REVIEW

Sexual Harassment at Work: Scoping Review of Reviews

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Background: This article presents a scoping review of reviews on the topic of Sexual Harassment (SH) in the workplace, a subject that has garnered significant global attention. The phenomenon of SH poses a critical challenge to equal opportunity and gender equity in the workplace.

Aim: The review aims to synthesize existing research, focusing on the antecedents, consequences, and interventions related to SH.

Methods: The inclusion and exclusion criteria were established based on the research question, which was adapted from the PICO strategy. A protocol was devised following the "DS-CPC" format, which encompasses considerations related to Documents, Studies, Construct, Participants, and Contexts. The search was carried utilizing several automated databases, specifically focusing on the fields of Psychology, Behavioral Sciences, and Health. Preliminary search yielded a total of 468 articles, and the review ultimately encompassed a total of 22 articles.

Results: This review critically examines the complexity of SH, including the role of bystanders, the perpetuation of myths and misconceptions, and the exploitation of power imbalances by harassers. It also explores the manifestation of SH in male-dominated workplaces and the varying levels of organizational awareness and response to such incidents. The review highlights the importance of fostering an organizational culture that not only acknowledges and protects victims but also implements effective measures to penalize perpetrators.

Implications: It aims to elucidate the intricacies of SH and advocate for a workplace environment characterized by respect and accountability. Through this comprehensive analysis, the article seeks to inform and guide future research, policy development, and organizational practices concerning SH.

Keywords: sexual harassment, review, bystander intervention, organizational culture, workplace equality, #metoo movement

Introduction

In 2017, the world witnessed a significant upsurge in global awareness surrounding the issue of Sexual Harassment (hereafter, SH), largely catalyzed by the #MeToo campaign. In a mere 24-hour period following Alyssa Milano's initial tweet, using Tarana Burke's phrase "me too", on October 15, 2017, more than five million users across various social media platforms engaged with the hashtag. This influential campaign underscored the pervasive and distressing nature of SH, thereby instigating a critical discourse on the subject.[1] Recent studies showed that the MeToo movement led some countries to change their laws,[2] and also affected victims decisions to report a sex crime to the police. For instance, in the United States, the movement increased reporting of sex crimes during its first semester, and the effect persisted for two years, by increased reporting, arrests for sexual assault, their effects were similar across racial and socioeconomic groups.[3] Concomitantly, the realm of empirical research concerning SH has witnessed a pronounced escalation,[4] driven by mounting interest from the general public and the academic community alike.[5,6]

The SH phenomenon poses a grave threat to equal opportunity and gender equity in the workplace, particularly impacting the career development of women.[7] Furthermore, it has been classified as a severe violation of human rights.[8] Despite this, SH continues to affect a significant percentage of workers worldwide, with approximately 15.2% of employees reporting such experiences in recent global surveys,[9] and more than 55.1% when considering specific professions, as nursing.[1] The

reverberations of these encounters extend beyond immediate emotional distress, encompassing heightened levels of insecurity, stress, anxiety, psychosomatic ailments, and concentration difficulties in comparison to their unaffected counterparts.[10] Such repercussions pose potential threats to the affected individuals' career trajectories.[11] Moreover, victims may find themselves grappling with enduring psychological disorders, including depression, eating disorders, and alcoholism.[12,13]

This intensification of empirical research is undeniably propelled by the exigency to comprehensively fathom the intricate tapestry of SH and its far-reaching ramifications.[14] A multitude of factors serves to compound the gravity of this issue. Notably, bystanders frequently underestimate the challenges encountered by victims in their efforts to defend themselves against harassment.[15] Bystanders could be often subjected to the same power dynamics as victims themselves, precluding them to support the SH targeted person.[16] This prevailing misperception often fosters the erroneous belief that victims could have effortlessly evaded harassment, perpetuating narratives of victim-blaming. Despite the role of the silent bystanders as well as the organizational norms avoiding claim and voice, the main responsibility lies with the perpetrator. Sexual harassers are adept at exploiting hierarchical power imbalances or the precarious job situations of their subordinates, rendering any attempt at self-defense exceptionally perilous.[17]

The prevalence of myths and misconceptions surrounding SH, including the fallacy that it frequently represents mere failed flirtations or that victims' attire invites unwarranted advances, serves to trivialize the issue and shift culpability from perpetrators onto victims. Furthermore, research indicates that SH is more likely to manifest within workplaces where men constitute the majority, diminishing the likelihood of victims seeking support from female colleagues.[18,19]

Within organizational and corporate settings, the level of awareness regarding this issue exhibits substantial variation.[20] Regrettably, in numerous instances, aggressors remain shielded from the repercussions of their actions, while victims often encounter blame or discredit. Consequently, the imperative of fostering an organizational culture that genuinely acknowledges and safeguards victims, while concurrently implementing effective measures to penalize aggressors, becomes strikingly apparent.[21]

This scoping review of reviews is not merely an academic exercise but a crucial step towards addressing the pervasive issue of SH in the workplace. By synthesizing existing research, insights from diverse sources, and the latest reviews and meta-analyses, the present study seeks to fill a significant gap in the literature: understanding the multifaceted nature of SH, its antecedents, and consequences, as well as evaluating the effectiveness of current interventions. The necessity for this research stems from an urgent need to inform policy, practice, and future research directions, providing a robust foundation for developing more effective strategies to combat SH. This work contributes to the ongoing dialogue on this critical issue by not only shedding light on the complexities surrounding SH but also advocating for a transformation in workplace culture. The study's aim to promote an environment that not only fosters respect and accountability but also supports victims and challenges the systemic issues that allow SH to persist. In doing so, this review underscores the imperative for concerted efforts to understand and address SH, reinforcing the need for our research to justify the significant efforts invested in this endeavor.

Theoretical Framework

In recent years, empirical research has accumulated a substantial body of evidence regarding the detrimental effects of SH on workers globally.[6,22,23] This phenomenon poses a grave threat to equal opportunities in the workplace, particularly impacting the career development of women. Moreover, recognizing sexual harassment as a severe violation of human rights underscores its profound societal and legal ramifications. It is an affront to the fundamental human rights principles that advocate for a safe, respectful, and dignified work environment for all individuals, regardless of gender. Addressing sexual harassment is, therefore, not just a matter of workplace policy but a crucial aspect of upholding and protecting the inherent rights and dignity of every employee. By tackling this issue head-on, we affirm the commitment to fostering a workplace culture that respects human rights, promotes gender equality, and ensures that every individual has the opportunity to achieve their full professional potential without fear of harassment or discrimination. Despite this, SH continues to affect a significant percentage of workers worldwide, with data from nationally representative samples in the United States informing that 43% of men and 81% of women suffered from SH at one point of their lives.[9]

Although there is an ongoing debate regarding the definition of SH, the majority of researchers concur that it constitutes an unwelcome, offensive, and threatening experience of sexual conduct within the workplace context.[24]

Legally, it is defined as a form of sexual discrimination encompassing two types of behaviors: quid pro quo and a hostile environment. The former involves threats or bribes of a sexual nature used to make employment-related decisions. The latter includes sexual jokes, comments, and physical contact that interfere with work or create an intimidating, hostile, or offensive environment. This definition may be overly restrictive since many non-criminal sexually harassing behaviors continue to be stressful and harmful to individuals and their organizations,[25] and the definition of SH varies accordingly to different national legislations as well as cultural norms.[26]

In light of the extensive body of research on SH, it is evident that there is a proliferation of primary studies and an abundance of reviews addressing various aspects of this complex issue.

