



A Piece of My Mind

Gender workforce disparities—an ethical imperative[☆]Allison R. Larson, MD^{*}

Department of Dermatology, Boston Medical Center/Boston University School of Medicine, Boston, Massachusetts



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Recently, the American Medical Association (AMA) passed its most progressive gender equity resolution to date, which included the AMA “walking the talk” and performing an organization-wide analysis of pay to address disparities in compensation (Silver and Sinha, 2018). The overwhelming support for this resolution highlighted an important formula that women in medicine and our allies are using: Research dissemination combined with strategic advocacy. How much this formula will result in changing the status quo has yet to be determined, but with the growth of social media, physicians are locking arms and calling for equity for everyone.

One of the authors of the AMA's gender equity resolution, Julie K. Silver, MD, is an associate professor and associate chair of the Department of Physical Medicine and Rehabilitation as well as director of a women's leadership continuing medical education course at Harvard Medical School. Dr. Silver and colleagues have designed and are implementing a detailed strategic initiative and call to action: The Be Ethical campaign (Silver, 2018). This campaign explicitly states that workforce equity is an ethical imperative and involves disseminating a document that highlights research on disparities for women in medicine. The campaign calls for leaders in four key gatekeeper groups (medical schools/hospitals/health care institutions, medical societies, journals, and funding agencies) to use data analysis and a systematic approach to solving equity issues.

In part thanks to the support and programming from the Women's Dermatology Society and American Academy of Dermatology, women make up 47.1% of practicing dermatologists in the United States (Physician Specialty Data Report, 2015). Despite this, inequalities affect dermatology in a manner similar to other specialties. Women are well represented in residency program leadership, but the percentage of women drops off with ascending academic rank. Only 23.5% of chairs of dermatology departments were women as of 2016 (Shi et al., 2017). Women are also underrepresented as last authors on manuscripts in dermatology journals (Bendels et al., 2018). A recent report revealed serious gaps for women in select recognition awards given to dermatologists by the American Academy of Dermatology (Silver et al., 2017).

There is work to be done, particularly with regard to career advancement in academic medicine. “Self-reflection will inevitably guide many leaders to the conclusion that good enough is not good enough,” Ross Zafonte, DO, chair of the Department of Physical Medicine and Rehabilitation at Spaulding Rehabilitation Hospital, Harvard Medical School and chief of Physical Medicine and Rehabilitation at Massachusetts General Hospital, is quoted as saying in the Be Ethical campaign (Silver, 2018). As the Be Ethical campaign describes, addressing gender equity in terms of pay, sexual harassment, gender-related myths and bias, inclusive culture and physical space, speaking opportunities, and sponsorship to leadership roles is an ethical necessity. Medical societies must act to address inequities in awards (Silver et al., 2017), speaking opportunities (Mehtra et al., 2018), and invited authorships in affiliated journals (Silver et al., 2018) because these are critical metrics that contribute to promotion. Funding is, of course, also critical to the success of women engaged in research (Maqua et al., 2017), and funding organizations must address barriers and/or bias.

Are you involved in departmental leadership and wondering what you can do to facilitate positive change? The Be Ethical campaign puts forward the following 6-step process:

1. Examine gender data through the lens of your organization's mission, values, and ethical code of conduct.
2. Report the results transparently to all stakeholders.
3. Investigate causes of disparities.
4. Implement strategies to address disparities.
5. Track outcomes and adjust strategies as needed.
6. Report/publish results.

Are you a stakeholder or emerging leader and wondering what you can contribute? You can join us in professional advocacy by respectfully sharing information about the Be Ethical campaign with

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^{*} Corresponding Author:

E-mail address: allison.larson@bmc.org.

others. You can also speak up and raise awareness when you see biased behavior or patterns. The procedure detailed earlier was designed for those in leadership roles to affect cultural change; however, the investigation and reporting of disparities and outcomes can be carried out by anyone, resident or attending. We should all encourage each other to Be Ethical.

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