Glass Ceilings & Sticky Floors: Time for Academic Medicine to Renovate

Department of Medicine, Grand Rounds, April 4, 2017

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Disclosures

We have no actual or potential conflict of interest in relation to this presentation.

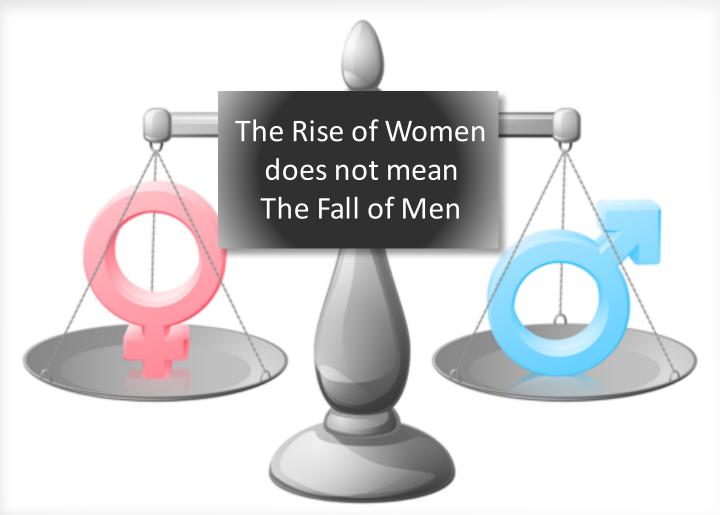
(No affiliation, honoraria or monetary support from an industry source)

Objectives

By the end of this session, participants will be able to:

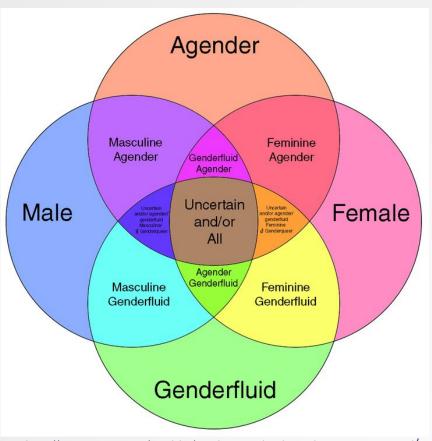
- 1. Describe barriers to women's advancement in medical leadership
- 2. Summarize the activities of the Women in Leadership Task Force
- 3. Describe strategies to close the gender gap in medical leadership

Disclaimers



http://www.businessfirstmagazine.com.au/workplace-gender-equality-agency-wgea/2580/

Disclaimers



https://www.pinterest.com/sexedplus/visualizing-gender-identity-binaries-spectrums-and/

