Department of Pediatrics
Faculty Meeting
September 26, 2017

TOPIC: Task Force 3 and Creating a Culture Conducive to Women’s Academic Success
Whitney Chadwick, MD
Clinical Instructor
Division of Hospital Medicine

Grace Lee, MD, MPH
Professor
Division of Infectious Diseases

Anisha Patel, MD, MSPH, MSHS
Associate Professor
Division of General Pediatrics
Allison Pribnow, MD, MPH
Clinical Assistant Professor
Division of Hematology/Oncology

Molly Tanenbaum, MD
Instructor
Division of Endocrinology

Ekaterina (Katia) Vaisberg, MD
Clinical Instructor
Division of Hospital Medicine
Appointments and Promotions

*June through September*

**Assistant Professor**
- John Dykes, Cardiology
- Baraka Floyd, General Pediatrics
- Dana Gerstbacher, Rheumatology
- Jessica Gold, Hospital Medicine
- Lahia Yemane, General Pediatrics

**Associate Professor**
- David Axelrod, Cardiology
- Jennifer Burgis, Gastroenterology
- Arun Gupta, Neonatology
- Ann Ming Yeh, Gastroenterology
- Scott Ceresnak, Cardiology

**Professor**
- Carlos Milla, Pulmonary Medicine
Congratulations!

Protecting unauthorized immigrant mothers improves their children’s mental health

![Graph showing the effect of Mothers' DACA eligibility on child outcomes](image-url)
Congratulations!

Elizabeth Egan, MD
- 2018 Young Investigator Award from the American Society for Microbiology and the American Academy of Microbiology

Eric Sibley, MD, PhD
- NASPGHAN Distinguished Service Award

Marlene Rabinovitch, MD & Roham Zamanian, MD
- $8.85M NIH grant to bring elafin therapy to pulmonary arterial hypertension patients
Congratulations!

Allie Rubin Buss, Anita Desai, Ann Ming Yeh, Alyssa Bogetz, Reshma Shah, and Becky Blankenburg

• AAP Best Poster: Mindful Moments: A Text Message-based Resident Wellness Curriculum
Congratulations!

Cycle for Kids Cancer
hosted by the Division of Pediatric Hematology/Oncology
at Lucile Packard Children’s Hospital Stanford
The Twelfth Annual Day of Remembrance & Rededication
To Honor The Children Who Have Died

Sunday, October 8, 2017
1:00 - 4:00 pm
Frances C. Arrillaga Alumni Center
326 Galvez Street, Stanford, California

RSVP to bereavement@stanfordchildrens.org or call 650-497-8175
LPCH Town Hall

with Chris Dawes, James Dunn, and Mary Leonard

Monday, October 2\textsuperscript{nd}

5:30 – 6:30 PM

LKSC 130
State of Stanford Medicine

Dean Minor, David Entwistle, Chris Dawes

Tuesday, October 24th

12 – 1 PM

Berg Hall
## Department Meetings over the Last Year

<table>
<thead>
<tr>
<th>Month</th>
<th>Topic</th>
</tr>
</thead>
<tbody>
<tr>
<td>September</td>
<td>Climate Survey</td>
</tr>
<tr>
<td>October</td>
<td>Dean Minor’s Remarks &amp; Faculty Engagement with the Lucile Packard Foundation</td>
</tr>
<tr>
<td>November</td>
<td>Education Update &amp; Partnership with the Quantitative Sciences Unit</td>
</tr>
<tr>
<td>January</td>
<td>Task Force Progress Reports &amp; Hospital Finances Update</td>
</tr>
<tr>
<td>February</td>
<td>Faculty Compensation and Incentive Plan</td>
</tr>
<tr>
<td>March</td>
<td>Education Scholarship &amp; Update on Government Affairs</td>
</tr>
<tr>
<td>April</td>
<td>Wellness Survey</td>
</tr>
<tr>
<td>May</td>
<td>Associate Chair Introductions and Portfolios</td>
</tr>
<tr>
<td>June</td>
<td>Task Force Reports (#1 and #3)</td>
</tr>
<tr>
<td>July</td>
<td>Task Force Report (#2) with Chris Dawes</td>
</tr>
<tr>
<td>August</td>
<td>Department Finances</td>
</tr>
</tbody>
</table>
Mentoring/Engagement Working Group

Action Plan
Task Force 3 Findings

Room for improvement
• Mentoring
• Engagement
• Inclusion

It’s time for ACTION
• Explore barriers and “sore points”
• Identify potential tangible remedies
Mentoring - Challenges

• Finding mentors
  – Research
  – For upper level faculty
  – To augment counsel from division chiefs & other assigned mentors

• Transparency about the promotion process
  – Honest and specific feedback about progress

• Defining the *mission* for faculty
  – Aligning hospital and department goals and priorities
  – Competing demands – clinical vs. education/research/QI
  – What is valued versus what is “counted”
Engagement - Challenges

