

Changing the Culture to End Sexual Harassment: Report from the ACD Working Group

*119th Meeting of the Advisory Committee to the Director
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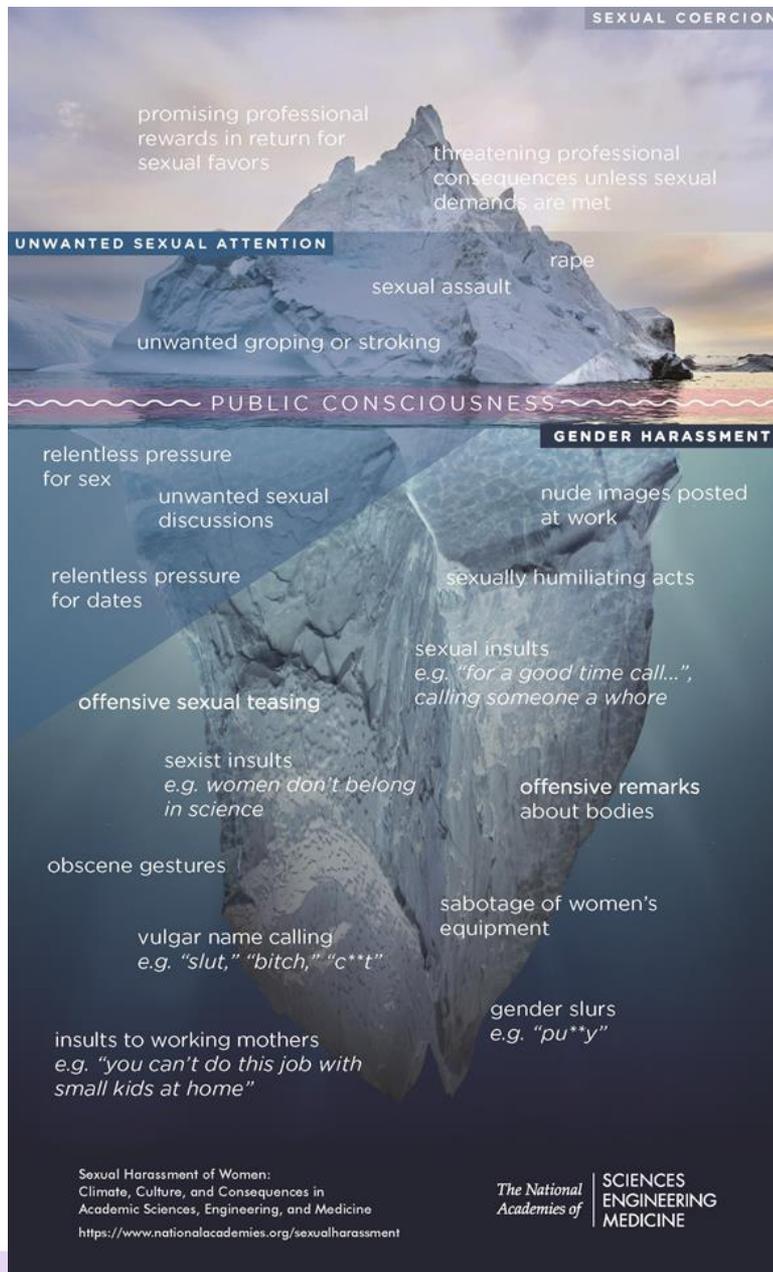
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Outline of Today's Presentation

- Update on NIH Activities
- Working Group Background
 - Review of the charge
 - Working Group members
- Working Group Activity Update
- Themes and Recommendations
 - To include recommendations to NIH, NIH-funded institutions, and scientific and professional societies
- Conclusions and Next Steps



Sexual harassment is morally indefensible, unacceptable, and presents a major obstacle that is keeping women from achieving their rightful place in science