The justification for conducting a scoping review of reviews in the context of SH is evident from the existing literature and the limitations of previous review efforts. Despite the abundance of empirical studies on SH, discordant findings have persisted, particularly when comparing studies from various occupational sectors, utilizing different measurement instruments to evaluate the perception of harassment, and incorporating samples from different continents. While several quantitative reviews have been undertaken,[27–29] they have each adopted a narrow focus or concentrated on specific aspects of the problem. One of the oldest reviews by Rotundo, Nguyen and Sackett[29] exclusively examines gender differences among perceivers of SH behaviors but overlooks other potential moderating factors and neglects to explore variables that could serve as antecedents or consequences in the organizational context. Ilies and colleagues[27] primarily address the issue from the perspective of incidence rates of SH, identifying three key moderators—survey methods, sampling techniques, and power dynamics within organizations—yet, these moderators alone cannot fully account for the substantial variations in SH incidence rates reported in primary studies. Lastly, the work of Lapierre, Spector, and Leck[28] delves into the impact of SH behaviors on overall job satisfaction, distinguishing between cases of harassment with sexual content and those without. However, this review fails to examine other potential antecedents and consequences beyond this specific aspect. Given the limitations of these previous reviews and their failure to construct a comprehensive explanatory model of the antecedents and consequences of SH at work, there is a clear need for a scoping review of reviews. Such an endeavor will enable the synthesis of existing knowledge from a multitude of reviews, offering a holistic perspective on the multifaceted nature of SH in the workplace. By doing so, this scoping review will bridge gaps in the literature, provide a more comprehensive understanding of SH, and potentially pave the way for the development of a more robust and integrated explanatory framework for this critical issue.

Theoretical Models Explaining SH

Understanding SH within the workplace necessitates a theoretical foundation that illuminates its underlying dynamics and factors. Scholars have developed various theoretical models that have contributed significantly to the comprehension of this pervasive issue. These models offer unique insights into the nature and causes of SH, drawing from established research:

Social Cognitive Theory: Bandura's Social Cognitive Theory[30] posits that individuals acquire behaviors through observation, imitation, and reinforcement. In the context of SH, it suggests that individuals may learn harassing behaviors from their social environment, including workplace norms and culture. This theory underscores the role of modeling and social learning in the perpetuation of SH.

Gender theories, including feminist perspectives,[31] emphasize the role of gender dynamics and power imbalances in SH. These theories highlight how societal gender norms, patriarchy, and power differentials contribute to the occurrence and tolerance of SH. Understanding SH within the framework of gender and power theories underscores the need to address structural inequalities that enable harassment.

Organizational models, such as the Organizational Power and Politics Model[32] and the Organizational Climate Model,[33] examine how factors within the workplace environment, including leadership, culture, and climate, influence SH. These models emphasize that SH is not solely an individual-level issue but is also shaped by the context in which it occurs. Organizational theories highlight the importance of creating a workplace environment that discourages harassment.

Intersectionality Theory[34] has gained prominence for its ability to account for the complex interplay of multiple social identities in SH experiences. This theory acknowledges that individuals may face different forms of discrimination and harassment based on their intersecting identities, such as race, gender, sexuality, and more. It highlights the need to consider the unique experiences of individuals with intersecting marginalized identities.

Psychological models, including the Hostile Attribution Bias[35] and the Social Identity Theory,[36] delve into the cognitive and identity-based aspects of SH. These models explore how individuals perceive and respond to harassment and how social categorization processes can contribute to SH incidents. Psychological models offer insights into the cognitive processes underlying SH experiences.

Incorporating these theoretical models into the framework provides a comprehensive lens through which to analyze the complex nature of SH. By examining the interplay of social, organizational, cognitive, and identity-related factors, this theoretical framework aims to deepen the understanding of the underlying mechanisms and dynamics of SH, facilitating the development of effective prevention and intervention strategies in the workplace.

SH Risk Factors

SH is a pervasive and harmful form of gender-based violence that can have a devastating impact on victims' lives. Understanding the complex interplay of risk factors that contribute to SH is essential for developing effective prevention and intervention strategies.[37]

Individual characteristics, such as gender, age, sexual orientation, and disability, can increase a person's risk of experiencing SH.[38] Women are disproportionately affected by SH, with estimates suggesting that one in three women have experienced SH in the workplace.[39] Younger employees are also more likely to experience SH than older employees. Lesbian, gay, bisexual, transgender, and queer individuals are at an increased risk of SH, as are individuals with disabilities.[40,41]

Workplace characteristics, such as a culture that tolerates or promotes SH, unequal power dynamics, lack of clear policies and procedures, lack of enforcement of policies and procedures, and alcohol consumption, can also increase the risk of SH.[42] Workplaces with cultures that normalize or trivialize sexual behavior are more likely to experience SH.[43] Unequal power dynamics between employees, managers, and clients can contribute to SH, as individuals in positions of power may feel more comfortable engaging in harassing behavior.[17] Workplaces that lack clear policies and procedures against SH are more likely to experience it, as employees may be unsure of what constitutes harassment and how to report it. Even when policies and procedures are in place, they may not be effectively enforced, which can contribute to a culture of tolerance for SH.[44] Additionally, workplaces where alcohol is consumed are more likely to experience SH, as alcohol can lower inhibitions and increase the likelihood of risky behavior.[45]

Industry and occupational risk factors, such as working in the service industry, holding management or supervisory positions, and working in isolated environments, can also increase the risk of SH.[46] Occupations in the service industry, such as waitressing and bartending, are at a higher risk of SH due to the nature of the work and interactions with customers.[47] Individuals in management and supervisory positions may have more power over their subordinates, which can increase their risk of engaging in SH. Additionally, individuals who work alone or in isolated environments may be more vulnerable to SH, as they may have less opportunity to seek help or escape from a harassing situation.[48]

Intersectional factors, such as race and ethnicity, immigration status, and socioeconomic status, can further increase a person's risk of experiencing SH.[12,49] Women of color are at an increased risk of SH, as they face the intersection of sexism and racism.[38] Immigrant women may be particularly vulnerable to SH due to their fear of deportation or repercussions for reporting the harassment (. Additionally, women from low-income backgrounds may be more vulnerable to SH due to their limited access to resources and support.[50]

The Devastating Consequences of SH

The consequences of SH extend far beyond the immediate emotional and psychological distress it causes, affecting victims' physical health, mental well-being, social relationships, and career trajectories.

SH can lead to a range of psychological and emotional consequences, including post-traumatic stress disorder, a debilitating mental health condition characterized by flashbacks, nightmares, hypervigilance, and avoidance behaviors.[51] Victims are at an increased risk of experiencing depression and anxiety, which can significantly impair their daily functioning and quality of life. Moreover, SH can erode victims' sense of self-worth and self-esteem, leading to feelings of shame, guilt, and inadequacy.[25]

SH can also have detrimental effects on victims' physical health, leading to chronic pain and fatigue that interfere with their ability to work, engage in social activities, and maintain overall health.[52] Sleep disturbances, such as insomnia

and difficulty sleeping, are common consequences of SH. Additionally, SH can manifest in physical symptoms like headaches, stomachaches, and dizziness.[53]

SH can have a negative impact on victims' social relationships and overall social functioning. Victims may withdraw from social activities and relationships due to feelings of shame, embarrassment, and fear of judgment. Close relationships with family, friends, and romantic partners may become strained and damaged. Furthermore, SH can make it difficult for victims to trust others, leading to feelings of isolation and loneliness.[54]

SH can also significantly affect victims' careers. It often leads to reduced job satisfaction, decreased productivity, and increased absenteeism. Victims may experience career stagnation, hindering their advancement and limiting professional growth opportunities. In severe cases, SH can force victims to leave the workforce altogether due to the unbearable work environment and its detrimental impact on their overall well-being.[55]

The consequences of SH are further exacerbated by intersecting factors such as race, ethnicity, immigration status, and socioeconomic status. Women of color, immigrant women, and women from low-income backgrounds may face additional barriers to reporting SH, accessing support, and achieving justice.[56]

The consequences of SH are far-reaching and can have a profound and lasting impact on victims' lives. Understanding the severity and breadth of these consequences is crucial for developing effective prevention and intervention strategies, promoting a culture of respect and civility in workplaces, and ensuring that victims have access to the support and resources they need to heal and rebuild their lives. Recognizing and addressing the devastating consequences of SH is a critical step toward creating safer and more equitable workplaces for all.

Hence, amid this wealth of literature, the need for a comprehensive scoping review of reviews becomes increasingly apparent. Such a synthesis is crucial to distill the key findings, methodologies, and gaps in the existing body of knowledge. It will enable us to navigate through the multitude of primary studies and reviews, providing a consolidated and organized overview that is essential for advancing the understanding of SH at work.

