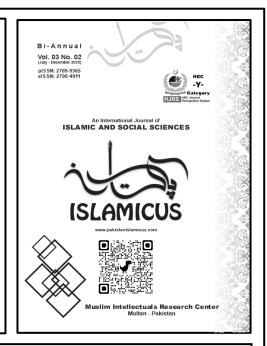
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TOPIC

WORKPLACE SEXUAL HARASSMENT: A STUDY OF FEMALE NURSES FROM HEALTHCARE INSTITUTES OF LAHORE, PAKISTAN

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WORKPLACE SEXUAL HARASSMENT: A STUDY OF FEMALE NURSES FROM HEALTHCARE INSTITUTES OF LAHORE, PAKISTAN

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Abstract

Workplace sexual harassment of women is an imperative aspect and one of the most challenging impediments in the process of gender equality and women empowerment globally. Today's women proved themselves through more productive roles and claimed equal collective rights along with better access to resources, acceptance, security, and self-respect in their families, communities, and workplaces. The increasing involvement of women in the workforce increases the incidents of sexual harassment at the workplace and becomes the largest hindrance to women's psycho-social and economic empowerment. To understand the actual situation this descriptive study was carried out with the female nursing staff in various public hospitals in Lahore. A structured self-administered questionnaire was utilized to collect primary data through multistage simple random sampling methods. Various univariate, bivariate, and multivariate statistical analyses were applied through SPSS-21 for comprehensive understanding and coherent discussion. The findings revealed that a huge proportion of the study population faces sexual harassment in the workplace. Male staff especially doctors and male nurses were found to be the most common perpetrators of sexual harassment against female nurses. The participants reported that sexual harassment in the workplace is a serious problem that significantly impacts the social, psychological, physical, and economic condition and productivity of female nurses.

Keywords: Workplace Sexual Harassment, Gender Equality, Women Empowerment, Women Workforce, Female Nursing Staff.

Introduction

Workplace sexual harassment of women is an imperative aspect and one among the most challenging impediments in the process of gender equality and women empowerment globally (Davis et al., 2023). In recent decades, participation of women in all spheres of life transforms the socio-economic and political conditions of societies. Today's women proved themselves through more productive roles and claims equal collective rights along with better access to resources, acceptance, security and self-respect at their family, community and workplace accordingly (Spencer et al., 2021). With increasing involvement of women as workforce enhance the incidents of harassment especially sexual harassment. Sexual harassment at workplace has become the largest hindrance and creates serious threats for women empowerment and well being (Jamil et al., 2023).

In developing countries like Pakistan, women confronting numerous socio-economic, educational, familial and communal obstacles and reached to secure a productive work condition (Kessler et al., 2021). But the sexual harassment at workplace has significant psychosocial impacts on women's personality that decreased productivity, efficiency and self-esteem among many others. Women are often labeled as the weaker or as the fairer gender and approximately half of our nations are indispensable from human resources. It is unsurprising that women, therefore, are unquestionably critical for nation building and for its growth (Nasim et al., 2023).

Women encounter prejudices or biases everywhere in society especially among institutions with mixed gender such as health care institutions/hospitals, education, banking among many others (Unison, 2020). More worryingly, in spite of legal interventions, the so-called gender-based violence that women invariably suffer continues unceasingly. Such gender-based violence has multiple forms and varies in its degrees. It showcases how the male population is, for varied reasons, unable to accept females in myriad and multi-hued roles which women have begun to perform in the modern society (Abbas et al., 2023).

Indeed, women have successfully adopted many such complex roles and excelled. Unfortunately, the male rewarded them with gender-based violence. Such violence can be mental or even physical and either way, it is a gross violation of female rights, especially the so-called fundamental rights (Lima et al., 2020). Such gender-based violence also operates as an impediment to gender-equality and the lofty ideal of female empowerment. Examples of same include, sexual assault, crime of domestic violence, rape, indecent representation of

females and more importantly for the purpose of this study, workplace sexual harassment (Dionisi et al., 2021).

Gender-based violence mentioned above, workplace Sexual Harassment is something women had to encounter since the very time they entered the workforce, and for generations they have suffered due to the same (Nazneen et al., 2023). Infect, authors have pointed how female employees are targeted due to gender and how this occurs due to general societal subordination of women. Also, even though rape or sexual assaults or even domestic violence happen to be more abhorred or generally recognized kinds of gender-based violence but still, workplace sexual harassment is equally obnoxious and way more subtle form of violence. It damages the mind and can be, as authors point, both more repressive and intimidating (Sweeting et al., 2022).

