

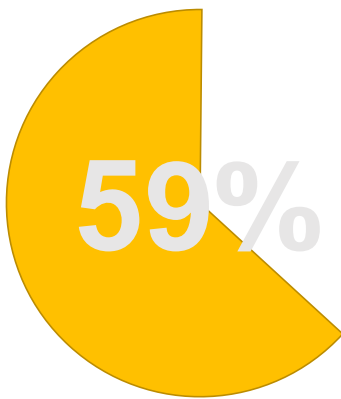
Sexual abuse of doctors by doctors

A critical moments analysis

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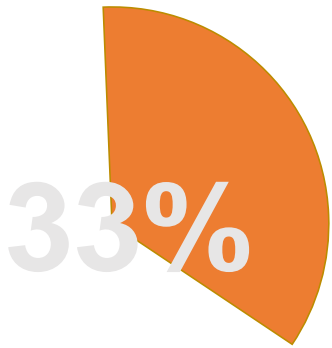


Dr Louise Stone
Professor Kirsty Douglas
Associate Professor Christine Phillips
Australian National University Medical School



of medical trainees
experience
harassment or
discrimination
during training

Fnais et al 2014

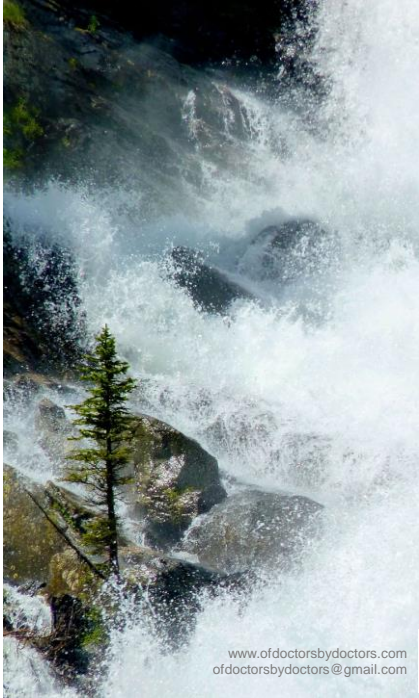


of medical trainees
experience
sexual
harassment
during training

Fnais et al 2014



Little is known
about the experience of
qualified doctors



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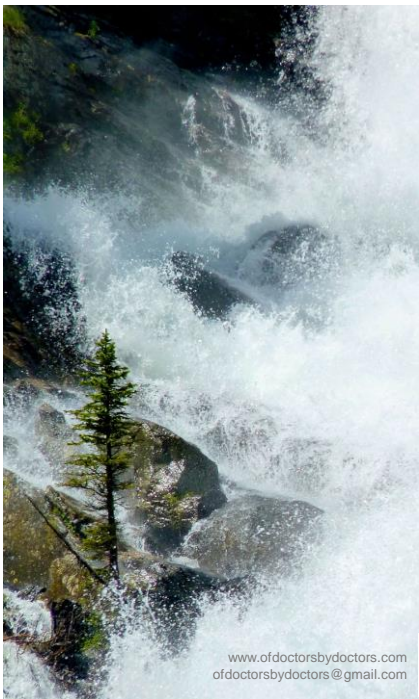
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Dr Bryan Ashman (ANU Medical School, Australian National University)

Ms Megan Cahill (CEO, Rural Workforce Agency Victoria)

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Dr Caroline Tan speaks out about sexism in Australian hospitals

March 12, 2015

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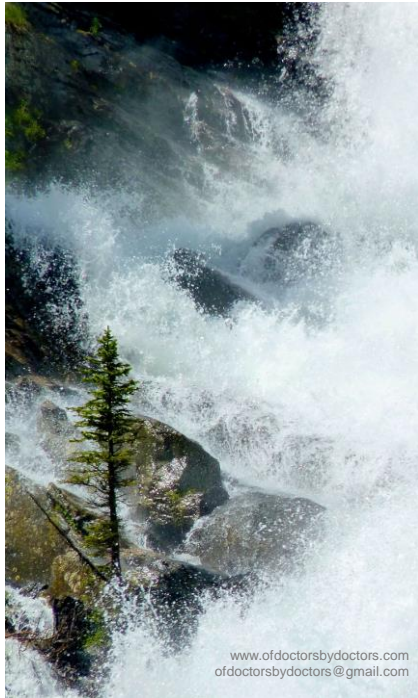
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Surgeon Caroline Tan has spoken out over sexual harassment in hospitals. Photo: Eddie Jim

The surgeon who Dr Gabrielle McMullin said was professionally punished for reporting a sexual assault has spoken out about the treatment of female doctors in Australia's hospitals.



