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Not on the Menu: Customer Sexual Harassment in the Restaurant Industry

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Not on the Menu:

Customer Sexual Harassment in the Restaurant Industry

by

Fernanda Wolburg Martinez

A thesis submitted in partial fulfillment of the
requirements for the degree of

Master of Science
in
Psychology

Thesis Committee:
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Portland State University
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Abstract

Despite the high prevalence of customer sexual harassment (CSH) paired with a high turnover in the restaurant industry, there have been few suggestions on resources that may attenuate the effect that bystander and direct CSH might have on strain— anxiety and depressive symptoms—and turnover intentions among restaurant workers. Based on the stipulations of the job-demands resources theory and the empowerment framework, the current study frames direct and bystander CSH as job demands that may be linked to employee strain and turnover intentions. Moreover, CSH preventive supervisor behaviors and organizational intolerance towards CSH are introduced as job resources that may weaken the relationships between CSH and strain as well as turnover intentions. A sample of restaurant employees ($n = 93$) were recruited to complete two surveys. Overall, the results support the association between high CSH frequency and increased anxiety in the same week. Moreover, preventive supervisor behaviors were supported as an organizational resource that may reduce restaurant employee's depressive symptoms and turnover intentions. Finally, the incremental effect of bystander CSH was not supported. Several explanations for these findings are discussed, as well as the limitations and future research directions.

Dedication

I dedicate this to my mother, Tatiana Martinez Rosiñol, for showing me that jobs are more than what we do for a paycheck.

Acknowledgments

I would like to thank my committee members, Dr. Liu-Qing Yang, Dr. Charlotte Fritz, and Dr. Tori Crain, for your continued support and guidance throughout this process. Your feedback helped me grow as a person and as a professional researcher. Thank you to Charlotte for encouraging me to apply for the grant that funded this project. Thank you, Liu-Qin, for being an amazing graduate advisor that dedicated numerous hours to mentoring me during your sabbatical. Thank you, Tori, for teaching me the importance of researching vulnerable populations.

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Not on the Menu: Customer Sexual Harassment in the Restaurant Industry

Organizational research on sexual harassment has been reinvigorated after nearly two decades of dormancy following a wave of social movements such as #MeToo and #TimesUp (Chawla et al., 2021). Although this renewed scholarly interest represents a positive shift in understanding sexual harassment in organizations, there are a few noteworthy limitations in the literature. First, most studies on the topic focus on a white-collar workplace context, and few have explored the development of this phenomenon in the restaurant industry (Kundro et al., 2021). This is surprising, given that an estimated 80% of female and 55% of male restaurant workers experience some form of customer sexual harassment (CSH; ROC United, 2014) and tipped workers account for 14% of all sexual harassment claims in the United States (ROC United, 2018). Second, CSH has been suggested to influence turnover intentions among restaurant workers (Aaron & Schwartz, 2021; Johnson & Madera, 2018), but this link has yet to be empirically explored. The potential link between CSH and turnover intentions has become increasingly relevant in the aftermath of the COVID-19 pandemic, when the restaurant industry experienced a slow financial recovery due to understaffing (Roberts & Vinh, 2022). Third, there has been increased calls for awareness of the mental health of restaurant employees, who tend to have high rates of depression and anxiety (Saah et al., 2021). While preliminary findings suggest that targets of CSH experience strain indicators such as depressive symptoms, burnout, and anxiety (e.g., Friberg et al., 2017; Szymanksin & Mikorski, 2017), limited research has identified potential organizational factors that could mitigate these CSH-strain relations.

CSH refers to any romantic or sexual advances from customers that are 1) unreciprocated, unwanted, and/or offensive, and 2) degrading or hostile behaviors from customers that are gendered in nature (Holland et al., 2016). Restaurant employees may be exposed to CSH either as a direct victim or as a bystander who witnesses CSH enacted towards their coworker. The literature has primarily focused on general forms of sexual harassment as an intraorganizational phenomenon, such as sexual harassment toward employees stemming from coworkers and supervisors, thus limiting the information available to design empirically guided interventions, policies, and procedures that may protect restaurant workers from exposure to CSH, a form of sexual harassment perpetuated by individuals who are external to the organization (i.e., customers; Kundro et al., 2021). As a result, the lack of formal procedures to handle CSH leaves restaurant supervisors ill-equipped to manage it, while simultaneously facilitating organizational retaliation against employees who choose to report CSH (Aaron & Schwartz, 2021; Madera, 2017). Therefore, the current study explores the links between direct and bystander CSH and strain indicators among a sample of restaurant workers. In addition, the study also introduces two organizational resources as potential moderators of the relationship between direct and bystander CSH and its negative outcomes.

This study will provide several contributions to the literature on CSH. First, while power imbalances in restaurant work have been suggested to increase the likelihood of CSH (Matulewicz, 2016; Minnotte & Legerski, 2019), it is not yet clear which theoretical processes explain how this power dynamic influences employee outcomes of CSH. To close this gap, this study integrates a stress theory, namely, the Job Demands and

Resources theory (JD-R; Bakker & Demerouti, 2007, 2014) with the empowerment framework (Conger & Kanungo, 1988), to explain the experiences of restaurant workers as targets of CSH in relation to the power imbalance between them and their customers. This also addresses the call by Bakker and Demerouti (2014) for more research that considers motivational and stress factors simultaneously. Consistent with the JD-R theory, the proposed study frames CSH as a job demand that is linked to higher strain (e.g., depression symptoms and anxiety) and employee attitudes (e.g., turnover intentions). The empowerment process suggests that the processes underlying the relations of CSH with target employees' strains and job attitudes may be partially explained by employees' sense of relational and motivational powerlessness. Integrating these theories allows for a theoretical and empirical examination of how CSH affects employee outcomes that may result from relational power imbalances in the restaurant industry.

In addition, the underrepresentation of restaurant employees in the research literature limits the ability to develop interventions that may mitigate the effects of CSH on employees. For example, the findings by Kundro et al. (2021) suggest that changing restaurant emotional labor norms (e.g., smiling), coupled with restructuring the restaurant's tipping structure may reduce the occurrences of CSH through a decrease in psychological power that customers have over restaurant employees. Another possible avenue for intervention is to introduce potential job resources that could mitigate the effects of CSH. This is important, given that the restaurant industry has one of the highest rates of CSH and sexual harassment in general (ROC United, 2014; Johnson & Madera,

2018; Matulewicz, 2016). Drawing from the JD-R theory, this study allows for the examination of two organizational resources (organizational intolerance towards CSH and CSH supervisor preventive behaviors) as factors that may weaken the relationship between CSH and employee strain as well as turnover intentions.

Finally, it has been suggested that witnessing sexual harassment can contribute to outcomes similar to being a direct target of it (Glomb et al., 1997; Chawla et al., 2021). For example, bystanders of mistreatment, including sexual harassment, may experience lowered well-being, as well as increased turnover intentions and job dissatisfaction (Liang & Park, 2021; Miner-Rubino & Cortina, 2007). Still, there is a lack of empirical evidence for the incremental effect of bystander CSH on direct CSH, as well as for the effect of bystander sexual harassment in general (Yang et al., 2023). Given that restaurant employees work in a shared space, they are likely aware of CSH directed at their coworkers, suggesting that there might be an additive effect of bystander CSH on witnesses' strains and job attitudes. To explore this possibility, the current study aims to analyze the effect of CSH on employee well-being outcomes over and above the effect of experienced CSH. Such findings would suggest that the negative outcomes of CSH may be higher for victims who are both direct targets and bystanders. This possible finding may serve as the basis for organizational researchers and practitioners to urge restaurant organizations to implement interventions to mitigate the effects of CSH for all employees.

Experienced and Witnessed Workplace Mistreatment

Workplace mistreatment occurs when an individual engages in deviant negative actions—or terminates positive normative actions—towards another person in the workplace (Magley et al., 2003). Example forms of mistreatment include acts of abuse, harassment, incivility, and aggression. Numerous findings suggest that contextual variables, such as working in a stressful environment, are the strongest contributors to an employee's exposure to workplace mistreatment (e.g., Bowling & Beehr, 2006; McCord et al., 2018; Yang et al., 2023). Restaurant workers are likely to be victims of customer mistreatment, defined as a form of treatment directed at service employees that is demeaning, aggressive, or disrespectful (Garcia et al., 2019). Moreover, restaurant work is designed such that the employee holds a disempowered status relative to the customer, as illustrated by the service industry's prioritization of the customer experience (e.g., Han et al., 2016; Matulewicz, 2016; Yagil, 2008). Indeed, social dynamics, particularly those pertaining to power imbalance, have also been identified as a contributing factor to acts of mistreatment (Cortina et al., 2017). As a result, employees who are exposed to customer mistreatment may experience a depletion of resources manifested in the form of emotional exhaustion, lowered performance, and increased burnout (e.g., Garcia et al., 2019; Han et al., 2016; Hershcovis & Barling, 2010). Other common outcomes of mistreatment include an increase in negative job attitudes, such as turnover intentions, and worsened mental health, such as anxiety and depressive symptoms (Yang et al., 2023).

Recent evidence indicates that the consequences of direct exposure to mistreatment can expand beyond the victim, as bystanders might also be indirectly affected (Dhanani & LaPalme, 2019). That is, employees who witness mistreatment develop outcomes parallel to those of the direct victim, such as lowered well-being and increased turnover intentions (Cooper-Thomas et al., 2014). In terms of antecedents of witnessed mistreatment, it has been proposed that the organization's level of tolerance for mistreatment influences the frequency and severity of mistreatment behaviors, as well as the bystander's level of sensitivity for mistreatment (Miner-Rubino & Cortina, 2007; Woolum et al., 2017). Higher organizational tolerance for mistreatment could encourage perpetrators by signaling that negative behaviors are inconsequential, and frequent observations of mistreatment lead to higher expectations of uncivil behavior in one's workday (Woolum, 2017). Despite the extant literature on the antecedents and outcomes of witnessed forms of mistreatment, there is a lack of empirical evidence for potential moderators of these processes (Yang et al., 2023). Moreover, to the best of my knowledge, few studies have identified the incremental effects for individuals who are both direct and bystander victims of mistreatment (Cooper-Thomas et al., 2014; Hitlan et al., 2006), but the authors did not specify if the perpetrators were internal or external to the organization.

Overview of Sexual Harassment in Work Organizations

While various types of sexual harassment have been identified, the current study focuses on the two forms that are most enacted by customers (Kundro et al., 2021). The first one, *sexual hostility*, refers to crude and/or degrading jokes or comments about sexuality or sexual activity. The second one, *unwanted sexual attention*, consists of uninvited sexual advances such as comments about one's appearance or inappropriate touch (Fitzgerald & Cortina, 2018). Sexual harassment has been described as an indicator of a hostile environment for gender minorities (Pina & Gannon, 2012) and men who challenge the gendered status quo (Holland et al., 2016). Those who are victims of sexual harassment may experience a myriad of negative outcomes, such as impaired mental health (Pina & Gannon, 2012) and increased work withdrawal (Chawla et al., 2021)—which can be a proximal precursor of turnover intentions. Finally, researchers have suggested that frequent instances of sexual harassment that were low in intensity—such as gender-specific harassment—were as equally detrimental to women's organizational commitment and mental health as infrequent cases high in severity, such as sexual coercion (Sojo et al., 2016).

Although the antecedents and outcomes of sexual harassment are well researched, scholars have yet to identify potential work contextual moderators capable of mitigating sexual harassment's negative effects on the victim. To date, most studies have focused on the coping strategies that victims commonly engage in (Cortina & Wasti, 2005) without suggesting solutions that place responsibility on the organization. Most sexual harassment interventions backfire and result in retaliation, including demoting or firing

the victims who report sexual harassment (Dobbin & Kalev, 2020). Moreover, promising solutions are designed for workplaces in which the perpetrator and the victim work for the same organization, making them difficult to implement in settings with high prevalence of sexual harassment involving perpetrators from outside of the organization, like customers. For example, bystander training, which trains bystander witnesses to step in and defend the victim, has been deemed effective in military settings (Potter & Moynihan, 2011), but prior research suggests that restaurant employees are less likely to defend their coworkers from CSH in fear of compromising their earnings (Liang & Park, 2021). Thus, more research is needed to identify potential organizational moderators for the relationship between sexual harassment and its outcomes.

Customer Sexual Harassment in the Restaurant Industry

CSH has been described as a power dynamic in which the perpetrator holds the target's access to resources (Kundro et al., 2021; Yagil, 2008). Indeed, customers hold access to a significant resource for restaurant employees: their tip-based income (ROC United, 2014; Shaw et al., 2018). Findings from a report indicate that female servers tend to tolerate unwanted sexual advancements in fears that retaliating would compromise their earnings (ROC United, 2018). Thus, the power differential between the restaurant employees and customers arises mainly from the customer's hold on the worker's financial resources. Further, this power dynamic is solidified due to the service industry's endorsement of the philosophy that "the customer is always right", which signals to employees that they must respond professionally to customers regardless of their behavior (Matulewicz, 2016). Along these lines, supervisors are incentivized to prioritize customer service and dismiss their employee's well-being in cases of customer mistreatment (Arnold & Walsh, 2015; Fine et al., 1994; Fisk & Neville, 2011). For example, in the case of *Llewelyn v. Celanese Corp*, an employee who was sexually harassed by a customer was dismissed by her employer when the latter indicated that the "customer is always right" (Fine et al., 1994). Overall, dependence on the tipped-wage income, coupled with the service philosophy that prioritizes the customer's experience, constrains restaurant workers from reporting and responding to inappropriate customer interactions, placing employees in a powerless status relative to the customer.

