



**BOUNDARY CROSSING
BOUNDARY VIOLATION
SETTING BOUNDARIES**

Information about
SEXUAL HARASSMENT AND DISCRIMINATION
in the Context of Medical and Nursing Care

POSSIBILITIES FOR ACTION
at the Charité - Universitätsmedizin Berlin

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Imprint

Publisher	Charité Women and Equal Opportunity Office
Editorial Staff	Dr. Christine Kurmeyer, Sabine Jenner
Design	Christine Voigts, Zentrale Mediendiensteleistungen der Charité
Photography	Wiebke Peitz, Communications Department Charité

Foreword

The subject of sexual harassment currently requires increased sensitivity at all levels in the field of institutionalized medicine and nursing care.

Crossing boundaries, in the physical as well as the psychological realm, is necessary in order to facilitate treatment in the first place. Patients have to reveal aspects of their private lives to make themselves accessible to therapy; staff members must sometimes discuss the most intimate matters of those receiving care in order to comprehensively arrange and carry out treatment. In these "border regions" of human interaction, it is especially important to maintain a respectful and trustworthy demeanor to avoid causing "boundary violations."

To help foster this sensitivity, the Charité Medical University Berlin is encouraging all students and staff to engage with this subject matter in a conscious manner and is also supporting the scholarly assessment of possible areas of conflict.

A significant aspect of this effort is to ensure that the personal rights of everyone affiliated with the Charité are recognized and respected. Sexual harassment or discrimination injures the dignity of the individuals affected by it.

The Charité is attentive to sexual harassment or discrimination at every level and in all directions within its internal hierarchy, as well as toward patients, their relatives and companions, or visitors. And violations will be resolutely sanctioned.

Sexual Harassment is not a Taboo Topic at the Charité!

Please do not hesitate to make use of the corresponding offers for counseling.

All boundary violations exhibit a structural and societal problem that constantly requires initiative to combat it. This brochure and its guidelines for taking action provide an initial glimpse into the far-reaching dimensions of the subject, along with offers of concrete support for dealing with actual situations.



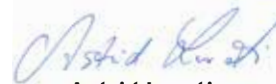
Prof. Dr. Karl Max Einhäupl
Chairman of the Board



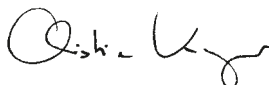
Prof. Dr. Axel R. Pries
Dean



Prof. Dr. Ulrich Frei
Medical Director



Astrid Lurati
Clinic Director



Dr. Christine Kurmeyer
Women and Equal Opportunity Officer

1. Definition

The spectrum of possible boundary violations stretches from verbal sexual harassment, to physical assault, all the way to rape. The effects of this misconduct are not only damaging for the affected individuals; they also make everyday cooperation and collaboration within the work environment of any of the medical and nursing professions difficult, if not unbearable. In addition to this, the motivations of the offenders are often unclear. For those affected, the harassment most often leaves behind a feeling of discomfort and confusion, as well as that of shame or injury.

The first step in coping with a boundary violation is to recognize that a violation has in fact occurred, and that it is legitimate to defend oneself against it.

In what follows are several examples of sexual harassment, which do not claim to be exhaustive.

Definition of Terms

According to the General Equal Treatment Act (Allgemeines Gleichbehandlungsgesetz), sexual harassment can be identified by the following characteristics:

§ 3 subsection 4:

“(4) Sexual harassment is a form of discrimination (...) when unwanted conduct of a sexual nature, including unwanted sexual acts and requests to carry out sexual acts, physical contact of a sexual nature, comments of a sexual nature, as well as the unwanted showing or public exhibition of pornographic images, takes place with the purpose or effect of violating the dignity of the person concerned, in particular where it creates an intimidating, hostile, degrading, humiliating, or offensive environment.”

(from the General Equal Treatment Act)

Other examples of unilateral sexual boundary violations could be:

- Sexist statements through words or gestures
- Unwanted bodily contact, for example, patting or stroking
- Personally offensive remarks, for example, regarding one's appearance or private life
- Obscene jokes
- Displaying, sending, or leaving behind pornographic images
- Displaying or mailing pornographic internet sites
- Exhibitionist behavior
- Sexual coercion and physical threats (punishable offense § 177)

(Charité Guidelines for the Advancement of Women § 25)

Facts and Figures

Sexual harassment in the workplace or at the university **can affect men as well as women**. However, women are predominantly confronted with this problem. A representative survey from **2004 of 10,000 women from the ages of 16 to 85**, commissioned by the Ministry for Families, Senior Citizens, Women, and Youth regarding living conditions, safety, and women's health, exhibited the following figures:

- **58.2%** of all the women questioned experienced sexual harassment at least once in lives
- **22.5%** of them experienced this at work, at school, or during an internship

(cf. Schroette/Mueller 2004)

Another study addressing **sexual harassment in professional life from 2008** in Germany and French-speaking Switzerland demonstrated the following gender discrepancies:

- **28%** of the women surveyed
- **10%** of the men surveyed reported having experienced sexual harassment in the workplace.

