gsa

UNIVERSITY OF MELBOURNE
**graduate student
association**

Safety on Placement

A research report from the Graduate Student
Association of the University of Melbourne

Contents

Acknowledgements

Executive summary

The Graduate Student Association (GSA) is the independent representative organisation for all graduate coursework and research students at the University of Melbourne. We are led by 8 GSA Board members and 10 Representative Council members who are all elected University of Melbourne graduate students. On behalf of over 29,000 constituents, we represent graduate student interests to the University and wider community, provide student engagement events, activities, and information to the graduate student community, and support 160 affiliated graduate student groups.

GSA's vision is for inclusive, empowered graduate student communities that achieve meaningful and holistic university experiences. Our objectives are to achieve and support representation, academic support, transition to work, engaged and healthy communities, and organisational sustainability.

At the University of Melbourne, placements are offered in some graduate degrees to provide practical work experience and enhance students' learning. This supports students to interact with external parties such as site staff, supervisors, other students, and the public. Placements are compulsory in some graduate coursework degrees including the Master of Teaching, Doctor of Medicine, Doctor of Physiotherapy, Master of Nursing Science and other degrees in the health sciences.

Through involvement in the University of Melbourne Respect Taskforce and from conversations with stakeholder organisations including the University of Melbourne Student Union (UMSU), GSA identified that many students have limited awareness of processes concerning sexual assault and harassment on placement. Initial feedback from students indicated that they received little information and support on this prior to completing placement.

In 2021, the University of Melbourne published its first stand-alone sexual misconduct policy. In the consultation phase, GSA advocated for the inclusion of student placements in the policy, however we note that the final policy does not adequately address this issue as it does not apply to individuals who are not affiliated with the University that students may interact with on placement. The policy does not provide a process for students to report sexual misconduct on placement that is perpetrated by non-University staff or students. We have continued this project to further our advocacy for student safety on placement.

This project was undertaken by GSA in line with our objective to support graduate students' transition to work, in collaboration with stakeholders from the University, UMSU, and the National Tertiary Education Union (NTEU) through the Safety on Placement Steering Committee. The Steering Committee provided strategic advice and support to ensure that the desired outcomes of the Safety on Placement Project were met. The aims of the Safety on Placement project are to:

- Investigate student safety on university placements and internships.
- Understand current practices for incident reporting.
- Identify alternative models for prevention and responding to sexual assault and harassment on placement.
- Make recommendations to the University on implementing best practice on prevention and handling these issues.

This project found that the University must undertake further actions to safeguard student safety on placement. Most students articulated a lack of information and training prior to placements and considered that the University had an obligation to provide this. While most students indicated a high degree of willingness to report any sexual misconduct they experience or witness, comments from students who had reported incidents to the University expressed a lack of trust in the process and indicated hesitancy in reporting future incidents.

We recommend that the University implements prevention initiatives including provision of information and review of placement providers to ensure safety. We furthermore recommend that reporting procedures be improved so that when students do report incidents of sexual misconduct on placement, they do not fear being penalised, and further harm is not caused because of the reporting process.

Literature review

Students undertaking placement are not always provided information and support from their faculties to develop an understanding of unacceptable behaviour including sexual assault and harassment. Placement programs are an area of risk for universities due to the learning environment being controlled by the placement provider, rather than by the university (Cameron 2017). The potential for adverse experiences, including sexual assault, while on placement is one of the risks that must be considered (Cameron 2017). Students have identified sexual harassment on clinical placements, and insufficient institutional responses, as a failure of duty of care (e.g. Health 2021). Sexual assault and harassment on placement can fall under the purview of both placement providers and the educational institution, including being a legal matter.

Students may be unaware of reporting procedures, or lack confidence that reports will be handled appropriately. University staff handling of sexual harassment reports, particularly if they seek to resolve to complaints without adhering to university policy, represents an additional area of risk (Cameron, Freudenberg, Giddings & Klopper 2018).

This review summarises recent studies on sexual harassment and assault on nursing, medicine, and social work placements. The Safety on Placement survey included students from other disciplines including education, cultural materials conservation, music therapy, and health sciences (speech pathology, physiotherapy, optometry, audiology, and public health). However, there is limited literature available on the incidence of harassment and assault for these disciplines. The detailed review on Australian and international literature on student safety in medicine, nursing and social work placement is presented below.