Theoretical Background

This study integrates the empowerment framework (Conger & Kanungo, 1988) and the JD-R theory (Bakker & Demerouti, 2014; Demerouti et al., 2001), to conceptualize the motivation and health mechanisms that influence how CSH may relate to the turnover intentions and mental health of restaurant employees. Specifically, power imbalances are commonly attributed to instances of sexual harassment (Pina & Gannon, 2021). The stipulations from the empowerment framework capture the power dynamics present in workers' experiences of CSH (as a direct or bystander victim) in restaurant settings. The JD-R theory serves as a broader stress framework that allows for the introduction of organizational resources as potential moderators for the relationship between CSH and its outcomes.

Empowerment Process

The empowerment process introduced by Conger and Kanungo (1988) integrates the management and psychology literatures to define the underlying mechanisms of empowerment. The authors define power as both a relational and a motivational construct. As a relational construct, power arises when the performance outcomes (e.g., tips, customer reviews) are contingent on other agents (e.g., customers). In a restaurant setting, customers hold coercive power (control of punishment) granted by the industry's philosophy of "the customer is always right", which grants them leverage when complaining to the supervisor. They also hold remunerative power (control of material rewards) because they control the restaurant worker's income. The relational approach to power assumes that individuals in a high-power status are more likely to reach their

desired outcomes and they also have some level of control over the organizational resources of low-power individuals. Empowerment for low-power subjects can be achieved by sharing or granting them organizational resources. In this view, empowerment can be achieved if restaurant leaders extend their managerial power to their subordinates, such as by introducing practices that strengthen the employee's ability to gain and protect their resources. A possible way in which restaurant supervisors can achieve this is by preventing CSH, a practice that would alleviate the employee's burden of confronting customers themselves.

The empowerment process further proposes that all people have a basic need for power. In a motivational sense, the need for power is referred to as the need for control in social contexts. This need is satisfied when individuals have a sense that they can cope with interpersonal confrontation and others' reactions during social interactions. On the other hand, an inability to cope with one's social demands would thwart one's need for power. Failing to satisfy this need will ultimately lead to strains and dissatisfactions. In this view, empowerment can be achieved through organizational strategies that *enable* employees, such as by creating conditions (e.g., positive organizational climate) that strengthen employees' sense of control over social demands at work. In contrast, a lack of organizational strategies strengthening restaurant employees' capacities to deal with CSH threatens these workers' need for power, resulting in increased strain levels and worsened job attitudes.

Job Demands-Resources Theory

The JD-R theory argues that job demands and resources are indirectly related to organizational outcomes through work exhaustion and engagement, respectively (Bakker & Demerouti, 2014; Demerouti et al., 2001). According to the JD-R theory, job demands are aspects of the job that require sustained effort and can result in the loss of physiological or psychological energies, and the resulting exhaustion has an effect on performance and well-being outcomes (Bakker & Demerouti, 2014; Bakker et al., 2014; Tims et al., 2013). This is referred to as the health-impairment process. The second category specified in the JD-R theory are job resources, which consist of job aspects that are “(a) functional in achieving work goals; (b) reduce job demands and the associated physiological and psychological costs; or (c) stimulate personal growth, learning, and development” (Bakker & Demerouti, 2014, p. 9). Job resources indirectly affect employee performance and strain through enhanced work engagement, and they tend to increase work engagement and motivation by satisfying psychological needs (Bakker et al., 2014). This is referred to as the motivational process. Furthermore, job demands and resources interact so that job resources buffer the relations between job demands and well-being. Thus, higher amounts of job resources help employees cope with job demands. The theory also suggests that job resources are most valuable when employees are dealing with high job demands.

Hypothesis development

Without proper resources in place, CSH is a taxing job demand for restaurant employees potentially linked to increased turnover intentions (i.e., the willingness to voluntarily leave one's current organization; Tett & Meyer, 1993). Consistent with the JD-R theory, constant exposure to stressors could drain an employee's psychological resources and contribute to focal employees' lowered well-being, such as more emotional strains and poorer job attitudes. In the context of experiencing CSH in restaurant setting, restaurant employees' health-impairment process might be constantly activated during or after a work shift. Specifically, the target employee may ruminate about the CSH incidents during and after work, subsequently experiencing exhaustion and emotional strains like anxiety and depressive symptoms, as well as developing more negative attitudes toward their job, such as having thoughts about quitting their job as a way to avoid sexual harassment from customers in the future. In the present study, I chose to focus on anxiety and depressive symptoms as indicators of emotional strains and turnover intentions as the indicator of job attitude for the following reasons: The restaurant industry has one of the highest turnover rates of any industry at 74% (National Restaurant Association, 2019) and the average job tenure of a restaurant employee is approximately two months (Jong, 2019), indicating that most restaurant employees choose to leave their organization shortly after being hired. This begets researchers to identify (and subsequently change) the work factors that prompt restaurant employees to quit their jobs in such a short amount of time, such as CSH (e.g., Johnson & Madera, 2018; Yagil et al., 2008). Moreover, scientific articles and popular media have begun to increase awareness

for the mental health of restaurant workers after the COVID-19 pandemic (Alburger, 2020; Saah et al., 2021). Preliminary evidence shows that employees in the tipped service industry may be more likely to report depressive symptoms (Andrea et al., 2018) and that recipients of customer misbehavior may be prone to experience long-term anxiety (Yagil et al., 2008; Harris & Reynolds, 2003). These findings beget further identification of potential predictors of mental health indicators for restaurant employees, and empirical evidence suggests that restaurant employees are at higher risk of experiencing anxiety and depressive symptoms when they are exposed to CSH (Yagil et al., 2008).

H1: Direct CSH will be positively related to a) anxiety and b) depressive symptoms.

H2: Direct CSH will be positively related to turnover intentions.

Besides being direct targets of CSH themselves, the health impairment process of restaurant employees may be activated by witnessing CSH directed at their coworkers, which may also relate to higher turnover intentions and lowered well-being. Researchers have conceptualized bystander sexual harassment as an ambient stimulus that serves as information for the affective and behavioral reactions of group members (Glomb et al., 1997). Based on this, bystanders may consider instances of CSH as information of their low power status relative to the customer. However, this effect has not been examined for bystanders of CSH in restaurants. Under this premise, bystander exposure to mistreatment (i.e., CSH) may create a shared traumatic experience facilitated by the process of co-victimization (Glomb et al., 1997; Chawla et al., 2021) and through increased bystander stress (Miner-rubino et al., 2007). Empirically, this vicarious process

of observing workplace mistreatment has been found to have implications on employee well-being, as well as their intentions to turn over (Miner-Rubino et al., 2007). Restaurant employee who are bystanders of CSH may be experiencing resource depletion in addition to instances in which they are direct victims of it, as a similar link has been identified for employees who are simultaneously victims and bystanders of workplace mistreatment (Cooper-Thomas et al., 2014).

H3: Bystander CSH will be positively related to a) anxiety and b) depressive symptoms, over and above experienced CSH.

H4: Bystander CSH will be positively related to turnover intentions, over and above experienced CSH.

Most studies on workplace sexual harassment in the literature have framed the phenomenon from the perspective of white-collar employees, largely neglecting the experiences of employees in the service industry (Kundro et al., 2021). As a result, most proposed solutions for workplace sexual harassment would be difficult to implement in the service industry, like the restaurant setting this study is focused on. Much more research is needed to identify potential work contextual moderators that may mitigate the negative impact of CSH on restaurant workers. Based on the tenets of the JD-R theory, restaurant employees may combat the negative effects of CSH if they have available job resources, such as when they work for an organization that is intolerant of CSH.

Organizational intolerance for CSH is evaluated by the perceived risk of reporting CSH, the potential consequences for the offender, and the seriousness in which the complaint is received (National Academies of Sciences, Engineering, and Medicine, 2018). Although

no study has examined how organizational intolerance towards CSH moderates the relationship between CSH and employee outcomes, it is plausible that it could mitigate the association between CSH and strain as well as turnover intentions. Following the processes stipulated in the JD-R theory, organizational intolerance should buffer the negative effects of CSH on employee well-being (e.g., strains and job attitudes), because it may decrease the effect of CSH as a job demand by increasing the employee's resources to cope with the strains resulted from CSH (e.g., formal sanctions for reported CSH offenders). Furthermore, the stipulations of the empowerment framework suggest that organizational intolerance for CSH should satisfy the restaurant employee's need for power by granting them control over their work processes and outcomes (i.e., granting them motivational empowerment), such as their gratuity earnings, instead of these being completely contingent on the customer. For example, employees who work for organizations that enforce clear sanctions against CSH may feel safety and control in reporting CSH. In contrast, employees who work in an organization that is tolerant of CSH would have less available organizational resources such as specific sanctions against offenders and formal channels for reporting CSH, which may yield a lowered sense of control and an unsatisfied need to power. Accordingly, target employees of CSH in such organizations would experience exacerbated well-being outcomes, including higher anxiety, more severe depressive symptoms, and higher turnover intentions.

Empirical research in the literature has found that employees that work in restaurants with high tolerance for CSH are left to cope with the customer informally on their own, many reporting that they have little control of the situation and lack

organizational support, and in turn feel stressed out from CSH (Matulewicz, 2016; Minnotte & Legerski, 2019). For example, one participant from Matulewicz's (2015) study shares that she thought she was "too sensitive, [she] can't work in the industry it's too stressful" (p. 410). Moreover, organizational tolerance for CSH may hurt the victim's well-being outcomes, such that the absence of organizational support influences the victim's likelihood to self-blame and increases their perceived vulnerability towards sexual harassment (Ford & Ivancic, 2020). Finally, working in an organization that is tolerant of CSH has been found reduce employee trust in their organization, which may deter employees from reporting CSH (Vijayasiri, 2008). In turn, employees who are unable to report CSH may be more likely to withdraw from work (Willness et al., 2007) and develop intentions to leave their organization.

H5: Organizational intolerance for CSH will moderate the positive relationship between direct CSH and a) anxiety and b) depressive symptoms such that these relationships will be weaker (stronger) under higher (lower) organizational intolerance for CSH.

H6: Organizational intolerance for CSH will moderate the positive relationship between direct CSH and turnover intentions such that this relationship will be weaker (stronger) under higher (lower) organizational intolerance for CSH.

Customer sexual harassment preventive supervisor behaviors may also be a resource that can weaken the link between CSH and strain outcomes. This construct is adapted from Yang and Caughlin's (2017) aggression-preventive supervisor behaviors. In this

context, preventive supervisor behaviors refers to the specific behaviors that supervisors engage in to prevent instances of CSH. These include having awareness of the interactions between the employees and the customers (proactive practice), intervening in situations with high risk of CSH (active practice), and informing the employees about the policies, processes, and procedures available regarding CSH (declarative practice). By engaging in preventive behaviors, supervisors influence how employees experience the outcomes of CSH. For example, preventive supervisor behaviors might increase the employee's awareness of the formal processes available to them to report CSH. Indeed, preliminary studies support the notion that supervisor behaviors influence employee's perceptions of organizational policies regarding general sexual harassment (Reese & Linderberg, 2003).

In a restaurant setting, supervisors can dictate the norms for interactions between employees and customers. For example, 17% of women restaurant workers indicated that their supervisors told them flirt with customers (ROC United, 2014, p. 21). Thus, preventive supervisor behaviors in restaurants are crucial for mitigating against the outcomes of CSH. Following the JD-R theory's stipulations, preventive supervisor behaviors will serve as a job resource that may buffer the effect of CSH on employee turnover intentions and well-being by protecting the employee's resources to combat CSH. According to the empowerment process, supervisors can extend their relational empowerment with their employees by extending their managerial resources, such as by removing customers with a high risk of enacting CSH, rather than prioritizing the customer's experience by allowing them to remain in the restaurant. In turn, restaurant

workers may feel more protected from experiencing CSH if their supervisor engages in active and proactive practices because this releases them from spending their personal resources to confront the customer themselves. Based on this, employees who have preventive supervisor behaviors as a job resource may experience higher relational empowerment, in turn experiencing lower anxiety, fewer depressive symptoms, and lower intentions to leave their organization.

Furthermore, research findings show that supervisors may mitigate employee job attitudes and well-being outcomes that result from negative customer interactions (Boukis et al., 2019; Zhu et al., 2019). Moreover, preventive supervisor behaviors are a practice that increases employee relational empowerment. Supervisors that adopt an empowerment leadership style have been found to increase their employee's psychological empowerment and organizational commitment (Namasivayam et al., 2014). Finally, supervisors have been found to have a buffering effect on the positive relationship between customer incivility and employee work strains (Beattie & Griffin, 2014).

H7: Preventive supervisor behaviors will moderate the positive relationship between CSH and a) anxiety and b) depressive symptoms such that these relationships will be weaker (stronger) under higher (lower) levels of preventive behaviors.

H8: Preventive supervisor behaviors will moderate the positive relationship between CSH and turnover intentions such that this relationship be weaker (stronger) under higher (lower) levels of preventive behaviors.