This study is dedicated to conducting a scoping review, specifically a scoping review of reviews, with a primary focus on the extensive body of literature related to SH. Our objectives are two-fold:

This study is aimed to explore recent advancements in the conceptualization of SH, encompassing its diverse dimensions, manifestations, and underlying factors. Additionally, this review seeks to identify and map the specific types of negative behaviors falling within the broader framework of SH that have garnered substantial attention in the existing academic literature.

The present approach aligns with the scoping review methodology, as articulated by[57] and later refined by Peters, Godfrey, McInerney, Munn, Tricco and Khalil.[58] This methodology provides us with a comprehensive and systematic means of surveying the multifaceted landscape of research on SH. By conducting a scoping review of reviews, the aim is to synthesize and organize the collective knowledge and insights from a plethora of scholarly works in this field.

Three central research questions guide this scoping review:

(a) What are the most recent developments in the conceptualization and understanding of SH within the academic discourse?
(b) Which specific forms and manifestations of SH have received extensive examination and analysis in the existing body of review literature?
(c) How do organizational factors and social interactions impact the effects of SH, and how do these factors influence employee outcomes?

The objective is to contribute to a more nuanced and comprehensive comprehension of the complex phenomenon of SH, shedding light on its evolving conceptual dimensions and highlighting areas of particular scholarly interest.

Method
Design
Grant and Booth[59] acknowledged the rich array of methodologies available for summarizing the body of evidence and identified the scoping review as one among various types of literature reviews, with a specific focus on SH. Scoping reviews

distinguish themselves from systematic reviews, primarily in terms of their objectives. While systematic reviews predominantly aim to address specific, often intervention-related, questions (particularly pertaining to the efficacy of interventions or treatments, as noted by Peters et al,[58] both methods share commonalities in terms of their systematic, transparent, and replicable nature, a principle underscored by Grant and Booth (2009). Hence, the current review has been structured in accordance with the overarching guidelines for umbrella reviews outlined in the Joanna Briggs Institute's Manual for Evidence Synthesis.[60]

Inclusion and Exclusion Criteria

In the context of this SH-focused study, inclusion and exclusion criteria were established based on the research question, which was adapted from the PICO strategy. More specifically, a protocol was devised following the "DS-CPC" format, which encompasses considerations related to Documents, Studies, Construct, Participants, and Contexts.

a) Type of documents (considered as the physical support of the content): Within this study, the selection encompassed two main categories of documents. First, periodical publications, specifically journal articles. Additionally, non-periodical publications, such as books, book chapters, and doctoral theses have been incorporated. This selection aligns with the guidance provided by Munn, Barker, Moola, Tufanaru, Stern, McArthur, Stephenson and Aromataris,[61] emphasizing the inclusion of grey literature to counteract potential publication bias.

Conversely, certain document types were excluded from the analysis. These exclusions comprised master's or bachelor's theses, newspaper articles, brief communications, case reports, technical notes, obituaries, editorials, and any literature resembling these categories. The rationale behind this decision lies in the pursuit of ensuring the highest level of academic rigor and reliability in the findings presented. Theses, while often substantial, vary significantly in their methodological rigor and peer review process compared to published academic articles. Newspaper articles and similar media sources, though informative, may lack the depth of analysis and are not subject to the same rigorous peer-review process as scholarly articles. Similarly, brief communications, case reports, technical notes, and editorials are often limited in scope, detail, and may not provide comprehensive insights necessary for a review of reviews aiming to synthesize broad trends and patterns across the literature. This exclusion strategy was thus employed to focus on sources that offer the most robust, peer-reviewed evidence, ensuring that our synthesis provides a reliable, comprehensive understanding of the phenomenon of sexual harassment within the academic and professional discourse.

b) Type of Studies (defined as the research characteristics): Regarding the inclusion of studies in this synthesis of existing research based on systematic reviews and meta-analyses, only studies explicitly identified as such by the authors were considered. The scope did not encompass theoretical works, case studies, quantitative or qualitative empirical studies, or other types of reviews such as narrative reviews, scoping reviews, focused mapping review syntheses, rapid reviews, integrative reviews, or meta-syntheses, often referred to as umbrella reviews.

c) Construct (considered as the scope of the research): In the context of this scoping review of reviews focused on SH, the diverse range of constructs found within the SH literature were taken into account. Specifically, the focus was narrowed to reviews that explicitly incorporated this construct, along with their variants (eg, sexual assault, sexual violence; unwanted sexual attention; work, workplace/s), within the title, abstract, or keywords. A detailed list of the excluded constructs is shown in Table 1.

d) Participants (defined as persons from which the original data have been obtained): included reviews that encompassed a wide spectrum of adult participants across diverse employment contexts, encompassing various categories of waged workers. This included individuals engaged in formal employment arrangements, such as wage-earning employees in both public and private sectors, as well as public servants, self-employed individuals (freelancers), caregivers and domestic labor, and similar categories of workers. Specifically excluded students, children, and voluntary or unpaid workers.

e) Context (defined as the environment that surrounds the facts under research): this review is focused on SH within the work environment, which pertains to situations occurring in various occupational and professional settings, excluded studies conducting in academia or educational institutions, if participants are students or children. Within these work settings, SH can manifest among adult employees, irrespective of their specific job roles or positions.

Table 1 Exclusion Criteria Based on Construct-Specific Focus

Child Abuse, Child Neglect, Child Pornography, and Sexting:	Our scoping review focused on SH in the context of the adult workforce. Given the distinct nature of child abuse, child pornography, and sexting as separate areas of concern and research. These issues primarily pertain to minors and fall under a different domain of study and legal frameworks.
Adolescent Sexual Abuse:	Adolescents represent a specific age group with unique dynamics in terms of sexual abuse and harassment. To maintain the focus on adult workplace-related SH, excluded studies or reviews that primarily centered on adolescent sexual abuse.
University Undergraduate Students:	As university undergraduate students primarily inhabit an academic environment and are considered a distinct population from the adult workforce, excluded studies or reviews focusing on this group to ensure alignment with our workplace-oriented scope.
SH on Public Transport:	SH occurring in public transport settings involves a distinct context and set of challenges. Since our emphasis was on the workplace environment, to exclude studies or reviews related to SH in public transportation.
Hidden Curriculum:	The concept of the hidden curriculum pertains primarily to educational contexts, including schools and universities. Given our workplace-focused scoping review, excluded studies or reviews related to the hidden curriculum in educational settings.
Sexual Conflict or Sexual Communication	These topics, while relevant in the broader study of human sexuality, do not align with the specific focus of SH within workplace environments. Therefore, excluded studies or reviews that predominantly addressed sexual conflict or communication in contexts unrelated to the workplace.
Mammal Aggression:	Mammal aggression, while a valid and important area of research, falls outside the scope of our review, which specifically centered on human SH in workplace settings.

Search Strategy

The search was carried out between April 2023 and July 2023, utilizing several automated databases were utilized for the search, specifically focusing on the fields of Psychology, Behavioral Sciences, and Health. These databases included ERIC, MedLine, Psychology and Behavioral Sciences Collection, PsycINFO, PubPsych, and Teacher Reference Center for thematic searches, as well as Academic Search Ultimate, E-Journals, ProQuest, Scopus, and Web of Science for multidisciplinary perspectives. These two bibliographic databases are renowned for their extensive coverage of peer-reviewed literature and are widely recognized as among the largest and most globally utilized citation databases in the field of academic research (Zhu and Liu, 2020). The search strategy was meticulously designed to ensure the comprehensive retrieval of pertinent literature for this scoping review of reviews on SH and related phenomena. To begin, it was formulated a search equation that incorporated specific keywords and Boolean operators. The equation was structured as follows:

[((“SH” OR “sexual assault” OR “sexual aggression”) AND (“review” OR “meta-analysis” OR “systematic review”))]

This search equation allowed us to target and retrieve articles and reviews that featured the keywords “sexual harassment”, “sexual assault”, or “aggression” in conjunction with terms denoting review methodologies, such as “review”, “meta-analysis”, or “systematic review”. The inclusion of Boolean operators, namely “AND”, facilitated the precise identification of documents that met the criteria.