Medicine Awareness

The literature review identified that around one-third of medical students experience sexual harassment during their training (Fnais et al 2014; White 2000). Common types of sexual harassment include inappropriate comments made by other students, and unwanted comments or physical contact from patients (Szubert, Gibberd, Buisson, Hooker & Ivory 2018; White 2000). The prevalence of sexual harassment has not diminished over time (Fnais et al 2014).

Medical students often do not report such incidents. This was noted In an Australian survey, 68% of medical students who experienced or witnessed bullying or harassment did not take any action in response (Szubert, Gibberd, Buisson, Hooker & Ivory 2018). Reasons for not reporting include not knowing what to do, fear of retaliation, not wanting to cause a fuss or be perceived as a victim, and believing that there will be no consequences for the perpetrator (Szubert, Gibberd, Buisson, Hooker & Ivory 2018; Wear, Aultman & Borges 2007). Students may also understand and excuse inappropriate behaviour from patients as due to ignorance, awkwardness, illness or age (White 2000, p. 985).

Adverse experiences during medical training can affect students' career choices. In a U.S. survey, of medical students who had been exposed to sexual harassment or discrimination, 34.9% said that this influenced their specialty choice or residency program (Stratton, McLaughlin, Witte, Fosson & Nora 2005).

Following this literature review, it is inferred that a culture of sexual harassment and bullying is well documented in medical training in both Australian and international literature. The literature similarly identifies the adverse experiences of nursing students on placements.

Nursing

In an Australian study, 12% of nursing students reported experiencing sexual harassment often or sometimes, and 35% occasionally (Budden, Birks, Cant, Bagley & Park 2017). Types of sexual harassment experienced include receiving sexist remarks, suggestive gestures, being inappropriately touched, being propositioned, and being threatened with sexual assault. In a similar study of nursing undergraduates at New Zealand universities, 20% reported having received a sexist remark, 9% had experienced a suggestive gesture directed at them, 9% had been inappropriately touched, and 10% had received an unwanted request for intimacy (Minton, Birks, Cant & Budden 2018). The authors of both studies expressed concern that the culture of bullying and harassment in nursing can have negative effects on its victims, including nurses leaving the field. Following this literature review, it is understood that nursing students are routinely subjected to sexual harassment on placement from patients and colleagues.

Social work

The literature review also supported the finding that social work students may be subjected to sexual misconduct on work placements. A U.S. study found that 55% of social work students had experienced at least one incident of sexual harassment while on placement (Moylan & Wood 2016). This was most likely to be perpetrated by other staff at the placement and their clients. Of the 55% who had experienced sexual harassment, 49% told nobody of the incident and just 6% pursued a formal report (Wood & Moylan 2017). Of those who did make a report, 44% found the response unhelpful. The authors also found that only half of participants had received training about sexual harassment on placement, and almost half felt unprepared for encountering sexual harassment while working (Wood & Moylan 2017).

Overall, the literature review finds that experiencing sexual assault or harassment is common for students in the medicine, nursing, and social work disciplines. Higher education institutions and placement providers therefore have an imperative to provide policies, resources and support structures to reduce risks to students and respond to any incident reports.

Desktop review

University of Melbourne policies and support

As part of this project, a desktop review was undertaken to analyse the University of Melbourne policies and support in relation to safety on placement. While this analysis was not extensive, some examples of good practice were identified. It was found that some University of Melbourne programs provide safety information and resources for students going on placement. Examples include:

- The Faculty of Medicine, Dentistry and Health Sciences states that placement providers have a responsibility to provide a safe environment and must report any incidents to the University (University of Melbourne n.d.). They state that the placement provider will provide an orientation and ensure all relevant policies and information is available to the student. No specific mention is made of information about sexual misconduct policies and support.

- Students undertaking a psychology clinical placement must complete Risk Aware training as a hurdle requirement. Risk Aware is a Government-funded online learning program that explores scenarios that psychology students may encounter on placement. Its module on interpersonal risks covers sexual harassment, sexualized behaviour, stalking, and bullying and harassment (Sheen, Wallace, Sutherland-Smith, McGillivray & Dudley 2020). Students who complete Risk Aware have increased knowledge and confidence of placement risks (Graj, Sheen, Dudley, Sutherland-Smith & McGillivray 2020).