Method

Sample and Procedure

This study is based on a larger project funded by the Professional Training Opportunities Program (PTOP) through the Northwest Center for Occupational Health and Safety, housed in the University of Washington. I implemented a two-wave design in which participants received two surveys that were a week apart. The weekly repeated-measures design was chosen because the average length of employment for restaurant workers is between one and two months (Jong, 2019), suggesting that turnover intentions develop promptly and quickly in the employee's work life cycle. Additionally, preliminary evidence has suggested that turnover intentions and mental health indicators are dynamic in nature, such that they can fluctuate on a weekly basis and are influenced by the occurrence of stressful work events (Bakker et al., 2014; Shi et al., 2021; Sonnentag, 2015). Restaurant workers' experiences of psychosocial stressors in their job may fluctuate given that the quality of customer-employee interactions tend to differ over time. Specifically, the likelihood of experiencing or witnessing CSH on a particular workday may vary depending on various factors such as workload (how busy the restaurant is), the demographics of the customer (e.g., gender, age), and the enactment of emotional labor (smiling; Kundro et al., 2021). Thus, CSH was measured in this study as the frequency of direct and bystander CSH during the prior week, which has been shown to be an effective way to capture the various SH experiences across individuals (Sojo et al., 2016).

Participants were recruited via community outreach and crowdsourcing. Expanding recruitment strategies was the most efficient way to recruit restaurant employees, who belong to a hard-to-reach population given the structural vulnerabilities embedded in restaurant work (Minnotte & Legerski, 2019) as well as the lack of representation of restaurant workers in research studies (Kundro et al., 2021) and unions. Community outreach efforts consisted of recruiting directly at restaurants in a metropolitan area, at a college campus in the Pacific Northwest, emailing other universities in the United States, and through a community partnership with the Restaurant Opportunities Center United. Please refer to appendix A for the recruitment materials. Additionally, crowdsourcing was done via the Prolific recruitment platform, which has been described as a viable way to recruit participants who have been typically underrepresented in research studies (e.g., Lyons et al., 2023; McInroy, 2016). The screening surveys for participants recruited on Prolific included additional questions aimed at identifying bots, which are a source of fake data (Storozuk et al., 2020). Please refer to Appendix B for these additional questions. Finally, the inclusion criteria required participants to be 18 years or older and working at a job in the food industry with regular customer interaction (e.g., bartender, host).

Recruited restaurant employees were directed to a screening survey (see Appendix B) in which they were asked to respond to several questions about their work environment. Those who indicated that the frequency of their interactions with customers were “often” or “always” were officially invited to participate in the study. The screening survey also asked the individuals to create a personalized ID and to provide their

preferred email address and/or phone number. The email addresses and phone numbers were collected to send out the Time 1 and Time 2 surveys to participants. The participant's personalized ID was used to link responses across surveys. This personalized ID consisted of the first two letters of the participant's mother's first name, the first two letters of the town they were born in, and the two digits of their day of birth.

Different batches of contact lists were created every week with the purpose of sending the survey to participants in a timely manner. Once participants were recruited for a specific batch, the link to the Time 1 survey was sent to the emails and phone numbers from the respective contact list. The first page of the Time 1 survey included the informed consent form. Those who provided consent to participate in the study were subsequently asked to provide their personalized ID. After this, participants were directed to complete questionnaires asking about their affective states, work experiences, and demographic information. The moderating variables were measured at Time 1.

A week after the Time 1 survey, participants were emailed the Time 2 survey on Sunday at 5pm via the "schedule send" feature on Qualtrics and the "custom allowlist" feature on Prolific. The Time 2 survey remained open until 5pm on Tuesdays. This survey asked participants about their work experiences and general well-being within the last week. The independent and dependent variables were measured at Time 2. Participants were awarded \$4.00 for each survey that they completed. The non-Prolific participants received their payment in the form of Amazon e-gift cards, whereas the Prolific participants were compensated through the Prolific website, which pays

respondents through PayPal. In total, individuals could earn up to \$8.00 for answering both surveys.

A total of 212 non-Prolific and 119 Prolific recruits completed the screening surveys. The respondents who met the inclusion criteria and passed the bot checks were invited to complete the Time 1 survey, resulting in 127 non-Prolific and 92 Prolific participant invites. Of those, 102 non-Prolific and 51 Prolific invited responses were received for the Time 1 survey. With the intention to maximize the sample size for the Time 2 measures, the Time 1 survey for the community outreach sample remained open in order to allow participants to officially join the study at any time, meaning that some participants completed the Time 1 survey twice. In such cases, I dropped the duplicated responses with the most missing data, considering that the Time 1 survey measures capture events “in general” rather than “weekly”. This resulted in the deletion of 6 duplicate Time 1 survey responses for the non-Prolific recruits. None of the Prolific participants answered the Time 1 survey more than once. Finally, 54 non-Prolific and 39 Prolific participants completed the Time 2 survey, resulting in a total sample size of 93 matched answers for Time 1 and Time 2. All participants passed the attention and bot checks (Bowling et al., 2021; Huang et al., 2015; Rogelberg & Stanton, 2007). Finally, some ($N= 15$) participants were excluded from the analyses pertaining to hypotheses 7-8 because they indicated not having a direct supervisor.

The average age of the final sample was 30.67 years old ($SD = 9.86$) and the average financial dependence on tips was 42.69% ($SD = 27.84$). The majority of participants were working as food servers (40.9%), followed by bartenders (11.8%),

hosts/hostesses (9.7%) and cashiers (6.5%). The remaining 26.9% of participants selected “other” and specified that their job title entailed working either in a combination of positions (e.g., “server/bartender/host”) or as managers (e.g., “shift lead”). More than half of the sample had been working in the restaurant industry for more than a year (63.4%), the remaining participants indicated working between three months to a year (19.4%), one to three months (9.7%), and less than a month (3.2%). Additionally, 17.2% of participants had been working with their current supervisor for less than a year, 16.1% for at least one year, 37.7% for at least two years, and 29% of participants did not answer this question. Regarding the participant’s demographics, 66.7% identified as White, 10.8% as Latinx, 3.2% as Black, 9.7% as Asian, 2% as Middle Eastern, and 2% selected “other”. The majority of respondents identified as women (64.5%) and were highly educated: most participants indicated having “some college” education (35.5%) or having a 4-year college degree (28%).

Time 1 Measures: Moderating Variables

Please refer to Appendix C for the scale items included in the Time 1 survey.

Organizational Intolerance for Sexual Harassment was measured using Holland et al.’s (2016) adaptation of William & Fitzgerald’s (1999) measure for organizational practices for sexual harassment. Participants indicated their level of agreement to ten items (e.g., “Sexual harassment will not be tolerated at my organization”) using a Likert scale ranging from 1 = *Strongly disagree* to 5 = *Strongly agree*. The reliability for this scale was high, $\alpha = .93$,

Customer Sexual Harassment Preventive Supervisor Behaviors were measured using a nine-item scale adapted from Cyr et al.'s (2019) Aggression Preventive Supervisor Behaviors towards patient aggression. Participants indicated the frequency in which their supervisor engages in specific preventive behaviors (e.g., "Pays attention to customers with high risk of sexual harassment"), using a Likert scale ranging from 1 = *Never* to 5 = *Every day* and one option for *Not applicable*. Reliability was high, $\alpha = .91$. Please see Appendix C for the adapted scale items and refer to Appendix E for a description of the scale adaptation process.

Time 2 Measures: Independent and Dependent Variables

Please refer to Appendix D for the scale items included in the Time 2 survey.

Direct and Bystander Customer Sexual Harassment were measured using Kundro et al.'s (2021) client version of Gettman & Gelf's (2007) Sexual Experiences Questionnaire (C-SEQ). Participants responded to two separate six-item scales indicating the frequency in which customers engaged in sexually harassing behaviors towards them and their coworkers in the past week, respectively (e.g., "[How often has a customer] touched you/your coworker in a way that made you/them feel uncomfortable?"). The scale anchors ranged from 1 = *Never* to 5 = *Four times or more*. Reliability for direct and bystander CSH were $\alpha = .88$ and $\alpha = .91$, respectively.

Turnover Intentions were measured using Mobley's (1982) scale. Participants indicated their level of agreement with the work experiences stated in three items in the past week (e.g., "I thought a lot about quitting my present job"), using a Likert scale ranging from 1 = *Not at all* to 5 = *A lot*. Reliability was high, $\alpha = .92$.

Depressive Symptoms were measured using Kessler et al.'s (2003) scale.

Participants indicated how often they felt six emotions in the past week (e.g., “Hopeless”), using a Likert scale ranging from 1 = *None of the time* to 5 = *All of the time*. Reliability was high, $\alpha = .89$.

Anxiety was measured using Splitzer et al.'s (2006) Generalized Anxiety Disorder seven-item scale. Participants indicated how often they were bothered by the stated problems in the past week (e.g., “Trouble relaxing”), using a Likert scale ranging from 1 = *None of the time* to 5 = *All of the time*. Reliability was high, $\alpha = .92$.

Control Variables

Control variables consisted of the organization's tipping model, tipping structure, and the employee's financial dependence on tips, as previous findings suggest that these factors influence the restaurant's power dynamics between employees and customers (Kundro et al., 2021) and the employee's reaction to direct and bystander CSH (ROC United, 2018; Liang & Park, 2021). The tipping model is defined as the process implemented to receive tips from customers. That is, the gratuity can be automatically included in the customer's bill, it can be situational—such that it is only automatically included for large parties—or it can be done as the traditional model in which the customer decides the tip amount for the employee. The tipping structure refers to the restaurant's policy for tip distribution among employees, such as pooled tips (the total amount of tips is distributed to all employees based on the hours worked), tip-out (some employees might give a percentage of their tips to other employees), and tips earned (every employee keeps the tips that they earn without splitting them with their

coworkers). The employee's financial dependence on tips was measured as the percentage of income that was earned from tipping. Finally, the source of recruitment—Prolific vs community outreach—was also entered as a control variable.

Results

Preliminary Analyses

The data were inspected for missing values and outliers. The rate of missing data ranged from 8% for most scale items to 13% for the preventive supervisor behaviors at the item level. Given Bennett's (2001) suggestion that more than 10% of missing data may introduce statistical bias to the analyses, Little's (1988) test was performed to determine if the data were missing completely at random (MCAR) for the preventive supervisor behaviors scale items. The test was conducted in R using the *nanian* package (Tierney & Cook, 2023). All of the preventive supervisor behavior items were simultaneously compared to the participant's age, gender, and ethnicity. The results indicated that the test was not significant, $\chi^2(262) = 285, p > .05$, suggesting that the data were MCAR. Based on this finding, listwise deletion was implemented to handle missing data, as recommended by Enders & Bandalos (2001).

The correlations, means, reliability coefficients, and standard deviations can be seen in Table 1. The correlation results show that direct and bystander CSH had a strong positive correlation ($r = .75, p < .01$). Organizational intolerance was negatively correlated with anxiety ($r = -.27, p < .05$), depressive symptoms ($r = -.25, p < .05$), and turnover intentions ($r = -.30, p < .01$). Finally, preventive supervisor behaviors were negatively correlated with depressive symptoms ($r = -.27, p < .05$) and turnover intentions ($r = .28, p < .05$).

Testing Assumptions

Before testing the hypotheses, several statistical assumptions were tested. First, residual plots were obtained to test for homoscedasticity. The residual plots indicated that direct and experienced CSH violated the homoscedasticity assumption. Specifically, there was greater variance for the standardized residuals at lower levels of the predicted values for all of the dependent variables. Additionally, the descriptive statistics demonstrated that direct (skewness = 2.36, $SE = .26$) and bystander (skewness = 2.11, $SE = .26$) CSH were positively skewed. This is common for measures of mistreatment (e.g., Yang and Caughlin, 2017), as lower values of mistreatment tend to be more frequently endorsed in comparison to higher values. Based on this, bootstrapping was used for all of the hypotheses as a remedy for the non-normality and heteroskedasticity present in the data (Chernick et al., 2011). Additionally, due to the small sample size, a heteroskedasticity-consistent 3 (HC3) robust correction for standard errors is recommended (Long & Ervin, 2000). Results with HC3 correction did not differ from the uncorrected findings. Thus, I reported the results from the uncorrected analyses, allowing for the simplest method of testing as stated by the principle of parsimony (Gauch, 2003).

I obtained variance inflation factor (VIF) and tolerance values to determine if multicollinearity was present between the predictors. The strongest correlation for predictor variables corresponded to direct and bystander CSH, and the results indicated that these variables had acceptable VIF (1.077 and 1.102, respectively) and tolerance (.928 and .907, respectively) scores. No multicollinearity was detected between any of the predictor and moderator variables since all of the VIF values were all lower than 5

and the tolerance scores were greater than .20. To check for multivariate outliers, studentized residuals, Cook's distance, and residual plots were obtained. Few outliers were identified, but none of these cases were excluded from the final analyses to maintain the integrity of the data and preserve the sample size. Lastly, scatter plots were obtained to establish the linearity assumption between the independent and dependent variables. A visual inspection of the fit line for each scatterplot indicated that all of the variables met the assumption of linearity.