Defining the “mission”
• Increased emphasis on clinical output
• Balancing clinical work with education, QI, research
• What does it mean to work in an “academic institution”

Feeling disconnected
• No longer a “small village”
• Scattered at different clinical sites & labs
• Inadequate “on-boarding” for new faculty

Needing more administrative support
• Clinical – EMR, communication with patients
• Research – pre and post award support
Inclusion - Challenges

No longer a “small village”
• Large number of faculty
• Differing faculty lines/roles
• Dispersion across labs and clinical sites

Coming “on board”
• Roles, responsibilities & the “other players”
• Being introduced
Tangible Next Steps

• Enhance “on-boarding”

• Create a Mentoring-Inclusion-Engagement (MIE) Group
“On-boarding”

• Quarterly lunch sessions for all new hires
  – Launch 12/2017

• Goals
  – Explore career goals & interests
  – Clarify benefits & resources
  – Encourage networking

• Support team
  – Associate chair(s)
  – Administration
  – Mentor(s)
Mission

• Improve faculty engagement
• Foster inclusive environment
• Optimize mentoring resources

Ensure ACTION –

• *Initiate tangible changes*
MIE Working Group

- **Who**
  - 8-12 volunteers
  - Diversity by gender, rank and line

- **What**
  - Monthly lunch meetings
  - Propose/review pilot projects to
    - Foster engagement
    - Enhance mentoring & support
MIE Working Group

• Interested?
  – Contact Scott Sutherland or Laura Bachrach

• Questions or comments?
Climate Survey: Inclusion

Sense of inclusion as a member of the Department of Pediatrics

- **Women (n=48):**
  - Very comfortable, included, and valued: 10%
  - Somewhat comfortable, included, and valued: 40%
  - Neither included nor isolated: 27%
  - Somewhat uncomfortable, isolated, or marginalized: 21%
  - Very uncomfortable, isolated, or marginalized: 2%

- **Men (n=37):**
  - Very comfortable, included, and valued: 32%
  - Somewhat comfortable, included, and valued: 46%
  - Neither included nor isolated: 11%
  - Somewhat uncomfortable, isolated, or marginalized: 11%
  - Very uncomfortable, isolated, or marginalized: 0%
Climate Survey: Gender Differences

I feel the climate and opportunities for women faculty in the Department are at least as good as those for men

- Women: 2.7
- Men: 3.7

I am given an opportunity to serve on important committees

- Women: 3.1
- Men: 3.6

I feel I am fairly compensated in relation to equivalent colleagues in the department

- Women: 3.0
- Men: 3.4

I feel comfortable sharing my opinions with colleagues in the department

- Women: 3.3
- Men: 3.8
Task Force Report: Gender Bias

Gender bias was identified as an issue particularly as it pertains to faculty sponsorship of other faculty members for national committees and other similar sorts of advocacy, especially for junior faculty.

There was concern about whether male faculty members were more likely to receive MCL appointments while female faculty were more likely to receive CE appointments.

There also appears to be a culture in which childcare issues that impact the timing of the workday, have an unfavorable influence on women faculty’s availability for key meetings in the evenings and early mornings.

Potential Remedies

• The Chair should make gender metrics more transparent to clarify whether these are myths or accurate perceptions.
• Consider providing training to faculty in leadership roles, to recognize and mitigate problems associated with unconscious gender bias.
Department of Pediatrics Demographics

Assistant Professor
N = 110

Associate Professor
N = 79

Full Professor
N = 72

Men Women

CE MCL UTL

CE MCL UTL

CE MCL UTL

Red: Men  Blue: Women
Department of Pediatrics Demographics

Assistant Professor
N = 110

Associate Professor
N = 79

Full Professor
N = 72

<table>
<thead>
<tr>
<th></th>
<th>CE</th>
<th>MCL</th>
<th>UTL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Men</td>
<td>30</td>
<td>20</td>
<td>50</td>
</tr>
<tr>
<td>Women</td>
<td>70</td>
<td>80</td>
<td>50</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>CE</th>
<th>MCL</th>
<th>UTL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Men</td>
<td>40</td>
<td>30</td>
<td>30</td>
</tr>
<tr>
<td>Women</td>
<td>60</td>
<td>70</td>
<td>70</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>CE</th>
<th>MCL</th>
<th>UTL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Men</td>
<td>50</td>
<td>50</td>
<td>50</td>
</tr>
<tr>
<td>Women</td>
<td>50</td>
<td>50</td>
<td>50</td>
</tr>
</tbody>
</table>
Department of Pediatrics Demographics

Clinical Division Chiefs

Associate Chairs

Committee on A+P

Residency Leadership

Fellowship Directors

PIs to Post-docs

Men

Women
Total Compensation (% AAP 80th percentile benchmark) in MD and MD, PhD faculty in clinical divisions*