In addition to electronic database searches, manual searches were performed within esteemed scholarly journals renowned for their focus on topics associated with SH and aggression. These journals encompassed “Violence and Victims”, “Aggressive Behavior”, “Aggression”, “Violence Against Women”, and “Psychology Women Quarterly”. The manual searches were executed to identify potentially relevant reviews that might not have been captured through electronic database queries. This comprehensive approach, integrating a well-constructed search equation and manual journal searches, aimed to compile a diverse and robust collection of reviews and studies that would serve as foundational sources for our scoping review of reviews on the topic of SH.

Selection and Coding of Studies

The articles subjected to screening had to meet the following eligibility criteria within the context of SH:

(a) Publication in Peer-Reviewed Scholarly Journals: included articles that were published in peer-reviewed, scholarly journals to ensure the reliability and rigor of the included literature.

(b) Literature Reviews: specifically focused on literature reviews, which encompassed systematic, non-systematic, or meta-analysis reviews. Single empirical studies were excluded from our scope to align with the scoping review's overarching goal.

(c) English Language: To facilitate comprehensive and consistent screening by all authors, articles were limited to those written in English. This choice ensured greater inter-rater reliability during the independent review and eligibility screening process.

(d) Publication Period: do not restrict inclusion to articles published between any specified timeframe.

Assessment of the Methodological Quality of the Studies

A categorical system was established, utilizing a checklist, to categorize the quality from systematic reviews and meta-analyses according to predefined criteria and procedures (Aromataris and Munn, 2020). The assessment of methodological quality in review studies enabled the inclusion of only those systematic reviews and meta-analyses of high quality.

Given that this is a systematic review of reviews, and based on the JBI Critical appraisal checklist for Systematic reviews and Research Syntheses, a specific checklist has been developed. The tool included the following eleven criteria (See Table 2) and the response scale was 2= yes, 0=no, 1= unclear, not applicable. Giving a global appraisal that ranges between low to high quality standards.

Table 2 Specific Checklist Developed for the Present Systematic Review (Based on the JBI Critical Appraisal Checklist for Systematic Reviews and Research Syntheses)

Criteria	Description
1. Clarity of SH Focus:	The review question must be explicitly and unambiguously centered on issues related to SH (SH). It should be formulated to address aspects of SH, such as prevalence, prevention, impact, or interventions.
2. Adequacy of Search Strategy:	A systematic review on SH should encompass a meticulously designed search strategy that effectively captures relevant literature pertaining to SH. It should comprehensively address the different facets of SH under investigation.
3. Appropriateness of Inclusion Criteria:	The inclusion criteria employed should be pertinent to the context of SH and align with the review's SH-focused question. These criteria should be derived from and directly correspond to the specific dimensions of SH being investigated.
4. Sufficiency of Search Sources and Resources:	To ensure a comprehensive exploration of the topic, multiple reputable sources and databases related to SH should be searched. This breadth of sources is crucial for minimizing the risk of overlooking important studies.
5. Appropriateness of Study Appraisal Criteria:	The review should transparently declare the criteria used for critically appraising studies. These criteria must be explicitly defined and tailored to evaluate research studies in the context of SH.
6. Independence of Critical Appraisal:	Critical appraisal or evaluation of the literature related to SH should be conducted independently by two or more reviewers. This collaborative approach enhances the reliability and objectivity of the assessment.
7. Error Minimization in Data Extraction:	Strategies to minimize biases in data extraction, such as dual and independent data extraction, precise data extraction tools, and evidence of pilot testing or training, should be employed to ensure data accuracy in the context of SH research.

(*Continued*)

Table 2 (Continued).

Criteria	Description
8. Suitability of Study Synthesis Methods:	The method of synthesis presented in the systematic review should align with the SH-focused question and the specific type of systematic review. It should be appropriate for summarizing and analyzing SH-related evidence.
9. Evaluation of Publication Bias:	To mitigate the impact of publication bias in the context of SH research, a comprehensive search strategy should be meticulously executed, leaving no stone unturned in identifying relevant literature.
10. Support for Policy and Practice Recommendations:	If recommendations for policy and practice regarding SH are proposed, a clear and substantiated link to the reported data from the systematic review should be evident, emphasizing the importance of these recommendations in addressing SH issues.
11. Appropriateness of Directives for Future Research:	Given the significance of addressing SH, any directives for future research should be relevant and informed by the review's findings. These directives contribute to the advancement of knowledge and actions aimed at addressing SH concerns.

Results

Screening Process

The flowchart depicted in Figure 1 illustrates the systematic search and screening process conducted for the present research. Initially, the preliminary search yielded a total of 468 articles. Following the removal of duplicate entries (n=105), 363 unique articles were left. To identify primary studies for the comprehensive scoping review, the author performed an independent assessment of the titles, study types, keywords, and abstracts, assessing their alignment with the predefined eligibility criteria. In order to check the decisions, an independent reviewer (another academic specialist), revised the outcome.

In most instances, both reached a consensus regarding the eligibility of the articles. In cases where discrepancies arose, more debate was followed, facilitating a thorough analysis of the full-text articles and engaging in discussions. It's noteworthy that a substantial number of records (n=330) were excluded from the review due to their failure to meet the eligibility criteria. These exclusions primarily encompassed articles that were not in the English language, focused on empirical studies, constituted book chapters or conference papers, dealt with the validation of questionnaires, or explored topics unrelated to the subject of SH. Such unrelated topics often ventured into different disciplines, such as medical or clinical studies, law, or general psychology.

Following this meticulous screening process, 33 articles that met the criteria were identified. Subsequently, the full texts of these 33 articles were subjected to thorough and independent scrutiny by the first two authors. This in-depth analysis led to the exclusion of 11 articles as it became evident from their full texts that they did not fulfill our inclusion criteria. Among the exclusions, one study primarily focused on the health state of women veterans,[62] another centered on perceptions among Hispanic workers in the United States,[63] and others concentrated on the convergence of perceptions among psychiatric staff.[64] Additionally, some studies were excluded because of their primary focus on the relationships between SH and other topics, such as suicidal ideation,[65] eating disorders,[66] or secondary victimization.[67] Three studies have been excluded for being a position papers.[68–70] One study has been excluded given that it was an empirical research on SH among female truck drivers,[42] and another due that adult workers were mixed with adolescents and child victims.[50]

Retained articles specifically addressed the prevalence of SH, interventions aimed at coping with SH, or the examination of risk factors associated with it. Consequently, our review ultimately encompassed a total of 22 articles.