Hypothesis Testing

Hypotheses 1-4 were tested by implementing a hierarchical linear regression analysis with bootstrapping in SPSS for each of the focal dependent variables. The first step consisted of entering the theoretically justified covariates as predictors. The categorical covariates (tipping model and structure) were entered as dummy variables. For tipping model, the "other" variable was used as the referent variable, and "tips earned" was used for tipping structure as the referent variable. In the second step, CSH was entered into the model to test Hypotheses 1-3. Finally, the third step consisted of entering witnessed CSH to test Hypotheses 3-4. The bootstrap analyses were examined to determine significance, since this method corrects for non-normality of the data. Thus, the significant and unstandardized coefficients reported reflect the bootstrapping results.

To examine whether direct CSH was positively related to a) anxiety and b) depressive symptoms, I conducted a hierarchical regression analysis with the control variables in step 1 and experienced CSH entered in step 2. As seen in Model 2 of Table 2, direct CSH was significantly and positively related to anxiety, $B = .28$, $SE = .14$, $\beta = .20$, $p = .03$. The

results from Model 5 of Table 3 indicate that direct CSH was not significantly related to depressive symptoms, $B = .16$, $SE = .13$, $\beta = .14$, $p = .18$. Thus, Hypothesis 1a was supported whereas Hypothesis 1b was not supported.¹

Hypothesis 2 suggested that experienced CSH would be positively related to turnover intentions. The results from step 2 of the hierarchical regression model (Model 8, Table 4) indicated that direct CSH was not significantly associated with turnover intentions, $B = .30$, $SE = .21$, $\beta = .19$, $p = .12$, providing no support for Hypothesis 2.²

Hypothesis 3 suggested that bystander CSH would be positively related to a) anxiety and b) depressive symptoms, over and above direct CSH. As seen in Model 3 of Table 2, when bystander CSH was entered into the model, it was not a significant predictor of anxiety, $B = -.10$, $SE = .21$, $\beta = -.09$, $p = .60$. Further, the results did not indicate that the incremental effect of bystander CSH over and above effects of direct CSH was significant, $\Delta R^2 = .00$, $\Delta F(1, 73) = .31$, $p = .57$. Thus, Hypothesis 3a was not supported. The results from Model 6 of Table 3 indicated that bystander CSH was not a significant predictor of depressive symptoms, $B = -.27$, $SE = .18$, $\beta = -.29$, $p = .13$ and the effect of bystander CSH over and above the effects of direct CSH was also not significant, $\Delta R^2 = .04$, $\Delta F(1, 73) = 3.19$, $p = .08$. The findings did not provide support for Hypothesis 3b.³

¹ Results from models that did not control for tipping variables yielded the same conclusion, as direct CSH was significantly and positively related to anxiety, $B = .27$, $SE = .12$, $\beta = .19$, $p = .02$, but not depressive symptoms, $B = .15$, $SE = .12$, $\beta = .13$, $p = .19$.

² Results from models that did not control for tipping variables yielded the same conclusion, as direct CSH was not significantly related to turnover intentions, $B = .30$, $SE = .19$, $\beta = .19$, $p = .11$.

³ Results from models that did not control for tipping variables yielded the same conclusion, as bystander CSH was not related to anxiety, $B = -.10$, $SE = .18$, $\beta = -.09$, $p = .60$, or depressive symptoms, $B = -.27$, $SE = .17$, $\beta = -.28$, $p = .11$, and the R-squared change was not significant.

Hypothesis 4 suggested that bystander CSH would be positively related to turnover intentions over and above the effect of direct CSH. The results from this model (Model 9, Table 4) indicated that bystander CSH was not a significant predictor for turnover intentions, $B = -.08$, $SE = .31$, $\beta = -.06$, $p = .79$, and the R-squared change for this model was not significant, $\Delta R^2 = .00$, $\Delta F(1, 73) = .13$, $p = .72$. These results did not provide support for Hypothesis 4.⁴

Hypotheses 5-8 were tested via a hierarchical regression model with bootstrapping in SPSS. First, the covariates were entered into the model. Then, the covariates and centered independent and moderator variable for each respective hypothesis were included in a separate model. Finally, the third model included the covariates, the centered independent and moderator variables, along with the interaction term. Hypotheses 5a-b suggested that organizational intolerance for CSH would moderate the relations of direct CSH and a) anxiety and b) depressive symptoms. The results from Model 12 of Table 5 revealed that the interaction term for this model was not significant, $B = .04$, $SE = .15$, $\beta = .03$, $p = .78$, providing no support for Hypothesis 5a. Results from Model 15 of Table 6 indicated that the interaction term was not significant, $B = -.10$, $SE = .14$, $\beta = -.10$, $p = .42$, providing no support for Hypothesis 5b.

Hypothesis 6 suggested that organizational intolerance for CSH would moderate the relationship between direct CSH and turnover intentions. The results from Model 18 of

⁴ Results from models that did not control for tipping variables yielded the same conclusion, as bystander CSH was not related to turnover intentions, $B = -.27$, $SE = .28$, $\beta = -.09$, $p = .11$, and the R-square change was not significant.

Table 7 revealed that the interaction term for this model was not significant, $B = -.09$, $SE = .19$, $\beta = -.07$, $p = .58$. Thus, Hypothesis 6 was not supported.

Hypotheses 7a-b suggested that preventive supervisor behaviors would moderate the relations between direct CSH and a) anxiety as well as b) depressive symptoms. The results from Model 21 of Table 8 revealed that the interaction term for preventive supervisor behaviors and direct CSH was not significant, $B = -.06$, $SE = .22$, $\beta = -.04$, $p = .75$, providing no support for Hypothesis 7a. As seen in Model 24 of Table 9, preventive supervisor behaviors were significantly related to depressive symptoms, $B = -.20$, $SE = .09$, $\beta = -.26$, $p = .02$, but the interaction term was not significant, $B = -.17$, $SE = .19$, $\beta = -.13$, $p = .27$, providing no support for Hypothesis 7b.

Finally, Hypothesis 8 suggested that preventive supervisor behaviors would moderate the relationship between direct CSH and turnover intentions. While Model 26 of Table 7 indicated that preventive supervisor behaviors was related to turnover intentions, $B = -.25$, $SE = .12$, $\beta = -.25$, $p = .04$, this direct effect was no longer significant when the interaction term was entered. The results from Model 27 of Table 10 indicated that the interaction term for this model was not significant, $B = -.17$, $SE = .34$, $\beta = -.11$, $p = .59$. Thus, Hypothesis 8 was not supported.

Discussion

The current study aimed to explore the effects of direct and bystander CSH on two emotional strain outcomes—anxiety and depressive symptoms—as well as turnover intentions. Due to the study’s small sample size and low statistical power, the findings from this study should be interpreted with caution and considered in tandem with other similar findings in the literature that are tested on larger sample sizes. Overall, the results supported a significant and positive relation between direct CSH and anxiety, but not one between direct CSH and turnover intentions or depressive symptoms. Moreover, the incremental effect of bystander CSH over and above direct CSH was not supported. The study also proposed a moderating effect of two job resources, organizational intolerance for CSH and preventive supervisor behaviors, for the relations of direct CSH on anxiety, depressive symptoms, and turnover intentions. I found that the moderating role of organizational intolerance for CSH was not supported for any of the hypothesized relationships. Furthermore, preventive supervisor behaviors were found to be significantly related to depressive symptoms and turnover intentions, but not anxiety, and the moderating role of preventive supervisor behaviors was not supported. I discuss the theoretical and practical implications of these findings in the next section.

Theoretical Implications

The current study contributes to the SH literature by considering the experiences of restaurant employees, a population that has been underrepresented in research, as well as by exploring the effects of SH from perpetrators who are external to the organization—customers. Findings supported the hypothesized positive link between direct CSH and

anxiety, suggesting that CSH experienced in a week may contribute to higher anxiety levels that same week. This indicates that the health impairment process underlying direct CSH as a job demand may develop quickly, especially in predicting anxiety. This may be due to internal psychological mechanisms that increase anxiety during a shorter time span in comparison to other strain outcomes (i.e., depressive symptoms). For example, prior research indicates that sexually objectifying work environments, such as restaurants, lead to anxiety through rumination (Szymanski & Mikorski, 2017). These mechanisms may be activated shortly after experiencing direct CSH, thus increasing feelings of anxiety in a short period of time.

The findings did not support the JD-R theory's health impairment effect of direct CSH as a job demand on depressive symptoms, a strain outcome. A possible explanation for this is that depressive symptoms may take longer than one week to develop. For example, meta-analytic findings suggest anxiety to be a stronger predictor of depressive symptoms than vice versa (Jacobson & Newman, 2017), indicating that prolonged feelings of anxiety resulting from direct CSH may eventually lead to increased depressive symptoms over time. Other sources suggest that depressive symptoms may manifest after 2 weeks (National Institute of Mental Health, n.d.), whereas a faster speed of onset (<1 week) is often attributed to experiencing stressful life events—such as getting divorced—or for people with a diagnosed mood disorder (Hegerl et al., 2008). Additionally, a larger sample size may be required to detect the relationship between direct CSH and depressive symptoms, as the effect size for this association may be smaller. Indeed, the effect of CSH on depressive symptoms has been found to be weaker than the effect of SH from

supervisors and coworkers (Friborg et al., 2017). Overall, these findings suggest that the influence of direct CSH may vary for different strain outcomes.

Regarding the lack of support for direct CSH as an antecedent for turnover intentions, Tsai et al. (2022) suggest that SH from coworkers may be more relevant to employee's intentions to turn over than CSH. Perhaps restaurant employees consider CSH to be "part of the job" (Malutewicz, 2015) and believe that working for a different establishment would not remove this job demand. Moreover, prior meta-analytic findings indicate that the aggregated effect size for the relationship between SH and job attitudes is smaller than that of SH and mental health (Willness et al., 2007) across employees from various industries. Thus, the relatively low statistical power of the current study resulting from a small sample size may have limited the ability to detect an association between direct CSH and turnover intentions.

The current study did not provide support for the health impairment effect of bystander CSH as a job stressor on strain indicators or turnover intentions over and above direct CSH. There may be two plausible reasons for this. First, more frequent observations of bystander SH have been found to decrease negative attitudes towards one's own SH experiences (Hitlan et al., 2006). Based on this, restaurant employees who witness CSH directed at their coworkers may perceive this to be a job stressor related to the nature of restaurant work (Matulewicz et al., 2015), making them less likely to internalize blame and be affected by direct CSH. Second, although the VIF and tolerance values did not identify multicollinearity among any of the variables, the correlation coefficient between bystander and direct CSH was strong and significant ($r = .75, p <$

.01). It is still possible that multicollinearity influenced the statistical power of this study, because multicollinearity estimates (such as VIF and tolerance) are less reliable for small sample sizes (Tay, 2017). Thus, the high correlation between bystander and direct CSH would suggest that these variables share a high amount of variance with one another and studying them together may capture a different construct, such as ambient sexual harassment (Glomb et al., 1997)—an environment in which CSH is commonplace. Thus, analyzing them as separate predictors in the same model may not capture incremental variance. Finally, a small sample size may have yielded lower statistical power for this study, limiting the ability to detect a significant incremental effect of bystander CSH over and above direct CSH.

The hypothesized buffering effect of organizational intolerance for CSH as a job resource was not supported. There may be two plausible reasons for this, one being that experiencing CSH in a given week may lead to emotional strain (i.e., anxiety), regardless of the organization's level of intolerance for CSH. Perhaps the motivational empowerment granted by organizational intolerance for CSH is not sufficient to combat the health impairment process of CSH as a job demand. That is, the motivational empowerment afforded by organizational intolerance for CSH as a job resource may not serve as a buffer for the relationship between CSH as a job demand and anxiety. Alternatively, the sample size for this study may have been too small to obtain sufficient statistical power for a small moderation effect (Aguinis et al., 2005).

Preventive supervisor behaviors were significantly related to depressive symptoms yet was not found to be a significant moderator for any of the hypothesized relationships.

A possible explanation for this is that the relational empowerment granted to employees from preventive supervisor behaviors may be more effective in preventing the development of emotional strain, such as depressive symptoms, over time and less effective in buffering anxiety that may arise shortly after experiencing direct CSH. Specifically, preventive supervisor behaviors may be effective in reducing the investment of personal resources that restaurant employees may spend combating CSH. This may result in higher relational empowerment, such as by allowing restaurant employees the discretion to spend their personal resources towards positive interactions with customers. In contrast, preventive supervisor behaviors may not grant a sense of relational empowerment shortly after CSH has occurred. It may be that restaurant employees who are victims of direct CSH would then spend their personal resources coping with CSH. Additionally, it is important to consider that the sample size for the analyses pertaining to this construct was smaller, since fifteen participants did not fill out this scale because they indicated not having a supervisor, and two participants chose to not answer any of the scale items (final $N = 76$). This means that statistical power for this moderated model was even lower, making it more difficult to detect a significant effect.

Practical Implications

Given the high rates of depression and anxiety (Saah et al., 2021) as well as the high turnover rate in the restaurant industry (National Restaurant Association, 2019), it is imperative to identify strategies for restaurant leaders to implement with the intent to increase workforce health and employee retention. Although my study based on a modest sample size offers preliminary evidence to the focal research questions, these findings

highlight factors that may aid in reducing strain indicators among restaurant employees. To begin, CSH experienced in one week was found to be related to higher anxiety levels in that same week. Thus, restaurant leaders interested in improving their employee's mental health should reconsider their business practices that may defer power to the customer, such as the enactment of emotional labor by employees and endorsing the belief that "the customer is always right" (Kundro et al., 2021).