Disclaimers



http://synthetick.com/stock-video/male-female-brain.html

Gender Disparity

- 23% university presidents
- 29% research chairs

Academics



- Academic rank
- Leadership

Academic Medicine



- Tenure
- Grants
- Papers

Research



Faculty of Medicine

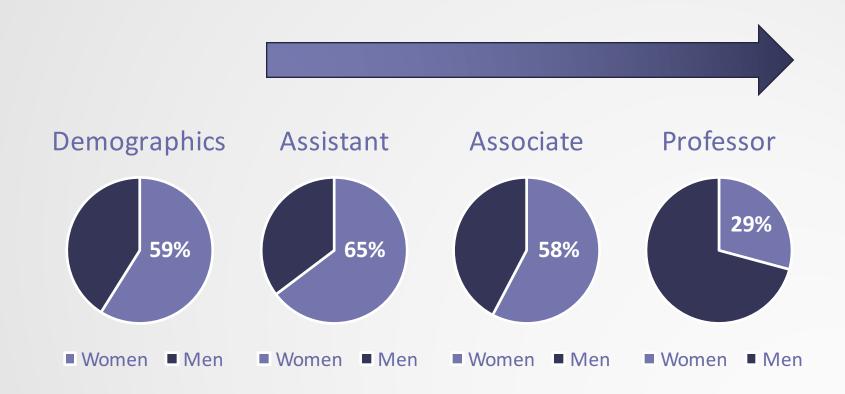


- Dean
- Clinical Chairs
- Basic Science Chairs

- Vice Deans
- Associate Deans
- Director of centre/ institute/unit







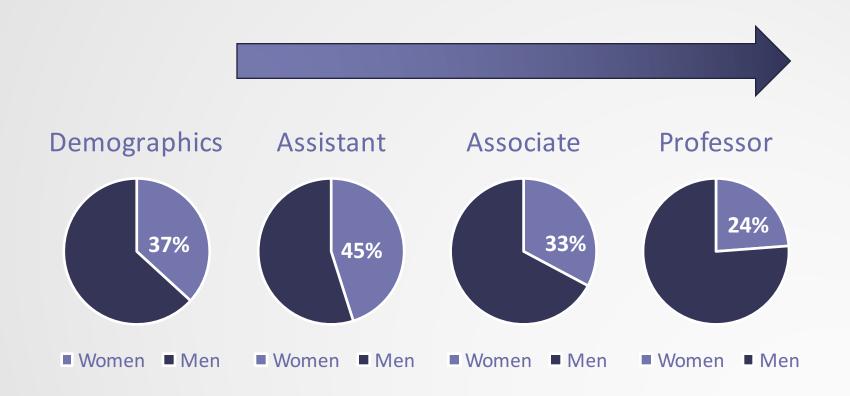
Pediatrics - Leadership

	Female	Male
Pediatrics UGME Director	1	0
Sub-specialty Program Directors	14	7
Core Training Program Director	1	0
Core Assistant Program Director	1	1
Division Directors	5	7
Associate Chairs*	1	6
Vice Chair	0	1
Head of Child Health Research**	0	1
Chair	0	1

Is the Department of Medicine Different?

Department of Medicine





Internal Medicine: Leadership

	Female	Male
Internal Medicine UGME Director	0	1
Subspecialty Program Directors	9	7
Core Site Directors	3	0
Core Assistant Program Director	1	0
Core Training Program Director	0	1
Division Directors	4	13
Associate Directors	0	2
Executive Associate Physician-in-Chief	1	0
Chair	0	1

Common Misperceptions

- ↑ 우 → ↑ P leaders
- Less interest
- Opportunities ♀=♂
- Opportunities = Equality



http://chatsworthconsulting.com/tag/perceptions

Opportunities are the same but the ability to take advantage/accept the opportunities is different.

Female, Focus Group

Common Misperceptions

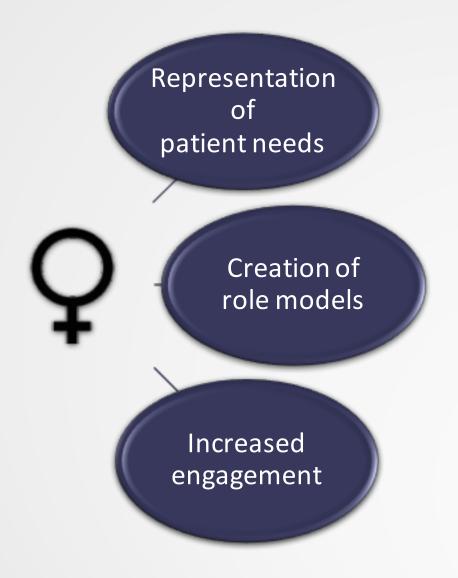


http://darkroom.baltimoresun.com/2014/02/sochi-olympics-day-5-mancuso-wins-skiing-bronze-curling-begins/

Advantages of Gender Diversity in Medical Leadership



Advantages of Gender Diversity in Medical Leadership



Women in Leadership Task Force

Department of Pediatrics

April 2016 - Present

Membership

Laurie Plotnick – Chair

Associate Professor, Associate Director, Pediatric Emergency Medicine,

Ingrid Chadwick

Assistant Professor, Management, John Molson School of Business

Jean-Pierre Farmer

Chair, Pediatric Surgery and Pediatric Neurosurgeon

Stephen Liben

Professor, Director, Pediatric Palliative Care Program

June Ortenberg

Assistant Professor, General Pediatrics

Joyce Pickering

Executive Associate Physician-in-Chief of Medicine

Maria Psihogios

PGY1 Pediatrics

Aimee Ryan

Associate Professor, Department of Pediatrics

Christine Sabapathy

Assistant Professor, Hematology-Oncology

Samara Zavalkoff

Assistant Professor, Pediatric Critical Care

WIL taskforce mandate

Realistic action plans

个 Women applying for leadership

个 Women assuming leadership

WIL Taskforce Initiatives

Literature review

Leadership for Medical Women conference

Survey

Focus groups

Survey and Focus Groups: Objectives

- Explore perceived barriers
- Surface innovative ideas

Survey - Methods

- Development
- Questions:
 - Demographic
 - Career development
 - Barriers
 - Strategies
- Target: faculty, trainees
- Administration

