

# Report of the Committee on Faculty Development and Gender

Johns Hopkins University School of Medicine



Presented to the ABMF by

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## History



In 1893, the Johns Hopkins School of Medicine became a reality largely due to the beneficence of prominent women in particular, Mary Elizabeth Garrett, who stipulated four conditions with her gift.

- › applicants hold a bachelor's degree
- › students be fluent in German and French and,
- › have a background in the sciences
- › women be admitted "on the same terms as men" and enjoy "all of the rewards available"



**The current initiative in the SOM seeks to sustain this legacy.**

*Mary Elizabeth Garrett*

# Background



- › In 1989, women faculty largely at lower academic ranks, salaries 25% lower than men at equivalent rank. (*Provost's Report on the Status of Women*)
- › In 2002 in the School of Medicine
  - › women on the SOM faculty had remained static at 28%,
  - › women faculty remained at junior ranks (78% and 71% of women faculty were instructors or assistant professors in 1991 and 2001, respectively) and,
  - › the % of women full professors had increased only from 6-11% (2001)
- › Dean Miller appointed the Committee for Faculty Development and Gender (CFD&G) to investigate the status of women in the SOM in 2002.

# Goals: Committee on Faculty Development and Gender



Data-driven approach to identifying potential barriers:

- › Determine rates of faculty attrition and promotion
- › Survey entire faculty to gauge perceptions regarding career development and satisfaction.
- › Interview department directors to learn their views of factors affecting faculty career success
- › Analyze salary equity

## Goals: Committee on Faculty Development and Gender

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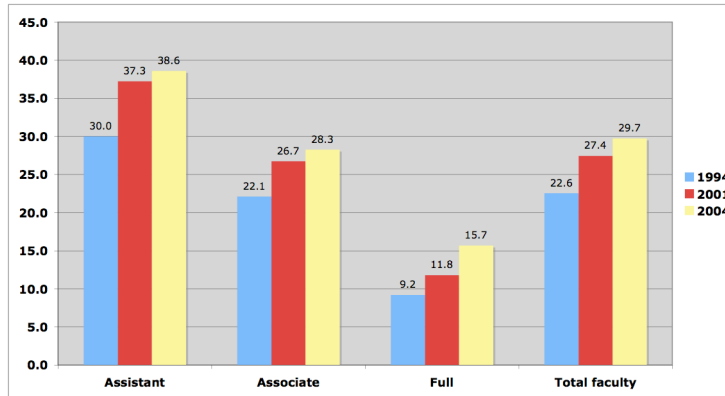
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## Highlights of Promotions and Career Advancement Analysis



## Proportion of women on faculty



In 2004:

- 15.7% of Full Professors are female
- 3 female Department Directors

## Time to promotion and attrition

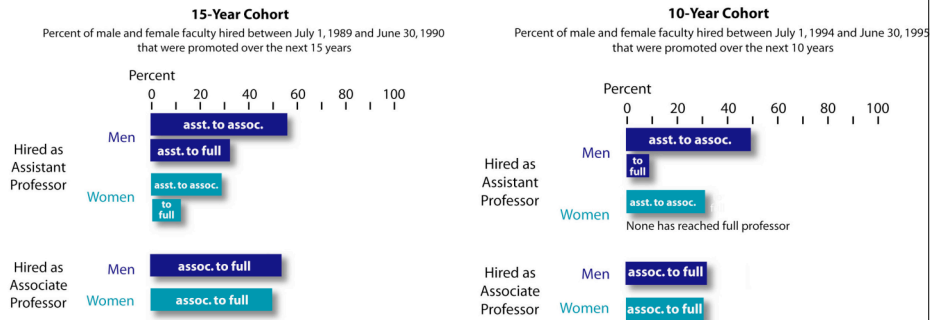
- Annual data simply gives “snapshot” of faculty
- Use cohort analysis to look at promotion and attrition
- Study two cohorts: faculty hired in 1989-1990 and in 1994-1995
- Analyze promotion, time at rank, and attrition for each group

- Mary Foy and colleagues, Registrar’s office

# Disproportionate attrition of women Assistant Professors



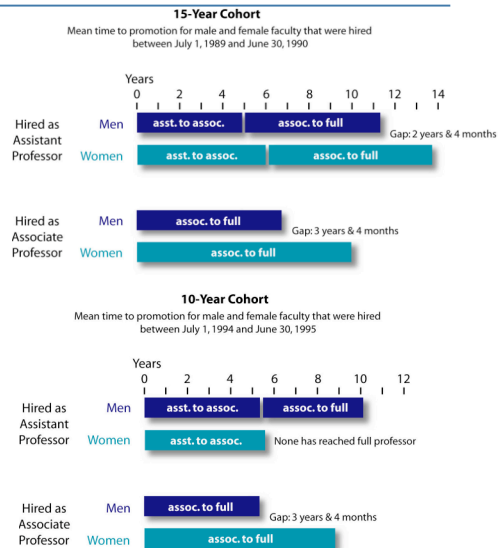
- Women are far less likely to be promoted to rank of Associate Professor
- Promotion rates from Associate to Full Professor are roughly equal



# Women take longer to be promoted



- Women take longer to be promoted than men
- Of faculty who were Assistant Professors in 1994-95 and are still at Hopkins, 10% of males (6/61) were promoted to Full Professor but NO females (0/30).