NIH Internal Anti-Harassment Actions



OVERSIGHT

NIH Anti-Harassment Steering Committee



POLICIES

Anti-Harassment Manual
Chapter & Relationship Policy Statement



TOOLS & RESOURCES

Hotline, Webform, Training, Education, and Additional Resources



PROGRAM

NIH Civil Program Expansion Updates



TIMELINE & COMMUNICATIONS

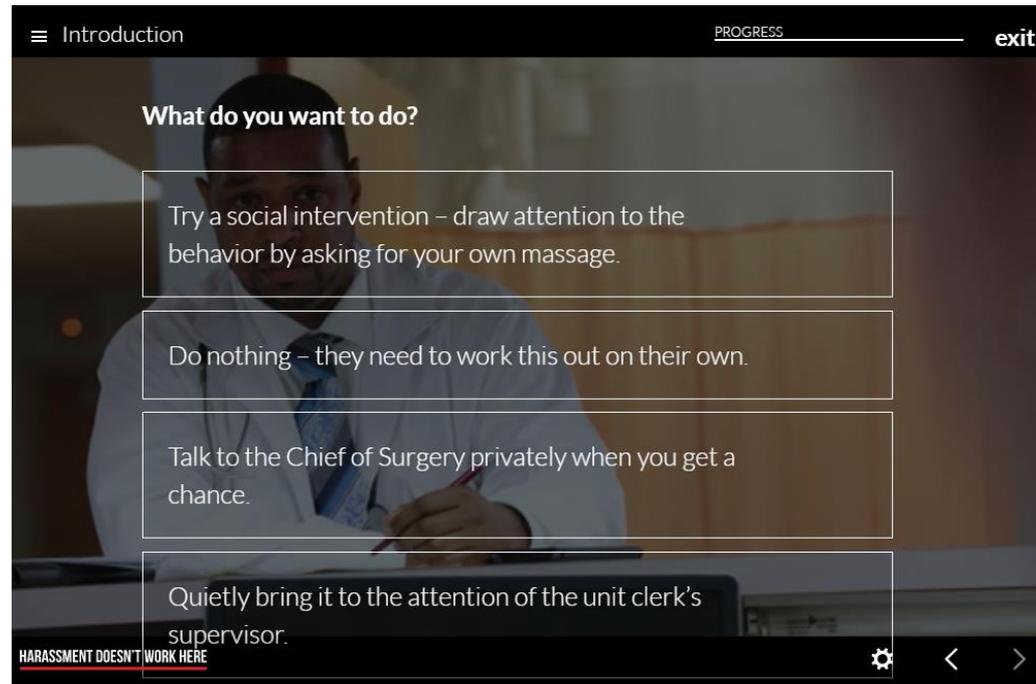
Anti-Harassment Program Launch Timeline and Campaign

NIH Internal Anti-Harassment Actions

June 2019-present

Enhanced Training

- New Anti-Harassment Training
 - Annual requirement
 - Anti-Harassment, POSH, and NoFEAR training
 - Includes interactive scenarios
- NIH IRP Case Studies on “Civility, Harassment, and Inappropriate Conduct”
 - Case 1: Gender Harassment, Sexual Harassment, and Consenting Relationships
 - Case 2: Freedom of Expression and Civility in the Laboratory
 - Case 3: Biases in Mentoring of Fellows and Sexual Harassment



NIH Internal Anti-Harassment Actions

June 2019-present

- ICs are required to develop independent anti-harassment plans
- NIH participates on the NSTC Subcommittee on Safe and Inclusive Research Environments
 - Federal coordinating body for sharing practices, challenges, and activities to combat harassment in research
 - Focuses on advancing proactive prevention of the conditions and characteristics that lead to a climate in which harassment is tolerated
 - Aims to foster an American research enterprise where researchers join, remain, and thrive