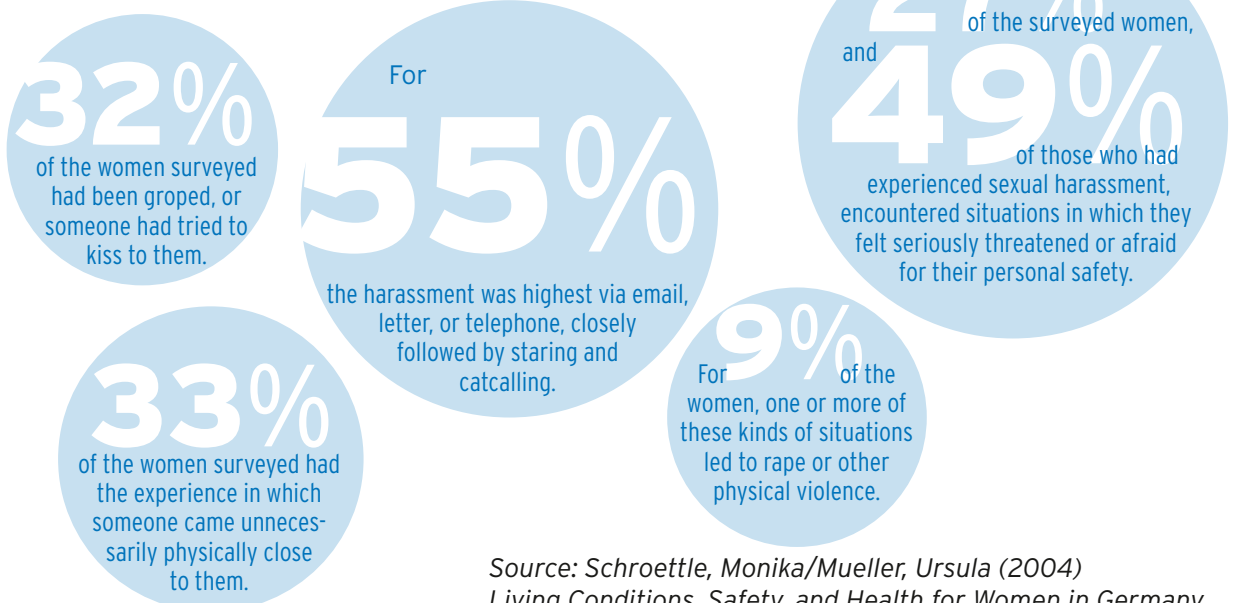
(cf. Diehl 2013)

In a study among students at the Ruhr University in Bochum,

- **54.7%** of those surveyed had experienced sexual harassment
- **9.8%** of those surveyed had felt threatened by sexual harassment

(cf. Feltes 2012)

Sexual Harassment at a Glance



Source: Schroettle, Monika/Mueller, Ursula (2004) *Living Conditions, Safety, and Health for Women in Germany*

2. Sexual Harassment in the Work Environment of University Medicine

Workplace

Sexual harassment and discrimination can happen at all levels and in all directions within the hierarchy.

In particular, the exploitation of a dependency relationship at the workplace, during studies, or further academic qualifications must be rejected and prosecuted as misconduct in cases of sexual assault.

Conditions that facilitate sexual harassment:

- The affected persons are positioned beneath the offender within a hierarchy, e.g. in an internship, course of study, or other situations of dependency
- Short period of employment
- Fix-term employment situation
- Unsecured residency status and the resulting grey-area in terms of employment law

(cf. Hugo 2007)

Studies

The results of studies on the incidence of sexual harassment in the context of higher education vary between **10% - 80%**. The information provided by students should always be understood in the context country and culture. For example, the figures in the Netherlands are significantly lower than in the United States.

(cf. Hilbert et al 2012).

An online questionnaire among students at the University of Göttingen in 2012 came to the following conclusion:

*"In almost every field, female students felt more frequently strained than their male colleagues: for example, **68% of the women, as opposed to 45% of the men** in cases of verbally inappropriate behavior. It is also worth noting that only women felt burdened by sexual harassment (39%)."*

(Hilbert et al, 2012: GMS Z Med Ausbild 2012; 29(4):Doc 55)

<https://www.egms.de/static/en/journals/zma/2012-29/zma000825.shtml>

Treatment Setting

Sexual harassment from patients or their relatives

According to a study from the Research Institute for Criminology in Niedersachsen, **18 % of the female nursing staff** in outpatient nursing care reported instances of sexual harassment.