The Sydney Morning Herald NSW

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AUGUST 26 2016 SAVE PRINT LICENSE ARTICLE

Oncologist John Kearsley jailed after drugging and indecently assaulting doctor

Emma Partridge

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The young female medical trainee went to the home of a senior oncologist hoping to talk about a mentoring program and her future as a doctor.

But what happened to her that night now has her questioning whether she wants to have anything to do with the medical profession.

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Methodology

Six participants recruited via mainstream and social media.

Initial telephone interview

1-2 in depth interviews 60-180 minutes

Transcripts de-identified

Stephanie, Claire and Emily won their cases in a civil or criminal court

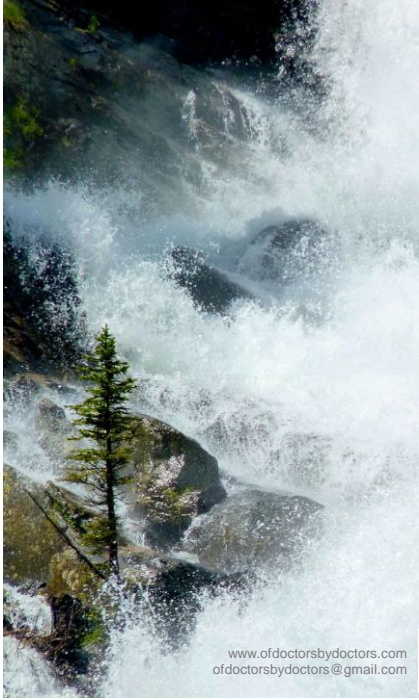
Data consisted of interview transcripts, victim impact statements, legal documents and media reports.

Data was analysed using narrative methodology and a critical theory framework.

We synthesised our analysis into a series of sequential critical moments in the story of abuse, each of which posed its own dilemmas for doctors.

Further detail can be found at www.ofdoctorsbydoctors.com





Prelude

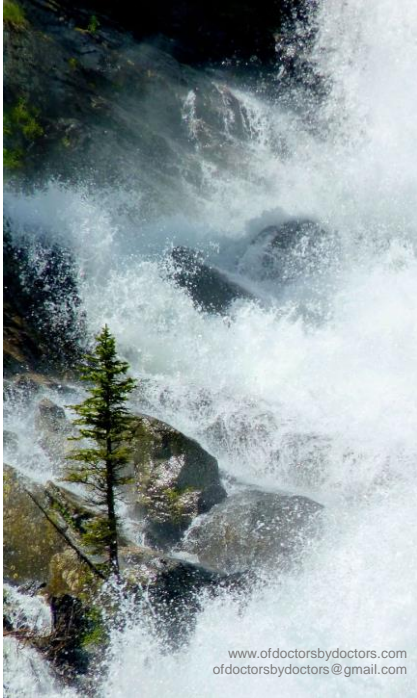
“Maybe I shouldn’t have been as open and friendly. I don’t know; maybe I should be more professional and not smile as much.”
– Helena

“Females and medicine are walking this tightrope between being strong, making decisions, getting on with it and solving problems. And being a “good girl”, being approachable and nice to the nursing staff.” – Helena



Prelude

Why did this happen to me?

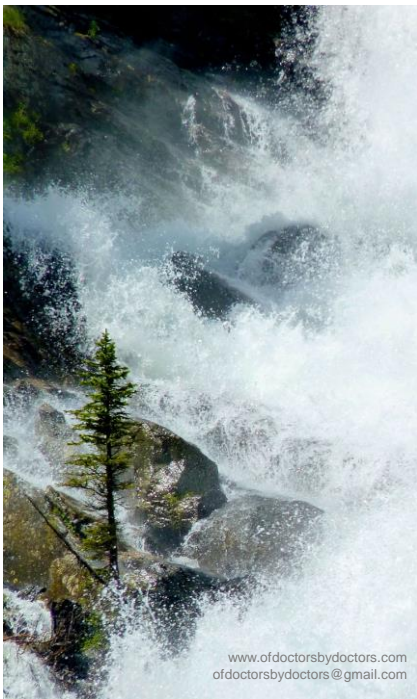


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Assault

"I just thought I can't live like this anymore. I can't keep this a secret anymore. I can't... Me telling him to stop is just not working." – Emily