However, from the perspective of this project, the current policy setting is insufficient to manage issues of safety on placement. Since the National Union of Students' Talk About It survey in 2015 and the Australian Human Rights Commission's Change the Course survey in 2017, both identifying high rates of harassment among university students, there has been increased awareness and dialogue about sexual violence in university communities. In the Change the Course survey, 2% of students who had been sexually harassed or assaulted in a University setting (in the two years prior to the survey) reported the most recent incident had occurred while on professional placement (AHRC 2017, p. 68).

At the University of Melbourne, the Respect Taskforce was formed in 2017 to provide strategic advice on the University's prevention and response priorities. The Taskforce identified the issue of external partners, including placement providers, at its first meeting (University of Melbourne 2017). A University of Melbourne Student Union report to the Respect Taskforce identified that shared responsibilities between institutions are a barrier to students reporting sexual misconduct on placements, and that the burden is usually on the student to withdraw from placement or find another solution (Tidmarsh 2020, p. 26).

A desktop review of current University of Melbourne policies found that they provide insufficient information on how to report or respond to sexual misconduct experienced or witnessed on placement:

- The newly released Sexual Misconduct Prevention and Response Policy specifies that it applies to student placements (University of Melbourne 2021a). The policy applies to University staff and students. It does not apply to others who students may encounter on their placements, such as clients and staff of non-University affiliated clinics and sites.

- The Appropriate Workplace Behaviour Policy, which applies to staff, prohibits sexual harassment and assault (University of Melbourne 2021c). The policy states that "the University has a positive duty to prevent and eliminate unlawful discrimination, sexual harassment, bullying and victimisation from the workplace", and outlines reporting pathways for assault perpetrated by University employees. The policy would apply to sexual misconduct perpetrated by University employees in University-owned clinics where placements occur. It does not specifically discuss placements.

- Expanding on the Appropriate Workplace Behaviour Policy, the University of Melbourne complaints and grievances process directs students to report sexual assault or harassment by another student or staff member to the University's Safer Community Program (University of Melbourne 2021d). The University also provides the option to notify them of inappropriate behaviour (either experienced or witnessed) through the anonymous register.

- The Student Conduct Policy requires students to conduct themselves professionally while on placements (University of Melbourne 2021b). Professionalism is not defined in the policy. The policy elsewhere prohibits perpetrating harassment.

- The Student Charter (University of Melbourne 2020a) expresses high-level responsibilities and rights of University of Melbourne students. The Student Charter includes commitments to respect the campus environment and act as good ambassadors for the University, and the entitlement to a safe and inclusive study environment.

From the above information, it is concluded that there is a gap in University policies concerning sexual misconduct perpetrated in learning environments by those who are not University staff or students. There is no standard reporting policy for students who experience harassment or assault on placement from members of the public or staff of placement providers.

However, there are some practices that can reduce the risk of assault and harassment to students on placement. For example, the Canadian organisation Students For Consent Culture has recommended that sexual violence policies should explicitly include processes for students to report sexual assault and harassment on placement, and that universities should monitor which placement sites have had incidents of sexual violence (Students For Consent Culture 2021). Monitoring programs have not been publicly implemented at the University of Melbourne.

An additional resource at the University of Melbourne to note is a consent training initiative. Undergraduate students are required to complete the Consent Matters online module which outlines respectful relationships and how to access support services. While this may assist students in identifying instances of sexual harassment and assault, it is not targeted at providing information about sexual misconduct they may encounter on placement.

National policies and resources

Though limited, this project also provided an opportunity to review national policies, resources and initiatives.

There are several recent initiatives for preventing and responding to sexual assault and harassment of medical students:

- Mandatory Ethical Bystander Training for medical students at the University of Queensland (Earl 2021).

- Co-designing a publication with students on defining and reporting bullying, discrimination and sexual harassment at the University of Western Australia (Wilcox 2021).

- Creating a Medicine & Health Taskforce to combat student bullying and harassment at the University of New South Wales (Colbert & Marley 2021).

- Having trained Harassment and Discrimination Contact Officers to be a point of contact for students who have experienced bullying, discrimination and sexual harassment (De Silva 2021).

