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Stanford Medical School's Plan to Attract More Female Leaders

by Lauren Stiller Rikleen | 11:00 AM August 19, 2013

The Stanford School of Medicine (SSoM) recently launched an initiative to increase the representation of women on its faculty. The program is rooted in data that should resonate with any business or profession confronting its own gender gap in the leadership ranks.

Like many organizations, SSoM requires an "all-in" commitment from its faculty members, which often translates to punishing hours that aren't exactly conducive to work-life balance. Such work-life conflicts significantly impacted the SSoM's ability to recruit (http://www.merritthawkins.com/pdf/mha2011residentsurvpdf.pdf) and retain women. SSoM has a stable of policies (PDF) (https://facultydevelopment.stanford.edu/sites/default/files/Benefits Programs and Family-Friendly Policy Summary.pdf) which offer flexibility options — including unpaid leave for up to a year after the birth or adoption of a child; grants of up to $5,000 per year for childcare; on-site childcare options; grants for dependent care expenses incurred while traveling to attend professional meetings; temporary reductions from full-time to part-time status for family-related needs, etc. However, the utilization rates for these policies were low, and they were often seen as incompatible with professional norms of success. SSoM realized that a much fuller response was needed to combat the threats to faculty excellence and growth. Recognizing that leadership support and engagement is fundamental to the success of any cultural shift, the SSoM embarked on its effort with the full commitment of leaders throughout the University.

That effort has taken root in the development of a *strategic* focus on flexibility that can serve as a blueprint for any workplace. It includes an analysis of flexibility practices (http://www.acenet.edu/leadership/programs/Pages/Academic-Medicine.aspx) at other institutions and the collection of detailed data from within to better understand the individual flexibility needs of SSoM faculty and the specific cultural barriers that were inhibiting the use of existing opportunities.

Not surprisingly, the results demonstrate that when existing flexible policies are not aligned with the culture of the workplace — in this case, academic medicine — it results in a dynamic that inhibits their use. Specifically, (1) professionals are concerned that they will look less committed to their careers if they opt-in to flexibility policies and (2) they fear placing an extra burden on their already overburdened colleagues. SSoM's data (https://facultydevelopment.stanford.edu/sites/default/files/documents/fqol-report-jan2010.pdf) shows that professional identity drives behaviors — as well as attrition (http://link.springer.com/article/10.1186%2F1472-6920-7-37) — when the demands of a 65 hour workweek lead to a high rate of dissatisfaction with work-life integration and create significant work-work conflict as a result of the many demands on a faculty member's time.

Research (http://www.aaup.org/aaup/pubsres/academe/2011/jf/feat/misr.htm) has also shown that male STEM professors spend more time engaging in activities that directly relate to career advancement, devoting 42% of their work hours to research, compared to 27% for female professors, who spend more time on service and mentoring activities that do not necessarily get rewarded.

Armed with this data, SSoM is now moving forward with a comprehensive program to integrate flexibility policies as a core element of the faculty advancement process. A key aspect has been the development of Academic Biomedical Career Customization (ABCC) (http://med.stanford.edu/diversity/recruiting/ABCC.html) . ABCC is a comprehensive program designed to increase the cultural acceptance of work-life integration plans and policies. The program is based in part on Deloitte's Mass Career Customization framework (http://latticemcc.com) . A key component includes planning conversations between faculty members and their Division Chiefs that focus on developing a short- and long-term strategy to achieve career objectives and leverage existing policies. The ultimate goal is to help faculty better combine their work and life goals.

Another major innovation is the development of a banking system (http://gender.stanford.edu/news/2013/school-medicine-initiative-helps-faculty-achieve-balance) that allows faculty to earn rewards for time spent on certain activities that benefits their departments or divisions, but that frequently go unrecognized. For example, the banking system allows hours spent mentoring students and participating on committees to be converted into support mechanisms such as grant writing assistance, meal deliveries, and housecleaning.

The program is currently being implemented as a pilot involving 50 faculty members across six divisions within the medical school. According to initial surveys of the participants, the early results are positive. Participants appreciate the value of engaging in a thorough career planning process that includes work-life concerns and offers support mechanisms. The pilot will continue for another year to allow for additional data collection and opportunities to ensure successful integration into the school's culture. SSoM anticipates that this program can be scaled throughout the medical school at the conclusion of the pilot phase.

The School of Medicine's efforts are combatting the well-worn argument that flexibility initiatives cannot work in certain settings. Perhaps it will be a group of STEM specialists who can clearly demonstrate through leadership support and detailed data that flexibility — and attracting more female leaders in turn — isn't rocket science. It's about creating the right culture.

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