

## Impact of gender on requests for ASGE leadership assignments

Audrey H. Calderwood,<sup>1</sup> Brintha K. Enestvedt,<sup>2</sup> Rebecca DeVivo,<sup>3</sup> Colleen M. Schmitt<sup>4</sup>

Boston, Massachusetts, USA

**Background and Aims:** Committee membership in gastroenterology national societies is considered prestigious, opening the door for leadership roles and professional advancement. Some have hypothesized that women ask for leadership opportunities less frequently than men. Our aim was to examine the gender representation of requests for placement on an American Society for Gastrointestinal Endoscopy (ASGE) committee.

**Methods:** We analyzed deidentified records of all requests for assignment to ASGE committees from 2011 to 2014, including applicant's gender, prior service to ASGE, year of application, and whether the applicant was appointed. The primary outcome was the proportion of requests from women compared with the overall ASGE female membership.

**Results:** There were 513 requests for ASGE committee appointments; 101 (20%) were from women, exceeding the active ASGE female membership (15%;  $P = .004$ ). Overall, the total number of committee requests increased over time from 89 to 195 ( $P = .08$ ); the proportion of requests from women remained stable at 16% to 21% ( $P = .51$ ). Compared with men, women were significantly less likely to have had previous ASGE service (28% vs 42%;  $P = .01$ ) and more likely to have a statement of endorsement from a mentor (33% vs 24%;  $P = .06$ ). The rate of appointment to a committee was 47% (95% confidence interval [CI], 41-52) overall, 42% (95% CI, 37-48) for male applicants, and 65% (95% CI, 54-76) for female applicants. Female gender (odds ratio [OR] 2.6; 1.5-4.5), endorsement from a mentor (OR 3.4; 2.1-5.6), and prior ASGE service (OR 2.3; 1.5-3.5) predicted committee appointment.

**Conclusions:** For ASGE committee appointments, it appears that women who make requests are successful in receiving these appointments. Future work should evaluate requests and appointments by gender among other gastroenterology societies and explore whether service translates into leadership opportunities for women. (Gastrointest Endosc 2016;83:730-3.)

The proportion of women in the field of medicine, including gastroenterology, is increasing. In 1972, only 9% of medical school graduates were female, compared with 40% by 1996.<sup>1</sup> Since 2005, women have comprised nearly 50% of medical school graduates.<sup>2</sup> Over the last 30 years, the proportion of women entering

gastroenterology fellowships has tripled, increasing from 11% in 1992 to 33% in 2012.<sup>3,4</sup> Despite these advances, however, the percentage of women in leadership positions remains low.<sup>5,6</sup> Within academic medicine, only 20% of professors and 32% of associate professors are women.<sup>6</sup> Female professors make up

*Abbreviations:* ASGE, American Society for Gastrointestinal Endoscopy; CV, curriculum vitae.

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Current affiliations: Section of Gastroenterology, Boston University School of Medicine, Boston, Massachusetts (1), Division of Gastroenterology, Oregon Health & Science University, Portland, Oregon (2), American Society for Gastrointestinal Endoscopy, Downer's Grove, Illinois (3), Galen Medical Group, Chattanooga, Tennessee (4).

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Reprint requests: Audrey H. Calderwood, MD, MS, FASGE, 85 East Concord Street, Room 7724, Boston, MA 02118.

If you would like to chat with an author of this article, you may contact Dr Calderwood at [audrey.calderwood@bmc.org](mailto:audrey.calderwood@bmc.org).

only 5% of all full-time faculty at U.S. medical schools, compared with male professors, who make up 19% of all full-time faculty. Similarly, women hold fewer leadership positions; only 22% of division or section chiefs, 14% of department chairs, and 12% of medical school deans are women. Although the specific factors accounting for the low rates of women in leadership roles in medicine remain unclear,<sup>7</sup> some have hypothesized that women may ask for leadership opportunities less often than men.<sup>8</sup>

