

Women Urologists: Trends in Mentoring and Career Choices

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Abstract

Introduction: We examined trends in the mentorship and career choices of women urologists.

Methods: An anonymous electronic survey was distributed to 1,563 women urologists in January 2015. Descriptive data are presented as the percent and mean.

Results: Of the 1,563 emails sent 365 surveys were completed for a 23% response rate. Practicing women urologists were most likely to be in academic practice (85 of 218 or 39%) or group practice (96 of 218 or 44%). Of 215 women urologists 108 (almost 45%) held a traditional academic rank of professor, associate professor or assistant professor. Of practicing female urologists 52% had completed fellowship training. In the early 1990s a traditional academic rank was held by 22% to 31% of women compared to 44.6% in the current study. Fellowship trained women urologists were more likely to hold a traditional academic rank ($p < 0.001$). Nonfellowship trained women urologists were as likely to work more than 50 hours per week as those who were fellowship trained ($p = 1$). Compared to practicing urologists current trainees were more likely to have another female urology resident in the program during training as well as a female attending (each $p < 0.001$). There was no difference between trainees and those in practice with respect to being mentored during training ($p = 0.6$). Most trainees and practicing urologists reported being a mentor to younger women in urology ($p = 0.5$).

Conclusions: Women urologists have a high rate of fellowship training and more women are attaining academic rank and pursuing academics. Mentoring in urological training is improving. However, there is a continued need for women urologists to ascend to leadership positions in training programs and urological societies to more accurately reflect the changing membership of urologists as a group.

Key Words: urology; physicians; women; mentors; faculty, medical; fellowships and scholarships

Abbreviations and Acronyms

AUA = American Urological Association

SWIU = Society for Women in Urology

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The first study characterizing women in urology showed that in 1995 the national ratio of male to female physicians overall was 4:1 but a staggering 84:1 in urology.¹ Only 4.2% of urology residents were women and only 1.2% of board certified urologists were women. Of the 18,172 AUA members 1,467 (8%) were women as of January 2012, which increased almost 10% to 1,833 women of all 18,184 members in 2 years.² In 2014, 7.7% of practicing urologists were women.³

Mentoring has been associated with numerous positive outcomes, including knowledge, support, guidance, professional identity, improved adjustment and positive career attitudes.⁴ Many believe that mentoring is critical in academic medicine and it should be available to all who pursue this career path.⁵ Professional progress is faster for female academic surgeons with the help of mentorship.⁵ Studies have shown that female surgeons believe that it is important to have female mentors.⁶ In addition, while a mentor of either gender is important for career advancement, a female mentor may offer more personal advice and a different mentoring experience than a male mentor.

Despite the importance of mentoring to female surgeons mentoring in urology has been reported as generally poor in prior studies. In 1995, 59% of women reported having male mentors while 35% had no mentors at all. The increase of women in medicine has not translated into an increase of women in leadership or mentoring positions as women comprise only 14% of tenured faculty and 12% of full professors.⁷ AAMC (American Association of Medical Colleges) recently concluded that “many women are not finding mentors in or are discouraged from entering surgical fields, raising questions about whether women enjoy the same access as men do to the full range of specialty choice opportunities.”⁸ Recent efforts have been made by the creation and efforts of SWIU and AMA (American Medical Association) to improve this.

Given the increasing number of women entering urology training and practice, we sought to characterize the career choices and patterns of women urologists and compare mentoring experiences between trainees and practicing urologists.

Materials and Methods

After receiving institutional review board approval we distributed an anonymous electronic survey of 46 questions to all members of SWIU, and all female members and candidate members of AUA who were not listed in the SWIU membership. This population comprised female residents, fellows and practicing urologists. The survey was distributed in January 2015 and information was collected

between January and February 2015. Survey items were initially selected using prior surveys of women surgeons and urologists as a reference. The nonvalidated survey was then revised by 2 urology residents and 2 practicing urologists to ensure that relevant data points were captured. Demographic information, practice details and attitudes toward work-life balance and mentorship experience were collected. Statistical analysis was performed using the t-test for continuous variables and the chi-square test for dichotomous data with $p < 0.05$ considered significant.

Results

E-mails with a link to our survey were sent to 1,563 women urologists, including residents and fellows, of whom 1,243 were SWIU members and 320 were nonSWIU AUA members or candidate members. Of the 1,563 surveys sent 365 were completed by American women urologists for a 23% response rate. For study purposes the 215 practicing women urologists (58.9% of the population) were considered the 183 who answered that they were board certified and the 32 who answered that they had finished training but were not yet board certified. All those who answered that they were a current resident, a current fellow or retired were considered nonpracticing urologists. The 119 current residents and the 27 current fellows (total 146 or 40% of the study population) were considered trainees, representing 41% of all 354 female trainees in the United States.

The average age of all participants was 39 years (range 25 to 73) (fig. 1, A). The majority of respondents were white, although all races were represented (fig. 1, B). Practicing urologists had an average age of 44 years (range 32 to 65) while trainees were an average of 31 years old (range 25 to 47). Practicing women urologists were most likely to be in academic practice (85 of 218 or 39%) or group practice (96 or 44%), followed by hospital employed practice (19 or 8.7%), solo practice (5 or 3.3%), military (11 or 5%) and other (2 or 1%) (fig. 2).

When considering any academic rank, including professor, associate professor, assistant professor, clinical instructor,

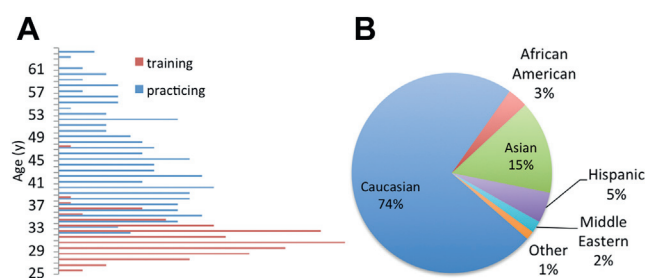


Figure 1. Study participants. A, age distribution. B, race distribution.

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