

Recommendations for Addressing Gender Inequity Issues At Yale Medical School

submitted for discussion by the senior women faculty of the YMS

The Senior Women Faculty members of the Yale University School of Medicine are concerned that there continue to be considerable impediments to progress for women in their pursuit of successful academic careers. In addition, there are continued difficulties experienced by the School in recruiting and retaining senior faculty women. We believe that the reasons for these difficulties include salary inequity, space and resource inequity, and an environment that is often unreceptive to women faculty. In an effort to remediate these issues, we present the following proposals:

1. Salary Equity

The Senior Women Faculty members of the Yale University School of Medicine are aware of longstanding problems with salary equity. As tenured faculty members, we are committed to seeing these problems addressed, not just for ourselves, but for female faculty at all levels.

The Committee on the Status of Women in Medicine has documented salary discrepancies by gender for seventeen years in its annual reports. The consistent trend of these data provides evidence of a longstanding problem with salary equity. Last year, an analysis of salaries was carried out by the Dean's office with the Office of Institutional Research on a much-improved database. This study demonstrated that being female was a statistically significant factor that correlated negatively with salaries when comparisons were made by degree, rank, department, age and seniority. Importantly, inequities were found across the salary spectrum, and these discrepancies were not explained by research or clinical productivity. The degree of discrepancy may vary by department but any discrepancy is of concern to us all.

Consequently, we suggest that the following steps are necessary to address existing problems:

- a) There should be an immediate correction of salary inequity by gender. We believe that the twenty years of data provide a significant body of evidence that requires action now. All salary inequities should be remedied by July 1, 2000. We request the establishment by March 1, 2000 of an arbitration panel that will review and document achievement of parity. This panel will prepare a summary document that will be reviewed by the Committee on the Status of Women in Medicine. Individual women who are identified by the panel as having inequities should be informed.
- b) Women who have suffered pay inequities for years need to be compensated for past inequities. Restitution for past inequities includes back pay and the accrued value of TIAA-CREF contributions on that back pay. We propose that the arbitration panel noted above also be empowered to formulate a plan for restitution of back pay and TIAA-CREF contributions for women with salary inequities documented in 1998, 1999, or earlier. Restitution should include at least the 2-year period 1/1/98-1/1/00. All women employed as faculty members during that time should be included whether employed at Yale or elsewhere at the time restitution is made.

- c) To ensure that salary inequity does not occur in the future, we request the establishment of a new mechanism for automatic annual review of salaries, supplements and bonuses including promotion increases and recruitment packages. (see 3.a.1 below) The person or body carrying out the review should be empowered to enforce salary adjustments and ensure that no retaliation is suffered by those whose salaries are adjusted.

2. Space and Resources

The availability of adequate space is mandatory for a successful academic career. Previous study of the space data generated in 1998 indicated no gender-based inequities in space allocation. However, the validity of that study is questionable because, for example, inadequate distinction was made between clinical service and research laboratory space. Furthermore, the Committee on the Status of Women in Medicine has been informed of apparent inequities in space allocation on an individual basis, which reinforces our concern that the previous analysis was inadequate.

Consequently, we request the following:

- a) There should be a timely reevaluation of the allocation of space to all members of the faculty. This includes an assessment of the quantity, quality, and location of laboratory and office space. Faculty members (of both genders) who understand the nature of the activities within the space should verify the data and agree upon criteria for allocation of space.
- b) Inequities of space must be corrected quickly despite the well-recognized limitations on availability of space within the medical center. While waiting for new space to be created or renovated, appropriate swing space must be made available to provide an equitable environment to support the success of women faculty. Additionally, renovations of substandard laboratory and office facilities for women faculty should be a priority. Furthermore, women should be adequately represented (e.g. by square footage) in any new research space, including the new Clinical Research building.
- c) A mechanism for automatic review of space issues for both established faculty and newly recruited faculty should be initiated. A committee with adequate representation of female faculty should conduct such a review on a regular and timely basis.

3. Infrastructure

The senior women would like to express their concern over the limited progress that has been made in increasing the number of senior women on the faculty. We feel that this reflects the broader problem that the academic atmosphere at the Medical Center limits rather than facilitates women's careers. This atmosphere is perpetuated by a minimization of the role of women on critical committees within the school. In addition, the absence of adequate mentoring for *all* junior faculty accentuates the isolation of many junior faculty women. Finally, there is an inadequate oversight of potential gender-based discrimination issues.

Consequently, we request the following:

- a) The school should strengthen the Office of Women in Medicine (OWM) by the addition of a tenured senior woman faculty member who would be a member of the administration at the level of an associate dean. This associate dean would be appointed based on recommendations by the senior women faculty and would serve a renewable 3-year term; she would receive 50% salary support and a budget for infrastructure. Duties of this senior woman faculty member would include:
- (1) Meeting yearly with the department chairs and conducting an evaluation of the salaries of faculty members prior to their finalization as well as an evaluation of space assigned to each faculty member.
 - (2) Supervising the timely and fair settlement of grievances.
 - (3) Establishing a mentoring program for young faculty members.
 - (4) Overseeing academic development of faculty members.
 - (5) Serving as liaison to the Faculty Affairs Office with regard to appointments and promotions.
 - (6) Reviewing the actions and composition of search committees.
 - (7) Reviewing offers given to potential new faculty members.
 - (8) Reviewing counteroffers given to faculty members with job offers at other institutions.
 - (9) Meeting at least annually with the senior women faculty.
 - (10) Participating in the panels for external review of department chairs.

This associate dean would report to the Dean of YMS, and would meet yearly with the Dean, Provost, and President of the University. This individual would also provide a written annual report to be presented to the Administration and to the faculty.

- b) The Yale grievance policy should be reviewed and enforced. Faculty or administrators with a credited grievance against them of sexual harassment or gender bias should not be appointed to or maintained in administrative positions.
- c) Demonstrated commitment to gender equity should be a positive criterion for appointment to administrative positions within the medical school
- d) Search committees should be chaired by women at least 20% of the time and women should comprise at least 20% of committee members.
- e) A prime objective of the Dean's Office should be to include women in the critical decision-making bodies within the School. When task forces and committees are formed, and when external reviews of department chairs occur, the committees should include a significant and representative number of women (at least 20%), and a significant number of the committees should have women as chairs (at least 20%).

We appreciate recent efforts to establish salary equity within the School. As you know, the tenured women represent an important strength of the faculty as leaders in their respective fields. We urge you to work with us to address and resolve gender inequity issues in an effort to make the Medical Center a place that supports women in their pursuit of their academic careers.