(cf. Ärztezeitung Online 2013)

Even if more women than men are employed in the nursing professions, sexual harassment can affect the male staff as well.

Likewise, those within all other public health professions, including doctors, as well as students, can be affected by boundary violations from patients or their relatives.

The professional necessity of crossing certain intimate physical boundaries can often be misunderstood by both male and female patients. In reaction to this, the boundaries of the professional staff may be violated: a supposedly 'racy comment' or 'fondling' of inappropriate parts of the body.

Even experienced medical and nursing personnel can find it difficult to spontaneously come up with the appropriate response or gesture to establish clear boundaries.

Lewdness often occurs within a grey area and is also not equally offensive for everyone concerned. The same comment can be taken as both a compliment or an offence. One person may feel harassed by the innuendos/comments, but another does not.

Especially young professionals, interns, and students are often unsure how to react in ambiguous situations. The women and men that are harassed - in most cases, however, they are women - are often ashamed and even have the feeling that they are partly to blame, or that they are prudish. Sexual harassment should not be tolerated or downplayed by those affected.

This is where experienced staff and supervisors are needed for their support. They need to make it clear that comments and behavior of a sexual nature, from whomever, should not be tolerated by anyone. It is also important to convey to the employee concerned that he or she is neither prudish nor to blame.

(cf. Ärztezeitung Online 2013)

Sexual boundary violations by health professionals and doctors

How high the number of sexual assaults in hospitals is, can be difficult to assess and must be done carefully. Serious cases of abuse do not happen frequently; however, there is certainly much more contact that occurs within a grey area and below the threshold of punishability.

The spectrum of sexual boundary violations by professional staff has specific characteristics:

- Inappropriate touching
- Touching for too long
- Veiled or open sexualization of relations
- The use of sexually suggestive language, possibly in the form of telling sex jokes
- along with derogatory remarks concerning the attractiveness of the patient
- Touching regions of the body outside the scope of a regular physical examination
- Exchanging of caresses
- Romantic relationships during or after treatment
- Sexual contact under the pretense of treatment or therapy
- In extreme cases: sexual assault of defenseless, unconscious, or intentionally anesthetized patients

Impacts

As Chantal Hugo demonstrated at the **“Poverty and Health”** conference in Berlin in 2007, sexual harassment and discrimination create an intimidating, stressful, and degrading working, learning, teaching, and research environment because:

Boundary violations

- absorb energy
- have an impact on performance and health of those affected
- individuals undergoing training tend to defend themselves less often and are often insecure. They are afraid to embarrass themselves or to be perceived as “prudish.” Paradoxically, the victims often feel as if they are the “troublemakers.”

The primary reactions of affected persons are often:

- insecurity, fear, and shame
- inward detachment from the job
- depression
- psychosomatic ailments and symptoms

Secondary work-related consequences take the form of:

- a decrease in motivation to work and learn
- increased sick leave
- more limited career opportunities
- (involuntary) change of workplace

3. Sexual Abuse of Minors

Child abuse, neglect, or sexual abuse can cause severe damage in the life of a child or juvenile, sometimes in ways that are life-threatening. It is important to recognize instances of this in order to prevent further abuse.

No one should be unfairly accused of wrongdoing, yet no afflicted or endangered child should be overlooked. In order to act in a precise and appropriate manner, the different professional groups at the Charité Medical University, Berlin must work closely together. These include nursing staff, social workers, doctors of various specialties (pediatric and adolescent medicine, obstetrics, pediatric radiology, pediatric neurology, pediatric surgery, etc.), and child and adolescent psychiatry and psychology. Only by working together can viable solutions be developed to protect children and assist parents.

Since 2007, the Child Protection Group at the Charité has taken on this task:

<https://kinderschutz.charite.de/>

“Characteristics of abused and neglected children

In the literature on child abuse, one symptom, among many others, is typically referenced for abused children: such children exhibit a ‘frozen watchfulness.’ They sit quietly in place and observe their surroundings out of the corner of their eye, so to speak, without moving. They move only when they do not feel like they are being observed.

Other typical symptoms of child abuse include emotional disorders (persistent sadness, anxiety, mood swings, and lack of confidence) and difficulties relating socially. The children are either conspicuously quiet and withdrawn, or especially active, agitated, and difficult (aggression, lack of acknowledgment of the boundaries of others). In assessments of their development, there is often a tendency towards a deficit in speech and motor faculties.

Sometimes children send cryptic signals, such as “I like it here” or “I like to go to the hospital,” which can indicate that the situation at home is difficult to endure, without them having to say it directly.

Conspicuous Behavior of Children

The suspicion of sexual abuse often arises from a conspicuous change in behavior on the part of the child.

