GWIMS Equity in Promotion Toolkit
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Learning Objectives

- Describe the gender inequities present in faculty advancement within academic medicine.
- Identify societal, organizational and individual barriers that delay or prohibit the advancement of women faculty.
- Review best practices and strategies described in the literature that have successfully impacted academic promotion rates for women faculty.
Definitions

Equal Pay: the right of a man or woman to receive the same pay as a person of the opposite sex doing the same or similar work for the same or a similar employee.
http://www.dictionary.com/browse/equal-pay

Gender Gap: the gap in any area between women and men in terms of their levels of participation, access, rights, remuneration or benefits.
Definitions

**Intersectionality:** the theory that the overlap of various social identities, as race, gender, sexuality, and class, contributes to the specific type of systemic oppression and discrimination experienced by an individual. [http://www.dictionary.com/browse/intersectionality?s=t](http://www.dictionary.com/browse/intersectionality?s=t)

**Implicit Bias:** attitudes or stereotypes that affect our understanding, actions, and decisions in an unconscious manner. These biases, which encompass both favorable and unfavorable assessments, are activated involuntarily and without an individual’s awareness or intentional control. [http://kirwaninstitute.osu.edu/research/understanding-implicit-bias/](http://kirwaninstitute.osu.edu/research/understanding-implicit-bias/)
Background: How Diversity Supports Excellence in Academic Medicine

- Improved health care quality outcomes
- Reduced health care disparities
- Broadened research agenda
- Enhanced learning and work environment
- Maximizes the potential problem-solving capacity of teams

Frank and Harvey, 1996; Tsugawa, et al., 2017; Roter et al., 2002; Nivet, 2015; Fine and Handelsman, 2010; Hong and Page, 2004
Background: Gender Inequities in Academic Medicine

New data for 2016:

Promotions to full professor:
Women 32% (men 68%)

Promotions to associate professor:
Women 41% (men 59%)

There was only a one percentage point increase since 2014 for promotions to both associate and full professors for women
Background: Consequences of Gender Inequities in Academic Medicine

- Lower publication rates
- Fewer first/last author papers
- Less NIH grant funding
- Fewer roles as a clinical trial investigator
- Less recognition and fewer awards from specialty societies

Jena et al., 2016; Kaatz et al, 2016; Silver et al., 2017
Challenge #1

The problem starts early: Women medical students are “readier to compromise professional attainment within their personal work-life balances.” Drinkwater, 2008
Strategies

**Strategy 1.1:** Provide training in negotiation, career advice and offer flexible work options.

- Hold sessions for medical students, residents and junior faculty led by business school faculty who are experts in this area.
- Recruit successful female faculty who have balanced family and work to provide career advice to medical students.
- Offer flexible work options along the medical education continuum.
Challenge #2

Bias and discrimination occur during the hiring and promotion processes.
**Strategies**

**Strategy 2.1:** Broaden the pool of qualified applicants to include more women.

- When \( \frac{3}{4} \) of the short list is women, the chance a woman will be hired is 67%; when \( \frac{1}{2} \) are women, the chance is 50%; when \( \frac{1}{4} \) are women, the chance is 0%. In other words, “If there’s only one woman in your candidate pool, there’s statistically no chance she’ll be hired.” (Johnson et al, 2017)
Strategies

**Strategy 2.2:** Constitute search committees with members from diverse backgrounds. (e.g. at least 2 women and 2 people of color).

**Strategy 2.3:** Utilize evidence-based strategies to reduce bias in the hiring process and hold sessions on unconscious bias training for search and promotions committees. Sheridan et al, 2010

- Provide clear evidence of job-related competencies along with evidence of communal competencies. Isaac et al., 2009
- Commit to the value of credentials before review of the applicants. Isaac et al, 2009
- Provide unconscious bias training for both search and promotions committee members with the intent of recruiting a diverse faculty and equitable treatment of faculty. Carr et al., 2016
- Utilize AAMC Unconscious Bias Video and resources [https://www.aamc.org/initiatives/diversity/learningseries/346528/howardrossinterview.html](https://www.aamc.org/initiatives/diversity/learningseries/346528/howardrossinterview.html)
Challenge #3

Women lack a supportive network and inclusive environment.
Strategy 3.1: Host networking events for women at your institution and in your professional societies and create a welcoming environment for all members of your community (intersectionality) with intention. Sims-Boykin, 2003; Sanchez, 2015
Challenge #4

Women have fewer opportunities to participate in scholarly activities.

- H-Index: Women have a lower h-index early and higher h-index later in their careers.