Additionally, preventive supervisor behaviors were related to lower depressive symptoms and turnover intentions, but not anxiety. Since these supervisor behaviors are aimed at preventing CSH directed at restaurant employees, high endorsement of these behaviors may also communicate low levels of organizational intolerance for preventive supervisor behaviors and more positive organizational climate. Indeed, preventive supervisor behaviors and organizational intolerance for CSH were found to have a strong association ($r = .65$). Taken together, these finding suggests that restaurant managers may benefit employee health and retention by implementing preventive supervisor behaviors, such as monitoring customers with high risk of sexual harassment, since employees may experience lower levels of depressive symptoms and be less inclined to leave their organization as a result. Thus, restaurant leaders interested in retaining their workforce should implement managerial training for preventive supervisor behaviors.

Limitations and Future Research

While this study has several strengths, there are some limitations that can guide future research.

Power and Crowdsourcing considerations. Based on meta-analytic findings, the average effect size for moderation models on sexual harassment is small (McCord et al., 2018). Further, findings by Aguinis et al. (2005) suggest that 245 participants would be ideal to identify a small moderation effect. Thus, an estimated sample size of 250 participants was required to achieve enough statistical power to detect a small moderation effect, whereas this study's sample size consisted of 93 participants. Thus, most likely the study did not have sufficient statistical power to find significant effects. The population of interest in this study consisted of restaurant employees, a hard-to-reach population that has been overlooked in the SH literature in comparison to white-collar employees (Kundro et al., 2021). The recruitment procedures implemented to increase the number of participants consisted of both community outreach and online crowdsourcing. The findings indicate that the source of recruitment significantly predicts all of the hypothesized outcomes, which indicates that there are differences between the source of samples. Thus, it is likely that studies based on single-source samples (e.g., crowdsourcing alone) may not be able to generalize their findings to the broader employee populations. Additionally, future studies on restaurant employees should consider implementing a recruitment strategy similar to the current study that combines both in-person and online sampling.

Recruitment considerations and recommendations. A factor that may have influenced the high attrition rate for this study's participants is the utilization of e-mail as the main form of communication. It may be that non-traditional workers, such as restaurant employees, are less likely to open their electronic mail on a regular basis.

Thus, other forms of communication that may be common across occupations, such as texting, might be more suitable for non-traditional workers. Indeed, I was able to text the survey links to participants at the beginning of the study, which resulted in higher retention rates. However, the ability to text participants became unavailable due to uncontrollable circumstances. This resulted in larger attrition rates. Based on this experience, future researchers interested in working with non-traditional employees should implement widely available forms of communication, such as texting, to share survey links with participants.

Cross-sectional data. This study analyzed cross-sectional data for weekly experiences. The measurement timeframe of the current study (recalling experiences in the past week) addresses the long-standing limitation in the SH literature that many studies ask participants to recall events with general time frames or over long periods of time (Chawla et al., 2021). Yet, this chosen cross-sectional method (with the independent variables and dependent variables measured at the same time point) does not meet the causality assumption of temporal precedence (Cohen et al., 2003). Future research on this topic may be strengthened by implementing a longitudinal or repeated-measures design. As such, future studies should measure at least two timepoints to increase the confidence for causal inference (e.g., Jeong & Lee, 2022).

CSH scale. Consistent with previous studies with similar research questions (Hitlan et al., 2006), direct and bystander CSH were measured using the same scale.

Unfortunately, these constructs were highly correlated to one another, and the high correlation ($r = .75$) probably contributed to multicollinearity issues, which might have

limited the ability to detect the incremental effect of bystander CSH over and above direct CSH. There might be benefits to use different scales or test the constructs separately in future studies. For example, using different scales to measure the two types of CSH experience might reduce the correlation/multicollinearity between the two variables. Testing the two constructs separately might also provide information regarding bystander employees who are not direct victims of CSH. In the context of restaurants, it might be helpful to consider scales that capture communication between employees, such as one employee venting about a CSH experience with their coworkers, since they may not always witness these events while at work.

Conclusion

This study implemented the JD-R theory (Bakker & Demerouti, 2014; Demerouti et al., 2001) and the empowerment process (Conger and Kanungo, 1988) to examine how direct and bystander CSH may contribute to turnover intentions and strain outcomes (anxiety and depressive symptoms) of restaurant employees. The findings indicated that direct CSH was significantly related to anxiety, but not depressive symptoms nor turnover intentions. Moreover, the hypothesized incremental effect of bystander CSH was not supported. Despite this, the results from this study may inform future researchers of the theoretical implications that may expand our understanding of CSH in the context of restaurant work. Moreover, there are some practical implications that may be implemented by restaurant leaders who wish to reduce employee strain and increase retention, such as training their supervisors on strategies to prevent CSH.

List of Tables

Table 1
Means, standard deviations, and correlations among focal variables

Variable	M	SD	1	2	3	4	5	6	7
1. Direct CSH	1.42	0.73	(.88)						
2. Bystander CSH	1.53	0.89	.75**	(.91)					
3. Anxiety	2.65	1.03	.17	.05	(.92)				
4. Depressive Symptoms	2.17	0.85	.10	-.08	.84**	(.89)			
5. Turnover intentions	2.12	1.19	.17	.11	.22*	.24*	(.92)		
6. OI	2.77	1.09	-.14	-.01	-.27*	-.25*	-.30**	(.92)	
7. CSHPSB	2.30	1.13	-.10	.08	-.21	-.27*	-.28*	.60**	(.91)

Means, standard deviations, and correlations among focal variables

Note. M and SD are used to represent mean and standard deviation, respectively. Reliability estimates are reported in parenthesis along the diagonal. CSH = customer sexual harassment, OI = organizational intolerance, CSHPSB = customer sexual harassment preventive supervisor behaviors.

* indicates $p < .05$. ** indicates $p < .01$.

Table 2
Hierarchical Regression with Direct and Bystander CSH as Predictors and Anxiety as an Outcome

Variable	Anxiety		
	Model 1	Model 2	Model 3
Control Variable			
Tip dependence	.11	.07	.07
Automatic Gratuity	-.09	-.11	-.13
Traditional Tipping	-.28	-.29	.17
Large Party Gratuity	-.14	-.14	.17
Tip-out Model	-.19	-.19	.16
Pooled-Tips Model	-.09	-.05	.16
Recruitment Source	-.36**	-.36**	.10**
Main Effects			
Direct CSH		.20*	.16
Bystander CSH			-.09
R^2	.19	.22	.22
ΔR^2	.19*	.04	.00

Note. Standardized coefficients are reported. Recruitment Source coded with community-outreach as a low condition and Prolific as a high condition

* $p < .05$ ** $p < .01$ (two-tailed tests)

Table 3
Hierarchical Regression with Direct and Bystander CSH as Predictors and Depressive Symptoms as an Outcome

Variable	Depressive Symptoms		
	Model 4	Model 5	Model 6
Control Variable			
Tip dependence	.09	.06	.09
Automatic Gratuity	-.01	-.03	-.06
Traditional Tipping	-.10	-.11	-.12
Large Party Gratuity	.05	.06	-.04
Tip-out Model	-.24	-.23	-.24
Pooled-Tips Model	-.06	-.03	-.05
Recruitment Source	-.32**	-.32**	-.30
Main Effects			
Direct CSH		.14	.35
Bystander CSH			-.29
R^2	.15	.17	.21
ΔR^2	.15	.02	.04

Note. Standardized coefficients are reported. Recruitment Source coded with community-outreach as a low condition and Prolific as a high condition

* $p < .05$ ** $p < .01$ (two-tailed tests)

Table 4
Hierarchical Regression with Direct and Bystander CSH as Predictors and Turnover Intentions as an Outcome

Variable	Turnover Intentions		
	Model 7	Model 8	Model 9
Control Variable			
Tip dependence	.12	.08	.09
Automatic Gratuity	-.04	-.05	-.06
Traditional Tipping	-.15	-.17	-.17
Large Party Gratuity	-.02	-.02	-.02
Tip-out Model	-.02	-.01	-.01
Pooled-Tips Model	.05	.08	.08
Recruitment Source	-.19	-.20	-.19
Main Effects			
Direct CSH		.19	.23
Bystander CSH			-.06
R^2	.07	.10	.10
ΔR^2	.07	.03	.00

Note. Standardized coefficients are reported. Recruitment Source coded with community-outreach as a low condition and Prolific as a high condition

* $p < .05$ ** $p < .01$ (two-tailed tests)

Table 5
Moderation Effect of Organizational Intolerance on the Relationship Between Direct CSH and Anxiety

Variable	Anxiety		
	Model 10	Model 11	Model 12
Control Variable			
Tip dependence	.07	.03	.03
Automatic Gratuity	-.11	-.08	-.09
Traditional Tipping	-.29	-.26	-.26
Large Party Gratuity	-.14	-.10	-.10
Tip-out Model	-.18	-.15	-.15
Pooled-Tips Model	-.05	-.05	-.04
Recruitment Source	-.36**	-.31*	-.31*
Main effects			
Direct CSH (DCSH)	.21*	.18	.19
Organizational Intolerance (OI)		-.18	-.18
Interaction			
DCSH X OI			.03
R^2	.22	.25	.25
ΔR^2	.22	.03	.00

Note. $N = 84$. Standardized coefficients are reported. Recruitment Source coded with community-outreach as a low condition and Prolific as a high condition

* $p < .05$ ** $p < .01$ (two-tailed tests)

Table 6
Moderation Effect of Organizational Intolerance on the Relationship Between Direct CSH and Depressive Symptoms

Variable	Depressive Symptoms		
	Model 13	Model 14	Model 15
Control Variable			
Tip dependence	.06	.02	.03
Automatic Gratuity	-.03	.00	.02
Traditional Tipping	-.11	-.08	-.09
Large Party Gratuity	.05	.09	.07
Tip-out Model	-.23	-.20	-.20
Pooled-Tips Model	-.03	-.03	-.04
Recruitment Source	-.32**	-.28*	-.29*
Main effects			
Direct CSH (DCSH)	.14	.11	.08
Organizational Intolerance (OI)		-.18	-.16
Interaction			
DCSH X OI			-.10
R^2	.17	.20	.20
ΔR^2	.17	.03	.00

Note. $N = 84$. Standardized coefficients are reported. Recruitment Source coded with community-outreach as a low condition and Prolific as a high condition

* $p < .05$ ** $p < .01$ (two-tailed tests)

Table 7
Moderation Effect of Organizational Intolerance on the Relationship Between Direct CSH and turnover Intentions

Variable	Turnover Intentions		
	Model 16	Model 17	Model 18
Control Variable			
Tip dependence	.09	.04	.05
Automatic Gratuity	-.05	-.02	-.01
Traditional Tipping	-.17	-.13	-.14
Large Party Gratuity	-.02	.03	.02
Tip-out Model	-.01	.03	.03
Pooled-Tips Model	.09	.10	.06
Recruitment Source	-.19	-.14	-.15
Main effects			
Direct CSH (DCSH)	.19	.16	.13
Organizational Intolerance (OI)		-.21	.20
Interaction			
DCSH X OI			-.07
R^2	.10	.14	.14
ΔR^2	.10	.04	.00

Note. $N = 84$. Standardized coefficients are reported.

* $p < .05$ ** $p < .01$ (two-tailed tests)

Table 8
Moderation Effect of CSHPSB on the Relationship Between Direct CSH and Anxiety

Variable	Anxiety		
	Model 19	Model 20	Model 21
Control Variable			
Tip dependence	.07	.03	.04
Automatic Gratuity	-.03	.01	.02
Traditional Tipping	-.33	-.30	-.31
Large Party Gratuity	-.16	-.16	-.16
Tip-out Model	-.25	-.19	-.19
Pooled-Tips Model	-.14	-.10	-.10
Recruitment Source	-.38**	-.36**	-.37**
Main effects			
Direct CSH (DCSH)	.24**	.23*	.21
CSHPSB		-.19	-.20
Interaction			
DCSH X CSHPSB			-.04
R^2	.26	.29	.29
ΔR^2	.26**	.03	.00

Note. $N = 76$. Standardized coefficients are reported. Recruitment Source coded with community-outreach as a low condition and Prolific as a high condition

* $p < .05$ ** $p < .01$ (two-tailed tests)

Table 9
Moderation Effect of CSHPSB on the Relationship Between Direct CSH and Depressive Symptoms

Variable	Depressive Symptoms		
	Model 22	Model 23	Model 24
Control Variable			
Tip dependence	.07	.03	-.04
Automatic Gratuity	.07	.12	.14
Traditional Tipping	-.16	-.12	-.13
Large Party Gratuity	.03	.03	.02
Tip-out Model	-.29	-.20	-.21
Pooled-Tips Model	-.09	-.04	-.06
Recruitment Source	.34*	-.30*	-.33*
Main effects			
Direct CSH (DCSH)	.18	.15	.10
CSHPSB		-.25*	-.26*
Interaction			
DCSH X CSHPSB			-.13
R^2	.20	.26	.27
ΔR^2	.20	.06*	.01

Note. $N = 76$. Standardized coefficients are reported. Recruitment Source coded with community-outreach as a low condition and Prolific as a high condition

* $p < .05$ ** $p < .01$ (two-tailed tests)

Table 10
Moderation Effect of CSHPSB on the Relationship Between Direct CSH and Turnover Intentions

Variable	Turnover Intentions		
	Model 25	Model 26	Model 27
Control Variable			
Tip dependence	.02	-.02	-.01
Automatic Gratuity	.12	.17	-.18
Traditional Tipping	.06	.10	.08
Large Party Gratuity	.20	.19	.19
Tip-out Model	-.05	.04	.03
Pooled-Tips Model	-.02	.03	.02
Recruitment Source	-.20	-.17	-.19
Main effects			
Direct CSH (DCSH)	.21	.19	.15
CSHPSB		-.25*	-.26
Interaction			
DCSH X CSHPSB			-.11
R^2	.10	.16	.17
ΔR^2	.10	.06*	.01

Note. $N = 76$. Standardized coefficients are reported.