Focus Group-Methods

- 3 groups: male, female, mixed
- Participant selection
- Focus group facilitators
 - Gender matched to group
 - Qualitative researchers
- Question

Survey Results

- 57.5% (n= 160) response rate
- Wide representation

Focus Group Results

- 17 women, 10 men
- Wide representation



https://medium.com/@UN_Women/comic-competition-winners-gender-equality-picture-it-b2b1690c6d14

Gender Disparity Principles

- Fairness
- Stereotypes and biases
- Stem from everyone

Barrier 1 - Image of a Leader

Agentic

- Dedicated
- Competent
- Strong
- Assertive
- Decisive
- Independent
- Analytical
- Action-oriented

Communal

- Warm
- Caring
- Sensitive
- Honest
- Nurturing
- Dependent
- Collaborative
- Supportive

Barrier 1 - Image of a Leader

Agentic = Men

- Dedicated
- Competent
- Strong
- Assertive
- Decisive
- Independent
- Analytical
- Action-oriented

Communal = Women

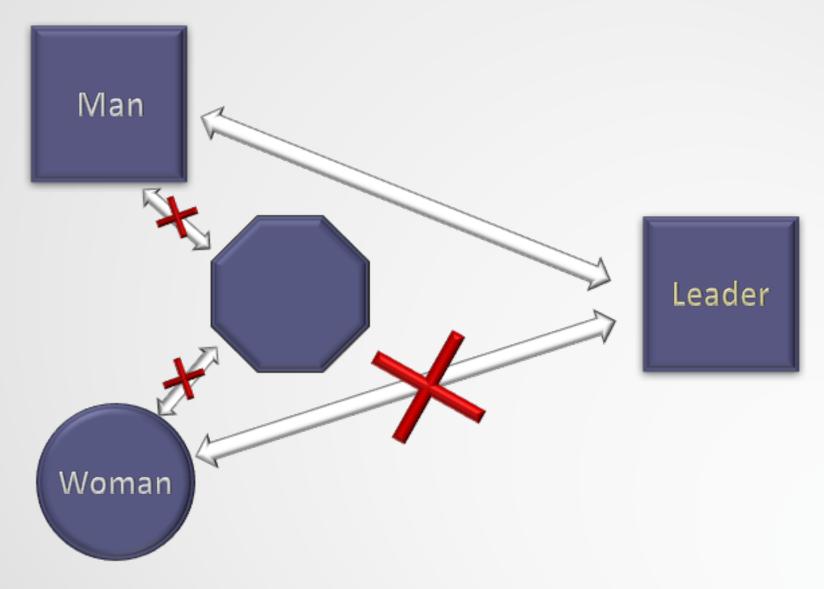
- Warm
- Caring
- Sensitive
- Honest
- Nurturing
- Dependent
- Collaborative
- Supportive

If you (and a male colleague) are both talking to someone, I often find that the male ... is being listened to more than the female...

I've even had some nurses [say] "You're [going to] have to have...a deeper, more assertive voice, [because] they're [going to] listen to the male in the room.