- Women still lag behind men as both first and senior authors, especially in prestigious publications. Sidhu, 2009; Lopez, 2014

- Gender bias may persist in NIH grant reviews, in particular for renewals of ROIs. Kaatz, 2016
Strategies

Strategy 4.1: Support women’s authorship, especially early in their careers.
   o Provide training on authorship considerations to all genders.

Strategy 4.2: Support women’s grant writing at institutions and address stereotype-based bias in the grant review process.
   o Offer grant writing boot camps for women Smith, 2017
   o Test interventions to prevent bias in the context of grant reviews Tricco, 2017
Strategies

**Strategy 4.3:** Petition editors to monitor gender authorship and reviewer imbalance in science journals.

- Editors can increase women reviewers by including the pool of rising stars, which has a greater proportion of women, in the reviewer pool.

Challenge #5

Women are less likely to get that first critical promotion and are less likely to receive a raise when they ask for it.

- Women are 20% less likely to receive feedback when they ask for it.
- Gap in leadership ambition: 40% of women v. 56% of men seek top executive status. [https://womenintheworkplace.com/](https://womenintheworkplace.com/)
- Women ask for raises and promotions in equal quantity, but receive less. [http://www.catalyst.org/system/files/The_Myth_of_the_Ideal_Worker_Does_Doing_All_the_Right_Things_Reall_y_Get_Women_Ahead.pdf](http://www.catalyst.org/system/files/The_Myth_of_the_Ideal_Worker_Does_Doing_All_the_Right_Things_Reall_y_Get_Women_Ahead.pdf)
- Perceived brilliance favors men.
- Unlike 5 yo girls, 6 yo girls associate boys with genius, and avoid games for kids who are “really, really smart.”
- Women receive Distinguished Service Awards at much lower rates than men. [Bian, 2017; Silver, 2017.](http://www.catalyst.org/system/files/The_Myth_of_the_Ideal_Worker_Does_Doing_All_the_Right_Things_Reall_y_Get_Women_Ahead.pdf)
- Letter writing for women has different areas of focus.
Strategy 5.1: Use effective language to make the case for promotion.


- Do not write about personal life or raise doubt unless you intend to do so. Trix & Psenka, 2003.
Strategy 5.2: Be aware that women may feel undeserving. Be deliberate about promotion and awards processes.

- Increase awareness and educate chairs to pay particular attention to women’s credentials and to set specific goals towards promotions.
Challenge #6

Ineffective pipeline programs to leadership.

- Women face subtle bias, including perceptions of “aggressive” behavior.
- Gendered career paths may not appeal to women. Women Rising: The Unseen Barriers, 2013.
Strategies

**Strategy 6.1**: Support female faculty members’ attendance at AAMC women’s leadership courses and national leadership programs such as ELAM.

**Strategy 6.2**: Provide leadership opportunities for women in institutional initiatives.

**Strategy 6.3**: Engage in deliberate succession planning to prepare women for leadership opportunities.
Action Items: Individual

• Educate yourself about promotion and tenure (P&T) requirements for your institution and seek honest feedback on whether you are reaching milestones for promotion (chair of P & T committee, prior members, Faculty Affairs/Faculty Development/Diversity Offices can serve as advisors).

• Understand whether you should apply for promotion yourself or need to be nominated.

• Educate yourself about promotion tracks and what is needed for leadership advancement in your institution.
Action Items: Individual

• Inquire about institutional flexibility in promotions pathways (e.g., process to change tracks).

• Understand requirements to extend the promotion clock.

• Identify a mentor and/or be a mentor for career progression.

Action Items: Institutional

• Develop and implement policies to promote equity in faculty advancement. Carr et al., 2016; Marchant et al., 2007

• Establish an annual career/professional development conference.

• Utilize best-practices for mentorship and faculty development.

• Establish expectations for chairs for promotion and advancement of faculty.
Action Items: Institutional

• Monitor promotion outcomes annually with respect to gender and race/ethnicity and share the outcomes with faculty.

• Provide unconscious bias training for all Department Chairs, Search and P & T Committees, both within departments and at the institutional level, and evaluate effectiveness of training.

http://www.kirkpatrickpartners.com/Our-Philosophy/The-Kirkpatrick-Model
Action Items: Institutional

• Ensure that there are diverse members serving on all major search committees (e.g., people of color, underrepresented minorities).

• Foster a climate that will enhance success for all groups Villablanca et al., 2017; Shauman et al, 2017.
Action Items: Academic Community

• Create professional development programs. Carr et al., 2016.

• Medical societies should:
  o Review inclusion and diversity data;
  o Report data to stakeholders;
  o Explore possible etiologies of inequities if present; and
  o Effect strategies designed to promote inclusion.

