# ABSTRACT: 2015 ELAM Institutional Action Project Poster Symposium 

Project Title: Best Practices for Recruitment of Women Leaders in Academic Medicine

Name and Institution: Monica M. Farley, MD, Emory University School of Medicine, Department of Medicine, Division of Infectious Diseases

Collaborators and Mentors: Joshua A. Barwick, J.D. Associate Dean Administration; Kathy Griendling, Ph.D. Associate Dean Faculty Affairs, Emory University School of Medicine

Background, Challenge or Opportunity: Despite decades of gender equity among medical school graduates, progress with promotion and advancement of women into leadership positions in academic medicine has been slow.

Purpose/Objectives: The objectives of this project are the following: 1) to assess gender distribution in faculty leadership positions at my institution and compare to national averages; 2) to review current leadership recruitment practices at my institution; 3) to determine best practices for increasing women in leadership positions in U.S. Medical Schools; and 4) to develop institutional guidelines to promote greater equity in leadership positions in our Health Sciences Center.

Methods/Approach: The 2013-2014 distribution of women in faculty leadership positions at Emory School of Medicine (SOM) was determined and compared to the American Association of Medical Colleges (AAMC) published benchmarks. The existing leadership recruitment process at Emory SOM was reviewed. The gender composition of SOM leadership position search committee chairs and members, the gender distribution of the candidates interviewed, and the outcomes of the searches were assessed over a six-year period at Emory University SOM. The gender distribution among individuals selected for an institutional leadership program in the Health Sciences Center at Emory was evaluated for the 13 years of its existence. Representatives from academic institutions with demonstrated success in recruiting women to leadership positions were interviewed. The literature on best practices for recruiting women to leadership positions in academic medicine was reviewed.

Outcomes and Evaluation Strategy: Emory was below the AAMC benchmarks for women Division Chiefs ( $20 \%$ vs. 24\% AAMC), Associate Chairs/Vice Chairs (21\% vs. 24\% AAMC), Deans (O vs 16\%), Senior Associate Deans (0 vs. 33\%), Associate Deans (22\% vs. 39\%) and Assistant Deans (33\% vs. 46\%), and was ahead of the national average for women Department Chairs (17\% vs. 15\%). Implicit bias training was not routinely provided for SOM leadership position search committees. Average search committee makeup was $31 \%$ female. Among ten leadership position searches, only $12 \%$ of candidates selected for interviews were female; $22 \%$ of the hires were female. In contrast, $50.5 \%$ of fellows selected for an institutional leadership academy at Emory SOM were female. Best practices identified for recruitment of women to leadership positions included: 1) emphasis on diverse search committee composition and structured interviews, 2) active identification of female candidates, 3) programs to mitigate unconscious bias, 4) emphasis on faculty diversity in departmental reviews, 5) attention to leadership and career development needs of women faculty, 6) equity in academic promotion, and 7) mentoring, coaching, and sponsorship programs. Recommendations for revised institutional recruitment guidelines are under development. Short term goal: education and implementation of new guidelines. Long term goal: measure progress towards greater diversity among leadership at our institution.

## Best Practices for Recruitment of Women Leaders in Academic Medicine

## Monica M. Farley, MD

Department of Medicine, Division of Infectious Diseases, Emory University School of Medicine Mentors: Joshua Barwick, JD, Kathy Griendling, PhD
Figure 1. Emory Medical School Faculty by Category and Gender
Table 2. Characteristics of Nine Search Committees for Leadership Positions at Emory SOM, 2009-2014

| $\begin{aligned} & \text { Search } \\ & \text { Committee } \end{aligned}$ | $\begin{aligned} & \text { Committee } \\ & \text { Co-Chairs } \\ & \text { Male:Female } \\ & \text { ratio } \end{aligned}$ | \% Female Commitue Members | Mzales Interviewed (\%) | Females Interviewed $(\%)$ | Gender of <br> Hire |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 1 | 2:0 | 60\% | 3 (100\%) | 0 | Male |
| 2 | 1:1 | 56\% | 4 (80\%) | 1 (20\%) | Female |
| 3 | 1:1 | 33\% | 14(87.5\%) | 2 (12.5\%) | Male |
| 4 | 2:0 | 27\% | 11 (100\%) | 0 | Male |
| 5 | 2:0 | 36\% | 15 (83\%) | 3 (16.7\%) | Male |
| 6 | 0:2 | 14\% | 5 (71\%) | 2 (29\%) | Female |
| 7 | 2:0 | 20\% | 12 (80\%) | 3 (20\%) | Male |
| 8 | 2:0 | 33\% | 8 (89\%) | 1(11\%) | Male |
| 9 | 1:1 | 24\% | 14 (100\%) | 0 | Male |
| TOTAL | 13:5 | 31\% | $\begin{gathered} 86 \\ (87.7 \%) \end{gathered}$ | $\begin{gathered} 12 \\ (12.248) \end{gathered}$ | $\begin{gathered} 22 \% \\ \text { Female } \end{gathered}$ |

Figure 2. Emory Woodruff Leadership Academy Gender Composition, 2003-2015 Emory vs. U.S. Medical Schools, 2013-14


## Table 3. Summary of Best Practices

 literaure Review and hnteviews
## 



 nontraditional sourcesand paths seek out fendel cardididies AttentiontocompositionofSearchComnitees
 Providetraininginimplictu unconscius biasto each Search Comnitee Consides sandodicied inteviens
 being evaluaded

## General pratices:

- Preserceofeffenderolemodedsinl eadestippositions

Professionaldeveropmentworkshopsand couses
 ondivesitivindepartmental revievs
EquitablePromotionandTCenvepatices

- Mentoringe coacting andsponsocstip


## Conclusions

Underrepresentation of women in leadership positions at Emory was similar to U.S medical schools. Assembly of the candidate pool, including active identification of female candidates was identified as a specific area for improvement. Development of leadership recruitment guidelines that incorporate best practices is likely to have a positive impact.

Despite good intentions, recruitmens frequenty fail to identify qualified female candidates for leadership positions. Best practices for recruitment of women include careful attention to the composition of search committees, recognition of and training to adjust for implicit/unconscious bias, active outreach to identify female candidates and expansion of the candidate pool. Importantly, general attention to the professional development leadership training opportunities and pathway to promotion for women in academic medicine is critical to expanding the pipeline of women available to fill leadership positions. In my institution, representation of women in an institutional leadership academy was excellent and may ultimately increase the pool of internal candidates for leadership positions.

## References <br> 

##  





## Acknowledgments

Many thanks to Dorothy Brown, Lynell Cadray, Nancy Bliwise, Robyn Fivush, Greg Jones, and Nancy Andrews for providing advice and information.

