CHANGING THE CULTURE TO END SEXUAL HARASSMENT

Executive Summary

December 2019

The full Working Group report can be found at: <url to be added upon publication>

Working Group report to the Advisory Committee to the NIH Director (ACD)
Introduction

Sexual harassment is a serious, pervasive problem that harms the well-being and careers of researchers and undermines our society’s investment in science. As the largest public funder of biomedical research, the National Institutes of Health (NIH) is uniquely positioned to transform the culture of science to prevent sexual harassment and mitigate its detrimental impacts. Marked failures of Title VII of the Civil Rights Act of 1964 and Title IX of the Education Act of 1972 are well documented in the National Academies of Sciences, Engineering, and Medicine (NASEM) report, *Sexual Harassment of Women: Climate, Culture, and Consequences in Academic Sciences, Engineering, and Medicine*, and demonstrate the urgent need to develop new partnerships to address this challenging problem. In addition to determining the direction of biomedical research, NIH has the broad influence to set the tone of scientific endeavor and, thus, is in a unique position to lead the solutions. NIH has an obligation to the scientific community to ensure that immediate and long-term changes are made to prevent sexual harassment. As NIH leadership said in their February 2019 statement, “We can do better. We must do better.”

The best path to eliminating sexual harassment is through fostering transparency, accountability, integrity, equity, and justice in the research environment. We must start by eliminating perpetrators but move on to remediating past injustices and systemic failures, improving accountability, and establishing transparent, accountable processes for reporting. This systemic problem will also require long-term change in the culture of the scientific enterprise and a fundamental restructuring of the research environment. Trainees (students, postdoctoral fellows, medical residents, and clinical fellows) and foreign scientists deserve special attention due to power differentials, career-stage vulnerability, and residency considerations.

Improving the culture and climate of research must rest on a foundation of trust and partnership between NIH and individual NIH-funded institutions. NIH holds the ultimate incentives of funding and influence by the way it evaluates and funds programs of research and ensures a safe and inclusive scientific enterprise. Research institutions set the local culture and oversee individual professional behavior. Person-focused efforts addressing the responsibilities of the perpetrator and the consequences to the target are central to addressing the problem of professional misconduct and sexual harassment, the investigation and adjudication of claims, and the restorative justice needed to repair harms. A singular approach to changing culture and climate of research everywhere is infeasible and will not address the fundamental problem. Policies and practices must be developed and implemented at the levels of the individual institutions and be seen as fair by all stakeholders.

The creation of a culture that eliminates sexual harassment demands the concerted efforts of NIH leadership, research institutions, and every individual within the biomedical ecosystem. Sexual harassment is a form of professional misconduct, and includes gender harassment, unwanted sexual attention (verbal or physical sexual advances, which can include assault), and sexual coercion. Sexual harassment may emerge as a single incident, or as an accumulation of many minor transgressions over time. These minor transgressions may appear innocuous to a bystander but are actually very harmful to the target of harassment. Mitigation and elimination of sexual harassment require action at each of three levels: the federal funding agency, the research institution, and individual behavior.
Every researcher, trainee, and staff member is entitled to a safe and inclusive research environment, characterized by diversity of thought and a workforce that reflects the population. Inequities in higher education are pervasive and are based on gender, sexuality, race, ethnicity, immigration status, age, disability, and socioeconomic status. We are recommending solutions to help eliminate these inequalities. NIH, in partnership with NIH-funded institutions, should strive to change the culture to end sexual harassment. Implementation of these recommendations will advance a more vibrant, equitable, and safe research enterprise.

**Key Definitions**

**Research Misconduct:** The Working Group notes that the term “research misconduct” is a term of art used in federal regulation, based on a Federal government-wide adoption of a uniform definition. This is limited to fabrication of data or results, falsification of research, and plagiarism. This is differentiated from the term “professional misconduct” as defined below.

**Professional Misconduct:** The Working Group defined professional misconduct as including a range of actions and behaviors that negatively affect the research environment, the people in the research environment, and science itself. This includes – but is not necessarily limited to – sexual harassment, harassment, inappropriate behaviors, and research misconduct. Employers, professional societies, and/or funding agencies might provide additional expectations of professional behaviors and actions in their codes of conduct. Professional misconduct includes more behaviors than those listed here; however, for simplicity only research misconduct and behaviors that can be related to sexual harassment are included in this report. Furthermore, clear processes already exist for the investigation and adjudication of research misconduct. Therefore, for the purposes of this report, recommendations for addressing professional misconduct are not intended to be duplicative or in conflict with the process for adjudicating research misconduct, but rather to encourage NIH and research institutions to broaden the standards of appropriate, professional behavior.

