Journal of The Korean Society of Integrative Medicine, 2020, 8(1), 15~25
https://doi.org/10.15268/ksim.2020.8.1.015
ISSN 2288-1174(Print)
ISSN 2383-9651(Online)

Effect of Sexual Harassment Experience on the Job of a Physical Therapist : Seoul Metropolitan Area

Kim Sunho, PT[1] · Yu Wonjong, PT, Ph.D[2‡]

[1]*Dept. of Physical Therapy, Eulji University, Undergraduate, Student*
[2‡]*Dept. of Physical Therapy, Eulji University, Professor*

Abstract

Purpose : Sexual harassment cases involving health and medical workers, including physical therapists, nurses and psychotherapists, are on the rise. Despite the increased incidence of sexual harassment, prior studies show that physical therapists, nursing assistants and caregivers are not doing well cope with sexual harassment. Therefore this study examines the factors associated with sexual harassment damage experience among physical therapists, as well as the relationship between sexual harassment damage experience and job-related aspects. It is intended to prepare basic data for programs and research that can mediate these issues.

Methods : We conducted a self-reported questionnaire survey of 200 physical therapists working at medical institutions in the Seoul metropolitan area. The survey items included sexual harassment experience and job-related aspects such as satisfaction, stress, burnout, and engagement. A correlation analysis was conducted to clarify the relationship between sexual harassment experience and job-related factors, and multiple regression analysis was conducted to verify the correlations of sexual harassment experience on physical therapists' job.

Results : There was a weak correlation between sexual harassment experience, job satisfaction, and job engagement, and a moderate correlation between sexual harassment experience, job stress, and job burnout. The impact of sexual harassment experience on job had a significant correlation on job satisfaction, job stress and burnout.

Conclusions : Sexual harassment damage experience among physical therapists had a significant impact on many job aspects. Thus, there is a need for countermeasures and education to prevent sexual harassment, or at least effectively cope with the consequences. It is proposed to expand to other local or national units as follow-up studies, to study other factors affecting sexual harassment damage experience, and to develop and verify programs to cope with or prevent sexual harassment damage experience.

Key Words : sexual harassment, job stress, satisfaction, burnout, engagement

‡Corresponding author : Yu Wonjong, wjyu@eulji.ac.kr

Received : November 28, 2019 | Revised : December 23, 2019 | Accepted : December 27, 2019

Ⅰ. Introduction

Sexual harassment cases among health and medical workers such as physical therapists, nurses, and psychotherapists are on the rise (DeMayo, 1997). In a previous study, sexual harassment was investigated by occupational therapists, and the results of sexual harassment surveys by nurses in nursing homes and nursing care nurses reported that many cases of sexual harassment occurred and experienced (Lee et al., 2017). However, the physical therapist has been exposed to numerous sexual harassment damages due to the lack of prior research to investigate such sexual harassment damages. Those who have experienced sexual harassment are fearful of others, not just the perpetrators, and experience negativity in their workplace relationships as well as posttraumatic stress disorder symptoms such as anger and depression (Sin et al., 2017; Son et al., 2015). This increase in stress has consequences such as emotional exhaustion and depersonalization, ultimately affecting job satisfaction (Wang & Kim, 2015).

Job satisfaction is a psychological state that satisfies promotion, status, remuneration, working hours, and motivation to achieve (Cheon, 1991). Job satisfaction is closely related to quality of life and physical and mental health. In particular, excess stress and an inability to overcome the problem can compromise physical therapists' ability to work; this occurs through communication breakdown and interpersonal disorders (Moon et al., 2010).

On the contrary, job stress, whether it is brought on by factors internal or external to the organization, is a factor that promotes and induces mental and physical reactions by stimulating the endocrine system and sympathetic nerves (Park, 2013). In particular, physical therapists experience a high degree of work-related stress through their relationships with patients, caregivers, and coworkers (Park, 2016). This leads to higher turnover rates, resulting in a decrease in the number of professionally trained physical therapists and a decline in the quality of physical therapy (Hwang & Myoung, 2014).

According to Maslach' commonly used definition, job burnout is a negative response to excessive stress, which can lead to dissatisfaction with and inattention to one' surroundings (Son, 2018). Job burnout has three dimensions: cynicism, exhaustion, and inefficacy.