- It was noted that some professional medical organisations have identified the issue of workplace sexual harassment and have released the following guidelines and policies:

- The Medical Board of Australia's code of practice for doctors clearly outlines that good medical practice requires not perpetrating sexual harassment and responding appropriately to witnessing sexual harassment (Medical Board of Australia 2020, p. 15).

- The Australian Medical Association code of ethics requires doctors to report harassment of or by students and colleagues (AMA 2016).

- The national framework Every Doctor, Every Setting, which sets out reforms improve the mental health of doctors and medical students, has set a target to achieve "safe and inclusive training and work environments" where bullying and harassment are not tolerated. However, they do not specify sexual harassment (Everymind 2019, p. 11).

There has been some advocacy by the Tertiary Education Quality and Standards Agency (TEQSA), the national regulator for universities, on promoting student safety in higher education institutions. TEQSA released a good practice note that specifically includes placement settings in institutions' obligations to provide a safe learning environment (TEQSA 2020). Additionally, universities have obligations relating to sexual misconduct on overseas placements as required by the Department of Foreign Affairs and Trade (DFAT). DFAT's 2019 policy on Preventing Sexual Exploitation, Abuse and Harassment that partner organisations must have investigation, reporting, risk management, and training processes. The University of Melbourne therefore has compliance requirements under the policy for any DFAT-funded activities, including research grants and scholarship programs, and is required to undertake risk assessments for relevant activities (University of Melbourne 2020b).

Methodology

Due to the extensive nature of this project, following the guidance of the Steering Committee, a survey methodology was determined. With the support of Steering Committee members, the Safety on Placement survey was opened in May 2021 and closed at the end of July 2021 and was conducted through Qualtrics. The survey was aimed at coursework graduate students with at least one semester of enrolment left, and at least one placement planned in that time. The survey aimed to explore students' current knowledge of processes and available resources for preventing and responding to sexual misconduct on placement. The survey asked students about their knowledge of reporting pathways and support for students who experience or witness sexual harassment or assault on placement.

There was extensive promotion of the survey through GSA and University of Melbourne channels and this promotion was enhanced by our Casual Support Officers. A small financial incentive will be provided to students who participate in the follow-up research.

Bot responses and incomplete responses were removed from the sample, leaving 767 complete responses from graduate students. A simple quantitative analysis was performed using Microsoft Excel. Qualitative data from student comments was interpreted using a thematic analysis.

Profile of participants

We received 767 complete responses to the Safety on Placement survey:

- 86% were domestic students, and 14% were international students.
- 51% were expecting to complete their degree by the end of 2021, and 49% in 2022 or later.
- 54.5% were expecting to undertake their next placement in 2021, and 45.5% in 2022.
- 77% had completed a placement or internship before, and 23% had not.

Response rate from faculties in order of ranking:

- Medicine, Dentistry and Health Sciences: 43%
- Education: 16%
- Business and Economics: 10%
- Other: 31%

Responses in relation to work sites for their future placement:

- Hospital: 28%
- University-affiliated clinic: 24%
- School: 22%

Findings – Quantitative

All findings are presented a percentage from the 767 responses

Knowledge and awareness
- 83% of participants reported they could recognise harassment if they witness or experience it.
- 75% reported that they understood the legal definition of sexual harassment.

Reporting
- Only 66% of participants knew where to report harassment or assault that they experienced or witnessed.
- 72% of participants reported they would feel safe reporting harassment to the Safer Community Program.
- 67% of participants felt confident that the University would respond adequately to reports concerning safety on placement.
- 87% would want to report harassment or assault that they witnessed on placement.

Duty of care
- 92% of participants reported that both the University and placement providers have a duty of care to provide a safe learning environment to students. This includes the placement provider having a responsibility to provide an orientation and provide all relevant policies and guidelines to students.
- 63% of participants reported that he University has adequately prepared them for issues relating to their safety on placement

Findings – Qualitative

Understandings of sexual harassment on placement

<u>Pre-placement training</u>

Students were of the view University has an obligation to educate and prepare students prior to placement and were emphatic that the preparation provided by the University is non-existent or insufficient. Students overwhelmingly commented that there was no training given on this matter, and that as a result they were under-prepared for the realities of the placement environment.

Case study

A nursing experience, who has experienced harassment from a patient, commented:

"I felt there wasn't much preparation regarding instances of sexual misconduct. We are taught about what to do in the event that we are asked to perform tasks outside our scope of practice, or if we witness something dangerous, but there really wasn't much talk about how to handle sexual harassment/assault."