Demonstrating Transparency and Accountability

Internal Actions

- 2018: Reviewed 232 allegations (43 of sexual nature)
 - Corrective action taken against 53 staff for misconduct of a nonsexual nature
 - Corrective action taken against 26 staff for misconduct of a sexual nature
- 2019 (Jan-Nov): Reviewed 271 allegations (68 of sexual nature)
 - Corrective action taken against 63 staff for misconduct of a nonsexual nature
 - Corrective action taken against 26 staff for misconduct of a sexual nature
 - 102 training sessions about the anti-harassment program

External Actions

- 2018: Reviewed 28 incidents
 - Replacement of 14 PIs
 - Institutional disciplinary action against 21 PIs
 - 2 people removed from peer review
- 2019 (Jan-Nov): 105 inquiries
 - Involved >50 institutions
 - Replacement of 12 PIs
 - 55 individuals removed from peer review
 - Many pending review

NOTE: Significant uptick in information since the Feb. 28th statement – 105 inquiries thus far in 2019 compared to 28 in 2018

Review of the Charge to the Working Group

- Assess the current state of sexual harassment allegation investigation, reporting, remediation, and disciplinary procedures at NIH-funded organizations.
- Advise on oversight, accountability, and reporting measures for awardee institutions, that will encourage a reduction in, and prevention of, sexual harassment in biomedical research laboratories.
- Propose actions and policies that would promote a safe and inclusive culture at NIH-supported research conferences.
- Suggest system-wide changes to culture and climate to prevent harassment and gender discrimination through diffusion of hierarchical environments by mentoring networks and committee-based advisement, and strong and diverse leadership.
- Develop strategies for encouraging research on anti-harassment policies, procedures, and training; and measures and evaluations of their effectiveness.

Working Group Membership



Francis Cuss
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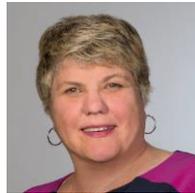
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Elizabeth Ofili
Morehouse



James Priest
Stanford



Angela Rasmussen
Columbia



Scout, *Nat. LGBT
Cancer Network*



Julie Segre
NIH



Kelly Ten Hagen
NIH



Hannah Valentine
NIH

Meetings convened

- 4 in-person meetings (Feb, May, Aug, Oct) and multiple teleconferences and a videoconference
 - Discussed the landscape, recurring themes, recommendations; heard from experts
- Held private and public listening sessions with targets and survivors of sexual harassment
 - Public session available via videocast at:
<https://videocast.nih.gov/summary.asp?Live=33124&bhcp=1>
- Discussion and sharing of ideas and materials continued via email

Key Definitions

Professional Misconduct

Inappropriate Behaviors

Research Misconduct

Harassment/
Bullying

Sexual Harassment

Falsification

Fabrication

Plagiarism

Unwanted
Sexual
Attention,
including
sexual assault

Sexual
Coercion

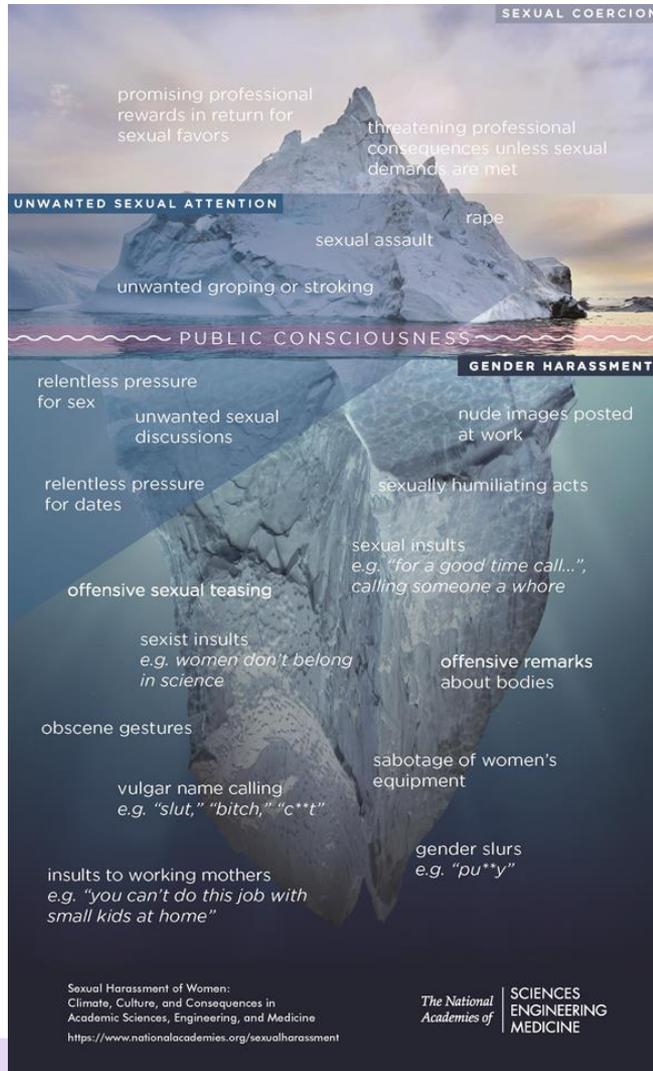
Gender
Harassment,
including
discrimination

