

Women representation in dermatology residency program leadership: A cross-sectional study

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Introduction

Women in dermatology training programs now outnumber men.¹ Despite making up the majority of trainees, a gender gap persists within dermatology faculty and leadership positions.¹ Women have been historically underrepresented in academic dermatology as chairmen, dermatology residency program directors, and dermatology fellowship program directors. For instance, in 2016, women were underrepresented as academic dermatology chairs, dermatology program directors (PDs), dermatologic surgery PDs, and dermatopathology PDs.^{1,2} Several reasons for this inequality have been proposed including child bearing, home/familial responsibilities, lack of proper mentorship, implicit bias, and unequal compensation for a given position. Our study aimed to determine whether this inequality has persisted as of 2021, or if any improvements have been made in the academic dermatology leadership gender gap.

Aims and Objectives

The goal of our study was to reevaluate the state of the disparity within academic dermatology leadership to determine if any increases have been made given the increased scrutiny to expand gender diversity in medicine and dermatology.

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Methods

To evaluate representation of women in leadership positions, we conducted a cross-sectional observational study in August 2021 of dermatology departments accredited by the Accreditation Council for Graduate Medical Education (ACGME). The ACGME and official department websites were used to identify accredited dermatology residency programs (n = 142), dermatopathology fellowships (n = 58), and micrographic surgery and dermatologic oncology fellowships (n = 74). Data were obtained from the American Board of Dermatology website to identify pediatric dermatology fellowship leadership (n = 38). The gender expression of dermatologic leaders was obtained through official department websites and department coordinators.

