apparent, depending on the subtype of harassment: 84% of women vs 63% of men felt harassed by degrading speech; 81% of women vs 43% of men felt harassed by letters, emails, or pictures; 95% of women vs 43% of men felt harassed by whistling or staring; and 93% of women vs 70% of men felt harassed by stories with sexual content.

Overall, men rated misconduct as harassment significantly less. This might be because of multiple reasons. Men might be more accepting of an organizational culture where certain behaviors that can constitute harassment are considered acceptable tokens of belonging. Furthermore, explicitly defining an unwanted behavior as harassment portrays one as a victim or a survivor, potentially eroding one’s concept of masculinity and gender role. On the other hand, not perceiving or not defining these behaviors as harassment may result in uncritically reenacting them, potentially even unwantedly.

In our study, the perception of nonphysical forms of harassment differed between men and women. In order to prevent harassment in the workplace, we need to start from these differences in perception and make every form of unwanted behavior explicit. This open communication represents a first necessary step toward cultural change in medicine.

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Conflict of Interest Disclosures: Dr Oertelt-Prigione has provided expert testimony on the issue of sexual harassment to the German Federal Anti-Discrimination Agency and the German Parliament Commission on Family Affairs, Senior Citizens, Women and Youth. No other disclosures are reported.


CORRECTION

Errors in the Figure 1 Caption, Table 1, and Supplement: In the Original Investigation titled “Association of Parenteral Anticoagulation Therapy With Outcomes in Chinese Patients Undergoing Percutaneous Coronary Intervention for Non–ST-Segment Elevation Acute Coronary Syndrome,” published online December 28, 2018, in the caption of Figure 1, “PCIU” was changed to “PCI.” In Table 1, the units for heart failure are number (percentage), the units for hemocrit should not have been g/L, the units for total length of stents are median (interquartile range) mm, and time to procedure should have been given as <24 hours, 24-72 hours, and >72 hours, not days. There were also errors in the supplement. This article was corrected online.