Female, Focus Group

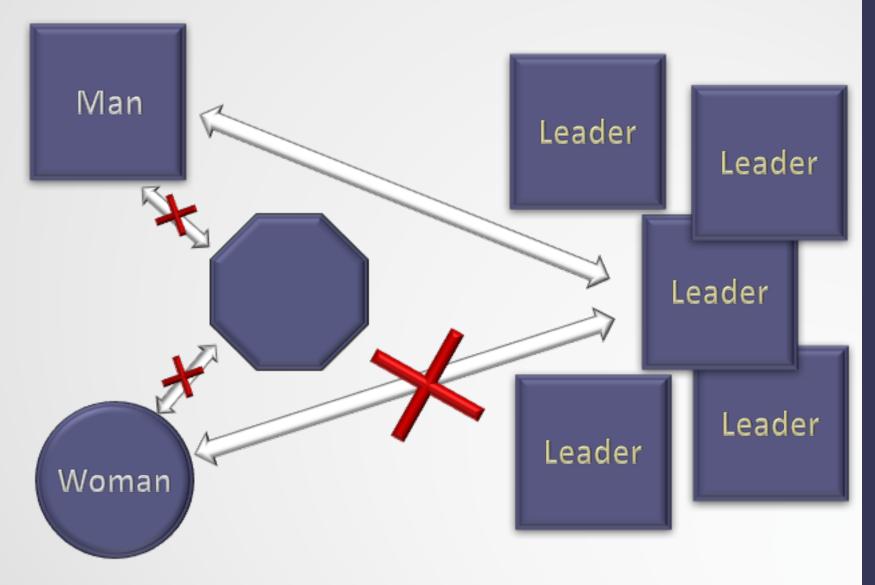
Barrier 1 - Image of a Leader



... if a man is more outspoken, he is a leader
... if a woman is more outspoken ... that can
be seen as negative ... not only just by men,
but I think as a society we do tend to ...
have a harder time with strong-willed women,
[whereas] being strong-willed... for a man is
a positive thing when it comes to leadership.

Male, Focus Group

Barrier 1 - Image of a Leader



Barrier 2 - Lack of Active Guidance

Mentorship – quantity and quality

...there is a bit of reluctance [for women] to go for mentorship: "I don't know who to talk to, I am too shy, I wouldn't even know where to begin"... [mentorship] seems to be more of a natural fit for men, and I think women are a little bit too shy or less inclined to go there.

Female, Focus Group

Barrier 2 - Lack of Active Guidance

Networking

Networking Opportunities	Female	Male	
Same	34.1% (31)	66.0% (31)	
Different	65.9% (60)	34.0% (16)	$\chi^2 = 12.78;$ p=0.002

Barrier 3 - Family Obligations

- Disproportionate
- Self-perceived barrier F 42.5% vs. M 27.3%
- Top challenge to women

Barrier 3 - Family Obligations

• You have to look outside in a broader society context... I've been reasonably successful in my career ... I am very fortunate. I have a very supportive wife who was ready to give up her own career to raise our children ... I did a lot of things that, if I was a woman, I am sure I wouldn't be able to do.

Male, Focus Group

Men	Women
Many role models	Few role models

Men	Women
Many role models	Few role models
Mentors and networks	Few mentors and networks

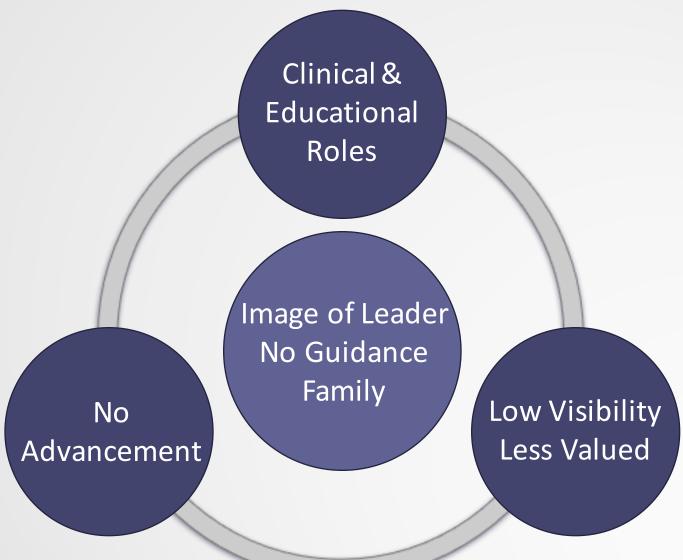
Men	Women
Many role models	Few role models
Mentors and networks	Few mentors and networks
Minority are primary caretakers	Majority are primary caretakers

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Do not bear children	Bear children

Men	Women
Many role models	Few role models
Mentors and networks	Few mentors and networks
Minority are primary caretakers	Majority are primary caretakers
Do not bear children	Bear children
Do not breastfeed	Breastfeed