Participants and Context

The total number of participants and specific contexts vary across studies, demonstrating a diverse approach to research in workplace environments. Despite these studies focus on the phenomenon of workplace harassment and
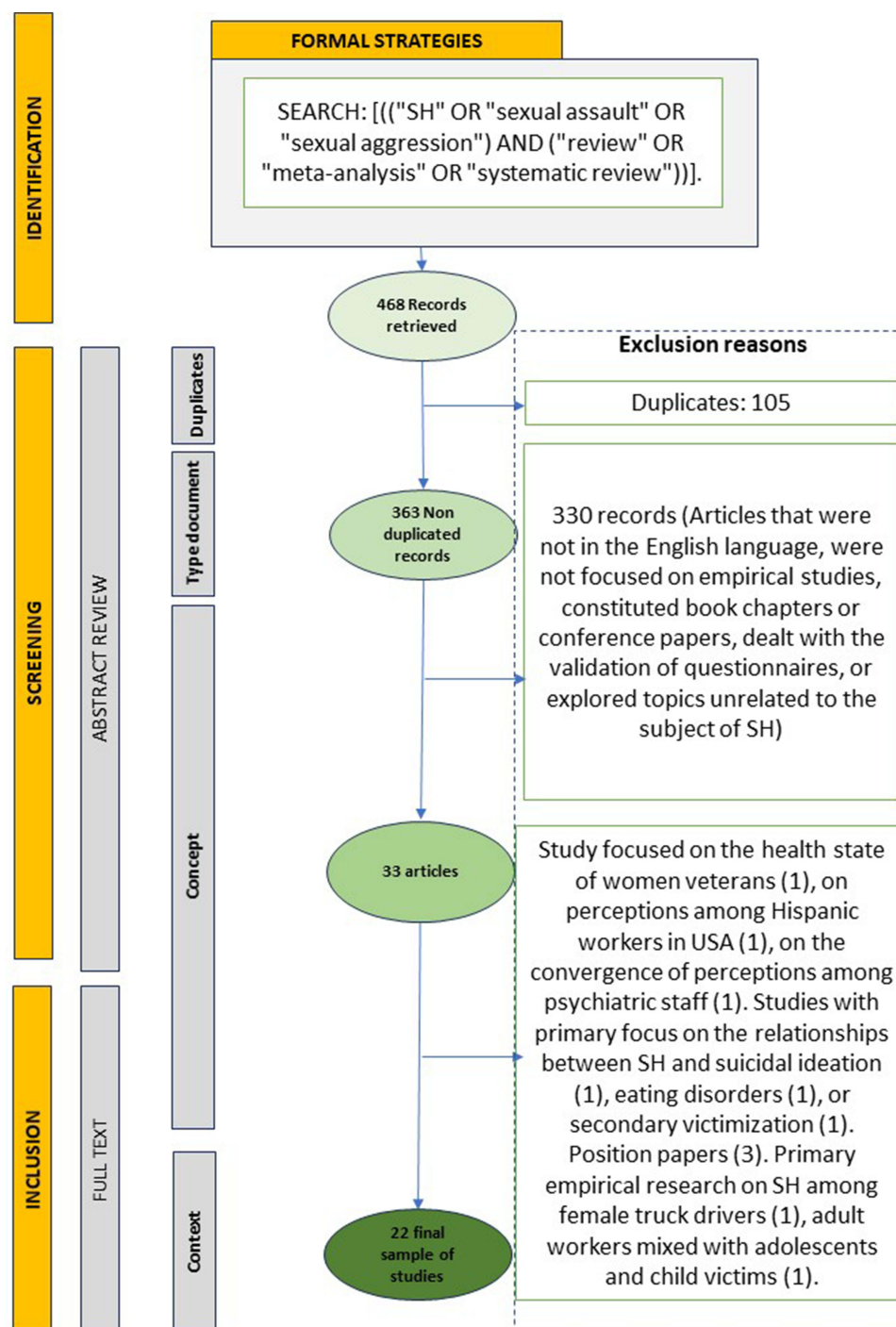
Figure 1 Flow chart for the revision process.

its various implications, the information about the precise number and type of the included studies, as well as the participants in the primary manuscripts is absent in some cases.[71–73] The common thread across these studies is the focus on workers or professionals in different settings, ranging from general workplaces to specialized healthcare and military environments. Many studies, such as those by Bowling and Beehr (2006), Chan et al (2008), da Silva Fonseca et al (2018), Diez-Canseco et al (2022), Islam et al (2020), Karami et al (2021), O'Donohue et al (1998), and others, primarily focused on workers in general workplace settings. The number of participants in these studies

varied widely, with Chan et al (2008) and Topa et al (2008) featuring large samples. Several studies targeted healthcare professionals. For example, Clari et al (2020) examined home healthcare workers, both professional and paraprofessional. Studies by Genovich-Richards (1992), Gianakos et al (2022), Kahsay et al (2020), Lu et al (2020), and Spector et al (2014) focused on nurses and other healthcare professionals. Wilson (2018) and Pulverman et al (2019) centered their research on military personnel and veterans. Some studies targeted specific professional groups. For instance, Mekonnen et al (2022) focused on housemaids. Charney and Russell (1994) did not specify the participant characteristics or context. Ranganathan et al (2021) diverged from the workplace-centric theme by including a broad demographic – female or male participants aged 14 and over – and encompassed studies from Asia, Africa, and Latin America. Worke et al (2020) studied workers in Ethiopia, as well as the study by Mekonnen et al (2022).

In summary, these studies encompass a wide range of contexts and participant characteristics, from general workers in various workplace environments to specific professional groups like healthcare workers, surgical residents, and military personnel. The participant numbers in these studies varied greatly, with some studies involving tens of thousands of participants, offering a broad perspective on the different environments and demographics studied.

Content

The content analysis provides a comprehensive overview of various studies that have explored the phenomenon of SH and related topics across different settings and populations. Based on the information contained in Table 3, the most relevant features are the following. Firstly, a group of three broad reviews, published previously than 2000 summarized evidence in a narrative way. Charney and Russell (1994) and O'Donohue et al (1998) conducted broader reviews on SH as a key subject. Charney and Russell's study included research and review papers from psychiatry and psychology journals, while O'Donohue et al did not specify the types of included studies. Secondly, specific reviews on SH at workplace were the studies by Bowling and Beehr (2006), Chan et al (2008), da Silva Fonseca et al (2018), Diez-Canseco et al (2022), Islam et al (2020), Topa et al (2008), Willness et al (2007), and Worke et al (2020). These studies utilized a range of sources, including PsycINFO, Medline, and various online databases, covering a wide span of years. The types of included studies were predominantly research articles, dissertations, and unpublished papers, with some focusing on specific aspects like the association of depression and SH. Thirdly, some studies devoted to SH among specific groups were divided among healthcare sector and military. Studies by Bowling and Beehr (2006), Chan et al (2008), da Silva Fonseca et al (2018), Diez-Canseco et al (2022), Islam et al (2020), Topa et al (2008), Willness et al (2007), and Worke et al (2020) concentrated on workplace harassment and SH. The types of included studies were predominantly research articles, dissertations, and unpublished papers, with some focusing on specific aspects like the association of depression and SH. Pulverman et al (2019) and Wilson (2018) delved into military sexual trauma, particularly among women veterans and military personnel. Finally, few studies adopted an approach to specific demographics. Papers, such as Mekonnen et al (2022) studied SH against housemaids in Ethiopia. Studies such as Lapierre et al (2005) and Karami et al (2021) covered extensive time spans, reviewing literature over several decades.

Methodological Quality of Included Reviews

The methodological quality of the included reviews has been evaluated based on a predefined checklist, revealing that most reviews fall within a medium quality range (See Table 4). Notably, the more recent meta-analytical reviews adhering to the Johanna Briggs Institute's guidelines achieved the highest quality ratings. The primary factors contributing to medium quality assessments were identified as gaps in reporting key details. These include the number and reasons for excluded studies, the total number of participants, and values indicating study heterogeneity. These omissions highlight areas for improvement in reporting standards, which are crucial for ensuring the comprehensiveness and transparency of meta-analytical reviews in the field.

Table 3 Characteristics of the Included Studies Specifically Focused on Content Analysis

Study	Participants	N	Context	Focus	Sources Searched	Years	k	Type of Included Studies	Authors' Country
Bowling and Beehr[71]	Workers	n.a.	Workplace	Workplace Harassment	Psycinfo, upward search, and unpublished manuscripts	1987–2005.	n.a.	Research articles and unpublished sources (8 conference papers, 11 Dissertations, 3 theses, and 1 manuscript submitted for publication).	USA
Chan, Chow, Lam and Cheung[74]	Workers	89,382	Participants recruited from the workplace	SH.	Psycinfo, Social Science Citation, and Medline	End in 2007	49	Published studies, dissertations and unpublished Papers.	USA CH
Charney and Russell[72]	n.a.	n.a.	n.a.	SH as a key subject, particularly in the context of the 1990s.	Computerized literature	n.a.	n.a.	Research and review papers from psychiatry and psychology journals, and Nonscientific works	USA
Clari, Conti, Scacchi, Scattaglia, Dimonte and Gianino[48]	Home healthcare workers professional and paraprofessional	6014	Home-care setting	SH against professional and Paraprofessional home healthcare workers.	PubMed, Cumulative Index to Nursing and Allied Health Literature, Psycinfo, WoS, Embase	2001–2019	14	Observational studies, descriptive observational study designs	IT
da Silva Fonseca, Viana Martins Portela, de Assis Freire and Negreiros[75]	Workers	n.a.	Workplaces	SH	Scielo, Pepsic, BVS and Portal Capes de Periodicals	2012–2016	19	Published studies	BR
Diez-Canseco, Toyama, Hidalgo-Padilla and Bird[76]	Workers	n.a.	Workplaces	Association of depression and SH	PubMed, Psycinfo, EMBASE, CENTRAL and Global Index Medicus	2007–2021	24	Published studies on prevalence of depression and SH	PE UK
Genovich-Richards[77]	Nurses and other healthcare professionals	n.a.	Healthcare settings	SH coverage in academic discourse	Nine major healthcare journals	1980 to 1990	14	Studies on SH among healthcare personnel (3 medical 1 nursing), 5 on characteristics of SH, 5 national studies.	USA