* $p < .05$ ** $p < .01$ (two-tailed tests)

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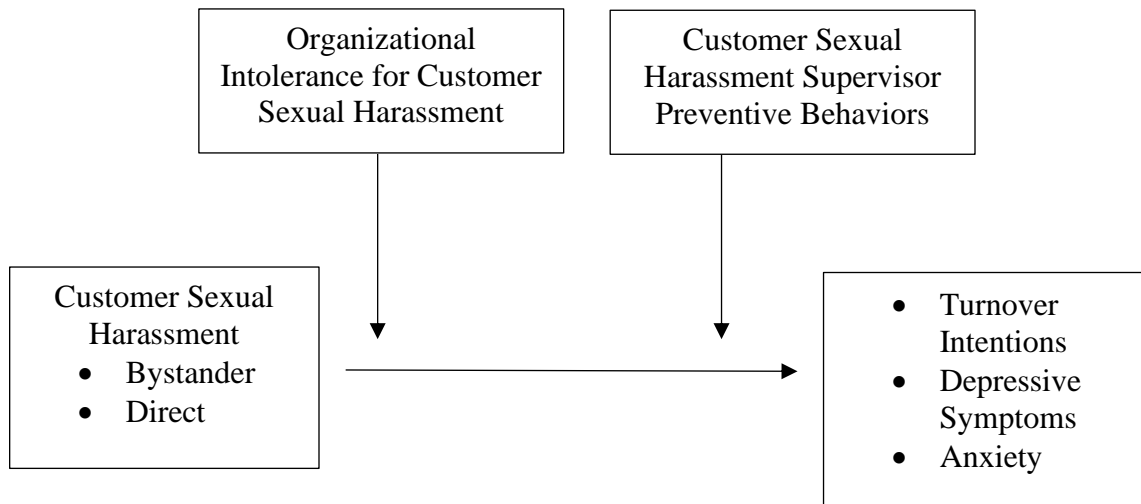


Figure 1. Proposed theoretical model.

References

- Aaron, D., & Schwartz, J. (May 13, 2021). Workplace abuse claims against McDonald's spotlight sexual harassment in the fast food industry. *Outten & Golden*.
<https://2587707.findlaw4.flbuilder.com/2021/05/workplace-abuse-claims-against-mcdonalds-spotlight-sexual-harassment-in-the-fast-food-industry/>
- Aguinis, H., & Stone-Romero, E. F. (1997). Methodological artifacts in moderated multiple regression and their effects on statistical power. *Journal of Applied Psychology, 82*(1), 192.
- Alburger, C. (2020). Restaurants are finally prioritizing workers' mental health. *Eater*.
<https://www.eater.com/2020/2/28/21153232/mental-health-in-restaurant-industry-staff-well-being-patrick-mulvaney>
- Arnold, K. A., & Walsh, M. M. (2015). Customer incivility and employee well-being: Testing the moderating effects of meaning, perspective taking and transformational leadership. *Work & Stress, 29*(4), 362–378.
<https://doi.org/10.1080/02678373.2015.1075234>
- Bakker, A. B., & Demerouti, E. (2007). The Job demands-resources model: State of the art. *Journal of Managerial Psychology, 22*(3), 309–328.
<https://doi.org/10.1108/02683940710733115>
- Bakker, A. B., & Demerouti, E. (2014). Job demands-resources theory. In C. L. Cooper (Ed.), *Wellbeing* (pp. 1–28). John Wiley & Sons, Ltd.
<https://doi.org/10.1002/9781118539415.wbwell019>

- Bakker, A. B., Demerouti, E., & Sanz-Vergel, A. I. (2014). Burnout and work engagement: The JD–R approach. *Annual Review of Organizational Psychology and Organizational Behavior*, *1*(1), 389–411. <https://doi.org/10.1146/annurev-orgpsych-031413-091235>
- Beattie, L., & Griffin, B. (2014). Day-level fluctuations in stress and engagement in response to workplace incivility: A diary study. *Work & Stress*, *28*(2), 124–142. <https://doi.org/10.1080/02678373.2014.898712>
- Bennett, D. A. (2001). How can I deal with missing data in my study? *Australian and New Zealand journal of public health*, *25*(5), 464-469. <https://doi.org/10.1111/j.1467-842X.2001.tb00294.x>
- Boukis, A., Koritos, C., Daunt, K. L., & Papastathopoulos, A. (2020). Effects of customer incivility on frontline employees and the moderating role of supervisor leadership style. *Tourism Management*, *77*, Article 103997. <https://doi.org/10.1016/j.tourman.2019.103997>
- Bowling, N. A., & Beehr, T. A. (2006). Workplace harassment from the victim's perspective: A theoretical model and meta-analysis. *Journal of Applied Psychology*, *91*(5), 998–1012. <https://doi.org/10.1037/0021-9010.91.5.998>
- Bowling, N. A., Huang, J. L., Brower, C. K., & Bragg, C. B. (2021). The Quick and the Careless: The Construct Validity of Page Time as a Measure of Insufficient Effort Responding to Surveys. *Organizational Research Methods*, 10944281211056520. <https://doi.org/10.1177/10944281211056520>

Chawla, N., Gabriel, A. S., O'Leary Kelly, A., & Rosen, C. C. (2021). From #MeToo to #TimesUp: Identifying next steps in sexual harassment research in the organizational Sciences. *Journal of Management*, *47*(3), 551–566.

<https://doi.org/10.1177/0149206320980518>

Chernick, M. R., González-Manteiga, W., Crujeiras, R. M., & Barrios, E. B. (2011).

Bootstrap methods. *International encyclopedia of statistical science*, *110*, 978-3.

Cohen, J., Cohen, P., West, S.G., & Aiken, L.S. (2003). *Applied multiple regression/correlation analysis in the behavioral sciences* (3rd Edition). Erlbaum.

Conger, J. A., & Kanungo, R. N. (1988). The empowerment process: Integrating theory and practice. *Academy of Management Review*, *13*(3), 471–482.

<https://doi.org/10.2307/258093>

Cortina, L. M., Kabat-Farr, D., Magley, V. J., & Nelson, K. (2017). Researching

rudeness: The past, present, and future of the science of incivility. *Journal of Occupational Health Psychology*, *22*(3), 299–313.

<https://doi.org/10.1037/ocp0000089>

Cortina, L. M., & Wasti, S. A. (2005). Profiles in Coping: Responses to Sexual Harassment Across Persons, Organizations, and Cultures. *Journal of Applied Psychology*, *90*(1), 182–192. <https://doi.org/10.1037/0021-9010.90.1.182>

Cooper-Thomas, H., Bentley, T., Catley, B., Gardner, D., O'Driscoll, M., & Trenberth, L. (2014). The impact of bullying on observers and targets. *New Zealand Journal of Human Resource Management*, *14*(2), 82-95.

- Cyr, L., Yang, L.-Q., & Yragui, N. (2019). Aggression-preventive supervisor behavior toward patient aggression: a scale cross-validation. In Ronald Burke and Cary Cooper (Eds) *Violence and Abuse in and Around Organizations*. Routledge.
<https://doi.org/10.4324/9781315194868-4>
- Dhanani, L. Y., & LaPalme, M. L. (2019). It's not personal: A review and theoretical integration of research on vicarious workplace mistreatment. *Journal of Management*, 45(6), 2322-2351. <https://doi.org/10.1177/0149206318816162>
- Demerouti, E., Nachreiner, F., & Schaufeli, W. (2001). The job demands–resources model of burnout. *The Journal of Applied Psychology*, 86(3), 499–512.
<https://doi.org/10.1037/0021-9010.86.3.499>
- Dobbin, F., & Kalev, A. (2020). Why sexual harassment programs backfire. *Harvard Business Review*, 98(3), 45-52.
- Enders, C. K., & Bandalos, D. L. (2001). The relative performance of full information maximum likelihood estimation for missing data in structural equation models. *Structural equation modeling*, 8(3), 430-457.
- Fine, L., Shepherd, C., & Josephs, S. (1994). Sexual harassment in the sales force: The customer is NOT always right. *Journal of Personal Selling & Sales Management*, 14(4), 15–30. <https://doi.org/10.1080/08853134.1994.10754000>
- Fisk, G., & Neville, L. (2011). Effects of customer entitlement on service workers' physical and psychological well-being: A study of waitstaff employees. *Journal of Occupational Health Psychology*, 16(4), 391–405.
<https://doi.org/10.1037/a0023802>

- Fitzgerald, L. F., & Cortina, L. M. (2018). Sexual harassment in work organizations: A view from the 21st century. In C. B. Travis, J. W. White, A. Rutherford, W. S. Williams, S. L. Cook, & K. F. Wyche (Eds.), *APA handbook of the psychology of women: Perspectives on women's private and public lives* (pp. 215–234). American Psychological Association. <https://doi.org/10.1037/0000060-012>
- Ford, J. L., & Ivancic, S. R. (2020). Surviving organizational tolerance of sexual harassment: An exploration of resilience, vulnerability, and harassment fatigue. *Journal of Applied Communication Research, 48*(2), 186–206. <https://doi.org/10.1080/00909882.2020.1739317>
- Friberg, M. K., Hansen, J. V., Aldrich, P. T., Folker, A. P., Kjær, S., Nielsen, M. B. D., Rugulies, R., & Madsen, I. E. H. (2017). Workplace sexual harassment and depressive symptoms: A cross-sectional multilevel analysis comparing harassment from clients or customers to harassment from other employees amongst 7603 Danish employees from 1041 organizations. *BMC Public Health, 17*(1), 675. <https://doi.org/10.1186/s12889-017-4669-x>
- Garcia, P. R. J. M., Restubog, S. L. D., Lu, V. N., Amarnani, R. K., Wang, L., & Capezio, A. (2019). Attributions of blame for customer mistreatment: Implications for employees' service performance and customers' negative word of mouth. *Journal of Vocational Behavior, 110*, 203-213. <https://doi.org/10.1016/j.jvb.2018.12.001>
- Gauch Jr, H. G. (2003). *Scientific method in practice*. Cambridge University Press.

- Gettman, H. J., & Gelf, M. J. (2007). When the customer shouldn't be king: Antecedents and consequences of sexual harassment by clients and customers. *Journal of Applied Psychology, 92*(3), 757–770. <https://doi.org/10.1037/0021-9010.92.3.757>
- Glomb, T. M., Richman, W. L., Hulin, C. L., Drasgow, F., Schneider, K. T., & Fitzgerald, L. F. (1997). Ambient sexual harassment: An integrated model of antecedents and consequences. *Organizational Behavior and Human Decision Processes, 71*(3), 309–328. <https://doi.org/10.1006/obhd.1997.2728>
- Harris, L. C., & Reynolds, K. L. (2003). The consequences of dysfunctional customer behavior. *Journal of Service Research, 6*(2), 144–161. <https://doi.org/10.1177/1094670503257044>
- Han, S. J., Bonn, M. A., & Cho, M. (2016). The relationship between customer incivility, restaurant frontline service employee burnout and turnover intention. *International Journal of Hospitality Management, 52*, 97–106. <https://doi.org/10.1016/j.ijhm.2015.10.002>
- Hegerl, U., Bottner, A. C., Holtschmidt-Taschner, B., Born, C., Seemuller, F., Scheunemann, W., ... & Angst, J. (2008). Onset of depressive episodes is faster in patients with bipolar versus unipolar depressive disorder: evidence from a retrospective comparative study. *Journal of Clinical Psychiatry, 69*(7), 1075–1080.
- Hershcovis, M. S., & Barling, J. (2010). Comparing victim attributions and outcomes for workplace aggression and sexual harassment. *Journal of Applied Psychology, 95*(5), 874–888. <https://doi.org/10.1037/a0020070>

- Hitlan, R. T., Schneider, K. T., & Walsh, B. M. (2006). Upsetting behavior: Reactions to personal and bystander sexual harassment experiences. *Sex Roles, 55*(3), 187–195. <https://doi.org/10.1007/s11199-006-9072-5>
- Holland, K., Rabelo, V., Gustafson, A., Seabrook, R., & Cortina, L. (2016). Sexual harassment against men: Examining the roles of feminist activism, sexuality, and organizational context. *Psychology of Men & Masculinity, 17*(1), 17–29. <https://doi.org/10.1037/a0039151>
- Huang, J. L., Liu, M., & Bowling, N. A. (2015). Insufficient effort responding: Examining an insidious confound in survey data. *Journal of Applied Psychology, 100*(3), 828–845. <https://doi.org/10.1037/a0038510>
- Jacobson, N. C., & Newman, M. G. (2017). Anxiety and depression as bidirectional risk factors for one another: A meta-analysis of longitudinal studies. *Psychological bulletin, 143*(11), 1155.
- Jeong, J., & Lee, J. H. (2022). Customer mistreatment, employee depression, and organizational citizenship behavior: Emotional intelligence as a moderator. *Social Behavior and Personality: an international journal, 50*(3), 90-98.
- Jong, C. de. (2019). *7 restaurant scheduling stats of 2017 [infographic]*. Restaurant Management & Growth Blog. <https://www.7shifts.com/blog/restaurant-scheduling-stats-of-2017/>
- Johnson, S., & Madera, J. (2018). Sexual harassment is pervasive in the restaurant industry. Here's what needs to change. *Harvard Business Review*.

