

Harassment: knowledge and perception of female medical and allied health sciences students from Peshawar, Pakistan

Ali Raza, Saminullah Khan, Seema Ashraf, Ayesha Ahmad, Najeebullah Khan, Hajra Zainab

Submitted

February 07, 2024

Accepted

March 10, 2024

Author Information

From: Department of
Community Medicine,
Rehman Medical College,
Peshawar, Khyber
Pakhtunkhwa, Pakistan

Dr. Ali Raza

Professor & Head
(Corresponding Author)
Email: ali.raza@rmi.edu.pk

Dr. Saminullah Khan

Associate Professor

Dr. Seema Ashraf

Associate Professor

Dr. Ayesha Ahmad

Lecturer

Dr. Najeebullah Khan

Lecturer

Dr. Hajra Zainab

Lecturer

Citation: Raza A, Khan S, Ashraf S, Ahmad A, Khan N, Zainab H. Harassment: knowledge and perception of female medical and allied health sciences students from Peshawar, Pakistan. J Rehman Med Inst. 2024 Jan-Mar;10(1):16-20.

ABSTRACT

Background: Harassment is a pervasive issue impacting female students globally. In conservative societies like Pakistan, societal perceptions often undermine its severity.

Objective: To investigate the knowledge and perceptions of female medical and allied health sciences students regarding harassment at Rehman Medical Institute (RMI), Peshawar, Pakistan.

Materials & Methods: A cross-sectional study was conducted using a structured questionnaire on 151 female students. The questionnaire assessed the students' knowledge about harassment, experiences of harassment, and perceptions of the reasons behind harassment. Data were analyzed for descriptive and comparative statistics using SPSS 20, keeping $p \leq 0.05$ as significant.

Results: The study found that a significant proportion of female students (40%) had experienced offensive remarks from colleagues or seniors, and 64% had experienced online harassment. Nearly half of the students (48%) knew the definition of harassment, but knowledge regarding reporting mechanisms and the university's safety was low. Gender discrimination and a person's childhood environment were perceived as significant factors contributing to harassment.

Conclusion: The findings highlight the prevalence of harassment faced by female students in educational institutes and the need for interventions such as robust anti-harassment policies, awareness programs about harassment, and providing support services for victims.

Keywords: Harassment, Non-Sexual; Sexual Harassment; Students, Medical; Social Behavior; Social Stigma.

The authors declared no conflict of interest. All authors contributed substantially to the planning of research, data collection, data analysis, and write-up of the article, and agreed to be accountable for all aspects of the work.

INTRODUCTION

According to the American Psychological Association (APA), harassment is defined as "threatening, harmful or humiliating conduct based on race, color, national origin, sex or disability".¹ It is not limited to rape as some people may perceive, but also encompasses the psychological and emotional trauma inflicted upon victims. It begins with uncomfortable staring, attempts to communicate without consent, "unintentional touching," and can escalate to sexual assault. The main problem lies in society's reaction to these incidents. In conservative countries like Pakistan, when a girl is harassed in any way, blame is often placed on the girl, leading to her and her parents being shamed, and their participation in society diminishing.² This drives victims towards depression and, tragically, suicide. Conversely, harassers often anticipate escaping consequences due to loopholes in the law and the arduous judicial process that wears victims out both professionally and financially.

As a result, there has been a significant rise in the rate of sexual assaults in Pakistan.³ Incidents of child rapes, and mothers being assaulted in front of their children or wives in front of their husbands are alarmingly becoming the new normal, instilling fear in women. Due to harassment being a taboo subject, it is not openly discussed with children, leaving them unaware of the difference between appropriate and inappropriate touch.

A study conducted in Sub-Saharan Africa⁴ found that the majority of participants (54.1%) understood how sexual harassment was defined. Additionally, 57% of participants acknowledged that sexual harassment does occur with female students in the university, although there was confusion regarding what acts constituted sexual harassment. The study concluded that harassment is a significant issue at the university level, warranting the creation of harassment policies to protect students.⁴

Another research conducted in Punjab⁵ aimed to gauge perceptions of sexual harassment in the workplace and the knowledge and attitudes of working women towards the Protection against Harassment of Women at the Workplace Act 2010 bill. Results showed positive responses, with many

participants admitting to experiencing harassment, though they faced difficulties in filing cases against workplace harassment.⁵