Job engagement refers to an individual' level of involvement in an organization (Jang, 2018). A high degree of job engagement indicates that you will do your best on the job and that you prefer yours to other jobs (Han et al., 2010). In other words, job engagement is an important variable that determines job satisfaction and organizational and individual performance.

In our society, an ethical approach to health care is partly attempted, and ethics education related to health care is recognized as a professional ethical education for health workers. Because of the growing interest in ethical aspects, physical therapists also need to study the ethically problematic sexual harassment damages. There have been many studies on occupational therapists, caregivers, and nursing assistants but sexual harassment research, especially in the context of physical therapists, is sorely lacking. Therefore, this study investigates the related factors of sexual harassment damage experience among physical therapists by studying its effects on job satisfaction, stress, burnout, and immersion in the clinical environment. By examining these relationships, this study attempts to identify the prevalence of sexual harassment in this population and prepare basic data for programs and studies that can mediate such problems.

Ⅱ. Methods

1. Research design

A self-reported a paper questionnaire was distributed to physical therapists working in medical institutions in the

Seoul metropolitan area. Prior to conducting the survey, the researcher visited the medical institution and explained the purpose and necessity of the study.

2. Research participants

In this study, 185 people in Lee et al. (2017) study and 140 people in Park et al. (2014) study were surveyed for sexual harassment experience (Lee et al., 2017; Park et al., 2014). In this study, 207 people were surveyed. The participants were 207 physical therapists aged 23 to 48 who agreed to participate in the study. After excluding seven questionnaires owing to incomplete or inadequate responses, the data of 200 participants were used for the analysis.

3. Research period

The data were collected over a 31-day period from July 16 to August 15, 2019.

4. Research tools

1) Sexual harassment

Sexual harassment experience involved visual, verbal, and physical aspects. Twenty-six of the questions used by Kim et al. (2013) were modified for use among physical therapists and scored on a five-point Likert scale. Higher scores were indicative of more sexual harassment experiences. The reliability of previous studies was Cronbach' α = 0.96 (Kim et al., 2013).

2) Job satisfaction

In this study, the Job Satisfaction Index used by Jang (2010) was used. As for scoring, 10 of the 18 items were reverse coded, as done in Jang (2010). The eight items that were not inverted were scored on a five-point Likert-type scale ranging from 1 (not absolutely) to 5 (always true). The 10 reverse-coded items were scored from 5 (not absolutely) to 1 (always true), which means that the higher the score, the higher the job satisfaction. In a previous study, Cronbach's α has been demonstrated to be 0.508-0.745 (Jang, 2010).

3) Job stress

Job stress was measured with Kim (2017) modification of the nurse job stress measurement tool developed by Kim and Gu (1984). Only physiotherapist-related items were used. This tool consists of five questions related to workload, four questions related to doctors and supervisors, three questions related to patients and guardians, and four questions related to professional role conflict. The 16 questions are scored on a five-point Likert-type scale, with the sum of the scores of each item corresponding to each factor divided by the number of items. In a previous study, Cronbach' α has been demonstrated to be 0.77 (Kim, 2017).

4) Job burnout

Park (2016) Korean version of the Maslach Burnout Inventory- General Survey was used to measure job burnout. This 16-item tool includes five items related to emotional exhaustion, five items related to cynicism, and six items related to job confidence, scored on a five-point Likert-type scale. In a previous study, Cronbach's α was 0.843 for exhaustion, 0.809 for cynicism, and 0.866 for job confidence (Park, 2016).

5) Job engagement

In this study, the Job Engagement Index used by Baek (2016) was used. This was the version used in the present study. Eight emotional and eight normative engagement items were scored on a five-point Likert-type scale. In a previous study, Cronbach' α was 0.801 for emotional engagement and 0.826 for normative engagement (Baek, 2016).

5. Analysis method

The collected data were analyzed using the SPSS 21.0 statistical program. Frequency and technical analyses were conducted to identify general characteristics and sexual harassment experience, and correlation analysis was conducted to clarify the relationship between sexual harassment experience and job-related factors such as satisfaction, stress, burnout, and engagement. Multiple regression analysis was conducted to verify the effects of sexual harassment damage experience on job satisfaction, stress, burnout, and engagement. In the correlation analysis, $p<.05$ is low, $p<.01$ is medium, $p<.001$ can be interpreted as having a high correlation.

