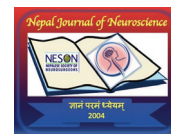


Harassment in Academic Medicine: One Hundred Years of Solitude



Ebtesam Abdulla¹ , Amit Agrawal² , Rafael Cincu³ , Tariq Janjua⁴, Luis Rafael Moscote-Salazar⁵

¹Department of Neurosurgery, Salmaniya Medical Complex, Manama, Bahrain

²Department of Neurosurgery, All India Institute of Medical Sciences, Saket Nagar, Bhopal ⁴⁶²⁰²⁰, Madhya Pradesh (India)

³Department of Neurosurgery, General University Hospital, Valencia, Spain

⁴Department of Critical Care Medicine, Physicians Regional Medical Center, Naples, FL, USA

⁵Colombian Clinical Research Group in Neurocritical Care, Bogota, Colombia

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Dear Editor,

There are dozens of cases of harassment and bullying in academic medicine that are hidden in the most hidden drawers.¹⁻⁴ Harassment in academic medicine is an accepted and widely recognized problem. As a common pattern, the protagonists are always someone with power against people with a lower hierarchy.⁵ Abuse in any of its forms, be it physical, moral, or academic, ends up affecting the student's performance and behavior.⁶ It should be considered an unacceptable and punishable pattern in any academic setting.

As our system is based on reliance, trainees, whether they are medical students, undergraduates, or graduate students, are uniquely dependent on academics for their future financial support, which creates a problematic dynamic. It creates an environment in which harassment is possible.⁷ The National Academies of Sciences, Engineering, and Medicine (NASEM) developed the iceberg analogy to illustrate harassment in these professions.⁸ Sexual assault and coercion are just the

apparent and horrifying top of a much larger problem. People realize the harm they inflict on individuals, the media often covers these incidents, and offenders are occasionally held responsible.^{3,8} In contrast, gender harassment is a vast, generally unnoticed bulk that is still destructive.⁴ NASEM defined gender harassment as verbal and nonverbal acts that indicate anger, objectification, exclusion, or second-class status.⁸⁻¹⁰ It degrades women, exhausts and demoralizes them, and saps them of their drive, causing them to finally leave the workplace. It is quite typical for women to feel as if they do not belong due to little indignities, such as being omitted from an email or not being invited to work on a project although they are obviously the expert.⁹ Other things that make women feel like they do not belong include making obscene gestures, being passed over for promotions, or having equipment broken, as well as a lack of sponsorship and mentorship that end up working in an isolated work environment.¹⁰ Gender-based harassment had a significant impact that cannot be ignored.

The psychological effect suffered by the harassed person has severe repercussions on their performance, making them less able to perform.¹¹ Two aspects that are profoundly affected are our self-esteem and self-efficacy. The prevention of harassment and bullying must be implemented from the early stages of medical school.¹ The formation of an integral physician must include a compassionate and tolerant human being. The search for excellence should not go against the well-being of all the members of the academic teams. It would be interesting to explore, how the lack of care for this phenomenon is how relevant at the international level, and how the lack of reporting and the complicity of some institutions to protect their prestige perpetuate this problem.

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Address for correspondence:

Ebtesam Abdulla

Department of Neurosurgery, Salmaniya Medical Complex, Manama, Bahrain,

Phone number: +97333097179

E-mail: Dr.Ebtesam@hotmail.com

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