*Excludes those with administrative supplements and faculty in Hospitalist Medicine
BEYOND BIAS AND BARRIERS
FULFILLING THE POTENTIAL OF WOMEN IN ACADEMIC SCIENCE AND ENGINEERING

NATIONAL ACADEMY OF SCIENCES,
NATIONAL ACADEMY OF ENGINEERING, AND
INSTITUTE OF MEDICINE
OF THE NATIONAL ACADEMIES
Culture Matters: The Pivotal Role of Culture for Women’s Academic Careers in Medicine

Development of a Measure of *Culture Conducive to Women’s Academic Success* (CCWAS)

Describe perceptions of the Department across four distinct dimensions:

1. Equal access to resources and opportunities (19 items)
2. Support in efforts to balance work and family for the achievement of both personal and professional success (11 items)
3. Freedom from gender bias (3 items)
4. Chair support (12 items)

Development of a Measure of *Work-to-Family Conflict*

1. Time-based work-to-family conflict: Time demands (e.g. long hours) interfere with effective participation in the family role
2. Strain-based work-to-family conflict: Stress or strain from work has a negative effect on family life

Associated with intentions of quitting their job, poorer physical health and worse mental health
Culture Matters: The Pivotal Role of Culture for Women’s Academic Careers in Medicine

Westring, et al. Academic Medicine, 2014
Dimensions of CCWAS: Equal Access

In general, in my department, compared with men faculty ...

1. Women faculty have equal access to career development opportunities.
2. Women faculty get as much mentoring from senior faculty.
3. Women faculty are as frequently considered for leadership positions.
4. Women faculty receive as much feedback regarding their performance.
5. Women faculty receive as much guidance about potential research opportunities.
6. Women faculty receive equitable salaries.
7. Women faculty get as much research space/equipment.
8. Women faculty get as much office space.
9. Women faculty have equal access to administrative support.
10. Women faculty have LESS protected time for research. *(r)*
11. Women faculty are as frequently recognized for their work.
12. Women faculty are as often asked to sit on prestigious committees.
13. Women faculty are as frequently nominated for awards and honors.
14. Women faculty are more likely to have others take credit for their work. *(r)*
15. Women faculty are as frequently included in discussions of division policies and administration.
16. Women faculty play equally important roles in decision making.
17. The comments made by women faculty in meetings are given as much credit and attention.
18. Women faculty are as frequently included in professional social gatherings (e.g., dinners with guest scientists).
19. Women faculty are as often included in informal social gatherings (e.g., sporting events, happy hours).

Westring, et al. Academic Medicine, 2012
Dimension of CCWAS: Support for Work–Life Balance

In general, in my department ...

1. Colleagues are supportive when women faculty members take time for family life.
2. Colleagues are supportive when women faculty members talk about work–family issues.
3. Attending to personal needs, such as taking time off for sick children, is frowned upon. (r)
4. Women faculty who reduce their workload are viewed by their colleagues as less committed to their careers. (r)
5. Family demands are considered when the division schedules events and/or meetings.
6. Family demands are considered when the division schedules teaching and clinical hours.
7. An obstacle for full-time women faculty is the expectation of a minimum of a 60-hour workweek. (r)
8. Reducing their workload hurts the chances that women faculty will succeed in their careers. (r)
9. Women faculty who temporarily reduce their workload for parenting responsibilities are expected to take on extra work when they return to full-time. (r)
10. Work is expected to be the primary focus of faculty members’ lives. (r)
11. It is possible for women faculty to get promoted working 50 hours per week or less on a regular basis.
Dimension of CCWAS: Freedom From Gender Bias

In general, in my department ...

1. Women faculty members are comfortable raising issues about the supportiveness of the work environment for women.

2. Women are encouraged to raise concerns about biases against women, even if those biases are subtle.

3. When women faculty raise concerns about gender issues, they are seen as “whiners.” (r)
Dimension of CCWAS: Chair/Chief Support

In general, in my department ...

1. My chair tries to ensure that women faculty have equal access to support and resources (e.g., space, administrative support, career development opportunities) to help them in their careers compared with men faculty.

2. My chair tries to ensure that women faculty are equally recognized and rewarded for their work compared with men faculty.

3. My chair tries to ensure that women faculty are included in FORMAL division events.

4. My chair tries to ensure that women faculty are included in INFORMAL division gatherings (e.g., coffee, lunches, sporting events, etc.).

5. My chair is supportive when women faculty talk about work–family issues.

6. My chair encourages women faculty to take advantage of policies/practices for managing work and family.

7. My chair ensures work coverage for women faculty on maternity leave.

8. My chair sends a message that parenthood is an expected part of life.

9. My chair tries to ensure that women faculty are able to manage the demands of work and family.

10. My chair tries to ensure that women faculty feel free to express concerns regarding the treatment of women.

11. My chair tries to ensure that women faculty are not sexually harassed.

12. My chair tries to ensure that women faculty are not subject to subtle gender-based biases.