Ⅲ. Results

1. General characteristics

Regarding the participants' general characteristics, 65.0 % were females, and most (67.0 %) were in their 20s. General hospitals were the most common type of workplace (35.5 %) and with regard to job department, most participants (56.0 %) worked in nervous system rehabilitation. Most participants (95.0 %) were full-time workers, and the most common position (83.5 %) was that of a regular staff member. Of the participants, 51.0 % worked fewer than eight hours a day. Regarding annual income, the most common bracket (53.0 %) was under 30 million won. Most participants' (61.5 %) total work experience was under five years. Among the types of sexual harassment, verbal sexual harassment (mean=1.79) was the most common while physical harassment (mean=1.79) was the least common (Table 1).

2. Chi-square distribution by gender

The results of cross analysis by gender. There was a significant difference in visual, verbal and physical sexual harassment experience according to gender ($p<.05$). Also, There was a significant difference a emotional engagement in job engagement ($p<.05$). Since the average score of male sexual harassment victims is lower than that of females, it can be seen that more female sexual harassment victims experience from female. There was no significant difference in other job satisfaction, job stress, job burnout, and normative engagement of job engagement, so gender was not affected (Table 2).

3. Correlations between sexual harassment damage, job satisfaction, job stress, job burnout, and job engagement

An examination of the relationships between sexual harassment damage experience and the above mentioned job-related factors showed that job satisfaction had a weak negative correlation with physical sexual harassment ($p<.05$) and most of the job stress has had a middle correlation ($p<.01$). There was a weak correlation between visual sexual harassment and excessive workload ($p<.05$). There was middle a correlation between burnout, verbal harassment, and physical harassment. There was a weak correlation between visual harassment and job confidence ($p<.05$). However, there was a very weak correlation in job engagement (Table 3).

4. Effects of sexual harassment damage experience on job satisfaction, job stress, job burnout, and job engagement

Physical sexual harassment had a significant effect on job satisfaction ($p<.05$, $R^2=.032$), interpersonal relations with patients ($p<.05$), and role conflict ($p<.05$). In the case of verbal sexual harassment, it was found to affect excessive workload ($p<.05$), while visual and verbal sexual harassment affected burnout ($p<.05$). However, sexual harassment experience did not affect the interpersonal relationship with the boss, cynicism, job confidence, emotional engagement, and normative engagement ($p<.05$).

In the case of job stress, interpersonal relations with

patients (R^2=.105), role conflict (R^2=.118), and interpersonal relationship with your boss (R^2=.09) were found to have high explanatory power. In addition, the emotional engagement of job engagement showed a high level of explanatory power that sexual harassment affects (R^2=.096). The low level of explanation is the job satisfaction (R^2=.032), job cynicism of job burnout (R^2=.031), job confidence (R^2=.029) and normative engagement of job engagement (R^2=.014)(Table 4).

Table 1. General characteristics

Characteristic	Item	n	%
Gender	Male	70	35.0
	Female	130	65.0
Age	20~29	135	67.5
	30~39	60	30.0
	40~49	5	2.5
Educational attainment	College	70	35.0
	University	117	58.5
	Graduate school	13	6.5
Marriage	Single	165	82.5
	Married	35	17.5
Work place	Clinic	65	32.5
	General hospital	71	35.5
	Tertiary hospital	64	32.0
Job department	Nervous system rehabilitation	112	56.0
	Orthopaedic surgery rehabilitation (Manual therapy)	44	22.0
	Thermotherapy, Electrotherapy	38	19.0
	And so on	6	3.0
Employ form	Regular workers	190	95.0
	Non regular workers	10	5.0
Position	Regular staff	167	83.5
	Assistant manager	27	13.5
	Manager	6	3.0
Work hour	≦8	102	51.0
	8<	98	49.0
Annual income	<2.0 million	8	4.0
	2.0-2.9 million	106	53.0
	3.0-3.9 million	61	30.5
	4.0-4.9 million	17	8.5
	5.0 million≦	8	4.0
Total working years	≦1	24	12.0
	2-5	123	61.5
	6-10	38	19.0
	10<	15	7.5