The child may exhibit inappropriate, sexualized behavior or knowledge about sexuality that is inappropriate for one's age, which is expressed in games or in drawings. As a consequence of an abusive situation, sudden changes in behavior may occur for no apparent reason.

Children may avoid being alone with a particular person or exhibit a slump in school performance, which is frequently associated with social withdrawal (an internalizing behavior), or disproportionate aggression (an externalizing behavior)."

(Techniker Krankenkasse, NRW 2014)

https://www.gewalt-gegen-kinder-mv.de/index2.php?option=com_content&task=view&id=24&pop=1&page=0&Itemid=41

In these special cases of sexual abuse or molestation, particular measures are necessary. The following schematic is intended to help all parties involved receive as much security as possible in dealing with suspected cases of boundary crossing or abuse of minors, as well as to combat them:

The **mere suspicion** of a crime against the sexual autonomy of minor at the Charité should be immediately reported to the Charité's Child Protection Group. This is followed by a plausibility assessment. **This means:** No question-

ing of either victims or perpetrators! Only a plausibility assessment and a record of the incident, as well as a rough assessment the circumstances described (vague, reasonable, or proven suspicion).

In cases of flagrant misuse or fraud (for example, the suspected employee was not even on duty), no criminal charges will ensue.

In cases of **vague suspicion**, depending on the severity of the allegations or circumstantial evidence, the following actions must be carried out:

- anonymous advising with an institutional counselling service
- anonymous advising with the Child Protection Group
- addressing questionable behavior within the team
- review of or continued training with the Charité's Code of Conduct

In the case of a **well-founded or proven suspicion**, the formation of a crisis team must be initiated immediately. This includes:

- the Medical and Nursing Central Administration
- the Nursing Service Administration and the medical administration of that station
- the Child Protection Group, the Legal Department
- the Human Resources Department, external consultants

This crisis team, in accordance with the executive board of the Charité, will come to the decision whether to involve law enforcement authorities.

The following actions will be immediately and simultaneously undertaken

Documentation

Those in charge of documentation put together all the information regarding incidents and interventions and make it available to all parties involved.

Support for the putative victim (or affiliate or relative of the victim)

Counselling services, placement in specialized institutions, advising on pressing criminal charges, and if necessary, documenting and preserving evidence.

Support for the putative perpetrator

Arranging special and general counseling services, recommending legal advice, establishing ongoing contact with the staff council, for example.

Consequences of sexualized violence for minors

“For most girls and boys, sexual abuse is experienced as an extreme event that cannot be put behind them. It is bound up with feelings of helplessness and fear. Memories of the abuse may flood the victims uncontrollably in the form of ‘memory flashes’ or nightmares. They often suffer from severe mood swings and may become fearful, sad, angry, or ashamed without any clear explanation.

*Roughly **40%** of sexually abused children do not initially exhibit any abnormalities in behavior. Others will express their experiences of violence through changes in behavior. Children of pre-school age will often play out their experiences of violence; some will avoid situations that evoke memories of abusive situations. Many children affected by abuse suddenly start to appear withdrawn in everyday situations and suffer from sleep disturbances, concentration problems, excessive alertness, panic reactions, and outbursts of rage, whose intensity is disproportionate to the trivial things that triggered them.*

Not all children that have been sexually abused will suffer from life-long repercussions. Once a child is believed to have suffered, he or she will be protected and will receive help to overcome the violent experience, which greatly increases the chances that the child will be able to work through the traumatic experience.

All of the peculiarities described above can be indications of sexual abuse; however, they may also have other causes. Behavioral abnormalities in children are always a cry for help, and their underlying causes should be clarified with professional help.”

(Police Advisory on the Internet)

<http://www.polizei-beratung.de/opferinformationen/sexueller-missbrauch-von-kindern.html#sthash.T1k1pkwH.dpuf>

Further information can be found on the website of the Charité Child Protection Group.

<https://kinderschutz.charite.de/>

4. Countermeasures

Prevention

Of course, sexual harassment or discrimination should never occur in the first place! It is therefore essential to adopt **preventative measures** and **put them into practice in every institutional setting** as much as possible. Through targeted public outreach work, individuals who feel sexually discriminated against and harassed will be educated about their right to report it and lodge a complaint. Protection against sexual harassment in the workplace also requires a preventative approach to create a culture of work, learning, and research that is free of harassment and discrimination. Through sensitivity and trustful cooperation, boundary-violating behavior can be recognized and interfered with.