Indeed, it is a ubiquitous crime, prevalent across the globe, transgressing borders and adversely affecting women everywhere (Russell et al., 2019). Also, as more and more women work, showcasing their myriad abilities and thus challenging patriarchy, this abhorrent problem will only assume even more gigantic proportions and, therefore, needs to be adequately thwarted. Various authors have pointed out that how sexual harassment not just damages women physically but also impact her very core, her identity and her soul (Sarwar et al., 2023). It has significant direct and indirect impact on lives of women who suffer from the sexual harassment and affects both their dignity and self respect. Also, all women, no matter their status, hierarchy, or even age can be subjugated or humiliated, thus remaining vulnerable (Naveed et al., 2022). In Pakistan, women work almost in every field despite the fact that the society is dominated by men. Since Pakistan's social system has undergone significant changes and a growing number of female-oriented professions have emerged, the percentage of professional women will gradually increase, encouraging more women to work outside the home and contribute to Pakistan's development and progress (Kabeer et al., 2021). The social and economic development of women and girls is hindered by some perpetrators in every society who promote violence and abuse against them. The practice of harassment in the workplace is often dangerous, irrational, and reprehensible. This revealed fact reflects the current situation of working women around the world, even though it is bitterly assimilated (Smidt et al., 2023).

Sexual Harassment in Pakistan

Women are half of Pakistan's population and they are contributing to the economy by joining different professions. Women harassment is a serious issue in Pakistan, and it has been prevalent for many years in various forms, including physical harassment, verbal abuse, and

emotional manipulation (Abbas et al., 2023). Women face harassment in different aspects of life, including in the workplace, public spaces, and at home. In Pakistan, workplace harassment is a common problem, and women are often subjected to unwanted advances from male colleagues or supervisors (Jamil et al., 2023). The lack of proper reporting mechanisms and a culture of victim blaming make it difficult for women to speak up and seek justice. Women are often subjected to catcalling, stalking, and groping in public spaces, making it difficult for them to feel safe and secure (Naveed et al., 2022).

The lack of public awareness campaigns and effective law enforcement add to the problem. Moreover, sexual harassment is also common in educational institutions in Pakistan (Abbas et al., 2023). Female students often face harassment from male classmates, teachers, or other staff members, which affects their education and mental health. The issue of women harassment in Pakistan needs to be addressed on multiple levels, including education, awareness, and legal reforms (Nazneen et al., 2023). Proper laws and mechanisms should be in place to ensure that women are protected from harassment and that perpetrators are held accountable for their actions. It is also essential to change the cultural attitudes and social norms that contribute to harassment and victim blaming (Kabeer et al., 2021).

Legal Framework and Policies Regarding Sexual Harassment in Pakistan

Women's harassment laws and policies in Pakistan have been introduced in recent years to address the issue of women's safety and protection. The laws and policies aim to provide legal remedies for victims of harassment and create a safe and supportive environment for women (World Health Organization, 2021). The most significant legal instrument addressing women harassment in Pakistan is the protection against harassment of Women at Workplace Act 2010. The act defines harassment as any unwelcome sexual advance, request for sexual favors, or other verbal or physical conduct of a sexual nature (Sarwar et al., 2023).

The law applies to all workplaces, including the public and private sectors, and provides protection for women against harassment from colleagues, supervisors, and employers. Another relevant law is the Criminal Law Amendment Act 2016, which introduced tougher penalties for harassment and other forms of violence against women (Mazumder et al., 2019). The law amended the Pakistan Penal Code (PPC) to include stalking and cyber harassment as offenses, with punishments ranging from fines to imprisonment. This legislation is an important step towards promoting gender equality and ending workplace harassment in Pakistan (Naveed et al., 2022).

Despite the introduction of these laws and policies, implementation and enforcement remain a challenge in Pakistan. The lack of awareness and education about women's rights and the social stigma attached to reporting harassment discourage women from seeking legal remedies. Moreover, the weak institutional capacity and ineffective law enforcement mechanisms pose significant obstacles to ensuring justice for victims of harassment (Smidt et al., 2019).

Women's harassment is a significant issue in Pakistan that needs to be addressed through multi-level interventions. Effective legal reforms, education, awareness-raising campaigns, and promoting women's economic empowerment and leadership can help reduce harassment incidents and promote gender equality (UN Women, 2021)). The purpose of this research is to explore the current situation of sexual harassment among female nurses in public hospitals in Lahore, Pakistan. The study will examine the effects of harassment and the coping strategies used by victims. It is important to address this issue in order to ensure fair access for women and girls to quality healthcare and economic opportunities and to promote gender equality for the betterment of society as a whole.

