

“Enough is Enough”: tackling sexism, sexual harassment, and power abuse in Spain’s academia and healthcare sector



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The victory of Spain at the FIFA Women’s World Cup was eclipsed by an unsolicited kiss from the President of the Spanish Football Federation to midfielder Jennifer Hermoso. Despite the international scandal, rather than immediately resigning, Luis Rubiales chose to portray himself as a victim of “false feminism,” and this was met with acceptance within the Spanish football community.¹ These series of events resonated with many women in Spain and led to an outpouring of support for Jenni, which was championed under the hashtag #SeAcabó, translating to “Enough is Enough” in English. Inspired by the #SeAcabó movement, a collective of female researchers, including Women in Global Health Spain, invited women in healthcare and academia in Spain to share similar experiences through snowball sampling via social media sharing.

In just 13 days, between 29th of August and 11th of September 2023, 345 personal stories from 251 respondents were gathered through an anonymous [online questionnaire](#). While we focused on healthcare and academia stories, some women reached out to share their experiences of sexual and verbal harassment in other settings, seizing this opportunity to speak out. In total, 73.6% of the accounts reported having felt sexually harassed and 28.7% reported having felt sexually abused.

In Spain, Organic Law 3/2007 guarantees gender equality by universally prohibiting sexual harassment.² It enforces all companies to develop mandatory equality plans, institute protocols, and uphold sexual freedom and moral integrity. However, the consistent implementation of this law has not been uniform across all sectors. Within academia, the recent Organic Law 10/2022 highlights the significance of sexual freedom and mandates reporting mechanisms in all Spanish universities, while the health sector lacks specific regulations in this regard.³

Our analysis of participant responses suggests that despite legislation, academia and healthcare workplaces still harbour pervasive sexist environments with ineffective legal protection for victims. Out of the total 345 accounts, 156 (45.2%) reported that power and sexual abuse are tolerated to such an extent that it is normalized. In 40.3% of all experiences reported, vulnerable women in precarious positions working in the health sector or academia: junior doctors, nurses, undergraduate and doctoral students, research assistants and tutees in different faculties and healthcare workplaces or institutions, explain how they are sexually harassed by their abusers: managers, directors, heads of departments, senior faculty, professors, tutors, most significantly older men with power in these rigid hierarchical structures. This harassment with power imbalance situations increases to 64.6% when including all the experiences reported.

The sexual harassment experienced by participants in the study takes many forms. Verbal abuse which consists of inappropriate, offensive, and humiliating remarks is the most prevalent type (53%). Physical abuse, such as inappropriate unwelcome touching, groping, kissing, and hugging is prevalent too (44.9%), especially in healthcare workplaces. Unwanted sexual advances and requests for sexual favors are happening in 6.4% of the accounts, including Quid Pro Quo harassment. Cyber harassment and sexual memes are less frequent with 3.8% of the accounts reporting such practices. Furthermore, several participants described experiences of hostile or offensive environment harassment perpetrated by companions and colleagues in healthcare workplaces and academia, concretely in 47.5% of the experiences shared.

Participants reported hesitating to report incidents due to the normalisation of sexist behavior, a lack of support from colleagues, supervisors, and institutional authorities who discourage them, as well as concerns about not being taken seriously and potential career repercussions. In the rare instances when participants have reported power and sexual abuse to health-related or academic institutions (6.7%), there has been a

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disturbing lack of consequences for the perpetrators in 1.4% of the reported accounts, whilst most continue in their positions advancing in their careers with impunity. In certain cases, warnings about their behaviours were issued, yet these individuals remained in their faculty positions.

The most frequent consequences mentioned due to this abuse reported by 34.5% of participants are feelings of disgust, fear, anger, shame, anxiety, depression, trauma and mental health problems. Many psychological effects can be long-lasting, even over a lifetime. Depending on the type of abuse, another direct consequence of refusing sexual advances is the perpetrator's retaliation. Examples range from verbally ridiculing, insulting or putting down their victim in public, to mobbing, failing her in exams, and loss of research or practice opportunities and promotion.

Our participants expressed gratitude for the opportunity to share their stories and urged us to find solutions to prevent similar experiences from happening to others. Therefore, we urge universities and healthcare institutions to tackle gender inequality as part of a broader commitment to human rights, recognizing sexual harassment as a problem deeply intertwined with overarching issues of equality and social justice.⁴ Based on the analysis of women's experiences and a review of existing literature, we outline eight recommendations for addressing power and

sexual abuse (detailed in [Panel 1](#)). We propose: 1) Promote gender balance and diversity in leadership roles, 2) Implement comprehensive prevention policies, 3) Challenge normalization, 4) Integrate protocol information during onboarding, 5) Develop clear behaviour definitions, 6) Evaluate policy impact with measurable indicators, 7) Embrace a survivor-centred approach,⁴ and 8) Promote a zero-tolerance culture.⁵ We would like to stress that sexual harassment can happen to people of different sexual orientations and gender identities and therefore our recommendations advocate for protecting all.

We firmly believe that by putting these recommendations into practice, institutions can establish more effective and survivor-centred approaches to eradicating sexual harassment in the workplace. We aspire to see the #SeAcabó movement lead to structural changes that protect both current and future generations and foster workplaces that are safe, respectful, and free from sexual harassment.

Contributors

All authors participated in data collection, data analysis and drafting the manuscript. All authors agreed on the final version of the manuscript.

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Panel 1: Description of the Policies and Procedures needed to address power and sexual abuse.

1. Actively promote gender-transformative leadership adopting an intersectional approach, especially in the fields of academia and healthcare, where hierarchical power imbalances are prevalent.^{4,6}
2. Develop and implement comprehensive sexual harassment prevention policies that go beyond the drafting of Equality Protocols. Establish a centralized, safe, and independent unit within institutions to handle harassment cases. Ensure a zero-tolerance policy for harassment and protect the rights of victims offering them additional services, such as leave or counselling and setting external whistleblowing mechanisms during investigation processes to minimize retaliation and guarantee confidentiality.⁷
3. Challenge the normalization of harassment and encourage a culture where such behaviors are seen as unacceptable by sensitization, educational campaigns and effective trainings which are dynamic, rather than checklists and mandatory online trainings.⁵
4. Integrate information about harassment protocols into onboarding processes for new students and employees to ensure that vulnerable individuals are informed about available protections from the outset.⁵
5. Develop clear definitions of what constitutes sexual harassment behaviors and power abuse within institutional protocols. These definitions should focus on the experience of the victim to provide clarity for all stakeholders and should explicitly incorporate those that occur in the digital environment.⁸
6. Incorporate Monitoring, Evaluation, and Learning (MEL) practices to continuously improve anti-harassment measures. In addition, generate more accurate data on sexual exploitation, abuse and harassment in the workplace, beyond sex and gender-disaggregated data, with an intersectional approach tackling other social factors such as race, migration status, LGBTQ+, and beyond high-income countries.^{5,8}
7. Promote a survivor-centred approach by encouraging a shift from solely survivor-side prevention to a broader perspective. Protocols should include a Survivor Recovery Plan to ensure that the perpetrator, his environment or the institution itself does not continue to harass the victim. Encourage witnesses to report harassment, acknowledging that it is a structural issue that requires collective efforts to eradicate.^{6,8}
8. Promote "Zero Tolerance" leadership policies for all forms of harassment. Evaluate the effectiveness of implemented measures and actions in creating a culture where harassment is simply not tolerated. Ensure that leaders take a strong stance against harassment.⁵

Declaration of interests

The authors of this manuscript have no competing or conflicts of interest.

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