Courses of Action include:

- All (new) employees and students will be informed of the relevant procedural instructions at the Charité for handling sexual harassment and discrimination, as well as personal injury
- Supervisors will become sensitized to the issue in educational seminars and training courses
- Inclusion of the topic within management committees and team meetings
- Further training on this topic will be offered in internship, advanced training, and continuing education programs at the Charité Health Academy
- Architectural and structural measures (e.g. lighting)
- Escort services, or increased attentiveness to safety from an informed security staff, especially at night
- Brochures/flyers (e.g. regarding prevention, intervention, general information about the issue)
- External advising services
- Parking lots for women
- Posters (in buildings, in bathrooms)
- Guidelines and handbooks for action
- Central information collection
- Development of a Workplace policy
- Awareness-raising public outreach campaigns (articles, theater performances, lectures, exhibitions, newsletters)
- Further research on the subject
- Self-defense courses

<https://bukof.de/online-handreichung-sdg/>

Strategies and Possibilities for Action in Actual Situations

Sometimes it is possible to respond directly and immediately to sexual harassment. This depends on the kind of relationship between the individuals involved and how offensively or subtly the offences transpire.

The following list of steps for taking action require courage and self-confidence, but have proven to be especially effective in dealing with sexual harassment. They are intended to encourage individuals to defend themselves, but no one should be expected to use them in concrete situations if he or she does not feel comfortable doing so. Because these situations are not the victims' fault.

If one knows in advance how to react, this increases the chances that one will act appropriately in acute situations.

So here is a schematic procedure for handling boundary violations:

Take your feelings seriously

It can often be difficult to recognize that what you have experienced is sexual harassment. That's why it is important to take your own feelings seriously and to make clear that every individual has the right not to be harassed in the workplace. It is often difficult for those affected to overcome the embarrassment from the situation that frequently ensues, and then to act.

Vigorously reject the harassment

The best response is to immediately and vigorously reject the first incident of harassment, e.g. with a loud confrontation. This way the situation cannot be taken to be a private or intimate matter. Ignoring or avoiding the harasser is much less effective.

Be proactive and go on the offensive

A proactive and assertive approach at the first instance of harassment is clearly advantageous.

Some effective possibilities for initial resistance are:

- confronting the harasser and insist that the harassment will not be tolerated
- using the threat of a complaint or making an actual complaint
- announcing that others will be informed about the offence or that the harassing person will be sued
- direct physical resistance

Responding in writing

Responding in writing directly to one's superiors is a useful when verbal rejections are ignored by the harassing person. In a letter, the behavior of the offender can be rejected in a concrete and detailed fashion-including information concerning the date, location, and progression of events. In addition, the consequences of the incident should be described, in the event that the offending person does not cease the behavior. A copy of the letter should be prepared. The letter should either be handed over in the presence of a third party or sent in the mail with a certified registration number. It is also possible to send it via email, with a copy (in the Cc: or Bcc: field) sent to a trusted third party.

Confide in others

Discussions with trusted individuals, including colleagues, can bring relief. It often turns out that the harasser has already been seen doing similar things on other occasions. A community-oriented approach can be very effective.

Seek out witnesses

It is a good idea to directly seek out witnesses who witnessed the incident of harassment.

Gathering of evidence

Collecting evidence, such as letters, emails, images, saved messages on an answering machine, text messages on a cell phone, etc. can reinforce the plausibility of your claims and be used as important evidence if you aim to take legal action against the offending person.

Keep a written record of the progression of events

A written record of the progression of events should be kept, e.g. who spoke with whom and when? What happened and at what time?

Official complaint

Documentation of the offence, accompanied by a sworn statement, can be filed with an attorney, and later used to make an official complaint.

The Women and Equal Opportunities Officer/ Staff Council

A confidential discussion with the staff council or the Women and Equal Opportunities Officer should happen at the latest when incidents of harassment take place repeatedly, and/or when the perpetrator of the harassment does not stop the harassment after being told to do so verbally or in writing. These contacts are also available in advance for those concerned, if one is, for example, not sure how to assess an unpleasant situation in this context.

(Violence against women e.V. on the Internet)

<http://www.gewaltgegenfrauen.de/beratung-und-hilfe/sexuelle-belaestigung-am-arbeitsplatz.html>

There are also good examples for how to handle a boundary-violating situation caused by patients in a treatment setting:

"The BGW (the Professional Organization for Public Health Services and Social Welfare) offers helpful information for affected individuals and recommends reacting verbally in three steps:

1. Describe the situation, such as:

"You're touching me a lot." If this does not stop the behavior, then

2. Explain the effect that it has on you:

"This makes me uncomfortable." When this does not put a stop to the situation, then

3. Demand that the patient changes his/her behavior:

"I do not want you to touch me."

Do not allow yourself to become involved in a discussion if the harasser tries to justify or explain him or herself, instead just repeat steps 2 and 3."

