Appendix 2

Qualitative content analysis - summary of the categories

Step 2 - The results of the subcategories (reduction 2) of doctors and nurses are arranged in this step in the following structure (sequence).

- o The subcategories are compared and further reduced in order to avoid duplication within the subcategories.
- o Review, revision and further reduction (2-3) as well as summaries of the subcategory system, which will then show the cross occupational group subcategories reduction 3.
- o Reduction 3 is formed of the final subcategories.

Categories	Result of reduction 2_ Nurses	Result of reduction 2_ Doctors	Generalization	Subcategories Reduction 3
UC Protection				
Institutionalized Protection	SC_N 1.1. Institutionalized points of contact and offers for protection within the company	SC_D 1.1. Institutional protection through programs and trainings	Institutionalized protection - Training - Gender violence awareness program - Central representatives/ counselling center	SC Structural protection measure
	SC_N 1.2. Institutionalized training and anti-violence programs	SC_D 1.2. Contact persons in the gender violence program		
		SC_D 1.3. Central representatives as contact persons inside the organization		

Protective measures from superiors	SC _N 2.1. Supervisors as trusted third parties must recognize sexual harassment, intervene and take measures. SC _N 2.2. Supervisors should be aware of the measures for aftercare	SC_D 2.1. Trust and protection by (female) superiors	- Trust and protection by superiors	SC Protection Superiors
Protective measures in the team	SC _N 3.1. Communication in the team offers relief and protection SC _N 5.2. Relief and maintenance of mental health	SC_D 3.1. Individual agreements on protective measures in teams SC_D 4.1. Existing consulting formats e.g. Team Supervision	- Alliances with colleagues and agreements on de-escalating measures - Individual strategies for mental Health	SC Protection Team
Protective measures in patient settings	SC_N 4.1 Protection against sexual harassment through team agreements SC_N 4.2. Protection in patient setting SC _N 4.3. Clear, inter-professional agreements to reduce sexual harassment	SC_D 4.1. Relief through communication with colleagues.	- Alliances with colleagues and agreements on de-escalating measures - Consulting formats e.g. Team Supervision	SC Protection strategies in the patient setting
Individual Protection	SC_N 5.1. Techniques for Individual Protection *-see previous category-*	SC_D 5.1. Learned techniques and experiences are applied in patient settings.	*-see previous category-*	SC Protection strategies in patient setting *-see previous category-*

		SC_D 5.2. Highlighting the dominance and status of medicine and setting limits		
Protection on horizontal level		SC_D 6.1. Individual self-protection measures at horizontal level SC_D 6.2. External gender-specific-awareness trainings	Individual handling of sexual harassment on a horizontal level	SC Self-protection strategies against colleagues
UC Prevention				
Prevention strategies Clinic management board	SC_N 1.1. Strategies of Prevention through removal of taboos and change in values SC_N 1.2. Equal treatment and appreciation of all professions in the clinic SC_N 1.3. Jobs that rely on safety, quality and protection SC_N 1.4. Duty of care and protection through house bans	SC_D 1.1. Clear and visible positioning of clinic management removes taboos on sexual harassment SC_D 1.2. Prevention through non-discriminatory culture and a change in values SC_D 1.3. Institutionalized formal regulations for protection and prevention must be drawn up.	- Clear and visible positioning of the clinic management creates removal of taboos - Low-discrimination culture and a change in values as strategic prevention - Procedures for a respectful and fair corporate culture	SC Strategy clinic management Board

		SC_D 1.4. Public announcement of regulation and procedures	- Prevention trough formal regulations and standardized procedures	SC Gender parity and reconciling work and family life as corporate strategy
		SC_D 2.1. Management strategies for gender parity and diversity in management positions	- Strategic concept on gender parity and diversity	
		SC_D 2.2. Special prevention strategies to reconcile family and career	- Reconciling work and family	
Organizational level	SC_N2.1. Implementation of the given change in values through senior managers	SC_D 3.1. Implementation of a zero tolerance policy of the clinic management	- Supervisors/ Managers implement the strategic guidelines in the departments	SC Leadership culture
	SC_N2.2. Ongoing information on sexual harassment and taboo issues. Contact person in the department	SC_D 3.2. Managers create a change in values through an established culture of correctness	- Managers are aware of regulations and procedures for the intervention process - Establishing a team culture that emphasizes the fundamental value of employees	
	SC _N2.3. Flat hierarchies as prevention against sexual harassment and discrimination	SC_D 3.3. Managers are familiar with regulations and intervention measures		
		SC _D 3.4. A leadership style based on democracy and participation	- Leadership style with employee participation and flat hierarchies	

			can reduce sexual harassment/discrimination		
			SC_D 5.1. Flat hierarchies and a leadership style geared to democratic and participatory components		
			SC_D 6.3. Difficult social issues/taboo topics delegated in each department Space and time for social communicative topics in meetings	Regular information on the topic and a delegated person for taboo topics and social-communicative competence	
Structure level	SC _N 3.1. Trainings on social and communicative competence permanently and continuously offered SC_N 3.2. Training to raise awareness of cultural diversity and its needs SC_N 3.3. Offering continuous consulting formats	SC_D 4.1. Training courses on sexual harassment and social communicative competence for all employees SC_D 4.2. Compulsory training for managers on sexual harassment	- Compulsory further training courses for managers - Further training on the topic and fair play for all employees - Offers of different consulting formats	SC Personnel development Trainings	
Structure Level	SC_N 5.1. Central representatives for consulting and support	SC_D 6.1. Low-threshold and anonymous reporting	- Anonymous reporting systems	SC Structure Level	

	SC_N 5.2. Anonymous, low-threshold reporting systems	systems (Whistleblower software) SC _D 7.1. Contact points/complaint offices can use public relations work to protect and prevent sexual harassment	- Central representatives for consulting and supporting the procedure	
Organizational level	SC_N 4. Process-optimization	SC_D 4. Process-optimization	- Participation in unit change processes – process optimization	SC Participation in unit Process-optimization
Organizational level	SC_N 6. Safety systems and structural measures			SC Safety systems and structural measures