Overarching Themes

1. Increase Transparency and Accountability in Reporting of Professional Misconduct, especially Sexual Harassment
2. Establish Mechanisms for Restorative Justice
3. Ensure Safe, Diverse, and Inclusive Research and Training Environments
4. Create System-wide Change to Ensure Safe, Diverse, and Inclusive Research Environments

RECOMMENDATIONS TO THE NIH ACD

Conceptualizing Recommendations



There is a sense of urgency to address the tip of the iceberg. **The Working Group included recommendations that are immediately actionable**



The Working Group also made many longer-term recommendations to **change the culture**

Theme 1: Increase Transparency and Accountability in Reporting of Professional Misconduct, especially Sexual Harassment

1.1: NIH should create a parallel process to treat professional misconduct, including sexual harassment, as seriously as research misconduct.

- 1.1a: Immediately establish a process to report findings of professional misconduct, including sexual harassment, by any key personnel on an active NIH grant within two weeks of the issuance of the findings.
- 1.1b: Amend current processes of reporting a change in PI status on an active NIH grant in cases where professional misconduct, including sexual harassment, is any part of the reason for the change.
- 1.1c: Require that grantee institutions consult with NIH to determine disposition of grant oversight when there is a change in PI and/or key personnel status that involves professional misconduct, including sexual harassment.
- 1.1d: Require that NIH-funded institutions develop or maintain a professional code of conduct as a condition of award for a grant or contract.

1.1: Recommendations to NIH-funded Institutions

- Put in place clear procedures for reporting and adjudicating professional misconduct, including sexual harassment, that are parallel to the procedures for research misconduct.
- Establish an office for professional misconduct, in addition to, and in parallel to, the office of research misconduct.
- Designate a specific administrator at the institution to communicate with NIH about changes in PI status that are related to professional misconduct, including sexual harassment.
- Establish a policy regarding personal relationships between individuals in inherently unequal positions, where one party has the real or perceived ability to influence the career trajectory of the other.
- Develop and maintain a professional code of conduct that addresses inappropriate behaviors in addition to harassment or sexual harassment.

1.2: NIH should establish a hotline and a web-based form for reporting sexual harassment and inappropriate behavior by any PI or key personnel funded by NIH.

1.2: Recommendations to NIH-funded Institutions

- Establish a hotline and a web-based form for anonymous and non-anonymous reporting of sexual harassment occurring at their institutions.
- Publicize outcomes of investigations and inform targets and affected individuals of the outcome after an investigation has been concluded, while protecting the identity of the target, if preferred by the target.
- Provide information to *all* research staff about the NIH webform and email address for reporting sexual harassment affecting NIH-funded research.

1.3: NIH should establish clear and transparent SOPs to respond to reports or findings of professional misconduct, including sexual harassment, or change in PI status in extramurally-funded laboratories.