<https://hbr.or/01//exual-harassment-is-pervasive-in-the-restaurantindustry-heres-what-needs-to-change>

Kessler, R., & Mroczek, D. (1994). *Final versions of our non-specific psychological distress scale*. Survey Research Center of the Institute for Social Research, University of Michigan.

Kundro, T., Burke, V., Grandey, A., & Sayre, G. (2021). A perfect storm: Customer sexual harassment as a joint function of financial dependence and emotional labor. *Journal of Applied Psychology, 107*(8), 1385–1396.
<https://doi.org/10.1037/apl0000895>

Liang, Y., & Park, Y. (2021). Because I know how it hurts: Employee bystander intervention in customer sexual harassment through empathy and its moderating factors. *Journal of Occupational Health Psychology, 27*(3), 339.
<https://doi.org/10.1037/ocp0000305>

Little, R. J. (1988). A test of missing completely at random for multivariate data with missing values. *Journal of the American statistical Association, 83*(404), 1198-1202. <https://doi.org/10.1080/01621459.1988.10478722>

Lyons, B.J., Baldrige, D., Yang, L.-Q., & Bryan, C. (2023). Disability severity, professional isolation perceptions, and career outcomes: When does leader-member exchange quality matter? *Journal of Management*, Advance online publication. <https://doi-org.proxy.lib.pdx.edu/10.1177/01492063221143714>

Long, J. S., & Ervin, L. H. (2000). Using heteroscedasticity consistent standard errors in the linear regression model. *The American Statistician, 54*(3), 217-224.

- Madera, J. (2017). When targets blame their organization for sexual harassment: A multilevel investigation of within-person appraisals. *Cornell Hospitality Quarterly*, 59(1), 49–60. <https://doi.org/10.1177/1938965517730317>
- Magley, V. J., Waldo, C. R., Drasgow, F., & Fitzgerald, L. F. (1999). The impact of sexual harassment on military personnel: Is it the same for men and women? *Military Psychology*, 11(3), 283–302.
https://doi.org/10.1207/s15327876mp1103_5
- Matulewicz, K. (2016). Law's gendered subtext: The gender order of restaurant work and making sexual harassment normal. *Feminist Legal Studies*, 24(2), 127–145.
<https://doi.org/10.1007/s10691-016-9322-z>
- McInroy, L. B. (2016). Pitfalls, potentials, and ethics of online survey research: LGBTQ and other marginalized and hard-to-access youths. *Social Work Research*, 40(2), 83–93. <https://doi.org/10.1093/swr/svw005>
- McCord, M. A., Joseph, D. L., Dhanani, L. Y., & Beus, J. M. (2018). A meta-analysis of sex and race differences in perceived workplace mistreatment. *Journal of applied psychology*, 103(2), 137. <https://doi.org/10.1037/apl0000250>
- Miner-rubino, K., Cortina, L. M., Schneider, K. T., Have, S. S., & Schneider, K. T. (2007). Beyond targets: Consequences of vicarious exposure to misogyny at work. *Journal of Applied Psychology*, 92(5), 1254–1269.
<https://doi.org/10.1037/0021-9010.92.5.1254>

- Minnotte, K. L., & Legerski, E. M. (2019). Sexual harassment in contemporary workplaces: Contextualizing structural vulnerabilities. *Sociology Compass*, 13(12), e12755. <https://doi.org/10.1111/soc4.12755>
- Mobley, W. H. (1982). Employee turnover, causes, consequences, and control. Addison-Wesley.
- Namasivayam, K., Guchait, P., & Lei, P. (2014). The influence of leader empowering behaviors and employee psychological empowerment on customer satisfaction. *International Journal of Contemporary Hospitality Management*, 26(1), 69-84. <https://doi.org/10.1108/IJCHM-11-2012-0218>
- National Academies of Sciences, Engineering, and Medicine. (2018). *Sexual Harassment of Women: Climate, Culture, and Consequences in Academic Sciences, Engineering, and Medicine*. National Academies Press. <https://doi.org/10.17226/24994>
- National Institute of Mental Health. *Depression*. <https://www.nimh.nih.gov/health/topics/depression#:~:text=It%20causes%20severe%20symptoms%20that,develop%20due%20to%20specific%20circumstances>.
- National Restaurant Association. (2019). *Hospitality industry turnover rate ticked higher in 2018*. <https://restaurant.org/education-and-resources/resource-library/hospitality-industry-turnover-rate-ticked-higher-in-2018/>
- Pina, A., & Gannon, T. A. (2012). An overview of the literature on antecedents, perceptions and behavioural consequences of sexual harassment. *Journal of*

Sexual Aggression, 18(2), 209–232.

<https://doi.org/10.1080/13552600.2010.501909>

Potter, S. J., & Moynihan, M. M. (2011). Bringing in the bystander in-person prevention program to a U.S. military installation: Results from a pilot study. *Military Medicine*, 176(8), 870–875. <https://doi.org/10.7205/MILMED-D-10-00483>

Reese, L. A., & Lindenberg, K. E. (2003). The importance of training on sexual harassment policy outcomes. *Review of Public Personnel Administration* 233, 175–191. <https://doi.org/10.1177/0734371X03253214>

Roberts, P., & Vinh, T. (2022). Higher prices, staffing shortages, angst. Here's what to expect as restaurants emerge from the pandemic. *The Seattle Times*.
<https://www.seattletimes.com/life/food-drink/seattle-area-restaurants-new-reality-higher-food-prices-staffing-shortages/>

ROC United. (2018). *Take Us Off the Menu*. Restaurant Opportunities Center United.
<https://rocunited.org/wp-content/uploads/sites/7/2020/02/TakeUsOffTheMenuReport.pdf>

ROC United (2014). *The Glass Floor: Sexual Harassment in the Restaurant Industry*. Restaurant Opportunities Center United.
<https://nvcv.dspacedirect.org/handle/20.500.11990/609>

Rogelberg, S. G., & Stanton, J. M. (2007). Introduction: Understanding and dealing with organizational survey nonresponse. *Organizational Research Methods*, 10(2), 195–209. <https://doi.org/10.1177/1094428106294693>

- Saah, F. I., Amu, H., & Kissah-Korsah, K. (2021). Prevalence and predictors of work-related depression, anxiety, and stress among waiters: A cross-sectional study in upscale restaurants. *PLoS ONE*, *16*(4), e0249597.
<https://doi.org/10.1371/journal.pone.0249597>
- Shaw, E., Hegewisch, A., Hess, C. (2018). Sexual harassment and assault at work: Understanding the costs. *Institute of Policy for Women's Research*.
<https://iwpr.org/iwpr-publications/briefing-paper/sexual-harassment-and-assault-at-work-understanding-the-costs/>
- Shi, X., Gordon, S., & Tang, C. H. (2021). Momentary well-being matters: Daily fluctuations in hotel employees' turnover intention. *Tourism Management*, *83*, 104212. <https://doi.org/10.1016/j.tourman.2020.104212>
- Sojo, V. E., Wood, R. E., & Genat, A. E. (2016). Harmful workplace experiences and women's occupational well-being: A meta-analysis. *Psychology of Women Quarterly*, *40*(1), 10–40. <https://doi.org/10.1177/0361684315599346>
- Sonnentag, S. (2015). Dynamics of well-being. *Annual Review of Organizational Psychology and Organizational Behavior*, *2*(1), 261-203.
<https://doi.org/10.1146/annurev-orgpsych-032414-111347>
- Storozuk, A., Ashley, M., Delage, V., & Maloney, E. A. (2020). Got bots? Practical recommendations to protect online survey data from bot attacks. *The Quantitative Methods for Psychology*, *16*(5), 472-481

- Szymanski, D. M., & Mikorski, R. (2017). Sexually objectifying environments: Power, rumination, and waitresses' anxiety and disordered eating. *Psychology of Women Quarterly, 41*(3), 314–324. <https://doi.org/10.1177/0361684317709438>
- Tay, R. (2017). Correlation, variance inflation and multicollinearity in regression model. *Journal of the Eastern Asia Society for Transportation Studies, 12*, 2006-2015. <https://doi.org/10.11175/easts.12.2006>
- Tett, R. P., & Meyer, J. P. (1993). Job satisfaction, organizational commitment, turnover intention, and turnover: path analyses based on meta-analytic findings. *Personnel psychology, 46*(2), 259-293.
- Tierney, N., & Cook, D. (2023). Expanding tidy data principles to facilitate missing data exploration, visualization and assessment of imputations. *Journal of Statistical Software, 105*, 1-31.
- Tims, M., Bakker, A. B., & Derks, D. (2013). The impact of job crafting on job demands, job resources, and well-being. *Journal of Occupational Health Psychology, 18*(2), 230–240. <https://doi.org/10.1037/a0032141>
- Tsai, H., Nam, H. V., & Wen, I. (2022). Impact of Internal and Customer Sexual Harassment on Job-related Outcomes: The Case of Female Casino Employees. *International Journal of Hospitality & Tourism Administration, 1*-25. <https://doi.org/10.1080/15256480.2021.2025190>
- Vijayasiri, G. (2008). Reporting sexual harassment: The importance of organizational culture and trust. *Gender Issues, 25*, 43-61.

- Williams, J. H., Fitzgerald, L. F., & Drasgow, F. (1999). The effects of organizational practices on sexual harassment and individual outcomes in the military. *Military Psychology, 11*(3), 303–328. http://dx.doi.org/10.1207/s15327876mp1103_6
- Willness, C. R., Steel, P., & Lee, K. (2007). A meta-analysis of the antecedents and consequences of workplace sexual harassment. *Personnel Psychology, 60*(1), 127–162. <https://doi.org/10.1111/j.1744-6570.2007.00067.x>
- Woolum, A., Foulk, T., Lanaj, K., & Erez, A. (2017). Rude color glasses: The contaminating effects of witnessed morning rudeness on perceptions and behaviors throughout the workday. *Journal of Applied Psychology, 102*(12), 1658–1672. <https://doi.org/10.1037/apl0000247>
- Yagil, D. (2008). When the customer is wrong: A review of research on aggression and sexual harassment in service encounters. *Aggression and Violent Behavior, 13*(2), 141–152. <https://doi.org/10.1016/j.avb.2008.03.002>
- Yang, L.-Q., & Caughlin, D. E. (2017). Aggression-preventive supervisor behavior: Implications for workplace climate and employee outcomes. *Journal of Occupational Health Psychology, 22*(1), 1–18. <https://doi.org/10.1037/a0040148>
- Yang, L.-Q., Fox, S., & McMahon, K. (In Press) Mistreatment in organizations. In L. E. Tetrick, G. G. Fisher, M. T. Ford, & J. Campbell Quick (Eds.), *Handbook of Occupational Health Psychology* (3rd ed.). American Psychological Association.
- Zhu, J. N. Y., Lam, L. W., & Lai, J. Y. M. (2019). Returning good for evil: A study of customer incivility and extra-role customer service. *International Journal of Hospitality Management, 81*, 65–72. <https://doi.org/10.1016/j.ijhm.2019.03.004>

Appendix A: Recruitment Materials



**LOOKING FOR RESTAURANT WORKERS
FOR A**

**PAID RESEARCH
STUDY**

ON EMPLOYEE WELL-BEING

Earn an Amazon e-gift card for up to **\$46.00** for participating! (Employment verification required)

PLEASE SCAN QR CODE BELOW



Please reach out to Fern, the primary investigator
(fern@psu.edu) for any questions

I'M A GRADUATE STUDENT
RECRUITING RESTAURANT WORKERS
FOR MY THESIS

PAID RESEARCH STUDY

YOU CAN EARN A \$46
AMAZON GIFT CARD FOR
FILLING OUT A 10 MIN SURVEY
ONCE A WEEK FOR 9 WEEKS
(EMPLOYMENT VERIFICATION
REQUIRED)

*Scan
this*



Email me: fern@pdx.edu

Appendix B: Screening Survey and Bot Checks

First page

Thank you for your interest in participating in the project titled "Work Experiences and Employee Well-being in the Restaurant Industry".

Before you can officially participate, we need some information from you. Specifically, we ask that you answer some questions about your working environment in order to determine if you qualify for this study.

If you have any other questions, please contact the primary investigator at fern@pdx.edu.

If you wish to provide this information, please click "Continue".