Gianakos, Freischlag, Mercurio, Haring, LaPorte, Mulcahey, Cannada and Kennedy[78]	Surgical residents	29,980	Healthcare settings	SH during surgical training	MEDLINE, EMBASE, and Cochrane	2010–2020.	25	Survey studies	USA
Islam, Raihan and Uddin[79]	Workers	n.a.	Workplace in general	SH	Taylor and Francis Online, Science Direct, JSTOR and Emerald Insight	2010–2019	67	Published studies	BD
Kahsay, Negarandeh, Dehghan Nayeri and Hasanpour[80]	Nurses	n.a.	Healthcare settings	SH against nurses	Scopus, Google Scholar, PubMed, WoS, ProQuest	1972–2018 (august)	20	Scholarly journals	IR
Karami, Spinel, White, Ford and Swan[81]	Workers	n.a.	Workplace in general	SH	WoS, Scopus, and EBSC	1977–2020	55	Survey studies	USA
Lapierre, Spector and Leck[28]	Workers	49,447	Workplace in general	SH vs Non SH	Psycinfo	1872 to 2003	45	Published articles, book chapters, and doctoral dissertations	USA
Lu, Dong, Lok, Feng, Wang, Ng, Ungvari and Xiang[82]	Nurses	52,345	Healthcare settings	SH against nurses	PubMed, psycinfo, EMBASE, WoS	Commence to 2018 (February)	43	Observational studies.	CN
Mekonnen, Lakew and Melese[83]	Housemaids	3,324	House as workplaces	SH against housemaid in Ethiopia	PubMed, Embase, Science Direct, HINARI, Scopus, Cochrane Library, Google Scholar	2006–2021	8	Published articles	ETH
O'Donohue, Downs and Yeater[73]	Workers	n.a.	Workplace	SH	n.a.	n.a.	n.a.	n.a.	USA
Pulverman, Christy and Kelly[84]	Women veterans	n.a.	Military	Military sexual trauma among women veterans	PubMed, psycinfo, and the Cumulative Index of Nursing and Allied Health Literature	No date-restricting parameters Set	6	Empirical studies	USA

(Continued)

Table 3 (Continued).

Study	Participants	N	Context	Focus	Sources Searched	Years	k	Type of Included Studies	Authors' Country
Ranganathan, Wamoyi, Pearson and Stöckl[85]	Female or male participants aged 14 and over	n.a.	Studies from Asia (n=26) and Africa (n=26), and 3 from Latin America.	SH in Low-income and middle – income countries.	Medline, Embase, Global Health, Psycinfo, econlit, Scopus, WoSand Social Policy and Practice	1990–2020	49	Empirical studies	UK TZ
Spector, Zhou and Che[86]	Nurses	151,347	Healthcare settings	Nurses exposure to violence	CINAHL, Medline and Psycinfo	1860–2012	136	Empirical studies	USA
Topa, Morales and Depolo[46]	Workers	106,948	Workplace in general	Workplace SH	Psycinfo, Psycarticles, ERIC, Academic Search Premier, Business Search Premier, and Econlit	1982–2005	42	Empirical studies published	ES IT
Willness, Steel and Lee[87]	Workers	68,343	Workplace in general	Workplace SH	Psycinfo, Ovid Medline, CINAHL, CCTR, Medline Non-Indexed, Old Ovid Medline, ProQuest Digital Dissertations, and proquest Advanced.	1874–2007	41	35 published articles, 5 dissertations, and 1 unpublished	USA
Wilson[88]	Military personnel and veterans	n.a.	Military	Military Sexual trauma	Psycinfo, PubMed, and PILOTS	1995–2018	69	Observational studies	USA
Worke, Koricha and Debelew[89]	Workers	21,054	Workplaces in Ethiopia	SH at workplaces	PubMed, Google Scholar, CINAHL, and African Journals Online	1998 to June 5, 2020	31	Observational studies	ETH

Abbreviations: *k*, number of included studies; n.a, not available; Authors' Country: BD, Bangladesh, BR, Brazil, CN, China, ETH, Ethiopia, IR, Iran, IT, Italy, PE, Peru; ES, Spain, TZ, Tanzania, UK, United Kingdom; USA, United States of America.

Table 4 Characteristics of the Included Studies Specifically Focused on Methodological Analysis

Study	Objectives	Method of Analyses	Findings	Significance	Heterogeneity	GQR
Bowling and Beehr[71]	Potential antecedents and consequences of SH	Meta-analysis	Environmental and individual Factors contributed to SH. SH negatively related to Well-being.	SH remain significant on outcomes even after controlling for Role ambiguity and role conflict.	n.a.	++
Chan, Chow, Lam and Cheung[74]	Job-related, psychological, and physical outcomes of SH.	Meta-analysis	Mean ES of SH Job-related, psychological, and physical outcomes.	The strength of associations Moderated by mean age and the type of measure.	Homogeneity tests reported as credibility intervals.	++
Charney and Russell[72]	SH in a comprehensive manner	Narrative synthesis	Self-doubt is a central issue, and there are ramifications unique to the trauma of gender-based abuse.	First paper that examines the role for psychiatry in both the treatment of victims and the study of underlying psychological and gender issues.	n.a.	+
Clari, Conti, Scacchi, Scattaglia, Dimonte and Gianino[48]	Workplace violence against healthcare workers providing home care.	Overall and subgroup random-effects pooled prevalence meta-analyses.	The presence of SH is a lesser but nevertheless considerable extent compared to other Healthcare settings.	Prevalence of SH against Home healthcare workers is lower than that in other clinical settings for both 12-month and lifetime prevalence	High heterogeneity ($I^2 <$ 95%; Cochran Q, $p <$ 0.001)	++
da Silva Fonseca, Viana Martins Portela, de Assis Freire and Negreiros[75]	SH	Systematic review	SH from Four perspectives	It identified the various consequences and the coping strategies	n.a.	+
Diez-Canseco, Toyama, Hidalgo-Padilla and Bird[76]	Association of depression and SH	Meta-analysis	Prevalence of depression of 26%, as well as a 2.69 increased risk of depression among workers who experience SH	Variables such as number of Harassment experiences and exposure to harassment from coworkers and other people increase this risk.	Heterogeneity Of studies is 99.2%	++
Genovich-Richards[77]	Prevalence and treatment strategies for SH among healthcare personnel	Literature search and conventional analysis	Very limited interest in the academic research about the topic.	Limited focus on SH within the healthcare literature during the time period studied	n.a.	+

(*Continued*)

Table 4 (Continued).

Study	Objectives	Method of Analyses	Findings	Significance	Heterogeneity	GQR
Gianakos, Freischlag, Mercurio, Haring, LaPorte, Mulcahey, Cannada and Kennedy[78]	Prevalence of SH among surgical residents	Systematic review	High prevalence rates of SH experienced by residents during surgical training	SH associated with burnout, anxiety, and depression	Mentioned but not reported.	++
Islam, Raihan and Uddin[79]	SH at work	Summary of evidence	Five reasons for widespread SH: inadequate governmental laws and organizational policies, 'perceptions and attitudes,' 'male dominance', 'power differentials and organization structure' and 'cultural influence'	Proposes interventions by linking current observations with previous empirical and theoretical studies	n.a.	+
Kahsay, Negarandeh, Dehghan Nayeri and Hasanpour[80]	SH suffered by female nurses	Systematic review	Prevalence high (43.15%), harassed by patients, families, physician and nurses or other coworkers.	Recommendations for policy makers, nursing associations, nursing curricula.	n.a.	++
Karami, Spinel, White, Ford and Swan[81]	SH major research topics, temporal trends over recent decades, and future directions	Combines text mining, qualitative analysis, and temporal trend analysis	62.5% of the topics showed a significant increasing trend over time, indicating these are 'hot' topics.	A 'bird's eye view' of the SH literature	n.a.	++
Lapierre, Spector and Leck[28]	Whether S vs nonsexual workplace aggression share equivalent or differential relationships With victims' overall job satisfaction.	Meta-analysis	Nonsexual aggression shares a Significantly stronger negative relationship with victims' overall job satisfaction than sexual Aggression.	Gender differences in the relationships between nonsexual aggression and job satisfaction.	Homogeneity test (I^2 = 319.96, p < 0.01)	++

