



Assessing Sexual Harassment in Nursing: Development and Validation of a Scale in Iran

Masuyama Devine*

Department of Cognitive Psychology, University of Amsterdam, Netherlands

DESCRIPTION

The development and validation of the Nurses Sexual Harassment Scale in Iran represents a significant step towards addressing a critical issue in the healthcare sector. Sexual harassment in the workplace, including healthcare settings, can have profound impacts on employees' well-being, job satisfaction, and overall work environment. The creation of a culturally relevant and validated scale specific to nurses in Iran provides a valuable tool for assessing and addressing this important issue. The process of developing and validating the Nurses Sexual Harassment Scale in Iran likely involved several key steps. Initially, researchers would have conducted a thorough literature review to understand existing scales and measures related to sexual harassment in healthcare settings. This review would have informed the selection of items and domains to be included in the scale, ensuring that it captures the relevant aspects of sexual harassment experienced by nurses in Iran. The scale development process would have involved input from experts in the field of sexual harassment, nursing, and psychometrics. These experts would have provided valuable insights into the content validity of the scale, ensuring that the items are clear, relevant, and comprehensive in assessing sexual harassment experiences among nurses. Following the initial development phase, the scale would have undergone pilot testing with a sample of nurses to assess its readability, comprehensibility, and relevance. Feedback from the pilot testing phase would have been used to refine and finalize the scale before proceeding to the validation stage. Validation of the Nurses Sexual Harassment Scale in Iran would have involved assessing its psychometric properties, including reliability and validity. Reliability refers to the consistency and stability of the scale over time, while validity assesses whether the scale measures what it intends to measure. Reliability of the scale would have been evaluated using measures such as

internal consistency (Cronbach's alpha), test-retest reliability, and inter rater reliability. These analyses ensure that the scale produces consistent and reliable results when administered to the same group of nurses or by different raters. Validity of the scale would have been assessed through various methods, including content validity, construct validity, and criterion validity. Content validity ensures that the scale items adequately represent the construct of sexual harassment among nurses in Iran. Construct validity assesses whether the scale measures the intended underlying constructs, such as different types of sexual harassment experiences. Criterion validity involves comparing the scale scores with established measures or criteria related to sexual harassment to determine if the scale accurately predicts or correlates with these criteria. The validation process would have also included factor analysis to examine the underlying structure of the scale and identify any subscales or dimensions within the construct of sexual harassment. This analysis helps determine if the scale items cluster together in meaningful ways and if there are distinct factors or domains of sexual harassment experiences among nurses in Iran. Overall, the development and validation of the Nurses Sexual Harassment Scale in Iran represents a rigorous and systematic approach to addressing an important issue in nursing practice. By providing a reliable and valid instrument for assessing sexual harassment experiences, this scale can inform interventions, policies, and support mechanisms aimed at preventing and addressing sexual harassment in the healthcare workplace.

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CONFLICT OF INTEREST

The authors declare that they have no conflict of interest.

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Corresponding author Masuyama Devine, Department of Cognitive Psychology, University of Amsterdam, Netherlands, E-mail: devine.masu@uva.nl

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