**Harassment and Inappropriate Behavior:** Sexual harassment is one form of harassment which, in turn, is one of many inappropriate behaviors. The NIH has developed definitions for harassment and inappropriate behavior as part of its new Policy on Preventing and Addressing Harassment and Inappropriate Conduct which collectively represent “any comments or conduct that disparages or demonstrates hostility or aversion towards any person that could reasonably be perceived as disruptive, disrespectful, offensive, or inappropriate in the workplace.” When the Working Group uses the terms “harassment” or “inappropriate behavior”, we refer to this NIH definition.

**Sexual harassment:** While many workplace policies (including that of NIH in its context as an employer and research institution) limit the definition of sexual harassment to the form of harassment that violates Title VII or Title IX, the Working Group strongly supports the NASEM’s expanded definition, moving beyond the narrowly defined legal categories of sexual harassment to encompass gender-discriminatory behaviors which “can result in the same level of negative outcomes”. The NASEM report defined sexual harassment as three broad categories: sexual coercion, which is when favorable treatment is predicated on sexual activity; unwanted sexual attention, such as unwelcome verbal or physical advances, including assault; and gender harassment, which includes crude behavior and sexist hostility. It is important to note, as evidenced in the NASEM report, that this latter category of gender harassment is pervasive and most commonly experienced by women in the sciences.
Sexual Assault: A variety of non-consensual sexual acts, including any form of unwanted sexual contact, sexual coercion, attempted and completed rape.

Psychological Abuse: A form of behavior that arises when a target is exposed to inappropriate behaviors that can result in emotional trauma. Psychological abuse is pervasive, often more common than physical and sexual violence, and is viewed by many targets as the most harmful form of abuse.

Psychological Safety: A characterization of an organization that promotes the safety and well-being of all members by fostering a working environment in which all members feel safe to speak up and express a sense of trust and respect for one another.

Institutional Betrayal: When an institution perpetuates wrongdoing by failing to act or prevent wrongdoing committed within the institution upon an individual or group of individuals dependent on that institution, as in the case of sexual harassment.

Targets and Affected Individuals: Throughout the report, the term “target” refers to an individual who has been subject to harassment, including sexual harassment. A number of other individuals, including but not limited to other trainees and research staff in the same working environment as well as witnesses to the harassment, may be adversely affected by sexual harassment. Therefore, this report considers the ramifications for all parties adversely affected by sexual harassment.

Themes and Recommendations

Theme 1: Increase Transparency and Accountability in Reporting of Professional Misconduct, especially Sexual Harassment

Recommendation 1.1: NIH should create a parallel process to treat professional misconduct, including sexual harassment, as seriously as research misconduct.

- Recommendation 1.1a: NIH should immediately establish a process to report findings of professional misconduct, including sexual harassment, by any key personnel on an active NIH grant within two weeks of the issuance of the findings.
- Recommendation 1.1b: NIH should amend its current process of reporting a change in PI status on an active NIH grant in cases where professional misconduct, including sexual harassment, is any part of the reason for the change.
- Recommendation 1.1c: NIH should require that grantee institutions consult with NIH to determine disposition of grant oversight when there is a change in PI and/or key personnel status that involves professional misconduct, including sexual harassment.
- Recommendation 1.1d: NIH should require that NIH-funded institutions develop or maintain a professional code of conduct as a condition of award for a grant or contract.
- Recommendations for NIH-funded Institutions
  - Put in place clear procedures for reporting and adjudicating professional misconduct, including sexual harassment, that are parallel to the procedures for research misconduct.
  - Establish an office for professional misconduct, in addition to, and in parallel to, the office of research misconduct.
Designate a specific administrator at the institution to communicate with NIH about changes in PI status that are related to professional misconduct, including sexual harassment.

Establish a policy regarding personal relationships between individuals in inherently unequal positions, where one party has the real or perceived ability to influence the career trajectory of the other.

Develop and maintain a professional code of conduct that addresses inappropriate behaviors in addition to harassment or sexual harassment.

**Recommendation 1.2**: NIH should establish a hotline and a web-based form for reporting sexual harassment and inappropriate behavior by any PI or key personnel funded by NIH.

- **Recommendations for NIH-funded Institutions**
  - Establish a hotline and a web-based form for anonymous and non-anonymous reporting of sexual harassment occurring at their institutions.
  - Publicize outcomes of investigations and inform targets and affected individuals of the outcome after an investigation has been concluded, while protecting the identity of the target, if preferred by the target.
  - Provide information to all research staff about the NIH webform and email address for reporting sexual harassment affecting NIH-funded research.