Table 2. Chi-square distribution by gender

Subordination variable	Subcategory	Mean		Pearson Chi-Square value	p-value
		Male Mean±SD	Female Mean±SD		
Sexual harassment	Visual sexual harassment	1.32±.45	1.91±.72	46.357	.000
	Verbal sexual harassment	1.41±.52	2.00±.86	46.122	.001
	Physical sexual harassment	1.40±.60	1.86±.86	36.825	.002
Job satisfaction	Job satisfaction	3.32±.56	3.17±.55	59.085	.078
Job stress	Excessive workload	3.14±.77	3.25±.71	20.286	.378
	Interpersonal relations with patients	2.75±.75	2.86±.74	16.930	.152
	Role conflict	3.44±.69	3.52±.59	17.867	.213
	Interpersonal relationship with your boss	2.95±.78	3.05±.70	14.590	.481
Job burnout	Exhaustion	3.10±.76	3.30±.72	23.168	.184
	Cynicism	2.37±.70	2.54±.66	24.283	.146
	Job confidence	3.52±.61	3.42±.57	27.009	.079
Job engagement	Emotional engagement	2.93±.41	2.79±.37	40.563	.002
	Normative engagement	2.54±.31	2.59±.31	16.912	.203

Value are M±SD.

Table 3. Correlation between sexual harassment damage experience, job satisfaction, job stress, burnout and job engagement.

Subordination Variable	Subcategory	Visual sexual harassment	Verbal sexual harassment	Physical sexual harassment
		Pearson correlation coefficient	Pearson correlation coefficient	Pearson correlation coefficient
Job satisfaction	Job satisfaction	-.053	-.058	-.143*
Job stress	Excessive workload	.143*	.225**	.227**
	Interpersonal relations with patients	.276**	.288**	.318**
	Role conflict	.287**	.311**	.334**
	Interpersonal relationship with your boss	.284**	.287**	.266**
Job burnout	Exhaustion	.119	.225**	.209**
	Cynicism	.052	.109	.132
	Job confidence	.162*	.126	.097
Job engagement	Emotional engagement	-.001	-.039	.021
	Normative engagement	.089	.074	.027

*p<.05, **p<.01, ***p<.001

Table 4. Effects of sexual harassment damage experience on job satisfaction, job stress, job burnout, job engagement

Subordination variable	Subcategory	Model	Unstandardized coefficients		Standardized coefficients	t	p-value	R^2
			B	Standard Error	β			
Job satisfaction	Job satisfaction	Visual S.H	.105	.113	.132	.931	.353	R^2= .032
		Verbal S.H	.048	.093	.070	.509	.611	
		Physical S.H	-.208	.086	-.304	-2.424	.016	
Job stress	Excessive workload	Visual S.H	-.269	.141	-.265	-1.908	.058	R^2= .075
		Verbal S.H	.232	.117	.265	1.981	.049	
		Physical S.H	.204	.107	.233	1.901	.059	
	Interpersonal relations with patients	Visual S.H	.001	.146	.001	.008	.994	R^2= .105
		Verbal S.H	.093	.121	.101	.769	.443	
		Physical S.H	.219	.111	.238	1.973	.050	
	Role conflict	Visual S.H	-.026	.116	-.031	-.226	.821	R^2= .118
		Verbal S.H	.107	.096	.145	1.110	.269	
		Physical S.H	.181	.088	.245	2.049	.042	
	Interpersonal relationship with your boss	Visual S.H	.114	.138	.114	.824	.411	R^2= .09
		Verbal S.H	.124	.115	.143	1.077	.283	
		Physical S.H	.055	.105	.064	.523	.602	
Job burnout	Exhaustion	Visual S.H	-.349	.144	-.336	-2.423	.016	R^2= .081
		Verbal S.H	.306	.120	.340	2.558	.011	
		Physical S.H	.189	.110	.211	1.729	.085	
	Cynicism	Visual S.H	-.222	.135	-.234	-1.646	.101	R^2= .031
		Verbal S.H	.115	.112	.140	1.026	.306	
		Physical S.H	.172	.103	.211	1.679	.095	
	Job confidence	Visual S.H	.193	.117	.235	1.648	.101	R^2= .029
		Verbal S.H	.002	.097	.003	.023	.982	
		Physical S.H	-.067	.089	-.094	-.750	.454	

