Title of Abstract: Factors impacting track change and attrition of women faculty

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ABSTRACT:
Background: Among tenured academic physicians and those in leadership positions (e.g., Deans, Department Chairs), the representation of women falls short of their male counterparts. Given the complexity of women’s career progression in the sciences, it is valuable to understand not only the differences between men and women, but also the differences among women. The current study attempted to differentiate among women who persisted in their current positions and those who changed academic tracks or left the university at an elite school of medicine (SOM) throughout a three year period.

Method and Analyses: This is a secondary analysis of an NIH-R01 (#R01-NS069793) cluster-randomized controlled trial aimed at improving academic productivity and well-being for women assistant professors at a major research institution. Departments/divisions with at least three women assistant professors (N = 27) were recruited for participation, and women assistant professors from these units were invited to enroll. Of the 178 eligible women, 134 consented to participate and 133/134 completed the pre-randomization baseline survey in 2010. In 2013, participants were asked to complete a follow-up questionnaire, which included their current employment status (changes in academic track and departure from the university). 133 women completed the follow-up questionnaire. We used multivariable logistic regression models to examine factors associated with track changes and attrition. Baseline self-report data on demographics, work-family experiences, and core-self evaluations were considered in the models.

Key Results: 14 women (11%) changed academic tracks and 21 women (16%) left the university. Regarding track changes: 11 women switched from Clinician-Educator to Academic Clinician; one switched from Tenure to Clinician-Educator; and, one switched from the Research track to a non-faculty status research investigator position. The only factor significantly associated with changing track was participant age; older participants were more likely to change academic tracks (odds ratio = 1.14, p = .037). Regarding attrition, unmarried women were more likely to leave the university than married women (odds ratio = 5.05, p = .014). Further, Black/Hispanic/Pacific Islander women were nearly six times more likely to leave than White women (odds ratio = 5.92, p = .012). After adjustment for core self-evaluation scores, women who experienced higher levels of spillover from work stress into personal life (strain-based work-interference-with-family) were twice as likely to leave their positions (odds ratio = 2.05, p = .035). It is also noteworthy that factors typically associated with job withdrawal (e.g., satisfaction and commitment) were not significant predictors of track changes or attrition in the final models.
Discussion: This study highlights differential factors associated with women’s career transitions in academic medicine. One critical finding is that women from under-represented ethnic groups were nearly six times more likely to leave the university. It is essential that retention efforts explore how the climate of academic medicine can be more inclusive of minority women. Further, creating climates that facilitate the management of work and family demands is also key for retention. Research and intervention efforts in this arena should adopt a multi-faceted approach to mirror the complex array of factors that impact women’s career progression.