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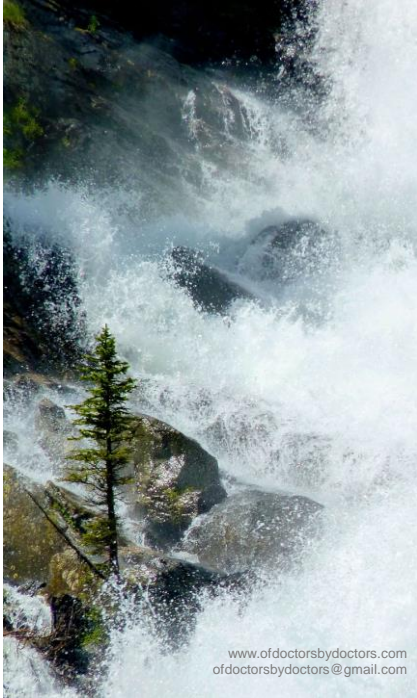


Assault

Is this actually assault?

Do I accept responsibility for the abuse and feel guilt and shame?

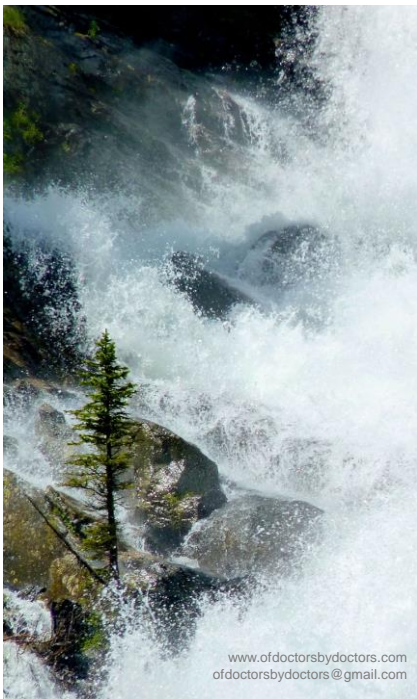
Or do I identify as a victim and feel rage, fear and helplessness?



Limbo

“Does anybody make a complaint and come out on top?” – Emily

“There is an obvious imbalance of power and I couldn’t help but feel small [but] even if he was not found guilty, it might prevent him from hurting other women.” – Stephanie

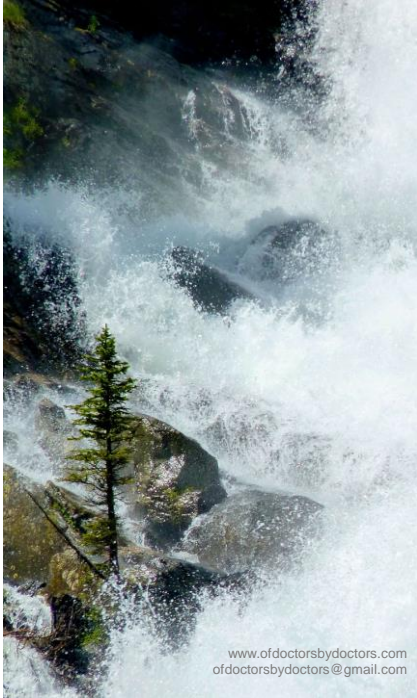


Limbo

Do I report?

Who do I report to?

Will I be strong enough to see this through no matter the outcome, or should I just “suck it up and move on”?