Objectives of the Study

- 1. To study the prevalence and types of sexual harassment experienced by female nurses in public hospitals in Lahore.
- 2. To examine the impact of sexual harassment on the psychological well-being of female nurses in public hospitals.
- 3. To study the coping strategies adopted by female nurses who have experienced sexual harassment in public hospitals.

Hypothesis of the Study

- **H1.** There is no significant difference between different age groups of Nurses and their experience of sexual harassment.
- **H2.** There is no significant difference between the marital status of Nurses and their experience of sexual harassment.
- **H3.** There is no significant difference between the pay scale of Nurses and their experience of sexual harassment.

Theoretical Framework of the Study

The theoretical framework on workplace sexual harassment in healthcare is a conceptual framework that provides a foundation for understanding the phenomenon of sexual harassment in the healthcare industry. This framework integrates several theories and concepts from different disciplines to provide a comprehensive understanding of workplace sexual harassment among healthcare workers, particularly female nurses.

Neo-Institutional Theory

The neo-institutional theory is a framework that explains the influence of societal, cultural, and other institutions on stakeholders, including organizations, employers, and employees. This approach considers the influence of the societal context, including moral templates, cognitive scripts, and symbol systems, to define institutions broadly. It removes the divide between 'institutions' and 'culture' in traditional institutional theory (Westmorland et al., 2020). In the context of sexual harassment, the neo-institutional theory suggests that societal norms and values influence the behavior of employees within organizations. Employees may be influenced by normative pressures and perceptions, which may lead to compliance with or acceptance of sexually harassing behavior. This approach emphasizes the importance of cultural and institutional factors in shaping the experiences of sexual harassment in the workplace (The British Psychological Society, 2021).

Moreover, the neo-institutional theory suggests that compliance with sexual harassment policies and regulations may occur not only because of rules or policies but also because of normative pressures and values. Employees may follow routines related to sexual harassment prevention and reporting because they are taken for granted by the way things are done within the organization (Ghosh, 2021). The neo-institutional theory provides a framework to understand how societal and cultural factors shape the experiences of sexual harassment in the workplace. This approach emphasizes the importance of considering the influence of normative pressures, values, and perceptions in shaping the behavior of employees within organizations. It also highlights the importance of understanding the taken-for-granted routines related to sexual harassment prevention and reporting within the organizational context (Hendrikx et al., 2021).

Power Theory

Another theoretical perspective that is relevant to workplace sexual harassment is power theory. This theory suggests that sexual harassment is a manifestation of power differentials

between individuals. In the healthcare industry, power dynamics can be influenced by several factors, such as gender, race, and job position (Russell et al., 2019). Female nurses, for instance, may be at a disadvantage due to their gender and job status, while male physicians may hold more power due to their position within the healthcare hierarchy. Power theory explains how perpetrators use their power to exert control over their victims and how this control can result in psychological distress and job-related outcomes such as lower job satisfaction and increased absenteeism (Oosterom et al., 2022).

Sexual harassment is a manifestation of power and dominance within the workplace. This theoretical framework proposes that sexual harassment occurs as a result of a power imbalance between individuals, particularly those in positions of authority and those who lack such authority. This power imbalance is rooted in both societal and workplace structures that prioritize the voices and experiences of those in positions of authority while disregarding or minimizing the experiences of those who lack such power (Dionisi et al., 2021).

Feminist Theory

A third theoretical perspective that is relevant to workplace sexual harassment is feminist theory. This theory emphasizes the gendered nature of power and how gender inequalities perpetuate patriarchal structures that allow for sexual harassment to occur. Feminist theory highlights the importance of examining gender role with other social categories such as race, ethnicity, and sexual orientation. In healthcare, female nurses who belong to marginalized groups may experience additional forms of discrimination and harassment (Sweeting et al., 2022).

The theoretical framework on workplace sexual harassment in healthcare also considers organizational and environmental factors that contribute to the prevalence of sexual harassment in the workplace. These factors include the lack of policies and procedures for reporting and handling incidents of sexual harassment, the absence of training programs to sensitize employees about the issue, and the hierarchical nature of the healthcare system that may prevent victims from reporting incidents. The framework also considers the impact of sexual harassment on the victims, such as psychological distress, decreased job satisfaction, and increased turnover intentions (World Health Organization, 2021).