Other studies done in Lahore⁶ and Islamabad², Pakistan show that socio-cultural, institutional, and managerial factors are the main contributors to harassment and there is a negative association between sexual harassment and self-esteem. Furthermore, research evaluating harassment faced by medical students and junior doctors highlighted a significant incidence of bullying or harassment in Pakistan's medical education system.⁷

A study conducted by an NGO (Dukhtar Foundation)³ working on gender issues, concluded that 82% of the total complaints they received were from female students of different universities. Majority of the complaints were regarding sexual harassment of students. In some cases, the university harassment committee members who are supposed to solve these issues were also found involved in harassment.³

In light of these findings, it is evident that harassment poses a significant challenge in Pakistan's educational and professional spheres. There is a pressing need for systemic changes, including the implementation of robust harassment policies, increased awareness, and societal attitude shifts towards victims of harassment. This research focuses exclusively on the knowledge female students possess regarding harassment, the factors they believe contribute to it, and their perceptions of the safety of their university environment regarding harassment.

MATERIALS & METHODS

This cross sectional study was performed on female students of different medical and allied health sciences departments of Rehman Medical Institute (RMI), Peshawar using convenience sampling. The study duration was 6 months from May to October 2021. The sample included students who were aged 18 and above, and were willing to participate in the study after written informed consent. Ethical approval was taken from the departmental Research Ethics Committee (REC) of Rehman Medical Institute (RMI). The total calculated sample size was 150 through the WHO formula, using $z=1.96$, $p=0.50$, and $e=0.08$ (8%).

A 16-item validated structured questionnaire with demographic details was used for the data collection on female students' perceptions regarding harassment and factors associated with it. The questionnaire had two sections, the first section with 12 questions were regarding the respondents' knowledge regarding harassment and any such experience. The second section was regarding the factors behind such incidents. Data collection was done by female medical students owing to the sensitive nature of the topic. The responses were based on a global rating scale from 0 to 4, where 0 was no idea regarding a particular question, 1 was Slight Idea, 2 was Some Idea, 3 was Strong Idea and 4 was Complete Agreement.

Data were entered and analyzed using SPSS v.20. Descriptive statistics were used to study the characteristics of the study population. Categorical variables were presented as frequencies and percentages and their analyses were done using the Chi-square test. Continuous variables were described as means and standard deviation. A $p \leq 0.05$ was considered statistically significant.

RESULTS

After cleaning the data and removing one largely incomplete response, the final number of acceptable responses was 149, of which some variables had missing data as well; almost 86% of the subjects were of ages 18 to 23 years. Table 1 provides further demographic data.

Table 1: Demographic characteristics of the study sample.

Variables	Frequency	Percent
Age groups (years) (n=135)		
18-20	50	37.0
21-23	66	48.9
24-26	14	10.4
27-29	03	2.2
30-32	02	1.5
Family System (n=135)		
Joint Family	31	23
Single Family	104	77
Relationship Status of the Respondent (n=148)		
Married	08	5.4
Committed	15	10.1
Single	123	82.6
Separated	02	1.4

Knowledge Regarding Harassment

Table 2 shows the significant and near significant associations of general knowledge regarding harassment with age groups of the respondents. Age was found to be significantly associated ($p=0.007$) with respondent's knowledge about where to get help at university if one experiences any such scenario. Age was also significantly associated ($p=0.012$) with the experience of sexual remarks or jokes directed at the respondents. Near significant associations were observed for peers or organization employees having passed inappropriate or offensive comments about the respondents ($p=0.053$), and that the presence of societal gender discrimination was the cause of harassment ($p=0.063$).

It is to be noted that these associations are related to the younger age groups of 18-20 and 21-23, who gave most of the positive responses (116/135, 85.9%), thereby indicating that these age groups are more prone or vulnerable to harassment. Perhaps the older age groups are not targeted by harassers to the same extent, or have learnt how to cope with it.

Moreover, regarding the question of where to get help at University in case of harassment, many respondents (65, 48.14%) were not aware of where to get such help; of these 65, 48 (73.85%) were of the age groups 18-23 years, indicating the great lack of knowledge about this important aspect by the younger students.

