Title of Abstract: A measure of Culture Conducive to Women’s Academic Success (CCWAS): variation across departments and divisions at one academic institution

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Topic: Defining and Changing the Culture of Academic Medicine

Background: Culture is thought to be a key factor that contributes to success in academic medicine. The culture of a department or division may be particularly important to faculty success. We have previously defined a measure of culture conducive to women’s academic success (CCWAS) which comprises four related, but distinct dimensions. This measure exhibited significant variation across, and agreement within, academic departments/divisions (units). Here we examine the relationships between this measure and characteristics of departments/divisions hypothesized to influence unit culture.

Methods: After conducting a review of the literature, focus groups, and expert consultations, a measure was developed and piloted in a sample of women assistant professors from 15 academic institutions nationally. The measure was refined and administered to 134 women assistant professors at the Perelman School of Medicine across 27 units. Four dimensions of success for women’s careers were assessed: support for work-life balance, equal access to opportunities, freedom from gender bias, and supportive leadership. These dimensions were validated against measures of satisfaction, commitment, and work-family conflict. The effect of variation across units was explored. Based on a priori hypotheses, we assessed how specific unit-level characteristics (e.g., chair/chief gender, number of faculty, and pediatric vs. adult medicine) were correlated with unit-level culture scores. Differences in unit mean culture scores stratified by defined categories were examined using non-parametric statistical tests.

Results: 133 respondents (99.3%) completed the survey. The mean age was 40.9 years, 59.4% were white, and 92% were full-time faculty. Of all respondents, 84.2% were married or in a domestic partnership and 75.9% had one or more children. The within-unit agreement in CCWAS scores was strong and reliable, indicating that individuals rated work culture similarly within a department/division. In contrast, there was notable variation in the average unit CCWAS scores across departments/divisions. CCWAS unit scores were positively associated with faculty satisfaction and commitment to department/division (p<0.0001 for both) and negatively associated with two measures of work-family conflict (p≤0.006 for both). There were significantly higher CCWAS scores among pediatric units compared to adult medicine units (mean CCWAS score 3.43 vs. 3.05; p=0.03). Although not statistically significant, a positive trend between compensation and higher CCWAS scores was observed (p=0.06). No differences in mean CCWAS scores were detected for chair/chief gender, procedural/non-procedural units, hours worked, or percent composition of senior and junior level women faculty in each unit.

Conclusions: Analysis of the CCWAS measure provided evidence that women faculty within departments/divisions agree on the supportiveness of their unit and that there are significant differences in culture across departments/divisions. In addition, women working in more conducive cultures were more satisfied and committed to their departments/divisions while women in less supportive cultures reported greater work-family conflict. Higher CCWAS scores among pediatric units may reflect a unique culture in pediatric medicine. This tool can be used to test the effectiveness of interventions to improve the culture of academic medicine for women faculty. Further testing of this measure to assess differences in culture within and across other academic medical centers would be valuable.

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