Lu, Dong, Lok, Feng, Wang, Ng, Ungvari and Xiang[82]	Worldwide prevalence of SH against nurses and its moderating factors.	Meta-analysis (random-effects model)	Prevalence of SH in the past 12 months and during nursing career were 12.6% and 53.4%, respectively.	Gender, use of the WHO questionnaires, lower middle income And high-income countries, sample size, survey year, and mean age of subjects Were significantly associated with the prevalence.	Q-test for heterogeneity	+++
Mekonnen, Lakew and Melese[83]	SH prevalence against housemaids in Ethiopia	Meta-analysis (random-effects model)	Pooled prevalence for SH was 39.03%	SH is high. Male employers are the vast majority of perpetrators Of their housemaids.	Cochran's chi-squared test and quantified by I^2 Values	+++
O'Donohue, Downs and Yeater[73]	Definitional, Epidemiological, etiological, treatment, and prevention of SH	Narrative review	SH is a frequent form of victimization of women, affecting around half of all women, with verbal harassment being more common that nonverbal harassment	Little is known about the etiology of SH, Although models that take into account organizational and individual variables seem to account for more of the variance.	n.a.	+
Pulverman, Christy and Kelly[84]	SH among women veterans.	Systematic review	Sexual dysfunction is a salient health issue for victims.	Additional Research is needed	n.a.	++
Ranganathan, Wamoyi, Pearson and Stöckl[85]	SH in low-income and middle-income countries and association SH And depressive symptoms	Meta-analysis	Pooled estimate of the Association between SH and depressive symptoms in low-income and middle-income countries.	Limited definitional clarity, and rigorously designed prevalence studies that use Validated measures for SH in low-income and middle-income countries.	Heterogeneity in prevalence estimates Is likely to further reduce the comparability of findings.	+++
Spector, Zhou and Che[86]	Nurses exposure rate to SH	Systematic review and meta-analysis	Overall violence exposure rates were 36.4% for physical violence, 66.9% for Nonphysical violence, 39.7% for bullying, and 25% for SH, with 32.7% of Nurses reporting having been physically injured in an assault.	1860–2012	n.a.	++
Topa, Morales and Depolo[46]	SH at workplace	Meta-analysis and Structural Equation Model	Tested a model of simultaneous relations among antecedents and consequences based on the findings of the meta-analytical Review	Organizational Environmental factors as main predictors of SH	Q statistics for heterogeneity significance ranging between p<0.05 to 0.001	++

(*Continued*)

Table 4 (Continued).

Study	Objectives	Method of Analyses	Findings	Significance	Heterogeneity	GQR
Willness, Steel and Lee[87]	SH negative consequences at workplace	Meta-analysis	SH associated with negative outcomes such as decreased job satisfaction, lower organizational commitment, withdrawing from work, ill physical and mental health, and even symptoms of post-traumatic stress disorder	Organizational Climate for SH figured prominently in facilitating the Occurrences.	n.a.	++
Wilson[88]	Prevalence of SH among military personnel and veterans.	Meta-analysis (random effect Model)	15.7% of military personnel and veterans report SH (3.9%of men,38.4% Of women)	Women evidenced significantly larger prevalence rates compared to men	Cochran's Q (ie, degree of homogeneity among input studies). Significant heterogeneity, $I^2= 99\%$ and $p < 0.001$	++
Worke, Koricha and Debelew[89]	Prevalence of SH in workplace settings in Ethiopia	Meta-analysis (random effect Model)	Prevalence of SH in Ethiopian workplaces is high. Pooled prevalence of workplace sexual violence was 22%	It was also exceptionally high among female faculty staff, commercial sex workers, and workplaces in Tigray National regional state	Cochran Q test and I^2 Test statistics	+++

Notes: n.a, not assessed; GQR, global quality rating. +, Low; ++, Medium; +++, High.

Discussion

The aim of this scoping review of reviews was to answer three research questions. The accumulated evidence allows to advance this answer to these questions.

What are the Most Recent Developments in the Conceptualization and Understanding of SH?

Recent academic literature has begun to address SH within a broader contextual framework. Unlike earlier studies that primarily focused on specific environments, such as workplaces or educational institutions, newer research encompasses a variety of settings. This expansion reflects a growing recognition of the diverse contexts in which SH can occur, including digital spaces and different sectors such as healthcare.

There has been a notable shift towards exploring the experiences of victims of SH. This includes an in-depth analysis of the psychological, emotional, and professional impacts on individuals who have experienced harassment. Such an approach marks a significant move from viewing SH purely as a legal or policy issue to understanding it as a deeply personal experience with long-lasting effects.

The use of systematic reviews and meta-analyses in recent literature points to methodological advancements in the field. These approaches allow for the consolidation of diverse research findings, offering a more comprehensive and evidence-based understanding of SH. This suggests a trend towards more rigorous and scientifically robust research methodologies, most of the reviews being focused on specific subpopulations under high risk[1,7] or on more vulnerable environments or situations.[4]

The incorporation of insights from various disciplines, such as healthcare, psychology, and sociology, indicates a growing interdisciplinary approach to studying SH. This trend underscores the complex nature of SH, which intersects with various aspects of human behavior, societal norms, and institutional practices.

An emerging trend in the recent literature is the examination of SH within specific sectors, and specifically among non-Western countries.[90–92] For instance, the healthcare sector or the law enforcement officers,[93] among others, have received particular attention, recognizing that different industries may have unique dynamics and challenges related to harassment, but some working conditions, as precarious employment,[94] or male-dominant industries[95] render the employees more vulnerable. This sector-specific focus is crucial for developing targeted strategies and interventions.

Finally, there appears to be an evolution in the theoretical frameworks used to conceptualize SH. Newer studies are likely incorporating contemporary social theories, reflecting changes in societal attitudes towards gender, power dynamics, and workplace behavior, as the Psychological Contract Theory[96] or the intersectionality theory.[97] Intersectional analysis of SH has gained prominence in recent literature. This approach examines how SH intersects with other forms of discrimination, such as racism, homophobia, and ableism. It emphasizes the unique experiences of individuals who belong to multiple marginalized groups, highlighting the complexity and multifaceted nature of harassment. This theoretical evolution is pivotal in understanding the changing nature of SH.

In summary, the recent academic discourse on SH reflects a more holistic, victim-centered, and methodologically sophisticated approach. It demonstrates an understanding of SH as a multifaceted issue that requires a nuanced, interdisciplinary, and sector-specific examination. The field continues to evolve, integrating new theoretical perspectives and responding to the changing social landscape. This evolution is essential for developing effective policies and interventions to address and prevent SH.

Which specific forms and manifestations of SH have received extensive examination and analysis in the existing body of review literature?

The revised literature aims to highlight the key areas of focus and the specific forms of SH that have been prominently featured in recent academic discourse.

Recent literature has extensively examined psychological and verbal forms of harassment. This includes unwelcome comments, jokes, and innuendos that create a hostile environment.[98] The focus on psychological harassment underscores its prevalence and the significant impact it can have on individuals' mental health and well-being. Verbal harassment,

often manifested through derogatory remarks or sexually charged comments, is another area receiving considerable attention, highlighting its commonality and insidious nature in various settings.

Physical forms of SH, though perhaps less frequently reported due to their overt nature, have also been a focal point in review literature. This includes unwelcome physical contact, ranging from seemingly benign actions like touching or patting to more aggressive forms such as sexual assault. The literature delves into the immediate and long-term effects of such behaviors on victims, including trauma and fear.

A growing body of research is dedicated to understanding digital and online forms of SH, for instance using dating apps.[4] This modern manifestation of harassment includes unwanted sexual advances, cyberstalking, and the sharing of explicit images without consent, often facilitated through digital platforms and social media. The literature reflects a growing awareness of the challenges in combating online harassment, given its pervasive and often anonymous nature.