Students undertaking hospital placements noted that the prevalence of harassment and bullying in their work environments is well-known, and agreed that the University was neglecting their duty of care to educate and prepare students:

Case studies

Students undertaking hospital placements commented:

"University needs to stop brushing over the fact that we might actually get assaulted. And tell us head on how to counter this and manage any emotions. At least making us aware it will happen can prepare us even more."

"The hospital environment is known for rampant bullying, it's built into the establishment. It's in the media and there are countless research articles written about students being bullied at clinical placements for years. Yet the University of Melbourne, which prides itself on evidence-based practice, chooses to overlook this issue and not prepare the students properly for clinical placement in this environment. "

Students from the Master of Teaching noted that they were provided training on identifying and reporting signs of abuse of children. It was noted that guidance or support should be provided on what to do if they themselves experienced sexual misconduct or inappropriate behaviour as teachers.

Almost all comments indicated that safety on placement had not been discussed in their training prior to placement, or that they did not remember if it was mentioned. However, three examples were given of good practices in the University to prepare their students to go on placement.

Good practice examples

"Before placement, the course coordinators went through the process of how to report matters regarding assault, sexual assault and sexual harassment. At the university clinic, there is also a safe button near our desk that we can press if we feel unsafe. They also gave us tips on what to do in certain situations and have provided their contact details including mobile and email if we need them." (Optometry student)

"Our introductory classes were very focused on us speaking up about our experience and being self-driven in what we need what is or isn't working. On top of small group sessions with our coordinator where we can bring up issues on placement, I feel comfortable bringing safety concerns up." (Music therapy student)

"Students were required to complete an online training module called RiskAware, which detailed various risks to safety which may occur during placements and how to negotiate them." (Psychology student)

No examples of good practices were provided by students of medicine, nursing, or teaching – the degrees for which student comments overwhelmingly indicated a need for improved training.

Understandings of appropriate behaviour

Students were largely confident in their understandings of harassment or assault, with 83% of students stating they would recognise it if they witnessed it. However, comments indicated a degree of uncertainty in being able to interpret incidents.

Case studies

"Whilst sexual assault I feel would be more obvious, it's hard to see where the line is drawn in relation to other matters. "

"I always think I know what it is but there is always a grey area where I don't want to appear as if I am jumping to conclusions. I would always check with the victim and stick up for them but acting on my own behalf without that discussion would be difficult."

Some healthcare students understood sexual violence as being normalised in their profession, suggesting the need for educational initiatives prior to placement to enable and empower students to identify and respond to inappropriate behaviour.

<div>

Case studies

"Especially regarding aggression from patients and family members, as experienced this several times whilst on placement but nursing buddies seem to accept it as common/it seemed like there was very little that could be done about it and didn't seem valid to report it however made placement a not-very-nice experience."

"It feels like something I need to learn to suffer as "part of the job". It is a wider social issue, not limited to placement at all, and as a result I feel the university somewhat washes its hands of responsibility as if it is outside their scope of duty of care."

"I am a healthcare student and the majority of harassment I have received comes from patients - especially verbal sexual harassment, sometimes with physical gestures."

</div>

Engagement with reporting processes

Confidence in processes

While 72% of participants agreed that they would feel safe reporting to the Safer Community Program, some students expressed doubts about trusting University processes for reporting sexual misconduct. Students also expressed a clear desire to report adverse experiences. However, students who had previously completed a placement responded saying they encountered difficulties when trying to report their negative experiences. Students who made disclosures were particularly critical of processes and training.

<div>

Case study

"University has not prepared me for the steps I need to take after experiencing sexual harassment. Nor has it prepared me for the mental distress I would experience thereafter. It did not give me sound knowledge of what exactly to do step by step after experiencing sexual harassment mentally."

</div>

Several students also commented on mishandling of complaints by the University, which caused them to doubt that they should report any incidents that occur on placement.

<div style="background-color:#e3e8d0; padding:1em;">

Case studies

"Experienced sexual assault at a University event, and nothing was done about it. So would be sceptical that anything would change if it occurred on placement. "

"I don't believe the MGSE would be supportive. My experience with them suggests they would only care about institutional reputation."

