



# What Women Want:

## Are Institutions Getting Better at Supporting Women Faculty?

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### Introduction, Method, and Discussion

**Introduction:** As identified in the AAMC report, “The State of Women in Academic Medicine: The Pipeline and Pathways to Leadership”, women continue to be underrepresented in senior faculty ranks, as well as in medical school leadership positions. Data from the AAMC’s Faculty Forward Engagement Survey (FFES) may offer additional insight into what women might need to help them advance, potentially including: increased availability of mentors, professional development programming, well-defined responsibilities and performance feedback, and workplaces that value diversity. To better understand the progress of our institutions in supporting women faculty, we analyzed FFES data regarding women faculty’s perceptions of and satisfaction with their development and advancement.

**Method:** FFES data were analyzed from 43 member medical schools that participated in the survey from 2009 through 2015. The FFES is a web-based survey to assess the workplace factors related to engagement and retention for medical school faculty. **Three unique cohorts’ data are presented (2009, 2011, 2012-15) and changes in perceptions of professional development and advancement are evaluated.** Prior to 2012, the Faculty Forward Engagement Survey was administered to a cohort of schools at one designated time. Since 2012, schools administer the survey at a time of their choosing. FFES data from 2009 included 9,638 respondents (34% women); 2011 data included 9,600 respondents (38% were women), and data from 2012-15 included 11,781 respondents (39% were women). The percentage of women in this sample roughly reflects the increased distribution of women in faculty positions between 2009 and 2015 from 35% in 2009 to 38% in 2014. **Chi-square statistics are used to evaluate if significant differences exist by demographic groups.**

**Discussion:** This study sheds light on important trends among women faculty. Further exploration to better understand the **differences between women in senior ranks versus those in junior ranks** is needed and will require further analyses of qualitative data. The data regarding satisfaction and engagement of male and female faculty provide an interesting view of the changes among male and female faculty over the 6 years. **While differences in satisfaction between men and women are decreasing**, the decrease is due, in some instances, to decreased male satisfaction rather than increased female satisfaction. **The continued difference between men and women with regard to perception of equal opportunities is a critical issue** that needs attention by institutional and national leaders.

### Cohort Results: Comparison Among Women Faculty by Rank

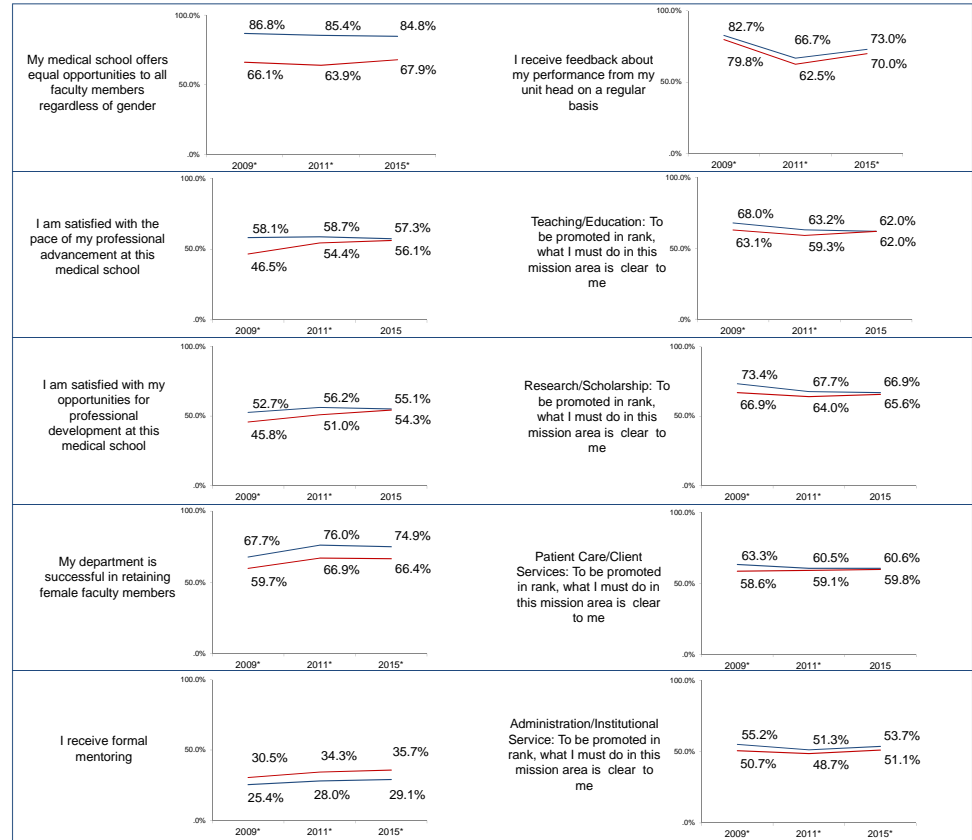
Percent Favorable Responses Among Women Faculty	2009		2011		2015	
	Senior	Junior	Senior	Junior	Senior	Junior
<b>Survey Items</b>						
My medical school offers equal opportunities to all faculty members regardless of gender	62.0	68.3***	55.6	70.2***	62.3	72.5***
I am satisfied with the pace of my professional advancement at this medical school	56.3	39.1***	54.9	54.1	57.2	56.5
I am satisfied with my opportunities for professional development at this medical school	46.5	45.5	46.4	54.7***	51.9	56.5***
My department is successful in retaining female faculty members	58.8	59.8	63.1	68.8**	63.6	68.0**
I receive formal mentoring	19.1	41.0***	21.5	45.5***	24.2	44.5***
I receive feedback about my performance from my unit head on a regular basis (*excluded those with administrative titles in 2009)	80.7	80.2	60.3	64.9*	68.1	73.1**
Teaching/Education: To be promoted in rank, what I must do in this mission area is clear to me	69.7	59.1***	65.4	55.2***	70.2	58.2***
Research/Scholarship: To be promoted in rank, what I must do in this mission area is clear to me	73.3	62.7***	69.5	59.5***	71.8	62.6***
Patient Care/Client Services: To be promoted in rank, what I must do in this mission area is clear to me	64.0	55.4***	61.4	57.7**	65.1	58.2***
Administrator/Institutional Service: To be promoted in rank, what I must do in this mission area is clear to me	57.9	46.2***	52.5	45.4***	55.8	49.2***

\* Significance at p=0.05-0.01; \*\* Significance at p < .01-.001; \*\*\* Significance at p < .001

Women respondents report similar patterns of incrementally increased women’s satisfaction over time. Further research is needed to explore the **many areas of significant differences among ranks of women**, and should include exploring dedicated resources that support distinct programming for both junior and senior women.

### Cohort Results: Percent Favorable Responses from Men and Women

\* Denotes Significance at p<.05 for men and women in each year’s cohort



In comparing men and women faculty responses from each cohort, there are a number of **instances where women’s perceptions and satisfaction have improved over time and where the gap in perceptions between men and women decreases**. However it should be noted that satisfaction with professional development or advancement was reported by less than 58% of any of the cohorts of faculty.

- Women have become increasingly more satisfied (46% to 54%) with their opportunities for professional development, reporting similar perceptions to men (55%) in the latest cohort.
- Satisfaction with the pace of their advancement was reported by 56% of women in the latest cohort. This is higher than previously reported in 2011 (54%) and 2009 (47%), and at near parity with men (57%).
- More women than men consistently reported being having a formal mentor. Additionally, the percentage of women who report having a mentor also increased over time (30% to 36%).
- One of the largest gender differences observed, which is essentially unchanged over six years, is the perception of whether the medical school offers faculty equal opportunities regardless of gender (68% women vs. 85% men).