Committee membership in gastroenterology national societies is considered prestigious, opens the door for leadership roles, and contributes to the development of a national reputation, promotion within an academic institution, and overall professional advancement.<sup>9</sup> A review in 2007 found that women occupied 11% of top gastroenterology society leadership (defined as president, past-president, president-elect) and editorial boards (defined as editor, co-editor, editor-in-chief).<sup>9</sup> This rate was on par with the proportion of women in gastroenterology at the time. Given that committee work and its contributions are factors that may help identify individuals for society leadership, we sought to examine whether women make requests for such appointments. There are no existing data on the rates of requests and appointments by gender for committee membership within professional medical societies. Therefore, the aim of this study was to examine the gender representation of requests for placement on an American Society for Gastrointestinal Endoscopy (ASGE) committee.

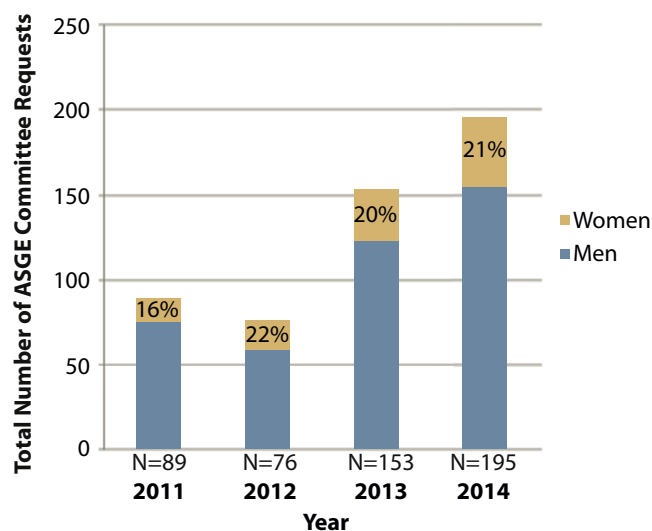
## METHODS

### Setting

The ASGE is a not-for-profit organization dedicated to advancing patient care and digestive health by promoting excellence and innovation in GI endoscopy. The ASGE has 24 committees with specific charges. Members may apply to serve on a committee by self-nomination and have the option of including a curriculum vitae (CV) and having a mentor write a letter of recommendation. The ASGE president-elect then selects nominees for committee appointment for up to a 3-year term.

### Approach and variables

Deidentified records of all requests for assignment to ASGE committees from 2011 to 2014 were analyzed. Data included applicant gender, whether a CV was included with the application, prior service to the ASGE, supporting mentor endorsement, gender of mentor, year of application, and whether the applicant was subsequently appointed to a committee. Applicant and mentor gender were identified by personal knowledge of the applicant by one author (C.M.S.), by



**Figure 1.** Number of American Society for Gastrointestinal Endoscopy committee assignment requests between 2011 and 2014 by year and the proportion of requests from women versus men. There was no significant increase in the proportion of requests from women over time ( $P = .51$ ). ASGE, American Society for Gastrointestinal Endoscopy.

self-identification, or by evaluation of the applicant's CV or on-line resources, including institutional materials available on-line.

## Outcomes

The primary outcome was the proportion of requests from women compared with the overall ASGE female membership. An additional outcome was the identification of independent predictors of successful appointment, including applicant gender, inclusion of CV or mentor support with application, gender of mentor, and prior ASGE service.

## Statistical analysis

We performed descriptive statistics, reporting frequencies, and proportions with 95% confidence intervals (CIs) where appropriate. Categorical variables were compared by using a chi-square test or Cochran-Armitage test for trend where appropriate. Univariable logistic regression was used to evaluate the association between a single predictor and the likelihood of appointment to a committee. Multivariable logistic regression was used to model the likelihood of appointment to a committee, accounting for variables significant in univariable analysis. In terms of sample size consideration, we sought to include all available requests over the most current 3-year period. We estimated that with 500 total requests, any point estimate of frequency would have a 95% CI of  $\pm 0.04$ , which would provide adequate precision. This study used deidentified data that did not contain any Health Insurance Portability and Accountability Act-protected information and thus was considered exempt from institutional review board review.

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