"I think based on what I know and have observed there is a degree of a lack of trust when it comes to making reports about safety to the University and it not being addressed in a timely and or meaningful manner."

</div>

Students also expressed hesitancy about reporting due to fear of consequences to them. This indicates a need for stronger, transparently communicated processes to promote students feeling safe to report sexual misconduct.

<div style="background-color:#e3e8d0; padding:1em;">

Case studies

"Placement felt like a bit of a test a lot of the time because I was so invested in making a good impression and proving that I know my stuff. I think this is a common sentiment amongst students that can make it difficult to want to self-advocate or speak up about safety issues. I didn't want to rock the boat or call too much attention to myself because I didn't want to be regarded as a "problem" or make anyone's job more difficult."

"I feared that I would be blamed for allowing it to happen, or for not de-escalating properly. When it occurred, I was buddied with a nurse who does not normally work on the ward I was placed- I told him what happened in hopes he could direct me to the appropriate reporting channels, but it seemed he wasn't aware of the organisational policy either. After a day or two had passed I was then afraid I would be reprimanded for not reporting sooner."

</div>

<u>Bystander intervention</u>

Students would like to be active bystanders: 87% indicated they would report assault or harassment that they witness on placement. Comments indicated that further education and resourcing is required to support students to be active bystanders. For example, one student expressed doubts about their ability to identify and report harassment; another indicated they would not want to get involved if they were not personally impacted.

This demonstrates the need for the University to continue to develop evidence-based bystander resources and educational programs.

> **Case study**
>
> *"Not sure if people will believe me, or if i correctly identified it as sexual harassment. I would be more confident if there were other witnesses who could report with me, and if the person I reported to were helpful in guiding me through the legal process of handling the sexual harassment case."*

Safety on transport

In addition to concerns regarding safety while onsite at placements, several students proactively raised the issue of personal safety while travelling to and from placement. Students noted the long hours and travel distances of their placements, expressing concerns about going to car parks and using public transport late at night and in isolated areas. Students suggested that the University should provide support or accommodations for students living far placement sites to mitigate this concern.

Discussion and recommendations

Through the Safety on Placement survey, students articulated a lack of information and training, and a failure of the University and placement sites to proactively provide guidance and support to students who experience sexual misconduct and placement. Students desired more information before going on placement, with current preparation practices being inconsistent and insufficient.

While most students would want to report incidents of sexual misconduct and would feel confident in doing so, comments were received from students who engaged with reporting processes – whether on placement or regarding other campus safety issues – felt a lack of trust in the process and indicated hesitancy in reporting future incidents.

Furthermore, travelling to and from placement was considered a risk by students who desire more support from the University.

Students were emphatic that the University can and must do more to provide students with realistic information and training, implement accessible reporting processes and support measures, and reduce risks of sexual misconduct on placement.

Workplace safety for students who undertake placement

In many cases, placement is a mandatory course requirement, so the University of Melbourne has an obligation to ensure that the University and placement provider have proper mechanisms and support to prevent and respond to sexual misconduct on placement. This can be undertaken by implementing the following strategies:

Prevention

- Developing clear, unified University of Melbourne policies and support services regarding safety on placement across all academic units, including in relation to inappropriate behaviours perpetrated by placement provider staff and clients/patients.

- Actively reviewing policies and work environments of all placement sites, and only using placement sites that have clear sexual misconduct policies and procedures and that nurture a respectful workplace culture.

- Providing clear briefings and access to information for students on identifying and reporting sexual misconduct on placement.

- Committing to a prevention strategy including pre-placement training for students. Additional support should be provided for disciplines with a high rate of sexual violence on placement, including medicine and nursing.

- Developing an intersectional approach to safety on placement, acknowledging the diversity of the student population. This should include providing information concerning sexual misconduct in alternative languages commonly spoken in the University community and providing access to translators where needed.

- Training students to undertake situational risk assessments including to manage behaviours from members of the public (such as clients/patients).

Intervention

- Providing trained University liaison officers for each placement site or cohort, from whom students can seek support.

- Developing channels for students to contact their University liaison officers to seek support in a timely manner. This could include provision of a mobile app or similar, to facilitate the flow of information.

- Ensuring that students have access to Employee Assistance Programs of placement providers to confidentially discuss issues and seek support.

- Recognising that students are likely to encounter workplace sexual misconduct throughout their careers in high-risk setting and providing training and support accordingly.