Similarly, regarding the experiences of having undergone some sort of harassment, 73 (54.04%) students had experienced sexual remarks by others; of these, 59 (80.82%) were of ages 18-23 years. Regarding general harassment remarks by peers or institutional employees, 81 (60.0%) were aware of such activities, of which 69 (85.2%) were of ages 18-23 years. A majority of respondents (99, 73.3%) believed that societal gender discrimination was a cause of harassment; of these, 63 (63.63%) were of ages 18-23 years.

Table 2: Significant or near significant differences in responses of students by age groups (n=135).

#	Questions	Age Groups (years)					p value
		f (%)					
		18-20 (50, 37%)	21-23 (66, 48.9%)	24-26 (14, 10.4%)	27-29 (03, 02.2%)	30-32 (02, 01.5%)	
1	How knowledgeable are you about where to get help at university if you or a friend experiences harassment?						0.007
	No idea (n=42, 31.1%)	14 (33.3)	22 (52.4)	05 (11.9)	01 (2.4)	0	
	Slight idea (n=23, 17.0%)	11 (47.8)	11 (47.8)	01 (04.3)	0	0	
	Moderate idea (n=40, 29.6%)	16 (40)	22 (55)	02 (05)	0	0	
	Strong idea (n=18, 33.3%)	03 (16.7)	06 (33.3)	05 (27.8)	02 (11.1)	02 (11.1)	
Complete idea (n=12, 08.9%)	06 (50.0)	05 (41.7)	01 (08.3)	0	0		
2	Have you ever experienced that another student or someone else made sexual remarks or told jokes or stories that were insulting or offensive to you?						0.012
	No idea (n=47, 32.8%)	21 (44.7)	21 (44.7)	03 (06.4)	0	02 (04.3)	
	Slight idea (n=15, 11.1%)	10 (66.7)	05 (33.3)	0	0	0	
	Moderate idea (n=26, 19.3%)	06 (23.1)	14 (53.8)	03 (11.5)	03 (11.5)	0	
	Strong idea (n=21, 15.6%)	07 (33.3)	12 (57.1)	02 (09.5)	0	0	
Complete idea (n=26, 19.3%)	06 (23.1)	14 (53.8)	06 (23.1)	0	0		
3	Have you ever experienced that a student or someone employed by the organization / university made an inappropriate or offensive comment about you or someone else's body, appearance, or sexual activities?						0.053
	No idea (n=36, 26.7%)	15 (41.7)	18 (50.0)	01 (02.8)	0	02 (05.6)	
	Slight idea (n=18, 13.3%)	09 (50.0)	05 (27.8)	02 (11.1)	02 (11.1)	0	
	Moderate idea (n=26, 19.3%)	11 (42.3)	14 (53.8)	01 (03.8)	0	0	
	Strong idea (n=22, 16.3%)	07 (31.8)	10 (45.5)	05 (22.7)	0	0	
Complete idea (n=33, 24.4%)	08 (24.2)	19 (57.6)	05 (15.2)	01 (3.0)	0		
4	Do you think gender discrimination on every level in a society is a cause of harassment?						0.063
	No idea (n=14, 10.6%)	07 (50.0)	05 (35.7)	01 (07.1)	01 (07.1)	0	
	Slight idea (n=19, 14.4%)	06 (31.6)	12 (63.2)	01 (05.3)	0	0	
	Moderate idea (n=39, 29.5%)	10 (25.6)	25 (64.1)	04 (10.3)	0	0	
	Strong idea (n=35, 26.5%)	17 (48.6)	12 (34.3)	02 (05.7)	02 (05.7)	02 (05.7)	
Complete idea (n=25, 18.9%)	10 (40.0)	09 (36.0)	06 (24.0)	0	0		

Adequacy of responses about harassment

In Table 3, an evaluation of the adequacy of respondents' perceptions regarding various aspects of harassment is presented. Out of the 16 items of the questionnaire, 08 (50%) were deemed as representing inadequate knowledge about harassment. Foremost among these were the knowledge about reporting harassment at the university (unsatisfactory responses 97, 69.1%), and the procedure that is followed after such reporting (unsatisfactory responses 92, 61.7%). Students were also fearful

of being harassed off campus (unsatisfactory responses 94, 63.1%) and on campus (unsatisfactory responses 84, 56.4%). Other items of lesser concern were the passing of inappropriate / offensive comments in the university (unsatisfactory responses 89, 59.7%), and the personal experience of having been subjected to offensive and sexual remarks (unsatisfactory responses 80, 53.7%). All these unsatisfactory responses speak volumes about the importance given to harassment by the students as well as their educational institutions.