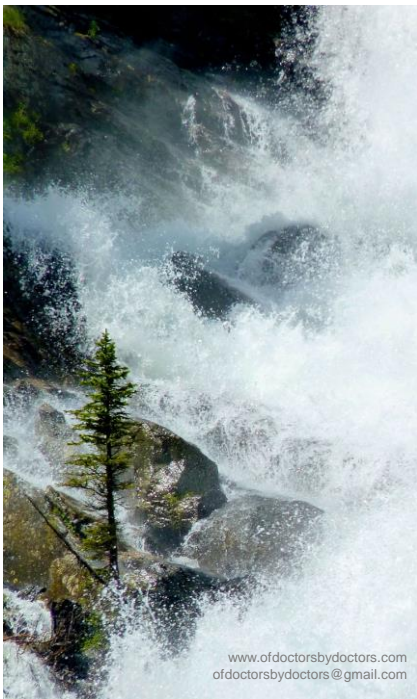
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Exposure

“The events through which I have suffered since I made my complaint have been worse than the harassment itself.” – Emily

*“Everyone has a reputation. I’m notorious.”
– Claire*



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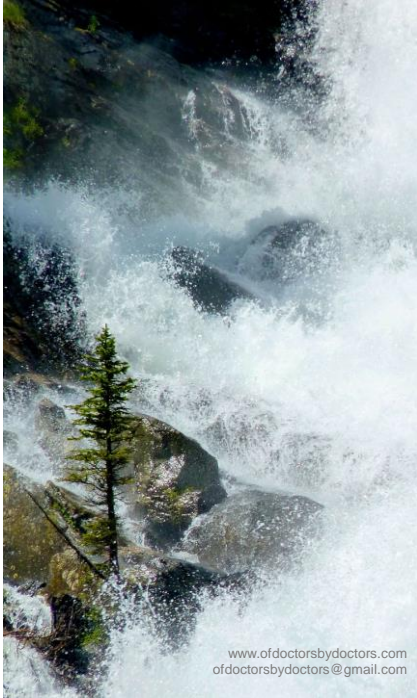
Exposure

How do I cope with this sense of betrayal?

Are the critics correct; am I to blame?

How do I keep working when everyone is talking about me?

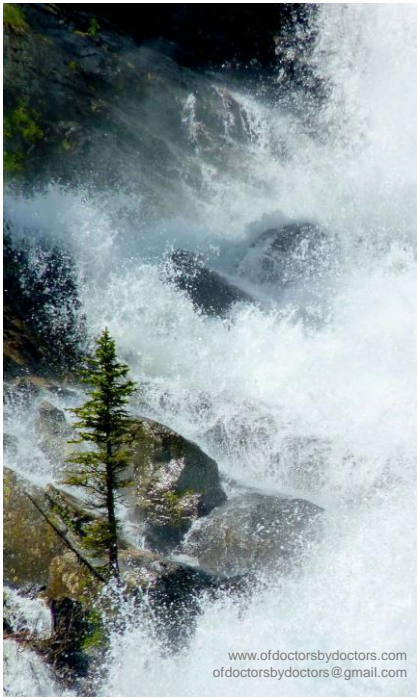
Do I respond and if so, how?



Aftermath

“My world is broken and will never be the same” – Stephanie

“It’s a Pyrrhic victory.” – Emily



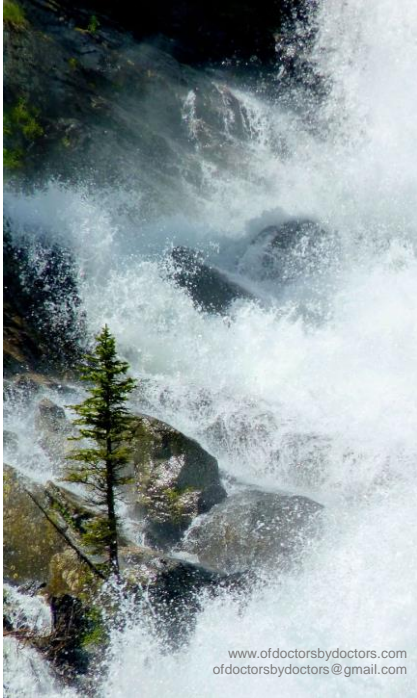
Aftermath

Who am I now as a doctor and as a person?

How have my values and world-view changed?

What does recovery look like, and how do I get there?

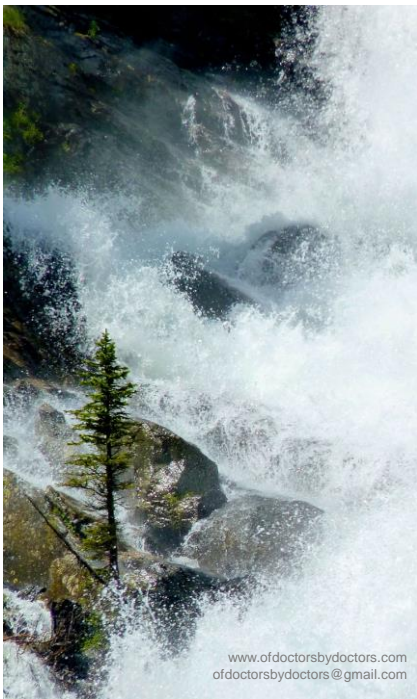
How can I change things for others?