- When sexual misconduct on placement is reported, student safety should be the top priority.

Actions should include:

- A timely, appropriate and student-friendly investigation process.
- Removing students from unsafe placements and providing alternative placements so their learning outcomes, work experience, and course completion are not affected.
- No further students being sent to the placement site in question until and unless an investigation is undertaken, and any issues addressed.
- Limiting individuals accused of sexual misconduct from interacting with students while an investigation is in progress.

Future-proofing

- Developing mechanisms to ensure safety of work environments for online/virtual placements.
- Promoting workplaces that have been proactive in creating a safety culture as employers of choice.
- To support the University to develop safe learning environments for students on placement, the following actions are recommended for GSA to implement:
- Collaborating with other community organisations to support graduate students to obtain information on their workplace rights.
- Partnering with the University to assist in disseminating information to student.
- Ensure student voices are represented for any new University policies developed concerning student safety.
- Embedding safety as a theme into orientation and other programs.
- Proactively working with partner organisations including UMSU and the NTEU to strengthen advocacy at the University.

References

Australian Human Rights Commission 2017, Change the Course, accessed from <https://humanrights.gov.au/our-work/sex-discrimination/publications/change-course-national-report-sexual-assault-and-sexual>

Australian Medical Association 2016, 'Code of Ethics', accessed from < https://ama.com.au/position-statement/code-ethics-2004-editorially-revised-2006-revised-2016>

Budden, LM, Birks, M, Cant, R, Bagley, T, and Park, T 2017, 'Australian nursing students' experience of bullying and/or harassment during clinical placement', Collegian, vol. 24, no. 2, pp. 125 – 133

Cameron, C 2017, 'The strategic and legal risks of work-integrated learning: An enterprise risk management perspective', Asia-Pacific Journal of Cooperative Education, vol. 18, no. 3, pp. 243 – 256

Cameron, C, Freudenberg, B, Giddings, J and Klopper, C 2018, 'The program risks of work-integrated learning: A study of Australian university lawyers', Journal of Higher Education Policy and Management, vol. 40, no. 1, pp. 67 – 80

Colbert, M, and Marley, C 2021, 'A new, faculty-centred approach to bullying and harassment', Medical Deans Australia and New Zealand, accessed from < https://medicaldeans.org.au/a-new-faculty-centred-approach-to-bullying-and-harassment-university-of-new-south-wales/>

De Silva, E 2021, 'Empowering students to speak up', Medical Deans Australia and New Zealand, accessed from < https://medicaldeans.org.au/empowering-students-to-speak-up-griffith-university/>

Department of Foreign Affairs and Trade 2019, 'Preventing Sexual Exploitation, Abuse and Harassment Policy', accessed from < https://www.dfat.gov.au/sites/default/files/pseah-policy.pdf>

Earl, D 2021, 'Ethical bystanders moving into the medical workforce', Medical Deans Australia and New Zealand, accessed from < https://medicaldeans.org.au/ethical-bystanders-moving-into-the-medical-workforce-university-of-queensland/>

Everymind 2019, 'Every Doctor, Every Setting: A national framework to guide coordinated action on the mental health of doctors and medical students', accessed from < https://lifeinmindaustralia.imgix.net/assets/src/uploads/Every-Doctor-Every-Setting-Medical-Framework.pdf>

Fnais, N, Soobiah, C, Chen, MH, Lillie, E, Perrier, L, Tashkhandi, M, Straus, SE, Mamdani, M, Al-Omran, M, and Tricco, AC 2014, 'Harassment and discrimination in medical training: A systematic review and meta-analysis', Academic Medicine, vol. 89, no. 5, pp. 817 – 827

Graj, E, Sheen, J, Dudley, A, Sutherland-Smith, W, and McGillivray, J 2020, 'Enhancing student competency in risky clinical environments: Evaluating an online education program', Australian Psychologist, vol. 54, no. 1, pp. 68 – 79

Health, E 2021, 'USyd is failing survivors of sexual violence on clinical placement', Honi Soit, accessed from < https://honisoit.com/2021/08/usyd-is-failing-survivors-of-sexual-violence-on-clinical-placement/>

Medical Board of Australia 2020, 'Good medical practice: a code of conduct for doctors in Australia', accessed from < https://www.medicalboard.gov.au/codes-guidelines-policies/code-of-conduct.aspx>