**Recommendation 1.3**: NIH should establish clear and transparent Standard Operating Procedures (SOPs) to respond to reports or findings of professional misconduct, including sexual harassment, or change in PI status in extramurally-funded laboratories.

- **Recommendations for NIH-funded Institutions**
  - Designate an official with knowledge of misconduct investigations to interact with NIH when notified of accusations of a PI and/or key personnel’s inappropriate behavior.
  - Have transparent and accessible SOPs in place to investigate and respond to reports of sexual harassment when notified by NIH and maintain active communication with NIH throughout the process to ensure safe working environments for researchers in NIH-funded laboratories.
  - If not already employed by the institution, hire and retain a confidential university official, who is not a mandatory reporter, and who can provide information and confidential advice to any faculty, staff, or trainees.

**Recommendation 1.4**: NIH should establish mechanisms of accountability for findings of professional misconduct.

**Recommendation 1.5**: NIH should exclude researchers with a confirmed finding of sexual harassment, or other professional misconduct, from participating in NIH study sections or NIH advisory councils/committees for a determined period of time.

**Recommendation 1.6**: NIH should require that each PI and key personnel on an NIH grant attest that they have not been found to have violated their institution’s code of professional conduct, including having a finding of sexual harassment, for a determined period of time.

- **Recommendations for NIH-funded Institutions**
Require all new faculty hires, in their offer letters, to attest that they do not have findings of, or ongoing investigations of, professional misconduct, including sexual harassment, at their past or current institutions.

Require faculty to authorize, in their official offer letter, reference checks regarding any potential past professional misconduct.

Have in place a process to ensure that NIH is notified if there is an investigation or finding of professional misconduct before they transfer a grant to a new institution.

Do not enter into non-disclosure agreements with faculty who have engaged in professional misconduct, including sexual harassment.

**Recommendation 1.7:** All meetings and conferences that receive NIH funding, directly or indirectly, must advertise NIH communications channels.

- **Recommendations for Professional and Scientific Societies**
  - Conference organizers and scientific societies sponsoring events or meetings should have policies in place to reduce risk of sexual harassment or other inappropriate behaviors, including a code of conduct with clearly stated expectations of behavior, systems of reporting and addressing inappropriate behavior, and safe, harassment-free spaces.
  - Meeting organizers are encouraged to include other resources to support targets of harassment, including personnel trained in advocacy and counseling for targets, as well as referrals to legal or health care resources.
  - NIH communication and reporting channels should be widely advertised at conferences, particularly those meetings directly supported by NIH or whose attendees travel expenses and registration are supported by NIH.
  - Conference organizers should conduct conference climate surveys, specifically related to sexual harassment and professional misconduct.

**Recommendation 1.8:** NIH should support research on procedures and policies that model and promote a positive climate that cultivates respect, civility, and safety.

- **Recommendations for NIH-funded Institutions**
  - We recommend that NIH-funded institutions undertake an evidence-based approach when writing and revising institutional policies.

**Theme 2: Establish Mechanisms for Restorative Justice**

**Recommendation 2.1:** NIH should create new incentives and funding opportunities to restore the careers of targets and other affected individuals.

- **Recommendations for NIH-funded Institutions**
  - Create a set of standards while providing resources and support to targets and other affected individuals in order to mitigate the short-term personal and professional harms of gender-based harassment.
    - Targets and other affected individuals should maintain control over how their information is shared within the organization and publicly, to the extent possible.
- Offer resources to cover the personal and professional “debt” to targets of sexual harassment incurred by participation in institutional administrative processes.
  - Provide support to other affected individuals that were inadvertently affected by the suspension of an accused investigator or their funding in the course of an investigation.

**Recommendation 2.2:** NIH should develop mechanisms for bridge funding for targets and affected individuals who lose their salary support due to sexual harassment.

**Recommendation 2.3:** We recommend an immediate NIH mechanism be developed/modified to reintegrate targets and other affected individuals into the research workforce.

- **Recommendations for NIH-funded Institutions**
  - Institutions should demonstrate clear standards for target-centered investigative processes and practices of restorative justice.
  - Investigations should be focused, first and foremost, on being fair and impartial, considering the needs of the target, with sufficient transparency to alert people and institutions considering working with responsible individuals.

**Recommendation 2.4:** NIH should partner with institutions to develop institutional safe-harbors for targets of professional misconduct.

**Recommendation 2.5:** NIH should fund additional research on policies, procedures, trainings, and interventions for restorative justice practices specifically tailored to the biomedical research environment.