1.3: Recommendations to NIH-funded Institutions

- Designate an official with knowledge of misconduct investigations to interact with NIH when notified of accusations of a PI and/or key personnel's inappropriate behavior.
- Have transparent and accessible SOPs in place to investigate and respond to reports of sexual harassment when notified by NIH and maintain active communication with NIH throughout the process to ensure safe working environments for researchers in NIH-funded laboratories.
- If not already employed by the institution, hire and retain a confidential university official, who is not a mandatory reporter, and who can provide information and confidential advice to any faculty, staff, or trainees.

1.4: We recommend that NIH establish mechanisms of accountability for findings of professional misconduct.

1.5: NIH should exclude researchers with a confirmed finding of sexual harassment, or other professional misconduct, from participating in NIH study sections or NIH advisory councils/committees for a determined period of time.

1.6: NIH should require that each PI and key personnel on an NIH grant attest that they have not been found to have violated their institution's code of professional conduct, including having a finding of sexual harassment, for a determined period of time.

1.6: Recommendations to NIH-funded Institutions

- Require all new faculty hires, in their offer letters, to attest that they do not have findings of, or ongoing investigations of, professional misconduct, including sexual harassment, at their past or current institutions.
- Require faculty to authorize, in their official offer letter, reference checks regarding any potential past professional misconduct.
- Have in place a process to ensure that NIH is notified if there is an investigation or finding of professional misconduct before they transfer a grant to a new institution.
- Do not enter into non-disclosure agreements with faculty who have engaged in professional misconduct, including sexual harassment.

1.7: All meetings and conferences that receive NIH funding, directly or indirectly, should be required to advertise NIH communications channels.

1.7: Recommendations to Professional and Scientific Societies

- Conference organizers and societies sponsoring events or meetings should have policies in place to reduce risk of sexual harassment or other inappropriate behaviors, including a code of conduct with clearly stated expectations of behavior; systems of reporting and addressing inappropriate behavior; and safe, harassment-free spaces.
- Meeting organizers are encouraged to include other resources to support targets of harassment, including personnel trained in advocacy and counseling for targets, as well as referrals to legal or health care resources.
- NIH communication and reporting channels should be widely advertised at conferences, particularly those meetings directly supported by NIH or whose attendees travel expenses and registration are supported by NIH.
- Conference organizers should conduct conference climate surveys, specifically related to sexual harassment and professional misconduct.

1.8: NIH should support research on procedures and policies that model and promote a positive climate that cultivates respect, civility, and safety.

1.8: Recommendations to NIH-funded Institutions

- Undertake an evidence-based approach when writing and revising institutional policies.

Theme 2: Establish Mechanisms for Restorative Justice

2.1: We recommend that NIH create new incentives and funding opportunities to restore the careers of targets and other affected individuals.

2.1: Recommendations to NIH-funded Institutions

- Create a set of standards while providing resources and support to targets and other affected individuals in order to mitigate the short-term personal and professional harms of gender-based harassment.
 - Targets and other affected individuals should maintain control over how their information is shared within the organization and publicly, to the extent possible.
 - Offer resources to cover the personal and professional “debt” to targets of sexual harassment incurred by participation in institutional administrative processes.
- Provide support to other affected individuals that were inadvertently affected by the suspension of an accused investigator or their funding in the course of an investigation.

2.2: NIH should develop mechanisms for bridge funding for targets and affected individuals who lose their salary support due to sexual harassment.

2.3: We recommend an immediate NIH grant mechanism be developed/modified to reintegrate targets and other affected individuals into the research workforce.

2.3: Recommendations to NIH-funded Institutions

- Institutions should demonstrate clear standards for target-centered investigative processes and practices of restorative justice.
- Investigations should be focused, first and foremost, on being fair and impartial, considering the needs of the target, with sufficient transparency to alert people and institutions considering working with responsible individuals.