Minton, C, Birks, M, Cant, R, and Budden, LM 2018, 'New Zealand nursing students' experience of bullying/harassment while on clinical placement: A cross-sectional survey', Collegian, vol. 25, no. 6, pp. 583 – 589

Moylan, CA, and Wood, L 2016, 'Sexual harassment in social work field placements: Prevalence and characteristics', Affilia: Journal of Women and Social Work, vol. 31, no. 4, pp. 405 – 417

National Union of Students 2015, Talk About It: Report 2015, accessed from < https://d3n8a8pro7vhmx.cloudfront.net/nus/pages/144/attachments/original/1454369041/Talk_about_it_Survey_Report.pdf?1454369041>

Ridde, V, Dagenais, C, Daigneault, I 2019, 'It's time to address sexual violence in academic global health', BMJ Global Health, vol. 4, no. 2, e001616

Sheen, J, Wallace, B, Sutherland-Smith, W, McGillivray, J, Dudley, A 2020, 'Risk Aware: Enhancing students' clinical competence in risky environments through a blended simulation-based learning program', Department of Education, Skills and Employment, accessed from < https://ltr.edu.au/resources/ID16-5270_Sheen_Report_2020.pdf>

Stratton, TD, McLaughlin, MA, Witte, FM, Fosson, SE, and Nora, LM 2005, 'Does students' exposure to gender discrimination and sexual harassment in medical school affect specialty choice and residency program selection', Academic Medicine, vol. 80, no. 4, pp. 400 – 409

Students For Consent Culture 2021, 'Provincial Advocacy', accessed from <https://www.sfcccanada.org/provincial>

Szubert, AK, Gibberd, A, Buisson, E, Hooker, C, and Ivory, K 2018, 'Mistreatment in Australian medical education: a student-led scoping of experiences', Australian Medical Student Journal, vol. 8, no. 2, pp. 31 – 37

Tertiary Education Quality and Standards Agency (TEQSA) 2020, 'Good Practice Note: Preventing and responding to sexual assault and sexual harassment in the Australian higher education sector', accessed from < https://files.eric.ed.gov/fulltext/ED606441.pdf>

Tidmarsh, P 2020, 'University of Melbourne Student Union Report to the Respect Taskforce', University of Melbourne Student Union, accessed from <https://umsu.unimelb.edu.au/wp-content/uploads/2020/11/UMSU-Report-to-the-Respect-Taskforce.pdf>

University of Melbourne 2020a, 'Student charter', accessed from < https://students.unimelb.edu.au/campus-life/policy-and-conduct/student-charter>

University of Melbourne 2021a, 'Sexual Misconduct Prevention and Response Policy (MPF1359)', Melbourne Policy Library, accessed from < https://policy.unimelb.edu.au/MPF1359>

University of Melbourne 2021b, 'Student Conduct Policy (MPF1324)', Melbourne Policy Library, accessed from < https://policy.unimelb.edu.au/MPF1324>

University of Melbourne 2021c, 'Appropriate Workplace Behaviour Policy (MPF1328)', Melbourne Policy Library, accessed from < https://policy.unimelb.edu.au/MPF1328>

University of Melbourne 2021d, 'Student complaints and grievances', accessed from < https://students.unimelb.edu.au/campus-life/policy-and-conduct/student-complaints-and-grievances>

University of Melbourne n.d., 'Important information', accessed from <https://mdhs.unimelb.edu.au/study/current-students/placements/students/info>

Wear, D, Aultman, JM, and Borges, NJ 2007, 'Retheorising sexual harassment in medical education: Women students' perceptions at five U.S. medical schools', Teaching and Learning in Medicine, vol. 19, no. 1, pp. 20 – 29

White, GE 2000, 'Sexual harassment during medical training: the perceptions of medical students at a university medical school in Australia', Medical Education, vol. 34, no. 12, pp. 980 – 986

Wilcox, H 2021, 'Co-designing solutions with students', Medical Deans Australia and New Zealand, accessed from < https://medicaldeans.org.au/co-designing-solutions-with-students-university-western-australia/>

Wood, L, and Moylan, C 2017, '"No one talked about it": social work field placement and sexual harassment', Journal of Social Work Education, vol. 53, no. 4, pp. 714 – 726