(Occupational Safety Portal on the Internet 2013)

http://www.arbeitsschutz-portal.de/beitrag/asp_news/2161/sexuelle-belaestigung-in-pflegeberufen.html

additionally to be found here:

http://www.aerztezeitung.de/politik_gesellschaft/pflege/article/830877/sexuelle-belaestigung-pflegekraefte-uebergreifen-schuetzen.html



- Any further discussion or attempts to justify one's behavior are inappropriate
- One's superiors or the senior physician should be immediately notified.
- If the offences continue, it should be considered whether the patient can be discharged early.
- Harassing relatives may be banned from the premises.

(cf. Swiss Professional Association of Nursing Professionals 2009)

Testimony

It is certainly a relief not to be the object of sexual harassment. However, **what should be done** when blatant boundary violations are witnessed? Such situations are always delicate! To actively intervene calls for a substantial degree of **moral courage and bravery**. And especially among colleagues, it can often be difficult to broach the issue of misconduct.

Nevertheless, it is especially important to be attentive to rule violations and to find ways not to silently condone the rule-breaking.

"How colleagues can help

- *Show openness, sincerity, compassion, and commitment!*
- *Offer your assistance whenever there are any indications that a man or a woman is being sexually harassed, even if the person concerned does not directly turn to you in the situation!*
- *Support the colleague affected by sexual harassment so that he or she will take action to defend him or herself!*
- *Make your colleague feel that he or she is not alone!*
- *Seek out allies!*
- *Help your colleague by addressing the harassing person directly! (For example, saying such things as: "Stop that!" or "Can't you see that he/she doesn't want that?")*
- *Don't laugh when colleagues make fun of a man or woman!*
- *Speak openly about the topic of discrimination among colleagues, but be prepared that you'll be addressing a taboo topic. Possible reactions might be to trivialize or to ridicule what you say, for example.*
- *Suggest to the affected person that you accompany them to counselling services.*
- *Take Caution*
- *Make sure to prevent any possible extension of the conflict by keeping confidential what has been entrusted to you."*

(Federal Chancellery of Austria Attorney for Equal Treatment 2007)

<http://betriebsrat.uni-ak.ac.at/images/links/Be-ruehrt.pdf>

Measures and Sanctions

Should one's own efforts to defend oneself prove insufficient for stopping sexual harassment, **further measures** may be taken. These will depend on the position of the accused individual under employment, service, or university law. The Charité will take action according to the circumstances and severity of the particular incident, while taking into consideration the affected individual's needs and wishes for anonymity and protection.

Informal Measures

- a face-to-face meeting between the affected person, and/or someone they trust, and the accused person
- an individual meeting between a superior, and/or someone from the group of possible contact-persons (e.g. the Women and Equal Opportunity Commissioner, the Staff Council representative), and the accused individual with explicit reference to the prohibition of sexual discrimination, harassment, and violence. The person affected by the harassment has the right to decline to participate in informal, internal proceedings at the university or rather to allow someone else to represent him/her.

Formal Measures

If the behavior of the harassing person continues after the initial countermeasures, or is so severe that face-to-face discussions alone are not sufficient, then higher levels of management must become involved, and steps toward legal action need to be considered. Requirements and procedures for individual sanctions conform in detail to the relevant provisions.

Whenever a so-called personal injury has occurred or is suspected as a result of injurious behavior (e.g. the use of physical violence, sexual offences) toward patients or their relatives, as well as toward staff, then, the Charité procedural guidelines for "Conduct in the Case of Injury" must be followed.

The following procedural steps should be observed:

- Holding a formal official meeting
- Verbal or written briefing
- Written formal warning
- Reassignment to a different workplace inside or outside of the university
- Suspension from academic courses
- Suspension from the use of university facilities
- Ban from the premises
- Termination of university registration
- Termination of employment with or without notice
- Initiation of disciplinary proceedings and the imposition of disciplinary sanctions, which could include expulsion, fines, pay cuts, reassignment, or removal from service
- Criminal charges

The Charité is responsible for initiating and implementing all formal proceedings.