Table 4. Effects of sexual harassment damage experience on job satisfaction, job stress, job burnout, job engagement(continue)

Subordination variable	Subcategory	Model	Unstandardized coefficients		Standardized coefficients	t	p-value	R^2
			B	Standard Error	β			
Job engagement	Emotional engagement	Visual S.H	.028	.078	.051	.356	.723	R^2= .096
		Verbal S.H	-.080	.064	-.172	-1.247	.214	
		Physical S.H	.054	.059	.115	.908	.365	
	Normative engagement	Visual S.H	.071	.065	.158	1.099	.273	R^2= .014
		Verbal S.H	.021	.054	.054	.388	.698	
		Physical S.H	-.055	.049	-.142	-1.121	.264	

S.H : Sexual Harassment

Ⅳ. Discussion

This study analyzed the data of 200 participants to determine the actual status of sexual harassment damage among physical therapists and whether their experiences of sexual harassment affect job satisfaction, job stress, job burnout, and job engagement.

In this study, sexual harassment had the strongest correlation with job stress. In the regression analysis, there was a significant influence when sexual harassment damage experience was set as the independent variable and job stress as the dependent variable. This result demonstrates that sexual harassment experience has an effect on job stress, as shown by Park et al. (2015). In addition, among the subfactors of harassment experience, verbal harassment had an effect on job stress. This may lead to the results of previous studies that high job stress due to the experience of sexual harassment can negatively affect job satisfaction, turnover intention, and exhaustion (Han & Cho, 2016; Lee & Chung, 2014). The correlations showed the largest correlations in job stress with Interpersonal relations with patients, role conflict interpersonal, relationship with your boss. Also, in the regression analysis, R^2 showed the highest explanatory power in interpersonal relations with patients, role conflict interpersonal, and relationship with your boss. The experience of sexual harassment has had a significant effect on the excessive workload, and it is thought that the therapist may feel excessive in the work area due to mental stress caused by sexual harassment damage. Park et al. (2017) said that job stress consists of job environment, work overload, and role conflict (Park et al., 2017). It can be seen that the experience of sexual harassment affects job stress due to reduced efficiency of work, deteriorating relationships with patients, and increased role conflicts. Jung (2015) said that the impact of sexual harassment on psychological and work life is less efficient because it makes me feel unpleasant, ashamed and insulted. In addition, physical sexual harassment affects patients' interpersonal relationships and role conflicts. Since physical therapists are one-on-one and face-to-face contact with patients, sexual harassment damage experiences in relation to patients. It seems to have a significant effect on physical sexual harassment.

In addition, in this study, sexual harassment experience had an effect on job satisfaction. This result is in line with

Jung (2018) study, which showed that women who have experienced sexual harassment have low work satisfaction, and that as the experience of sexual harassment increases, work satisfaction continues to decrease. Not only the experience of direct harm but also indirect sexual harassment that occurs within departments or organizations negatively impacts engagement and job satisfaction (Jung, 2018; Han, 2006). If the physiotherapist is not satisfied with his or her job, it is difficult to expect an effective role and will not be able to develop as a professional(Kim et al., 2014). In particular, the results showed that physical sexual harassment experience had an effect on job satisfaction. The strong correlation between sexual harassment and job stress and satisfaction among physical therapists is thought to originate from the high degree of physical contact with patients. In addition, the physical therapist's mental health, as well as the treatment and management of the patient, has a negative impact on job engagement. However, due to the low R^2 value, it is thought to have less effect.

Having experienced visual and verbal sexual harassment damage was found to be associated with job burnout. In this study, there was a significant difference in visual and verbal sexual harassment damage experience with regard to exhaustion, which is a sub-factor of job burnout; this result is in accordance with that of Park (2019) survey of 726 nursing caregivers reporting significant differences in the exhaustion subfactor (Park, 2019). Exhaustion is a form of stress response that occurs when you are no longer able to cope with stress as a result of repeated mental pressures, namely emotional, mental and physical exhaustion and exhaustion (Kim, 2016). Rather than physical sexual harassment, verbal and visual sexual harassment, which can be easily and lightly delivered, may occur repeatedly, causing stress, depression, and anxiety. In addition, although physical sexual harassment cannot be effected to lack of significant differences in exhaustion, it can be said to have affected some extent because the p-value is very close to 0.05, and there is more than moderate correlation in correlation. The high R^2 value also supports the result that sexual harassment damage experience has some effect on exhaustion.