Material and Methods

To understand the actual condition and analyze the extent of sexual harassment faced by the nursing staff, quantitative research methods and techniques were applied. The target population

was the all-female nurses working in the public sector hospitals of Lahore. Total number of public sector hospitals in Lahore was 28. The detail has been provided under:

Table -1 List of hospitals in Lahore City

Sr.No	Hospitals in Lahore	Sr.No	Hospitals in Lahore				
51.110	Hospitals in Lanore	51.140					
1	Govt. teaching Hospital Shahdara	15	Nawaz Sharif Hospital Kotkhawja Saeed				
2	Govt. Tuberculosis Hospital, Bilal Gunj	16	Punjab Dental Hospital				
3	Govt. Mozang Teaching Hospital	17	Punjab Institute of Neurosciences				
4	United Christian Hospital, Lahore	18	Punjab Social Security Hospital				
5	Children's Hospital	19	Railway Karen Hospital				
6	Jinnah Hospital	20	Said Mehta Hospital, Lahore City, Lahore				
7	Lady Aitcheson Hospital	21	Services Hospital				
8	Lady Willington Hospital	22	Services Institute of Medical Sciences				
9	Lahore General Hospital	23	Punjab Institute of Cardiology				
10	Mayo Hospital	24	Punjab Institute of Mental Health				
11	Main Munshi DHQ-1 Teaching Hospital	25	Sir Ganga Ram Hospital				
12	WAPDA Hospital	26	Janki Devi Hospital				
13	Social Security Hospital, Kotlakhpat,	27	Allama Iqbal teaching Hospital				
14	Nawaz Sharif Social S						

Population of the current study was female nurses (Total 4976 nurses) working in Public sector Hospitals of Lahore. Multi stage random sampling technique was applied and at first stage three public sector hospitals such as 1) Mayo Hospital, 2) Nawaz Sharif Hospital Kotkhawja Saeed Lahore and 3) lady wellington hospital) were selected. The list of nurses 729 number was available at the above selected hospitals and the researcher applied Taro Yamane formula and approached 258 participants from the sampled population of three hospitals.

Table-2 Determination of Sample Size

Sr. No.	Name of Hospital	Total No of Nurses	Sample	
1	Mayo Hospital	364	129	
2	Lady Willington Hospital	117	41	
3	Nawaz Sharif Hospital Kotkhawja Saeed Lahore	248	88	
	Total	729	258	

For the purpose of data collection, a self-administered questionnaire was used as a tool of data collection. The collected data was scrutinized and entered to SPSS-21 for further univariate, bivariate and multivariate analysis.

Results and Major Findings

Statistical package for social sciences (SPSS) version 21 is used for the analysis of data. For the analysis of data, Frequencies, percentages, mean and standard deviation has been used. Composite tables and graphs have been used to present the analyzed details. The arrangement of the tables are as follows- socio demographic profile of the participants, nature of sexual harassment, frequency of sexual harassment, description of the harasser, effects of harassment on victim and coping strategies used by victim.

Table-3 Demographic Characteristics of Participants

I abic-c	Demographic Characteristics of Farticipants						
Sr.No	Participants Characteristics Single		N	%			
	•	Single	151	58.5			
1	Marital Status	Married	103	40.0			
1	Marital Status	Divorced	4	1.5			
		Total	258	100.0			
		18-25	111	43.1			
		26-30	56	21.9			
2	A ~~	31-35	37	14.2			
Z	Age	36-40	5	1.9			
		41-above	49	18.8			
		Total	258	100.0			
		Diploma in Nursing	144	55.8			
2	Onalification	Bachelor in Nursing	64	25.0			
3	Qualification	Masters in nursing	50	19.2			
		Total	258	100.0			
		Less than a year	7	2.7			
		I to 5 years	163	63.1			
4	Professional Experiences	6-10 years	22	8.5			
4		11-15 years	15	5.8			
		16 years and more	51	20.0			
		Total	258	100.0			

Table 3 presented the marital status of the participants and the large proportion 58.5% were single, 40.0% were married and 1.5% participants were divorced. Among the 258 respondents 43.1% were between the age group of 18-25 and 18.8% were between the age group of 49-above. Similarly, 55.8% done diploma in nursing, 25.0% done bachelor in nursing and 19.2% done masters in nursing. The professional experience of respondents reported as 2.7% respondents have less than a year experience, 63.1 % have 1- 5 years' experience.8.5% have 6-10 years, 5.8 % have 11-15 year experience and 20.0 % have 16 years and more professional experience.