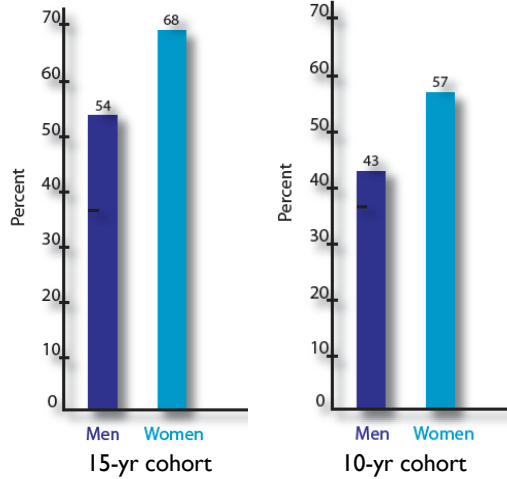


# Higher attrition of female faculty



- Overall faculty attrition is high:
- 58% for '89-90 cohort  
47% for '94-95 cohort
- A disproportionate number of women faculty leave the SoM

Percentage of men and women in cohort who have since left JHSoM

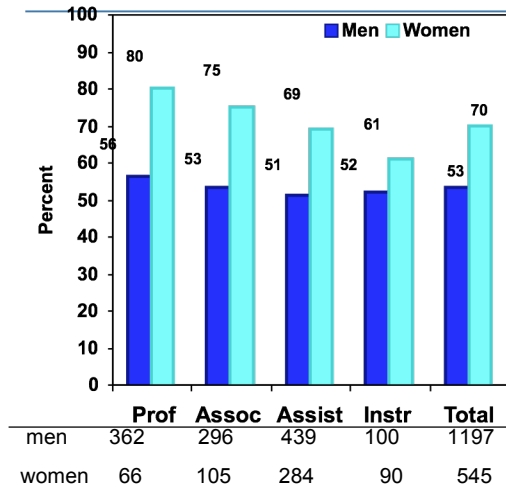


## Highlights of Survey Results



Web-based survey conducted Spring 2004  
Administered and analyzed by Biostatistics, Bloomberg SPH  
63% participation of full-time faculty

## Response Rates by Rank and Gender



	Prof	Assoc	Assist	Instr	Total
men	362	296	439	100	1197
women	66	105	284	90	545

*Number of faculty at each rank at the time of the survey*

- Survey conducted Spring 2004
- The overall survey response rate was 58.6%.
- Women constitute 31.3% of the faculty and 37.6% of survey respondents.
- Absolute numbers of male respondents greater at every rank, and overall.

## Major findings

While men and women faculty report comparable levels of job satisfaction, significant problem were identified in the following areas:

- Exclusion from decision-making processes
- Perception of unfair treatment of women
- Institutional barriers to career advancement
- Sexual harassment

## Exclusion from decision-making



	Women	Men
Do you have a voice in dept. decision-making?	36.8	56.0
Are there informal decision-making networks in your dept. or div.?	86.5	82.1
- Do you feel part of them?	12.1	33.6

- Women are less likely to feel included in both formal and informal decision-making networks.
- Results remain significant even after correction for rank and career path.

## Fairness and barriers to advancement



	Women	Men
Are there barriers to your career advancement?	63.1	36.8
Do men and women have equal Opportunities in department?	40.5	81.2
Are promotion decision fair by gender?	57.8	73.8
Are termination decisions fair by gender?	31.6	56.9

*% positive response, corrected for rank and career track*

- Almost twice as many women as men believe that there are barriers to their career advancement.
- 80% of women perceive unequal access to opportunities.
- Women are more likely to view decisions on promotion and termination as being unfair.