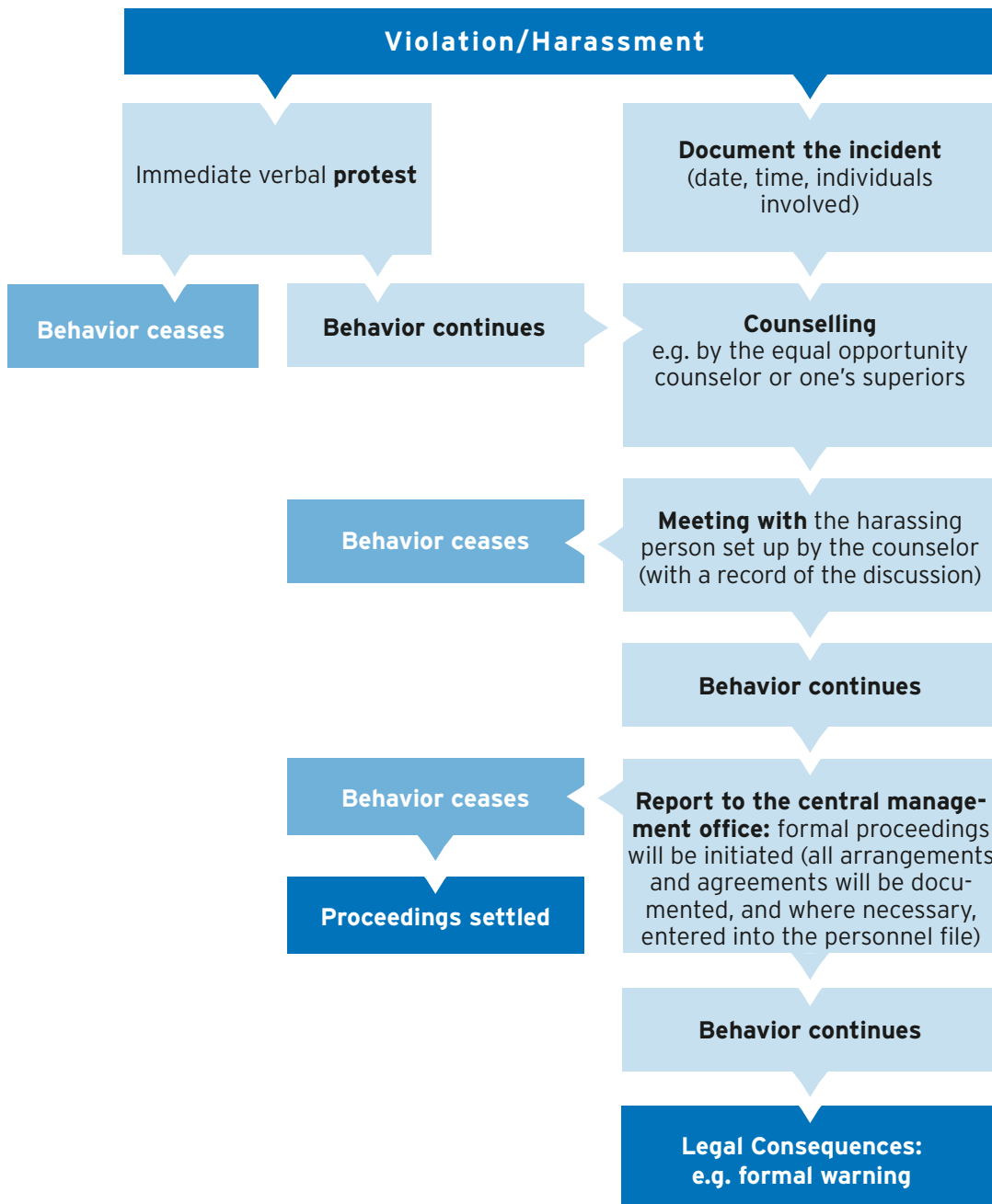
The institution will work to the best of its abilities to provide the individuals concerned with psychological and legal guidance.

“As soon as a case of sexual discrimination, harassment, or violence presents itself, immediate preliminary arrangements independent from subsequent proceedings must be made to protect the affected individual, if the latter so wishes. The Women and Equal Opportunity Commissioner must be informed, unless the affected individual requests otherwise. All measures and sanctions are guided by the ‘polluter pays principle.’”

(Federal Conference for Women and Equal Opportunity Commissioners in Higher Education, on the Internet.)

<https://bukof.de/online-handreichung-sdg/>

Overview of the Counselling Procedure in Cases of Sexual Harassment



Support and Counselling

Internal

Employees and students who feel sexually harassed or discriminated against have the option to seek counselling at the Charité.

The following offices offer counselling:

Women and Equal Opportunity Offices
frauenbeauftragte@charite.de
tel. 450 **577 252**

Occupational Health Services (AMz)
tel. 450 **570 702**

Conflict Management
tel. 450 **571 027**

For students, there is an additional option:

MediCoach
medicoach@charite.de
tel. 450 **529 189**

TIRS (Teaching Incident Reporting System)
<https://campusnet.charite.de/service/tirs/>

In cases of suspected sexual abuse of minors, please contact:

Child Protection Group
tel. 450 **566 627**

Patients (male and female) or relatives may contact the following offices:

Complaint Management
lobundbeschwerden@charite.de

External

Berlin Crisis Services

tel. **030 390 63 00** (reachable 24-hours-a day)

Women's Crisis Hotline

tel. **030 615 42 43**

for special consultations for migrant women:

tel. **030 615 75 96**

Wildwasser

Working Group against the Sexual Abuse of Girls e.V.
Dircksenstraße 47, 10178 Berlin
tel. **030 282 44 27**

Kind im Zentrum (Child in the Center)

Counselling center at the Evangelical Center for Youth and Social Welfare (eJF)
Maxstr. 3a, 13347 Berlin (Wedding)
tel. **030 282 80 77**
kiz@ejf.de

LARA (registered association)

Crisis and counselling center for sexually harassed or abused women
tel. **030 216 88 88** (daily 9:00 a.m. to 6:00 p.m.)