Table 3: Adequacy of students' responses about harassment (n=149).

#	Questions	Response Status	
		Satisfactory f (%)	Unsatisfactory f (%)
1.	How knowledgeable are you about where to get help at university if you or a friend experiences harassment?	71 (47.7)	78 (52.3)
2.	How knowledgeable are you about where to make a report of harassment at university?	52 (30.9)	97 (69.1)
3.	How knowledgeable are you about what happens when a student reports an incident of harassment at university?	57 (38.3)	92 (61.7)
4.	Do you think your university environment is unsafe regarding your safety?	73 (49.0)	76 (51.0)
5.	Do you think that you will be confronted by inappropriate behavior on campus?	65 (43.6)	84 (56.4)
6.	Do you think that you will be confronted by inappropriate behavior off campus?	55 (36.9)	94 (63.1)
7.	Have you ever experienced that another student or someone else made sexual remarks or told jokes or stories that were insulting or offensive to you?	69 (46.3)	80 (53.7)
8.	Have you ever experienced that a student or someone employed by the organization / university made an inappropriate or offensive comment about you or someone else's body, appearance or sexual activities?	60 (40.3)	89 (59.7)

DISCUSSION

The findings of this study underscore the pervasive nature of harassment and its profound impact on female students in educational institutions, particularly in conservative societies like Pakistan. The study revealed that a significant proportion of female students have experienced various forms of harassment, including offensive remarks about their bodies or other female colleagues, unwanted advances, and online harassment. These findings resonate with studies conducted in Nigeria,⁸ Columbia,⁹ and Greece,¹⁰ highlighting the global prevalence of harassment among female students in educational settings. The most prevalent harassing experience women experienced were inappropriate sexual comments and offensive jokes about their body and appearance.

The findings of this study suggest that there is a significant association between the level of knowledge about harassment definition and the belief that gender discrimination is the cause of harassment. We found a significant, though weak, ($\rho=0.286$, $p<0.001$) linear association between these two variables. This suggests that individuals with greater knowledge about harassment definitions are more likely to attribute harassment to gender discrimination across all levels of society. This association is supported by the literature.¹¹ Studies from Greece,¹⁰ Nigeria,⁸ and South Africa,¹² found similar associations. The effect on gender was associated with the psychological resilience of the woman.¹⁰ These experiences have a detrimental effect on victim's mental health and wellbeing. For women this affects their performance and growth prospects.¹³

In this study, respondents identified various factors contributing to harassment, including gender discrimination, childhood experiences, and exposure to adult content. We found a significant, though weak association ($\rho=0.199$, $p<0.016$) between harassment and the respondent's belief in the influence of childhood environment on becoming a harasser. This implies that individuals with greater knowledge about harassment definitions are more likely to believe that a person's childhood environment plays a significant role in them becoming a harasser. A narrative review of studies done in high, middle and low income countries show that harassment and violence was more in families where

there was marital conflict, family disintegration, male unemployment and norms of male dominance in the household.¹⁴ Similar findings were reported from a study done in Punjab, Pakistan.⁶

The study underscores the urgent need for systemic changes to address harassment within educational institutions. This includes the implementation of robust harassment policies, increased awareness and education initiatives. Lack of awareness makes the vulnerable population i.e., women to fall victim to harassment, which makes the harasser more confident and leads to mental health issues of the victims.^{15,16} Recommendations drawn from studies conducted nationally and internationally can inform policy and practice, such as the establishment of confidential reporting mechanisms, provision of support services for victims, and promotion of gender equality and empowerment initiatives.

LIMITATIONS

The study was done to assess the knowledge and perception of female students regarding harassment. The study was limited by small sample size and data from one medical institute of Peshawar. The study contains only data from health care workers and female students in the medical field, which can result in potential biases in the study.

CONCLUSION

The study achieved its primary objective and adds to the growing body of literature on harassment among female students in educational settings. By contextualizing the findings within the broader literature, valuable insights were gained into the complex dynamics of harassment and its multifaceted impact on victims.

RECOMMENDATIONS

Concerted efforts are needed to address the root causes of harassment, challenge societal norms, and create safer and more equitable environments for all students.