 Table-4
 Workplace Sexual Harassment

I abic-4	workplace beau	ai i i ai assiliciti				
Sr.No		Responses	N	%	Mean	SD
		Never	152	58.8		
		Once	52	20.0		
1	Told a dirty joke to you	Few times	54	21.2	1.62	0.812
		Very frequent	0	0		
		Total	258	100		
2	Talk about Figure	Never	113	43.8	1.91	0.894
		Once	54	20.8	1.91	0.894

		Form times	90	35.0		
		Few times	90			
		Very frequent	1	0.4		
		Total	258	100		
		Never	55	21.2		
		Once	26	10.0		
3	Staring Critically	Few times	101	38.8	2.77	1.095
		Very frequent	76	30.0		
		Total	258	100		
		Never	138	53.8		
		Once	23	8.8		
4	Try to Mingle Up	Few times	90	34.6	1.86	0.988
		Very frequent	7	2.7		
		Total	258	100		
		Never	207	80.4		
	Share unethical	Once	48	18.5		
5	Material (Direct/Social	Few times	3	1.2	1.20	0.434
	Media	Very frequent	0	0		
		Total	258	100		

Table -4 highlighted the various aspects of sexual harassment at workplace and 58.8% participants reported loose talk or dirty jokes. The mean of the responses are 1.62 and SD=0.812 respond to the statement regarding the experience of sexual harassment. 43.8% with mean 1.91 and SD=0.894 respond to the statement regarding the experience of sexual harassment Appreciation of figure was reported by 35.0 % participants and the majority of respondent38.8 % with mean 2.77 and SD=1.095 respond to the statement regarding the experience of sexual harassment stared at you from head to toe with dirty looks. Similarly 80.4% with mean 1.20 and SD=0.434 respond to the statement regarding the experience of sexual harassment "Tried to show you some pornographic material" as never, 18.5 % as once, 1.2 % as few times and 0 % as very frequent. This indicates that the majority of respondents never face this type of harassment.

Table-5 Workplace Sexual Harassment

Table-5	workplace Sexu	iai Harassment				
Sr.No		Responses	N	%	Mean	SD
		Never	144	55.8		
1	Undua Dalay in	Once	59	23.1		
	Undue Delay in Work/Response	Few times	55	21.2	1.65	0.807
	work/Response	Very frequent	0	0		
		Total	258	100		
2		Never	212	82.3		
	Assured you of promotion	Once	18	6.9		
		Few times	28	10.8	1.28	0.648
		Very frequent	0	0		
		Total	258	100		
		Never	107	41.5		
	Collided with you while	Once	40	15.4		
3	passing by	Few times	77	30.0	2.14	1.105
	passing by	Very frequent	34	13.1		
		Total	258	100		
	Job Threats and	Never	215	83.5		
4	immoral demands.	Once	41	15.8	1.17	0.398
	minorai demands.	Few times	2	0.8		

		Very frequent	0	0		
		Total	258	100		
		Never	173	67.3		
		Once	56	21.5		
5	Tried to defame	Few times	28	10.8	1.44	0.697
		Very frequent	1	0.4		
		Total	258	100		

Table – 5 point out some further aspects of sexual harassment at workplace and participant 55.8% with mean 1.65 and SD=0.807 respond to the statement regarding the experience of sexual harassment withheld (delayed) your work so that you might go to him again and again regarding that work. The 82.3% with mean 1.28 and SD=0.648 respond to the statement regarding the experience of sexual harassment assured you of promotion in the job or some other benefits if you fulfill his immoral demands. 41.5 % with mean 2.14 and SD=1.105 respond to the statement regarding the collision with you while passing and 3.5 % with mean 1.17 and SD=0.398 respond to have you face any loss in your job due to not meeting his immoral (bad) demands. The majority of respondents 63.7 % with mean 1.44 and SD=0.697 respond to defame you for not fulfilling his immoral (bad) demands.

Hypothesis Testing and Analysis of Variance

Variance of analysis is one among the most suitable methods to understand the relationship between groups and within groups. The finding of one way ANOVA test indicates the suitable results according to recommended measures and objectives of the study. The study hypothesis was also checked and findings presented in Table-6 below.

