

SEXUAL HARASSMENT OF FEMALE ATHLETIC TRAINING STUDENTS IN THE CLINICAL EDUCATION ENVIRONMENT: AN INITIAL INVESTIGATION

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Objective: We aspired to identify presence and potential effects of sexual harassment in the clinical education setting. We sought information and experiences with male athletes/patients from female athletic training students (ATS) enrolled in accredited entry-level athletic training education programs (ATEP). **Design and Setting:** The study involved a mail-in survey specifically designed for this investigation distributed to an observational group of female ATSs through the cooperation of potential participants' ATEP Directors. **Subjects:** Participants were 144 female ATSs from 20 accredited ATEPs in the United States who had completed at least one full academic semester of clinical education experience prior to participating in this investigation. The primary investigator recruited participants via an electronic mailing to each eligible institution's ATEP Director. **Measurements:** The data collection instrument was the *ATS Clinical Education Experiences Questionnaire*, which was based on the instruments of three previous investigations on sexual harassment in other allied health professions (female physical therapists and physicians) and pilot tested for reliability and content validity. Quantitative data were collected via 25 closed-ended Likert scale and multiple choice written questionnaire items. Participants were asked to report perceived exposure/response to sexual harassment from male athletes/patients, exposure/response to sexually harassing behaviors from male athletes/patients, and perceived preparedness against sexual harassment in their respective clinical education experiences. Data were analyzed using descriptive statistics. **Results:** Within the clinical education setting 43.7% ($n=63/144$) of female ATSs reported being sexually harassed making them feel uncomfortable (66.7%, $n=42/63$), annoyed (63.5%, $n=40/63$), or irritated (52.4%, $n=33/63$). Responses to being sexually harassed were to ignore (57.1%, $n=36/63$) the offense or confront the offender (34.9%, $n=22/63$) and 93.7% ($n=59/63$) did not report the offense or file a complaint. Of respondents not reporting experience with sexually inappropriate behaviors, 27.1% ($n=22/81$) reported being stared/leered at or being "asked out on a date" making them uncomfortable. Specific sexual harassment policies were in place for 58.3% ($n=84/144$) of the ATEPs and for 77.8% ($n=11/144$) of the Universities. Most participants, 74.3% ($n=100/144$), answered "yes" when asked if they would support formal education regarding sexual harassment within the ATEP. **Conclusions:** Our findings suggest that sexual harassment is problematic for female ATSs during clinical education experiences and that some may not be prepared with specific skills necessary to recognize and respond appropriately to sexually harassing behaviors. We suggest a didactic approach to sexual harassment that defines sexual harassing behaviors and provides guidance in appropriate responses to these experiences.

Word Count: 396