Several studies have explored institutional and systemic forms of SH.[99] This encompasses harassment that is either perpetrated or condoned by institutions, including workplaces and educational establishments. The focus here is on the policies, culture, and power dynamics that enable harassment to occur and persist.[100] This area of research highlights the need for systemic change to effectively address and prevent harassment.

In conclusion, the existing body of review literature on SH has extensively examined various forms and manifestations of negative behaviors. These include psychological and verbal harassment, physical harassment, digital and online harassment, as well as institutional and systemic harassment. There is also a growing focus on intersectional analyses of harassment. This comprehensive examination across different forms and contexts reflects the evolving understanding of SH as a complex and multifaceted issue. It underscores the need for targeted interventions and policies to address the diverse manifestations of SH effectively.

How do organizational factors and social interactions impact the effects of SH, and how do these factors influence employee outcomes?

In the examination of organizational antecedents to SH, it is noted that the variable with the most significant impact pertains to social interaction processes, specifically social support. This finding substantiates theories that emphasize the crucial role of social dynamics among superiors, subordinates, and peers in understanding SH, as proposed by Luthar and Pastille.[101] This perspective stands in contrast to theories seeking broader sociological explanations. Moreover, it is essential to acknowledge the influence of organizational environment and culture on SH,[102] as these elements provide organizations with more effective prevention tools.[103]

Regarding the consequences of SH, notable effects are identified in social interactions and on mental and physical health. However, a clear relationship with anxiety or stress levels is not evident. In the organizational context, outcomes such as the intention to resign and job performance exhibit more complex patterns than anticipated. The intention to resign shows a lesser effect, while job performance reflects one of the most significant impacts, with moderate effects on job satisfaction and organizational commitment. These findings suggest that the impact of SH on job outcomes is indirect and influenced by additional factors.[104] Employees might experience a decline in performance due to SH, even if they do not consider leaving their job. Furthermore, this perceived decrease in performance could also indicate the influence of intergroup dynamics affected by a hostile work environment stemming from SH.[105] In conclusion, when examining all variables, patterns shift, highlighting that SH primarily affects satisfaction with supervisors and colleagues on a personal level, and job satisfaction and organizational commitment on a professional level.

Limitations of the Present Scoping Review and Implications for Research, Policy, and Practice

In conducting this scoping review of reviews focused on SH, several inherent limitations arise from the design and methodology. The review's exclusive focus on SH may limit the breadth of its findings, as it overlooks broader aspects of workplace aggression or misconduct. This narrow scope potentially misses critical insights into the dynamics of workplace behavior that intersect with SH.

The inclusion and exclusion criteria set forth in this study present another limitation. The deliberate exclusion of certain document types, such as master's theses and newspaper articles, could lead to the omission of emerging research

trends and valuable perspectives. Additionally, the study's restriction to systematic reviews and meta-analyses means that it may not capture the full range of insights available in empirical studies, case studies, and qualitative research. This could lead to a more constricted view of SH and its impacts.

The review's specificity in terms of the constructs it focuses on could also be seen as a limitation. By concentrating solely on reviews that explicitly incorporate SH and its variants, the study might exclude literature discussing related but differently named constructs. This approach could potentially overlook relevant and insightful discussions on the subject.

Another key limitation stems from the participant selection criteria. The exclusion of students, children, and unpaid workers means that the review does not consider experiences of SH in academic or volunteer settings. This omission could lead to a lack of understanding of SH dynamics in these contexts, which can be significantly different from those in the workplace.

Contextual limitations also arise from the review's focus on the work environment. This singular focus limits the understanding of SH in other contexts or populations,[106] such as educational settings, where dynamics and implications might differ significantly.

The search strategy and time frame of the review further contribute to its limitations. By limiting the search to a specific period and relying on automated databases and selected scholarly journals, the review risks missing out on recent studies and valuable research published in less-known or emerging journals. Moreover, the restriction to articles written in English introduces a language bias, excluding non-English research and potentially leading to a lack of representation of perspectives from non-English speaking regions.[107,108]

Lastly, the methodological quality assessment of the review poses its own set of limitations. The use of a specific checklist to assess methodological quality could introduce bias, particularly if the criteria are not sufficiently comprehensive or applicable across various types of reviews. Moreover, the categorization of studies based on quality standards might lead to the exclusion of research that, despite certain methodological limitations, could offer insightful contributions to the topic.

This comprehensive review of reviews on SH in the workplace not only illuminates the complex nature of SH but also underscores the critical need for an interdisciplinary, nuanced approach to address this pervasive issue. The findings from this synthesis have several important implications.

Interdisciplinary Research: The integration of insights from healthcare, psychology, and sociology reinforces the necessity for a multidisciplinary perspective in SH research. Future studies should cross disciplinary lines, using diverse methods and theories to fully grasp SH's effects and identify effective interventions.[16]

Sector-Specific Policies: The focus on SH within particular sectors, like healthcare, indicates that generic policies might not address all issues effectively. Policies and interventions should be designed with the unique needs and conditions of each sector in mind, aiming for targeted and effective solutions.

Theoretical and Practical Evolution: The adoption of contemporary social theories in SH research points to changing views on gender, power, and workplace behavior. Policies and interventions need to reflect these evolving views, ensuring they are relevant and effective in today's societal context.

Victim-Centered Approaches: Recent discourse emphasizes the importance of considering victims' needs and experiences. Policies and practices should prioritize safe reporting, support for victims, and a culture where victims can report SH without fear of stigma or retaliation.

Methodological Sophistication: Advances in research methods highlight the need for rigorous study designs to understand SH better. Future research should employ detailed, reliable methods to uncover insights that can guide policy and practice.

By addressing SH with specific, informed strategies based on interdisciplinary research and sector-specific needs, we can develop more effective policies and practices. This effort will help create safer, more respectful workplace environments.

Conclusion

In conclusion, this scoping review of reviews offers a comprehensive and optimistic perspective on the current state of SH research. The findings highlight significant advancements in the conceptualization and understanding of SH, reflecting a more nuanced and victim-centered approach in recent literature. The expanded contextual understanding encompasses a variety of settings beyond traditional workplaces, acknowledging the diverse environments where SH can

occur, including digital spaces. The emphasis on victim experiences has brought forth a deeper analysis of the psychological, emotional, and professional impacts of SH, marking a pivotal shift from viewing it as a purely legal issue to understanding its profound personal effects.

Methodologically, the field has seen significant advancements with the increasing use of systematic reviews and meta-analyses, indicating a trend towards more rigorous and scientifically robust research methodologies. This methodological evolution, combined with interdisciplinary perspectives from healthcare, psychology, sociology, and other fields, under-scores the complexity of SH as it intersects with various aspects of human behavior and societal norms.

Furthermore, the review literature has extensively examined specific forms and manifestations of SH, such as psychological and verbal harassment, physical harassment, digital and online forms, and institutional and systemic harassment. The growing focus on intersectional analyses emphasizes the unique experiences of individuals facing multiple forms of discrimination, enhancing our understanding of the multifaceted nature of SH.

The accumulated evidence also sheds light on how organizational factors and social interactions impact the effects of SH. The crucial role of social support within organizations stands out, indicating that fostering a supportive environment can be key in mitigating the effects of SH. The findings reveal complex patterns in the consequences of SH on organizational outcomes, such as job satisfaction, performance, and the intention to resign, suggesting that the impact of SH on job outcomes is indirect and influenced by various factors.[109]

Overall, this scoping review demonstrates a significant evolution in the field, integrating new theoretical perspectives and responding to the changing social landscape. The insights gained are essential for developing effective policies and interventions to address and prevent SH, fostering healthier, more equitable, and productive work environments. This positive trajectory in SH research signifies a growing commitment to understanding and addressing this pervasive issue in a comprehensive and empathetic manner.

Author Contributions

All authors made a significant contribution to the work reported, whether that is in the conception, study design, execution, acquisition of data, analysis and interpretation, or in all these areas; took part in drafting, revising or critically reviewing the article; gave final approval of the version to be published; have agreed on the journal to which the article has been submitted; and agree to be accountable for all aspects of the work.

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