Table-6 One-Way ANOVA with respect to Age groups

Table-0	One-way F	anova will lesp	icci io A				
Sr.No		Sum of Squares	Df	Mean Square	F	Sig.	Decision
Н1	Between Groups	3164.237354	4	791.059			
	Within Groups	31787.547261	253	124.657 6.346		0.000	Accepted
	Total	34951.784615	257				
Н2	Between Groups	2009.069	2	1004.534			
	Within Groups	32942.716	255	128.182	7.837	0.000	Accepted
	Total	34951.785	257				

Table- 6 indicates the comparison of female nursing staff harassment experiences with respect to their different age groups. There exist no significant difference of harassment experiences

among female nursing staff as indicated by F=6.346, and $Sig=.000> \alpha=.05$ and the null hypothesis H1. There is no significant difference between the different age of groups of nurses and their experience of sexual harassment was accepted.

Similarly, the female nursing staff harassment experiences respect to their marital status. There exist no significant difference of harassment experiences among female nursing staff as indicated by F=7.837, and $Sig=.000>\alpha=.05$ and the null hypothesis H2"There is no significant difference between the marital status of nurses and their experience of sexual harassment" was accepted.

Table – 7 Comparison of Harassment experience with respect of service pay scale

	Lo	cality	7	N	Mean	SD	t	Df	Sig.	Decision
Н3	Grade below	16	and	211	41.0566	11.61249	_	1 258	227	Rejected
	Grade Above	17	and	47	41.2500	11.75730	.104		.337	

Table 7 indicates the comparison of female nursing staff harassment experiences with respect to their pay scale. There significant difference of harassment experiences was exist among female nursing staff as indicated by t=-.104, df=258 and $Sig.=.337>\alpha=.05$. Hence the null hypothesis H3 "There is no significant difference between pay scale of nurses and their experience of sexual harassment." was rejected.

Discussion

The sexual harassment experience questionnaire was applied to assess the prevalence and types of sexual harassment experienced by female nurses in public hospitals of Lahore. The purpose of the current study was to determine the frequency of sexual harassment and how sexual harassment impacted on psycho-social conditions female nurses and identified coping mechanisms. Based on a thorough analysis of the existing researches, hypotheses were developed to investigate the relationship between several demographic factors and the occurrence of sexual harassment among female nurses.

The findings of this empirical investigation reveled that there was a lot of sexual harassment of female nurses accrue at public hospitals in Lahore. These occurrences demonstrated the critical need for healthcare organizations to address the problem and put policies in place to stop and handle workplace sexual harassment. The current study additionally demonstrated that female nurses' emotional and physical health, job happiness, and performance at work were all greatly influenced by sexual harassment. These detrimental effects emphasized how crucial it was to offer assistance and resources to nurses who had been subjected to sexual harassment.

The research also uncovered a number of coping mechanisms that female nurses used to deal with sexual harassment, such as asking for help from coworkers and superiors, filing a lawsuit, moving to another hospital, and changing careers. These tactics required healthcare organizations to create efficient procedures and policies to deal with workplace sexual harassment.

Conclusion

In conclusion, the study shed light on the incidence of sexual harassment of female nurses in public hospitals, the emotional toll it takes personally, and coping mechanisms employed by those who are affected. The results of this study have significant ramifications for healthcare organizations in developing efficient policies and programs to combat sexual harassment at work, which can ultimately enhance the wellbeing of female nurses and the standard of care given to patients.

Recommendations

Based on the conclusion of the present research, several recommendations are suggested to reduce the prevalence of sexual harassment in public hospitals. It is intended that by putting these suggestions into practice, the incidence of sexual harassment in public hospitals can be decreased, resulting in a work atmosphere that is safer and more encouraging for female nursing staff.

- First and foremost, health care organizations should have precise policies and procedures in place that define sexual harassment and spell out the repercussions for those who commit it.
- Second, health care institutions should periodically train and educate all staff members
 on what sexual harassment is, how to spot it, and how to file a complaint. This may
 include training sessions like seminars and conferences.
- Third, the Harassment Act of 2010's inquiry commission should be activated and offered regular training. Since the committee works with harassment victims, it is essential that they are trained and qualified to deal with such circumstances.

Recommendations for Future Researchers

The female nurses employed by state hospitals are the only subjects of the current study. To gain a deeper knowledge of sexual harassment in the nursing profession, future researchers might broaden the study's scope by including male nurses and nurses employed by private institutions.

- Further research can examine how sexual harassment affects the mental health and wellbeing of the victims and provide the most effective remedies.
- Future research could compare the occurrence and kind of sexual harassment against nurses in various regions since the current study is geographically restricted to one area.

Additionally, research might be conducted to determine the causes of sexual harassment directed against nurses and recommend solutions to eliminate or lessen those causes.

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