When comparing the sexual harassment damage experiences by gender, the visual, verbal and physical harassment damage experiences were more significant differented in women than in men. A similar study found that 84 percent of working women in the studies of Oh and Koh (2003) had experience in sexual harassment. This can thinks that men lack the concept and education of sexual harassment and sexual assault, and that males have more sexual harassment experience because they are stronger than women.

According to a survey on sexual harassment in hospitals, the damage increased from 10.1 % in 2013 to 10.7 % in 2014 (Korean health and medical worker's union, 2014). As the prevalence of sexual harassment continues to rise, studies show that nursing assistants and caregivers are not coping well (Kim, 2013; Kim, 2012). The same is true for physical therapists. Evaluating sexual harassment in the context of the relationship between a physical therapist and patient is complex and, therefore, requires a customized sexual harassment education program (DeMayo, 1997).

A limitation of this study is the fact that it focused only on physical therapists working in the Seoul metropolitan area. Thus, the results cannot be generalized to physical therapists across the country. Despite this limitation, the study' strength lies in the fact that there has been no prior research on physical therapists' coping or turnover intentions when experiencing sexual harassment. While there is a need to expand our research scope, this study demonstrates the necessity of developing educational programs and other measures to reduce the prevalence of sexual harassment and formulate coping strategies.

Ⅴ. Conclusion

The purpose of this study was to investigate the effects

of sexual harassment damage experience on job related factors such as satisfaction, stress, burnout, and engagement among physical therapists working in the Seoul metropolitan area, and the conclusions are as follows.

First, in this study, sexual harassment experience negatively affects job stress.

Second, in this study, visual sexual harassment and verbal sexual harassment have a negative impact on job exhaustion by increasing job burnout.

Third, in this study, physical sexual harassment affects job satisfaction.

Fourth, in this study, physical sexual harassment negatively affects interpersonal relationships and role conflicts with patients, thus affecting job stress.

Sexual harassment experience has several negative effects on the performance of physical therapists.

Therefore, it is necessary to develop sexual harassment prevention programs suitable for medical institutions in order to improve the job performance of physical therapists.

References

Ahn CJ, Kim MC, Lee MS, et al(2016). Comparative analysis of the ethical values of physical therapy: focused on physical therapists and physical therapy students. J Korean Soc Integrative Med, 4(2), 37-51.

Baek MA(2016). Effect of job stress of person in charge of lifelong education on organizational commitment : based on control effect of job efficacy. Graduate school of Kyungpook University, Republic of Korea, Master's thesis.

Cheon JK(1991). A study on the service performance and job satisfaction of physical therapists. JKPT, 3(1), 9-37.

DeMayo RA(1997). Patient sexual behaviors and sexual harassment: a national survey of physical therapists. Phys Ther, 77(7), 739-744.

Han JW(2006). The effects of sexual harassment on the job: consequences for individuals and organizations. Journal of Secretarial Studies, 15(1), 29-48.

Han SY, Cho YC(2016). Covariance structure analysis on the impact of job stress, fatigue symptoms and job satisfaction on turnover intention among dental hygienists. JKAIS, 17(7), 629-640.

Han YH, Sohn IS, Park KO, et al(2010). The relationships between professionalism, job involvement, organizational commitment and turnover intention among clinical nurses. JKCNR, 16(2), 17-31.

Hwang R, Myoung SM(2014). Empirical verification of the korean occupational stress scale in physical therapist. The Journal of the Korea Contents Association, 14(11), 849-857.

Jang JS(2010). Employees satisfaction at the long term nursing care. Graduate school of Gachon University, Republic of Korea, Master's thesis.

Jung JY(2018). The effect of sexual harassment on workplace satisfaction and career prospect for women. Journal of Women's Studies, 97(3), 72-102.