## Hostile work environment



	Women	Men
Ever experienced sexual harassment at Hopkins?	<b>21.5</b>	3.9
Ever heard demeaning remarks based on gender?	<b>13.5</b>	1.6

- 21.5% of women report having experience sexual harassment at some time (10 % once, 11.5% more than once)
- Definition: “unwelcome sexual advances, unwanted physical contact, or a hostile environment created by negative sexist remarks or jokes”

## Family responsibilities disproportionately affect women



	Yes	Women	Men
Caused Childcare Conflicts			
Dept. Meetings	No/Rarely	<b>42.1</b>	54.3
Clinic Duties	No/Rarely	44.9	45.3
Teaching Duties	No/Rarely	68.9	69.2
School of Medicine Meetings	No/Rarely	<b>63.1</b>	72.8
Childcare Responsibilities Slowed Career Progress	Not at All	<b>18.2</b>	50.9
Has Inflexible Work Schedule Slowed Progress	Not at All	<b>65.6</b>	80.7

- Departmental and medical school meeting caused child care conflicts more often for women.
- Family responsibilities and inflexible work schedules were cited more frequently by women as a cause for a slower progress in career advancement

# Highlights of Director Interviews



## Major points



- 80% of directors report conducting annual reviews, while only 58% of faculty report receiving an annual review.
- Important decisions are made primarily by men.
- Chairs are concerned that family obligations have a disproportionate negative impact on women.
- Mentoring programs exist in some departments but are highly variable. 12 department have no program in place.

# Highlights of Salary Analysis

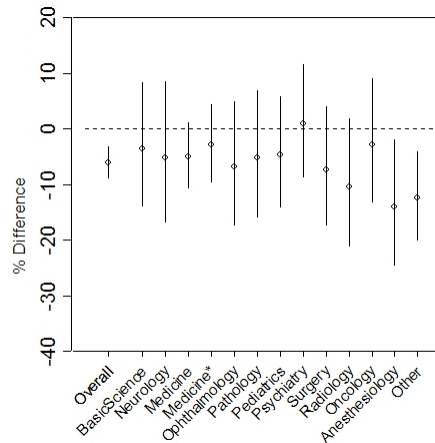


- Multivariate analysis of salary by rank, years at rank, degree, department.
- Performed by Biostatistics group, Bloomberg SPH

## Women on average earn less than men



- › Women's salaries are 6.3% lower than men's.
- › Women's salaries are always lower (with one exception).
- › Results are not skewed by including individuals with particularly high or low salaries.
- › Contrary to previous assertions, there is still lack of equity in the pay of men and women.



# Tabulated salary differences



Table 9b. Estimated percent difference in mean salary comparing females to otherwise similar males. The coefficients (%diff) and standard errors (SE) from regressions of log salary allowing for an overall gender difference or a department-specific gender difference after adjusting for department-specific rank, degree, and years in rank. The data removes faculty identified to have high influence and the Medicine estimate excludes the Cardiology and GI specialties.

Department	Current FTE Salary		Total Salary	
	%diff	SE	%diff	SE
<b>Overall</b>	<b>-3.7</b>	<b>1.2</b>	<b>-6.3</b>	<b>1.5</b>
Basic Science	-2.3	4.3	-3.3	5.4
Neurology	-2.6	5.0	-5.1	6.2
Medicine	-1.7	2.7	-2.9	3.3
Ophthalmology	-6.7	4.5	-5.4	5.6
Pathology	-1.3	4.5	-5.2	5.6
Pediatrics	-2.3	4.0	-1.4	4.9
Psychiatry	0.4	3.7	0.9	4.7
Surgery	-0.3	4.3	-8.4	5.4
Radiology	-5.4	4.8	-13.7	6.0
Oncology	-3.0	4.3	-2.8	5.3
Anesthesiology	-14.1	5.0	-18.4	6.3
Other	-9.6	3.5	-12.5	4.3

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## Consequence of salary differences: A case study



- › John and Jane are hired as Assistant Professors.
- › John's starting salary is \$100,000 and Jane's is \$93,700 (6.3% less).
- › Jane is promoted to Associate Professor one year later than John.
- › John's salary at promotion is \$5,000 more than Jane's (\$135,000 vs. \$130,000, a 3.8% difference)
- › After 10 years John has earned:
  - › \$91,840 more in salary
  - › \$11,020 more in benefits

## Committee Recommendations

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1. The equal treatment, promotion, and retention of women should rise to the level of an essential mission of the School of Medicine,
2. Achieve and maintain salary equity using approach outlined here.
3. Reduce conflicts with family responsibilities by strongly discouraging scheduling of meetings and conferences outside of hours of 8 a.m. to 5 pm.
4. Allocate financial resources for targeted recruitment and retention of women.

## Recommendations

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5. *Eliminate sexual harassment.* A school-wide program should be conducted to enhance faculty and leadership awareness as to what constitutes sexual harassment and how to report incidents.

## Recommendations

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6. Appoint Associate Dean and provide necessary infrastructure to:
  - a) Oversee salary analysis and ensure that equity is achieved and maintained.
  - b) Ensure that directors conduct annual reviews
  - c) Monitor faculty promotions
  - d) Encourage inclusion of women in decision making
  - e) Provide counseling to the faculty regarding the institutional tools, including limited full time status, daycare, and FASAP, that can support families

## Recommendations

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7. Conduct exit interviews to assess reasons for high attrition of faculty.
8. Faculty oversight by standing committee in Medical School Council
9. Assess progress three years from now by repeating survey of faculty