CAPTCHA VERIFICATION

Screening questions

Please note, there will be multiple questions that are designed to determine if you are paying attention. You may not be selected if you are found to be careless.

1. How many years old are you? (BOTS)
 - a. *text answer*

Please answer the following questions about your working position and environment.

1. What is your current position as a restaurant worker?
 - a. Server
 - b. Bartender
 - c. Cashier
 - d. Manager
 - e. Host/Hostess
 - f. Busser
 - g. Cook
 - h. Food delivery
2. Other (please specify): _____
 - a. While at work, how often do you interact with customers?
 - b. Always
 - c. Often
 - d. Sometimes
 - e. Occasionally
 - f. Never
3. To what extent does your job require you to be around your coworkers?
 - a. Always
 - b. Often
 - c. Sometimes
 - d. Occasionally

- e. Not at all
- 4. Do you have at least one direct supervisor who supervises you during daily work?
 - a. Yes
 - b. No
- 5. What is your age?
- 6. *drop down [18-90]
- 7. What is the last month of the year? (BOTS)
 - a. January
 - b. March
 - c. December
 - d. Winter
 - e. April
- 8. Cat is to kitten, as dog is to ____
 - a. *drop down answer [Bat, Serpent, Puppy, Cub, Baby]*

ID and participant information

If you are selected to participate in this study, we will need to match your survey responses across surveys. Please respond to the following questions such that a confidential unique code may be created. If you become a participant, you will be asked to recreate this code for every survey.

1. What are the first two letters of your mother's first name? (if this doesn't work for you, pick someone influential in your life that you will remember for the rest of the surveys).
2. What are the first two letters of the town you were born in? (If you do not know, pick the first town you remember living in)
3. What were the two digits of your birth DAY? (ex. March 7th = 07)
4. What year were you born? (ex. 1997) (BOT CHECK)

We ask that you provide your preferred email address so we can contact you directly if you are chosen to participate in this study. Your email will be used to send you all surveys, as well as an amazon e-gift card once your answers have been recorded. We will delete this information after you confirm that you received your payment/gift card.

Email: _____

(Optional) You can also provide your phone number and receive the survey via text message

Appendix C: Time 1 Survey

Personalized ID:

Your privacy is of the utmost importance. For this reason, we ask that you do NOT write your name on any part of the survey. To match your survey responses across surveys, please respond to the following questions such that a confidential unique code may be created.

1. What are the first two letters of your mother’s first name? (If this doesn’t work for you, pick someone influential in your life that you will remember for the rest of the surveys).
2. What are the first two letters of the town you were born in? (If you do not know, pick the first town you remember living in).
3. What were the two digits of your birth DAY? (ex. March 7th = 07).

Organizational tolerance for sexual harassment (Holland et al., 2016)

Please indicate your level of agreement or disagreement with the following statements:

1. My organization enforces penalties against customers who sexually harass.
2. Customers who sexually harass employees usually get away with it.
3. Sexual harassment from customers is not tolerated at my organization.
4. Senior leadership makes honest and reasonable efforts to stop sexual harassment from customers.
5. Actions are being taken at my organization to prevent sexual harassment from customers.
6. My organization has a specific office which investigates complaints regarding sexual harassment from customers.
7. My organization publicizes the availability of formal complaint channels.
8. During the last 12 months, I have had training on my organization’s policies on sexual harassment from customers.
9. During the last 12 months, I have had training on procedures for reporting sexual harassment from customers.
10. My organization provides customer sexual harassment awareness training for employees.

Response items: 1 (strongly disagree) 5 (strongly agree)

Please think of your direct supervisor while you answer the questions in the following section.

The direct supervisor is someone who directs you the most on your shift and is typically one level above you in the organizational structure.

If you have multiple direct supervisors, please refer to the one who has the most direct interactions with you.

1. The job title of this direct supervisor of yours is: _____

2. On average, how often do you interact with this direct supervisor of yours? (please check only one)

- a) Never
- b) Once or Twice per Year
- c) Once or Twice per Month
- d) Once or Twice per Week
- e) Once or Twice per Day
- f) Multiple Times per Day
- g) Other (please Specify): _____

3. For how long have you worked at the current job with this direct supervisor?
 ____ Year ____Month

Customer Sexual Harassment Preventive Supervisor Behaviors (Cyr et al., 2019)

My direct supervisor...

- 1. Makes sure I am aware of organizational *resources* that are available for preventing sexual harassment from customers.
- 2. Asks me if I understand organizational *policies* on preventing sexual harassment from customers.
- 3. Asks me if I understand organizational *processes* for preventing sexual harassment from customers.
- 4. Pays attention to customers with high risks of sexual harassment.
- 5. When necessary removes (or tries to remove) disrespectful customers to prevent them from sexually harassing me.
- 6. Gives me advice for effectively working with specific customers that are likely to sexually harass the employees.
- 7. Steps in to diffuse an uncomfortable situation to prevent sexual harassment from customers.
- 8. Demonstrates effective ways to communicate with customers to avoid sexual harassment.
- 9. Assigns me with customers with whom I worked well in the past.
- 10. Assigns me tables or parties based on my capacity (e.g., experience, skills).
- 11. Denies service to customers who have sexually harassed an employee in the past.

Response items: 1 (*Never*) to 5 (*Everyday*), 6 (*Not Applicable*)

Time 1 Demographics

Position

- 1. What is your current job title?
 - a) server
 - b) bartender
 - c) host/hostess
 - d) Other

Hours worked per week

1. How many hours did you work in your job as a food server this past week (Monday through Sunday)? (Provide a numerical digit only, ex: 8)

Hours worked: _____

Tipping structure

1. What is your restaurant's current policy for tips/gratuities received from customers?
 - a) Tips are automatically included in the customer's bill, regardless of the party/table size
 - b) If it's a large party/table, tips are automatically included in the customer's bill
 - c) The customer specifies how much they wish to tip after paying their bill
 - d) Other

Tipping Model

2. What is your restaurant's current model for tip out?
 - a) I split the total amount of tips earned with my coworker(s) (pooled tips)
 - b) I give a percentage of my earned tips to another employee (e.g., bartender, dishwasher, busser, etc.)
 - c) I keep 100% of the tips that I earn

Financial Dependence on Tips

1. Approximately what percentage of your total monthly income is earned from tips?
drop down 5%-100%

Tenure in current occupation

1. How many months of experience do you have working as a food server/bartender/host/hostess?
 - a) Less than a month
 - b) 1-3 months
 - c) 3 months to a year
 - d) More than a year

Age

What is your age?

Fill-in: _____ years

Gender

What is your gender?

- a) Man
- b) Woman
- c) Transgender
- d) Cisgender
- e) Agender
- f) non-binary
- g) genderqueer
- h) Other

Marital Status

What is your marital status?

Response Options:

- a) Single, never married
- b) Dating someone
- c) Married
- d) Living with a partner
- e) Divorced
- f) Widowed

Ethnicity

What is your ethnicity?

Response Options:

- a) White (non-Hispanic)
- b) Hispanic/Latino
- c) African American
- d) Asian
- e) Native American
- f) Native Alaskan or Pacific Islander
- g) Middle Eastern
- h) Indian / South Asian
- i) Other (Please specify: _____)

Education Level

What is the highest level of education you have completed?

Response Options:

- a) High school/GED
- b) Some college
- c) 2-year college degree (Associate's)
- d) 4-year college degree (Bachelor's)
- e) Advanced degree (Master's or other)
- f) Other (please specify: _____)

Appendix D: Time 2 Survey

Sexual Experiences Questionnaire—Client Version Items and Factors (Kundro et al., 2021)

EXPERIENCED

In the past week, how often have you been in a situation where a customer...

1. ... told sexual jokes or stories when you were nearby.
2. ... made sexualized hand gestures or expressions.
3. ... made offensive remarks about your appearance, body, or off-work activities.
4. ... made repeated requests to go out for meals, drinks, despite you saying no?
5. ... asked for your personal contact information (e.g., cell phone or social media access).
6. ... touched you in a way that made you feel uncomfortable?

WITNESSED

In the past week, how often have your coworkers been in a situation where a customer...

1. ... told sexual jokes or stories when they were nearby.
2. ... made sexualized hand gestures or expressions.
3. ... made offensive remarks about their appearance, body, or off-work activities.
4. ... made repeated requests to go out for meals, drinks, despite them saying no?
5. ... asked for their personal contact information (e.g., cell phone or social media access).
6. ... touched them in a way that made them feel uncomfortable?

5-point scale of 1 (*never*), 5 (*four times or more*).

Turnover Intentions (Mobley, 1982)

To what extent do you agree with the following statements regarding your experience at work in the past week?

1. I thought a lot about quitting my present job.
2. I will probably look for a new job in the next few months.
3. As soon as possible, I will leave this organization.

Response items: 1 (*Not at all*) 5 (*A lot*)

Depressive Symptoms (Kessler et al., 2003)

In the past week, how often have you felt...

1. So sad nothing could cheer you up?
2. Nervous?
3. Restless or fidgety?
4. Hopeless?
5. That everything was an effort?
6. Worthless?

Response Options: 1 (*None of the time*) to 5 (*All of the time*)

Generalized Anxiety Disorder 7-item scale (GAD-7; Spitzer et al., 2006)

Over the past week, how often have you been bothered by the following problems?

1. Feeling nervous, edgy, or on edge.
2. Not being able to stop or control worrying.
3. Worrying too much about different things.
4. Trouble relaxing.
5. Being so restless that it is hard to sit still.
6. Becoming easily annoyed or irritable.
7. Feeling afraid as if something awful might happen.

Response Options: 1 (*None of the time*) to 5 (*All of the time*)

Appendix E: Preventive supervisor behaviors scale adaptation

Scale Adaptation Process

The Aggression Preventive Supervisor Behaviors (ASPB; Cyr et al., 2018) scale was adapted to reflect the customer sexual harassment preventive behaviors enacted by restaurant supervisors (CHSPSB). A pilot study was implemented to develop items that reflected these behaviors. First, a panel of researchers composed by a university professor and two graduate students adapted 9 items from Yang and Caughlin's (2017) aggression-preventive supervisor behavior (APSB) scale. Then, $n = 23$ restaurant employees were recruited via snowball sampling to serve as subject matter experts (SMEs), given that they experience how the CHSPSB construct manifests in an applied restaurant setting. As an incentive, SMEs were offered to enter their email into a raffle for a \$20 Amazon e-gift card if they wished to participate. After consenting to participate, the SMEs responded to the adapted scale items followed by a series of multiple choice and open-ended questions (see below). Subsequently, the panel of researchers analyzed the quantitative responses by computing descriptive statistics such as the means, standard deviation values, and reliability score. The qualitative answers were also reviewed in order to modify and add two new items. Once all three research panelists reached consensus, the final version of the Customer Sexual Harassment Preventive Supervisor Behaviors was launched on the Time 1 survey.

Pilot study: Questions for SMEs

1. Does your restaurant have any formal or informal policies or processes to deal with sexual harassment from customers?
 - a. What formal or informal policies/processes does your organization have to deal with sexual harassment from customers?
2. Has your immediate supervisor ever explained any policies (rules) to you to prevent sexual harassment from customers? (Y/N)
3. Does your immediate supervisor intervene in situations in which a customer is displaying sexually harassing behavior? (Y/N)
 - a. Can you provide some examples of how your supervisor has intervened in situations in which a customer is displaying sexually harassing behavior?
4. Does your supervisor give you any advice on how to handle sexual harassment from customers? (Y/N)
 - a. Can you provide some examples of the advice your supervisor gave you to handle sexual harassment from customers?
5. To what extent does your immediate supervisor proactively prevent situations in which a customer displays sexually harassing behavior toward you and your fellow coworkers? (1 = *a few times*, 5 = *always*)
 - a. Can you provide some examples of how your supervisor prevents these situations?
6. Is your supervisor mindful of how you are treated by regular/returning customers? (Y/N)

7. How is your supervisor mindful of how regular customers treat you?

CFA results

A one-factor confirmatory factor model for the preventive supervisor behaviors scale was tested using Mplus. The chi-square value was significant, $\chi^2(44) = 310.52, p = .00$, indicating poor model fit. The model fit indices also suggested poor model fit, CFI = .66, SRMR = .18. The one-factor model was compared to a three-factor model with a second order factor, which captured the subscales of preventive supervisor behaviors (declarative, proactive, and active practice) as latent variables that loaded onto a common factor. Theoretically, this second model would suggest that the three subscales reflect practices pertaining to preventive supervisor behaviors. The chi-square value for the three-factor model was significant, $\chi^2(40) = 111.31, p = .00$, indicating poor model fit. Given the chi-squares sensitivity to sample size, the alternative fit indices were examined to determine the data's fit for the three-factor model. The fit indices suggested acceptable model fit, CFI = .91, SRMR = .08. A comparison between the one-factor and the three-factor model suggested that the three-factor model was a better fit for the data, $\Delta\chi^2(4) = 199.17, p = .00$.

Table 11

Results of Confirmatory Factor Analysis for CSHPSB

Model	χ^2	<i>df</i>	CFI	RMSEA	SRMR
One-factor	310.52	44	.67	.24	.18
Three factors	111.31	40	.91	.13	.08

Note. CFI = Comparative Fit Index; RMSEA = Root Mean Square Error of Approximation; SRMR = Standardized Root Mean Square Residual.