• Medical societies:
  o Monitor outcomes;
  o Share results with stakeholders to invite dialogue about goals to achieve equity, Silver et al., 2017; and
  o Include women as peer reviewers, Lerback and Hanson, 2017.
GWIMS’ Resource List

Volume 1: Leveraging Your Career

- Chapter 1: Managing through Teamwork for Maximum Performance (Judy Weber)
- Chapter 2: Crafting a Fundable Grant (Emina Huang)
- Chapter 3: Workshop Preparation and Presentation (Carla Spagnoletti, Rachel Bonnema, Melissa McNeil, Abby Spencer, & Megan McNamara)
- Chapter 4: Crafting Successful Award Nominations, The Art of Successful Nominations (Jocelyn Chertoff), Preparing Successful Award Nominations (Elizabeth Travis)
- Chapter 5: Part-time Faculty in Academic Medicine, Individual and Institutional Advantages (Linda Chaudron, Susan Pollart & Aimee Grover)
- Chapter 6: Writing an Effective Executive Summary (Roberta Sonnino)
- Chapter 7: Mentoring Women- A Guide for Mentors (Mary Lou Voytko & Joan Lakoski)
GWIMS’ Resource List

Volume 1: Leveraging Your Career

- Chapter 8: Mentoring Women- A Guide for Mentees (Mary Lou Voytko & Joan Lakoski)

- Chapter 9: Strategies for Cultivating Career Satisfaction and Success through Negotiation (Reshma Jagsi, Martha Gulati, & Rochelle DeCastro Jones)

- Chapter 10: A Case Study: Creative Faculty Development through your GWIMS Office (Catherine Lynch)

- Chapter 11: Transitioning to a New Role: Practical Tips on Navigating From One Chapter to the Next (Archana Chatterjee, Meenakshi Singh, Roberta Sonnino)

Chapter 12: Strategies for Advancing the Careers of Women of Color in Academic Medicine- Individual Strategies (Archana Chatterjee, Chiquita Collins, Linda Chaudron, Barbara Fivush, Laura Castillo-Page, Diana Lautenberger, Ashleigh Moses)
GWIMS’ Resource List

Volume 2: Institutional Strategies for Advancing Women in Medicine

- Chapter 1: How to Start and Maintain a Robust WIMS Organization (Julie Wei & Paige Geiger)
- Chapter 3: Women's Leadership and the Impact of Gender (Toi Blakley Harris, Susan Pepin, & Amelia Grover)
- Chapter 4: Implementing an Intensive Career Development Program for Women Faculty (Tamara Nowling, Elizabeth Travis, Abby Mitchell, Mugé Simsek, Erin McClure)
- Chapter 5: Strategies for Advancing the Careers of Women of Color in Academic Medicine- Institutional Strategies (Archana Chatterjee, Chiquita Collins, Linda Chaudron, Barbara Fivush, Laura Castillo-Page, Diana Lautenberger, Ashleigh Moses)
Resource List

AWIS Equitable Workplaces Resources
https://www.awis.org/equitable-workplaces/

Executive Leadership in Academic Medicine
http://drexel.edu/medicine/Academics/Womens-Health-and-Leadership/ELAM/

Northwestern University Resources on unconscious bias
http://www.northwestern.edu/provost/faculty-resources/faculty-search-committees/unconscious-bias.html

Office of Research on Women’s Health, NIH Career Development Resources
https://orwh.od.nih.gov/career/mentored/resources/
Resource List

Stanford Center for the Advancement of Women's Leadership
https://womensleadership.stanford.edu/voice

University of Texas MD Anderson Cancer Center’s Women and Minority Faculty Inclusion

University of Washington Center for Health Equity, Diversity and Inclusion: mandates on hiring written into the faculty code; committee on minority affairs; resources on faculty advancement http://www.washington.edu/diversity/faculty-advancement/

WISELI: Promoting Participation and Advancement Of Women in Science and Engineering
http://wiseli.engr.wisc.edu/
Resource List

Cook Ross: Proven Strategies for Addressing Unconscious Bias in the Workplace (http://www.cookross.com/docs/UnconsciousBias.pdf)


Implicit Association Test (Harvard University): https://implicit.harvard.edu/implicit/

Project Implicit: https://implicit.harvard.edu/implicit/aboutus.html

Stanford Block Bias Toolkits: https://womensleadership.stanford.edu/tools


References


References


References


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References


Toolkit - Group on Women in Medicine and Science (GWIMS) - Member Center - AAMC. Association of American Medical Colleges.

Tools. Center for the Advancement of Women's Leadership.


References


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