Institutions should work on provision of safe and secure environment for female staff and students. Parents should provide information to their children regarding harassment and good and bad touch. Women should be empowered with education and confidence to speak up against harassment.

REFERENCES

- American Psychological Association. Bullying, Harassment and Electronic Aggression Prevention [Internet]. Available from: <https://www.apa.org/pi/lgbt/programs/safe-supportive/bullying>.
- Qureshi HS, Masroor U. Teacher's perception of sexual harassment incidents and its impact on university students in Pakistan. *Clin Psychiatr*. 2018;04:9854.
- EduVision. 82% of female harassment reported cases are by university students against teachers [Internet]. Eduvision, Career Planning- Educational Services. Available from: https://www.eduvision.edu.pk/edu_news/82-of-female-harassment-reported-cases-are-by-university-students-against-teachers-news-3052
- Menon JA, Sanjobo N, Lwatula C, Nkumbula T, Zgambo T, Musepa M, et al. Knowledge and perception of sexual harassment in an institution of higher education in Sub-Saharan Africa. *Med J Zambia*. [Online]. 2014;41(3):137-43.
- Mahmood QK, Ishtiaq I. Perception of sexual harassment at workplace, knowledge and attitude of working women towards workplace harassment act 2010. *Soc Sci Rev Pak*. 2011;1(1):22-9.
- Ali F, Kramar R. An exploratory study of sexual harassment in Pakistani organizations. *Asia Pacific J Manag*. 2015;32(1):229-49.
- Ahmer S, Yousafzai AW, Bhutto N, Alam S, Sarangzai AK, Iqbal A. Bullying of medical students in Pakistan: a cross-sectional questionnaire survey. *PLoS One*. 2008;3(12):e3889. doi: 10.1371/journal.pone.0003889.
- Omorogiuwa TBE. Sexual Harassment among university students in Nigeria: prevalence, psychosocial factors and prevention. *Bangladesh Educ J*. [Internet]. 2018;17(2):25-33. Available from: https://www.bafed.net/pdf/edecember2018/3_Sexual_Harassment.pdf.
- Monsalve LFD, Arango BCC, Gómez

- AMG, Escobar MCM. Analysis of the prevalence and perception of sexual harassment between university students in Colombia. *Cogent Soc Sci.* [Internet]. 2022;8(1). Available from: <https://doi.org/10.1080/23311886.2022.2073944>.
10. Athanasiades C, Stamovlasis D, Touloupis T, Charalambous H. University students' experiences of sexual harassment: the role of gender and psychological resilience. *Front Psychol.* 2023;14:1202241.
11. Fry DA, Elliott SP. Understanding the linkages between violence against women and violence against children. *Lancet Glob Health.* 2017;5(5):e472–3.
12. Oni HT, Tshitangano TG, Akinsola HA. Sexual harassment and victimization of students: A case study of a higher education institution in South Africa. *Afr Health Sci.* [Internet]. 2019 Mar 1;19(1):1478-85. Available from: [/pmc/articles/PMC6531969/](https://pubmed.ncbi.nlm.nih.gov/31969/)
13. Raj A, Freund KM, McDonald JM, Carr PL. Effects of sexual harassment on advancement of women in academic medicine: a multi-institutional longitudinal study. *EClinicalMedicine.* [Internet]. 2020;20:100298. Available from: <https://doi.org/10.1016/j.eclinm.2020.100298>
14. Guedes A, Bott S, Garcia-Moreno C, Colombini M. Bridging the gaps: a global review of intersections of violence against women and violence against children. *Glob Health Action.* 2016;9: Guedes A, Bott S, Garcia-Moreno C, Colombini M. Bridging the gaps: a global review of intersections of violence against women and violence against children. *Glob Health Action.* 2016;9(1).
15. Aman T, Asif S, Qazi A, Aziz S. Perception of sexual harassment at workplace, knowledge of working women towards workplace harassment act 2010. *Khyber J Med Sci.* 2016;9(2):230-6.
16. Lindquist C, McKay T. Sexual harassment experiences and consequences for women faculty in science, engineering, and medicine. In: RTI Press Policy Brief [Internet]. Research Triangle Park (NC): RTI Press; 2010. 2018 Jun. Available from: <https://doi.org/10.3768/rtipress.2018.pb.0018.1806>.