Adapted from: *Handelsman, J.* https://med.stanford.edu/facultydiversity/diversity-resources/information-about-bias/handelsman-video-page.html

Barrier 4 - Distracting Roles

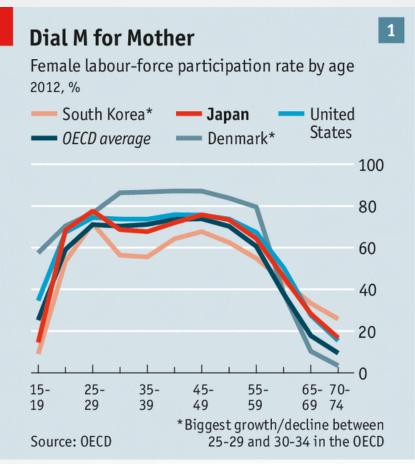


...Male leadership tends to be ... about formal leadership roles... The informal leadership ... is heavily [undertaken by] women ... this sort of day-to-day, not named "chair of committee or department head," but "lived" leadership ...that doesn't necessarily get recognized or get much...

Male, Focus Group

Barrier 5 - Organizational Structure





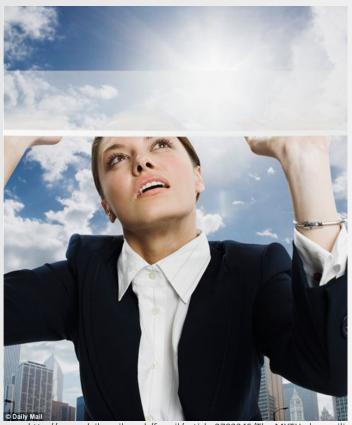
http://www.economist.com/news/briefing/21599763-womens-lowly-status-japanese-workplace-has-barely-improved-decades-and-country

Barrier 5 - Organizational Structure

Lack of:

- Family-friendly environment
- Metrics
- Policy

Glass Ceiling & Sticky Floor



http://www.dailymail.co.uk/femail/article-2703345/The-MYTH-glass-ceiling-Think-women-raw-deal-work-In-ferocious-blast-pioneering-woman-boss-eatssexist-pigs-breakfast-says-time-stopped-whining.html



http://www.ahappymum.com/2017/03/empoweringwomen-with-3m-futuro-for-her.html

(Monroe, A.K., et al., 2015; Zhuge, Y. et al., 2011; Carnes, M. et al., 2008)

Potential Strategies

Gender Diversity = Gender-diverse Solutions

1. Training & Education

The first step in solving a problem is to recognize that it does exist.

Zig Ziglar

1. Training & Education

- Diversity expert
- Outcomes:
 - Buy-in
 - Gender Diversity policy
 - Training of Departmental leaders
 - Bias-free selection and promotion
- Faculty of Medicine Diversity Workshops



2. Data Tracking and Monitoring

- Tracking demographics
- Measurement of metrics
- Real-time reporting



http://setuix.com/track-tracking-data-users-website/

3. Renewed Career Framework

Academic Biomedical Career Customization (ABCC)

- Framework
 - Individualized
 - All life stages
- Banking Program

4. Active Guidance for Women

- Formal mentorship program
- Networking
- Workshops, programs and meetings

5. Family-friendly Work Environment

- Meeting times and remote access
- Departmental petition for:
 - On-site childcare
 - On-site amenities and services
 - On-site employee gym

Take-Home Points

- The gender gap is real
- Gender diversity is necessary
- Implicit biases → barriers
- Many strategies to consider

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- Ms. Kendall Kolne PhD student, School of Communication Sciences and Disorders, McGill University
- Ms. Isadora Hellegren, RA, Department of Art History and Communication Studies, McGill University
- Ms. Cecilia Delamora, graduate student, Études Urbanes et Touristiques, Université du Québec a Montreal

Be brave enough to start a conversation that matters.

Margaret Wheatley

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Video - https://med.stanford.edu/facultydiversity/diversity-resources/information-about-bias/handelsman-video-page.html

Medscape Survey http://www.medscape.com/features/slideshow/public/femaleleadershipreport2015#page=1