Take-home messages

Personal vulnerabilities and organisational culture modify risk.

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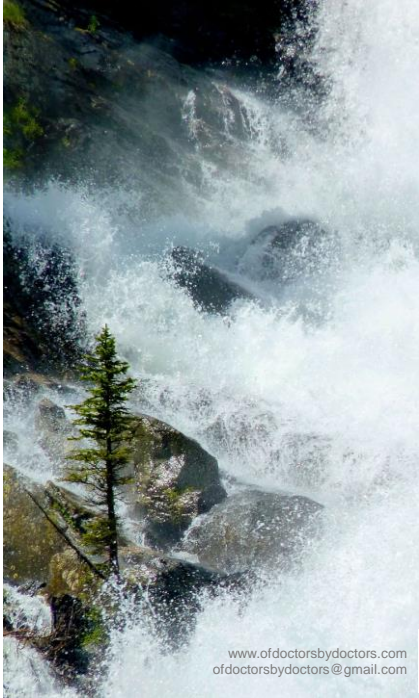


Take-home messages

Trainees are vulnerable in a hierarchical culture.

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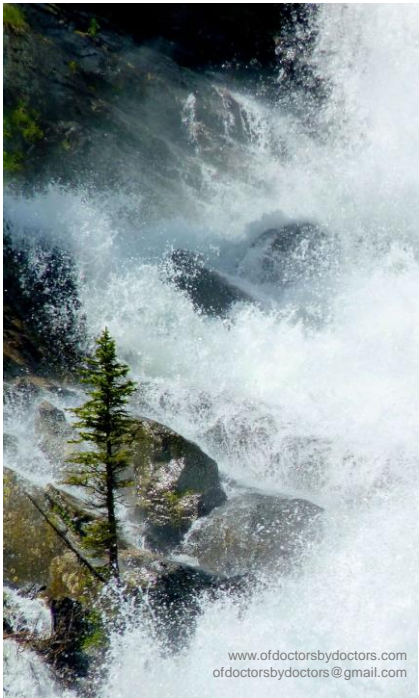




Take-home messages

Recognising sexual abuse can be difficult.

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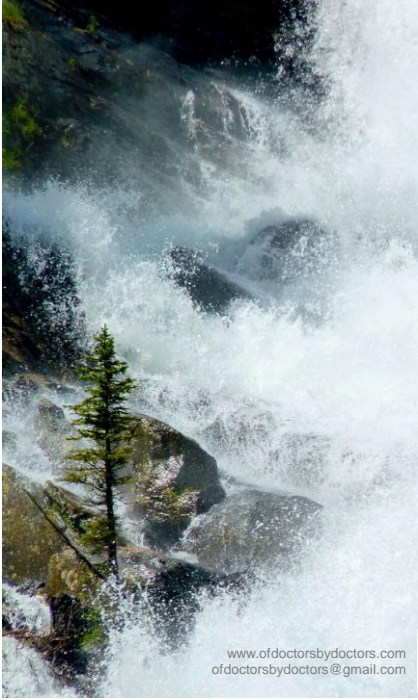


Take-home messages

It can be easier to accept responsibility than to identify as a victim.

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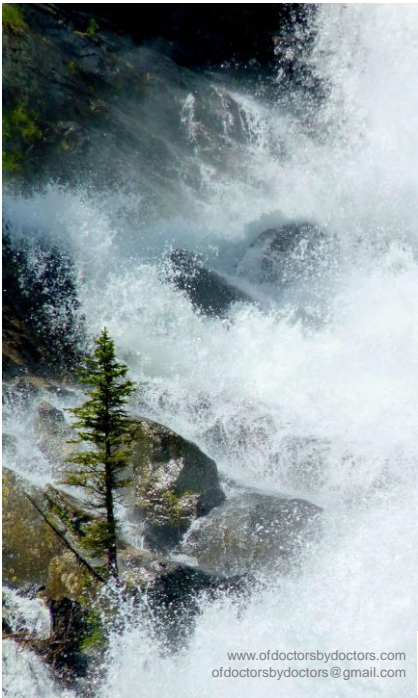




Take-home messages

Prolonged silencing is traumatic.