2.4: NIH should partner with institutions to develop institutional safe-harbors for targets of professional misconduct.

2.5: We recommend additional research on policies, procedures, trainings, and interventions for restorative justice practices specifically tailored to the biomedical research environment.

Theme 3: Ensure Safe, Diverse, and Inclusive Research and Training Environments

3.1: We recommend that NIH create new mechanisms whereby research awards are given directly to trainees.

3.2: All NIH grants should have specific expectations and requirements for maintaining a safe training and research environment including, but not limited to, at the research institution, and at conferences, other research settings (e.g., field work), and clinical settings.

3.2: Recommendations to NIH-funded Institutions

- Institutions should advise faculty on development of risk mitigation plans that include a section on safety at conferences.
- NIH-funded institutions should develop a mechanism for removing mentors found to be in violation of the institution's code of conduct and/or policies on inappropriate behavior/harassment.

3.3: NIH should require grantee institutions to conduct anti-sexual harassment training, in a manner parallel to Responsible Conduct of Research.

3.3: Recommendations to NIH-funded Institutions

- All mentors should participate in mandatory, in-person training sessions that include identifying sexual harassment and what to do in the case of sexual assault.
- Additional training for understanding mentor/mentee relationships should be required, perhaps using National Mentoring Resource Network (NMRN) infrastructure.
- Anti-sexual harassment training should be a combination of lectures and case study discussions about sexual harassment including how to identify and mitigate harassment. It should occur at the beginning of and throughout an individual's scientific career to allow for maximum career impact.

3.4: NIH should fund research on the development of effective interventions tailored to different types of organizations and climates that improve the health and safety of biomedical researchers.

Theme 4: Create System-wide Change to Ensure Safe, Diverse, and Inclusive Research Environments

4.1: We recommend that NIH address funding strategies that contribute to male-dominated power structures, including addressing grant mechanisms that are awarded predominantly to men.

- 4.1a: Ensure that review actions and funding decisions are free of bias related to gender and work to address disparities in awards.
- 4.1b: Develop incentives and rewards for overcoming male-dominated power structures.

4.2: NIH should develop mechanisms to incentivize institutions that excel at promoting diversity and inclusion.

- 4.2a: Incentivize third party recognition of institutional support for diversity and inclusion.
- 4.2b: Provide formal awards and recognition for institutions that excel in this area.

4.2: Recommendations to NIH-funded Institutions

- Adopt third party assessment and recognition for issues of gender equality.
- Fairly compensate (e.g., decreased teaching responsibilities, increased pay) any faculty and/or staff who directly work on addressing the needs for a safe, diverse, and inclusive research environment.

4.3: NIH should hold institutions accountable to exceed the standards set by their peers and continuously strive to set a higher bar to create safe, diverse, and inclusive scientific workplaces.

4.4: We recommend that NIH facilitate and collect data from a wide-scale climate survey that allows every individual funded on an NIH award to confidentially disclose whether they are experiencing an adverse work environment.

4.5: NIH, working with research institutions, should foster examination of the system of research training, recognizing that the current apprenticeship system facilitates risk factors for sexual harassment.

4.6: NIH should conduct a landscape analysis of the prevalence and antecedents of sexual and gender harassment in order to develop interventions that address goal-specified gaps.

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Conclusions

- NIH should use its unique position to set the tone to ensure that immediate and long-term changes are made to prevent sexual harassment.
- NIH and grantee institutions must coalesce around the recommendations and form a robust partnership to fully implement change.
- NIH must be committed to ongoing evaluation of these efforts over time.
- Transparency and accountability will be paramount during the implementation of these recommendations to ensure progress is being made.

There is not only a moral obligation for ending the culture of sexual harassment in biomedical research – safe and harassment free research environments are also essential for conducting high-quality science.

Next Steps

- We recommend that NIH maintain the Working Group for advice to the ACD during implementation.
- NIH should provide regular updates on its implementation efforts.



**We can do better. We must do better.
We will do better.**

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