Weißer Ring (White Ring)

Counselling and victim support for men and women in cases of sexual harassment or assault
Hotline: **116006** (daily 9:00 a.m. to 10:00 p.m.)

Mann-O-meter Counselling on same-sex (gay)

sexual harassment | Bülowstr. 106, 10783 Berlin
tel. **030 216 80 08**

Tauwetter

Walk-in center for men who were sexually abused as children | Gneisenaustr. 2a, 10961 Berlin
tel. **030 693 80 07**

Bundesamt für Familie und zivilgesellschaftliche Aufgaben.

Das Hilfetelefon - Beratung und Hilfe für Frauen

tel. **0800 116 016**

<https://www.hilfetelefon.de/>

5. Laws and Regulations

Basic Law (Constitution)

Article 1

- 1 Human dignity is sacrosanct. To respect and protect it is the duty of all state authorities.

Article 2

- 1 Every individual has the right to freely develop his/her character, insofar as he or she does not infringe upon the rights of others and does not violate the constitutional order or the moral law.
- 2 Every individual has the right to life and physical sanctity. Personal liberty is inviolable. These rights may only be impinged upon pursuant to the law.

Penal Code

§ 177

Sexual Assault; Rape

Anyone who coerces another person:

- by force
- by threat of imminent danger to life or limb; or
- by exploiting a situation in which the victim is unprotected and at the mercy of the offender, to suffer sexual acts by the offender or a third person on his or her own person or to engage actively in sexual activity with the offender or a third person, shall be liable to imprisonment of not less than one year.

§ 240

Coercion

- 1 Anyone who unlawfully, with force or threat of serious harm, causes a person to commit, suffer, or omit an act shall be liable to imprisonment for up to three years or a fine.
- 2 The act is unlawful if the use of force or the threat of harm for achieving the desired outcome is deemed reprehensible.
- 3 The attempt to do so is punishable by law.
- 4 In especially serious cases, the penalty shall be imprisonment from six months up to five years.

An especially serious case typically occurs when the perpetrator

- forces another person to engage in sexual activity
- forces a pregnant woman to terminate her pregnancy, or
- abuses his or her powers or position as public official

General Equal Treatment Act

§ 1

Purpose of the Law

The purpose of this law is to prevent or to stop discrimination on the grounds of race or ethnic origin, gender, religion or belief, disability, age, or sexual orientation.

§ 3

Definitions

Subsections 3 and 4

- 3** Harassment shall be deemed to be discrimination when unwanted conduct in connection with any of the grounds referred to under Section 1 takes place with the purpose or effect of violating the dignity of the person concerned and of creating an intimidating, hostile, degrading, humiliating, or offensive environment.
- 4** Sexual harassment shall be deemed to be discrimination in relation to Section 2, Subsection 1, Nos 1 to 4, when unwanted conduct of a sexual nature, including unwanted sexual acts and requests to carry out sexual acts, physical contact of a sexual nature, comments of a sexual nature, as well as the unwanted showing or public exhibition of pornographic images, takes place with the purpose or effect of violating the dignity of the person concerned, in particular where it creates an intimidating, hostile, degrading, humiliating, or offensive environment.

§ 12

Employer Actions and Duties

- 1** The employer has the duty to take the necessary measures to ensure protection against discrimination on any of the grounds referred to under Section 1. This protection shall also cover preventive measures.
- 2** The employer shall draw attention to the inadmissibility of such discrimination in a suitable manner, particularly within the context of initial training and advanced training, and shall use his or her influence to ensure that such discrimination does not occur. Where an employer has trained his or her employees in an appropriate manner for the purpose of preventing discrimination, he or she shall be deemed to have fulfilled his or her duties under Subsection 1.

§ 13

Right of Appeal

- 1** Employees shall have the right to lodge a complaint with the appropriate department in the firm, company, or office when they feel discriminated against in connection with their employment relationship by their employer, superior, another employee, or third party on any of the grounds referred to under Section 1. The complaint shall be examined and the complainant informed of the result of the examination.

§ 14

Right to Refuse Performance

Where the employer takes no or takes obviously unsuitable measures to stop harassment or sexual harassment in the workplace, the affected employees shall have the right to cease work without loss of pay insofar as this is necessary for their protection. Section 273 of the German Civil Code (Bürgerliches Gesetzbuch) shall remain unaffected.

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