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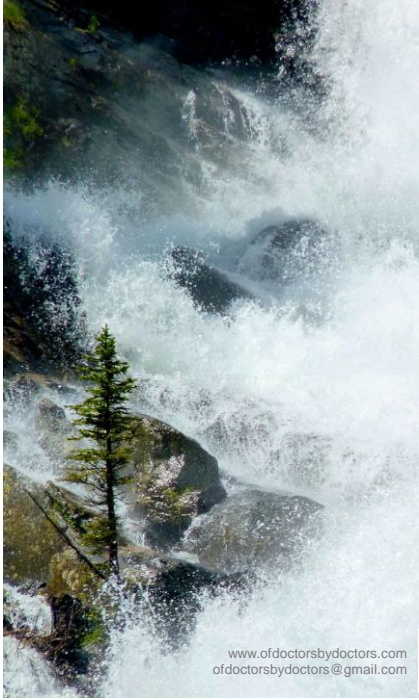


Take-home messages

Legal and organisational systems are opaque.

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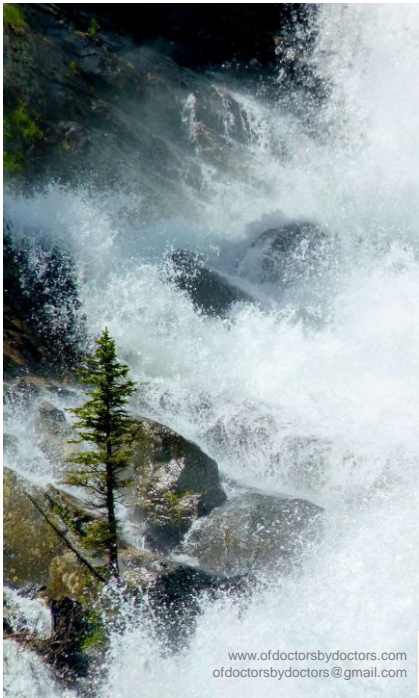




Take-home messages

Senior women do not necessarily protect their junior colleagues.

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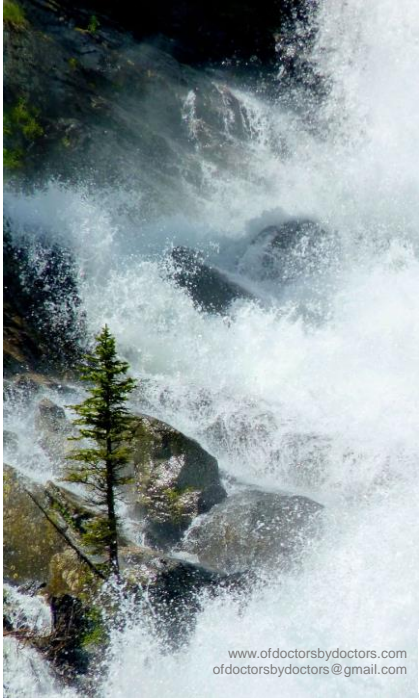


Take-home messages

Public exposure can be worse than assault.

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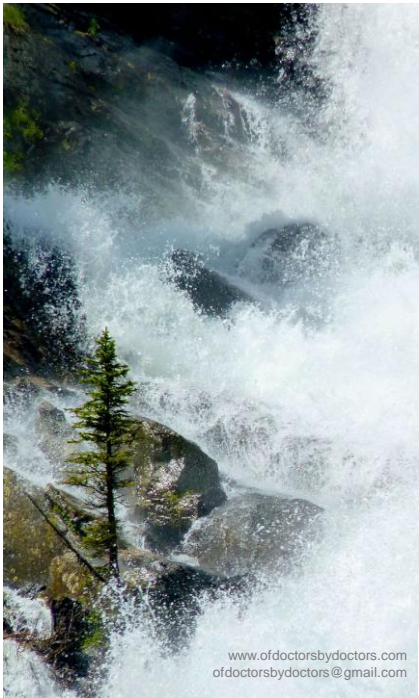




Take-home messages

Justice is elusive.

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