Jang SY(2018). A study on the effect of emotional labor of casino employees, job engagement, organizational commitment customer orientation. Tourism Research, 43(2), 151-170.

Jung YK(2015). Survey of sexual harassment experienced by beauty care workers and factor analysis based on their awareness. Graduate school of Youngsan University, Republic of Korea, Master's thesis.

Kim EH(2017). Effects of personality types on job stress among clinical physical therapists. Graduate school of Sahmyook University, Republic of Korea, Master's thesis.

Kim IA(2012). Coping measures for care workers' damages by sexual harassment. Graduate school of Gaya University, Republic of Korea, Master's thesis.

Kim JS, Kim HS, Kim KH(2013). Experience of sexual harassment and coping behaviors among caregivers in nursing homes. J Gerontol Nurs, 15(1), 21-31.

Kim MJ, Gu MO(1984). The development of the stress

measurement tool for staff nurses working in the hospital. J Nurs Acad Soc, 14(2), 28-37.

Kim SG, No JW, Park MG, et al(2014). The effects of job types of physical therapists on the job satisfaction and organizational commitment: to center the Pusan area. J Korean Soc Integrative Med, 2(4), 41-48.

Kim SH(2016). A Study on the emotional labor and burnout of the social worker. KASWPR, 7(1), 103-124.

Lee HK, Chung JY(2014). Study of job stress, burnout, and compassion satisfaction of occupational therapists in rehabilitation hospitals. JSER, 53(3), 177-192.

Lee JH, Song YW, Cha TH(2017). A study on job stress and working environment of female occupational therapist. JKAIS, 18(2), 484-492.

Moon JK, Song BK, Hwang BY(2010). A study on job satisfaction among physical therapists in the public health centers of the Seoul metropolitan area. JKPT, 22(2), 61-68.

Oh HJ, Koh HJ(2003). Recognition and experience of sexual harassment of female teachers in middle and high school. Journal of Korean Public Health Nursing, 17(2), 238-254.

Park GJ, Jung HM, Kim MK(2014). Sexual harassment of nurses in long-term care hospitals. KJHSM, 8(4), 95-107.

Park JM(2016). Effects of job stress factors on job satisfaction and job involvement in physical therapist. Graduate school of Sehan University, Republic of Korea, Master's thesis.

Park JS(2016). The influence of job stress on turnover intention, public service motivation and job burnout : focused on correctional officers. Graduate school of Myongji University, Republic of Korea, Doctoral dissertation.

Park JY(2013). The effects of job stress of elderly care facility workers and the leadership of directors on organization effectiveness. Graduate school of Uiduk University, Republic of Korea, Master's thesis.

Park KR, Suh HK, Koh YS(2015). Effect of sexual harrassment on job stress among care-givers for the elderly in long-term care facility. JKGS, 35(1), 171-190.

Park MA, Lee SG, Shin YW, et al(2019). A study on the effect of sexual harassment damage on turnover intention: focused on the mediating effect of depression, anxiety and burnout. The Journal of Humanities and Social Science, 10(1), 255-270.

Park SG, Park JM, Yang DJ, et al(2017). Analysis of the job stress factors affecting job satisfaction and job involvement in physical therapists. J Korean Soc Integrative Med, 5(3), 39-47.

Sin YW, Lee HY, Lee SG, et al(2017). Experience of sexual harassment and coping behaviors among caregivers in nursing homes. Journal of Gerontological Nursing, 7(1), 343-358.

Son HR(2018). The effect of job challenge and job hindrance on job burnout and job engagement : the moderating effect of positive psychological capital. Graduate school of Daegu University, Republic of Korea, Master's thesis.

Son YJ, Gong HH, You MA, et al(2015). Relationships between workplace violence experience and posttraumatic stress symptoms, resilience in clinical nurses. JKDAS, 17(1), 515-530.

Wang JS, Kim YR(2015). Analysis of relationship between job stress and turnover intention of physical therapists. JKAICS, 16(9), 6112-6119.

Korean Health and Medical Worker's Union. Health and medical workers survey (4) exploitation, violation, and sexual harassment, 2014. Available at http://bogun.nodong.org/xe/khmwu_5_4/309826/ Accessed November 2019.