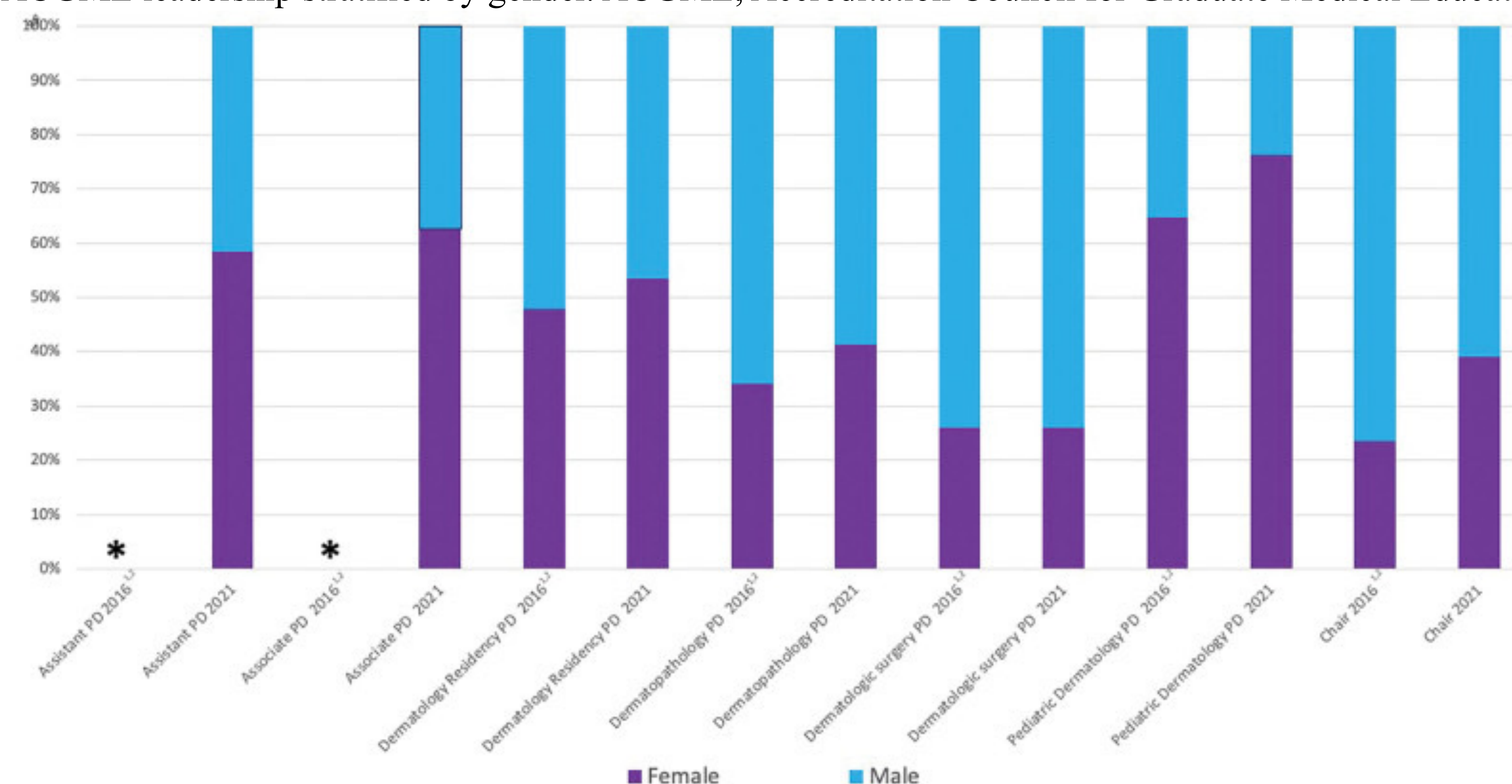
Results

Our results demonstrate that women make up 53.5% (76/142) of dermatology residency PDs, 62.6% (42/67) of associate PDs, and 58.3% (14/24) of assistant PDs. Notably, women are least represented as program chairs, making up 39.0% (48/123) of chairs. Within fellowship program leadership, women make up 41.4% (24/58), 26.0% (19/73), and 76.3% (29/38) of PDs in dermatopathology, micrographic surgery, and pediatric dermatology, respectively (Fig.1).

Conclusions

Previous research shows that in 2016, women made up 48% of PDs, 23% of chairs, 26% of dermatologic surgery PDs, 34% of dermatopathology PDs, and 64% of pediatric dermatology PDs.^{1,2} Comparatively, our study demonstrates no change in female representation for dermatologic surgery PDs, but showed an increase in all other leadership positions described. Despite this increase, women remain underrepresented, particularly in leadership of dermatopathology and dermatologic surgery fellowships. This disparity is reflective of the general trend in surgery and pathology leadership nationally.^{3,4} Furthermore, utilizing data from 2012 to 2014, Qiu et al.⁵ showed that diversity in academic dermatology faculty decreases significantly with increasing faculty rank. Our data mirror this sentiment by demonstrating a majority of women in assistant and associate PD positions, with a minority of women chairs. Further investigation is necessary to determine the implications of this disparity with regards to financial compensation, burnout rates, and time commitments required for differing levels of leadership. Limitations of this study include its cross-sectional nature and the inability to identify individuals with varying forms of gender expression using department websites. Despite these limitations, our study demonstrates an overall increase in women's representation within academic dermatology leadership, while identifying a persisting disparity within dermatologic pathology, surgery, and chairman positions from 2016 to 2021.

Fig. 1. ACGME leadership stratified by gender. ACGME, Accreditation Council for Graduate Medical Education.



References

- Nambudiri VE, Shi CR, Vleugels RA, et al.. Academic dermatology leadership in the United States -- addressing the gender gap. *Int J Womens Dermatol* 2018;4:236-7.
- Shi CR, Olbricht S, Vleugels RA, et al.. Sex and leadership in academic dermatology: a nationwide survey. *J Am Acad Dermatol* 2017;77:782-4.
- Rakestraw SL, Chen H, Corey B, et al.. Closing the gap: increasing female representation in surgical leadership. *Am J Surg* 2022;223:273-5.
- Lipscomb MF, Bailey DN, Howell LP, et al.. Women in academic pathology: pathways to department chair. *Acad Pathol* 2021;8:23742895211010322.
- Qiu M, Bae GH, Khosravi H, et al.. Changes in sex and racial diversity in academic dermatology faculty over 20 years. *J Am Acad Dermatol* 2016;75:1252-4.