**Theme 3: Ensure Safe, Diverse, and Inclusive Research and Training Environments**

**Recommendation 3.1:** NIH should create new mechanisms whereby research awards are given directly to trainees.

**Recommendation 3.2:** All NIH grants should have specific expectations and requirements for maintaining a safe training and research environment including, but not limited to, at the research institution, conferences, other research settings (e.g., field work), and clinical settings.

- **Recommendations for NIH-funded Institutions**
  - Institutions should advise faculty on development of risk mitigation plans, including a section on safety at conferences.
  - NIH-funded institutions should develop a mechanism for removing mentors found to be in violation of the institution’s code of conduct and/or policies on inappropriate behavior or harassment.

**Recommendation 3.3:** NIH should require its grantee institutions to conduct anti-sexual harassment training, in a manner parallel to Responsible Conduct of Research.

- **Recommendations for NIH-funded Institutions**
  - All mentors should participate in mandatory, in-person training sessions that include identifying sexual harassment and what do in the case of sexual assault.
  - Additional training for understanding mentor/mentee relationships should be required, perhaps using National Mentoring Resource Network (NMRN) infrastructure.
Anti-sexual harassment training should be a combination of lectures and case study discussions about sexual harassment, including how to identify and mitigate harassment. It should occur at the beginning of and throughout an individual’s scientific career to allow for maximum career impact.

**Recommendation 3.4:** NIH should fund research on the development of effective interventions tailored to different types of organizations and climates that improve the health and safety of biomedical researchers.

**Theme 4: Create System-wide Change to Ensure Safe, Diverse, and Inclusive Research Environments**

**Recommendation 4.1:** NIH should address funding strategies that contribute to male-dominated power structures, including addressing grant mechanisms that are awarded predominantly to men.

- **Recommendation 4.1a:** NIH should ensure that review actions and funding decisions are free of bias related to gender and work to address disparities.
- **Recommendation 4.1b:** We recommend that NIH develop incentives and rewards for overcoming male-dominated power structures.

**Recommendation 4.2:** NIH should develop mechanisms to incentivize institutions that excel at promoting diversity and inclusion.

- **Recommendation 4.2a:** NIH should incentivize third party recognition of institutional support for diversity and inclusion.
- **Recommendation 4.2b:** NIH should provide formal awards and recognition for institutions that excel in this area.
- **Recommendations for NIH-funded Institutions**
  - Adopt third party assessment and recognition for issues of gender equality.
  - Fairly compensate (e.g., decreased teaching responsibilities, increased pay) any faculty and/or staff who directly work on addressing the needs for a safe, diverse, and inclusive research environment.

**Recommendation 4.3:** NIH should hold institutions accountable to exceed the standards set by their peers and continuously strive to set a higher bar to create safe, diverse, and inclusive scientific workplaces.

**Recommendation 4.4:** We recommend that NIH facilitate and collect data from a wide-scale climate survey that allows every individual funded on an NIH award to confidentially disclose whether they are experiencing an adverse work environment.

**Recommendation 4.5:** NIH, working with research institutions, should foster examination of the system of research training, recognizing that the current apprenticeship system facilitates risk factors for sexual harassment.

**Recommendation 4.6:** NIH should conduct a landscape analysis of the prevalence and antecedents of sexual and gender harassment in order to develop interventions that address goal-specified gaps.
Conclusion

In closing, the Working Group reiterates the need for NIH to use its unique position to set the tone to ensure that immediate and long-term changes are made to prevent sexual harassment. In order to sufficiently change the culture, NIH and the institutions it funds must coalesce around these recommendations and form a robust partnership to fully implement change. The Working Group felt strongly about the development of recommendations, not only for NIH, but also for NIH-funded institutions and scientific and professional societies.

While we recognize that many of these changes will require significant community input, time, and resources, we believe these changes are necessary for ensuring a safe research environment. Additionally, several of these recommendations should be easily implementable as they build on existing NIH and institutional grant and training infrastructure, rather than reinventing it. To increase the likelihood of uptake by NIH-funded institutions, NIH should make public as many resources as possible including, but not limited to, SOPs, flow charts, and trainings.

NIH must be committed to ongoing evaluation of all efforts to change the culture and end sexual harassment over time and provide accountability for all involved parties. A detailed evaluation plan should be developed to ensure that policies and strategies are having the intended effects. Considering that implementation of some recommendations may take significant time and resources, transparency and accountability will be paramount during the implementation of these recommendations to ensure progress is being made. There is not only a moral obligation for ending the culture of sexual harassment in biomedical research – safe and harassment free research environments are also essential for conducting high-quality science.