



FOCUS ISSUE – Celebrate Diversity with the AUA

Promotion Equity for Women in Urology: A Path Forward



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The 2019 AUA Census reflected the growing number of women entering the field of urology, representing 9.9% of the workforce in 2019 (compared with 7.7% in 2015).¹ Despite these encouraging trends, women remain underrepresented in senior faculty roles in urology, journal editorial leadership and in organized urologic societies. As of 2019 only 6 chairs or division chiefs (4.5%) of 133 accredited U.S. urology training programs are women (compared to other fields in which women comprise 14% of department chairs across specialties).²

The observed disparity in academic promotion for women likely has many causes. While promotion timelines lag, especially for early career women, it is unclear which factors contribute most. The lag is not related to women working less. Our group used 2014 AUA Census data and found that, after adjusting for age, practice type, subspecialty, and inpatient operations performed, there was no difference in hours worked between women and men (beta-coefficient -2.8 , 95% confidence interval -6.4 to 0.7 , $p=0.12$).³ Women may disproportionately perform more clinical, administrative, and/or teaching roles, leaving less time to write publications or grants. This work may

not always lead to quantifiable or recognized productivity outcomes for promotion.

Women have the same average number of nonclinical hours and fewer clinical hours, but less publication productivity according to Mayer et al.⁴ Weiss et al showed that the contributions of women authors is outpacing their entry into urology, yet, on average, women faculty appear to publish less than men.⁵ In our paper addressing differences in promotion, urologists having 18 hours or more of nonclinical working time had faster promotion times on average (5.5 years) compared to those with 9–17 nonclinical hours (6.5 years) or those with less than 8 nonclinical hours (6.7 years; $p=0.011$).^{6,7} Based on a question from the 2018 AUA Census, women urologists bear more of the daily family responsibilities than men urologists.¹ With extra family care duties, women may have reduced time available for paper and grant writing. This disparity is more likely to exist in clinical and academic settings that are heavily RVU (relative value unit) based, in which there may be a lack of dedicated research time.

The pipeline effect may also play a role in the lack of women in leadership positions. Simply stated,

as one progresses up the pipeline of academic urology, there are fewer women in existence at that level. This will undoubtedly change over time as more and more women enter the field of urology. In fact, in 2021 women represented 34% of successfully matched candidates in urology. Efforts are underway to encourage women—and even girls as young as grade school age—to enter the fields of science and medicine. Ultimately, we will hopefully see more women in positions of leadership in academic urology as more women enter the “pipeline.” As these women progress in their careers, there is a need for institutions to establish equitable family leave, opportunities for promotion that reflect clinical/administrative/teaching roles, and mechanisms to reduce pay gaps between men and women in urology.²

Many of us believe that we don’t have the time to wait for the pipeline effect to diminish. What can we do now to bring women into positions of leadership? Mayer et al showed that early-career female surgeons in academics who lack same-sex mentors and role models felt isolated and limited in career opportunities.⁸ However, the 6 women chiefs in urology surveyed felt that a lack of a female mentor was not a limiting factor for academic success.² They viewed as most important the mentors’ willingness to promote inclusion of women in a male-dominated field. These women also emphasized the need to distinguish between mentorship and sponsorship. Whereas mentoring consists of a “long-term relationship focused on supporting the growth and development of the mentee,” according to career mentor Toni Patterson, “sponsors are senior-level people with power and influence, who believe in your talent and skills and are willing to

stick their necks out to help you get key opportunities to advance your career.”^{9,10}

Leaders, both men and women alike, need both mentorship and sponsorship to advance academically. Awareness of the need to engage women in academic urological leadership is critical when recruiting for academic positions in urology, including editorial leadership and society positions. Seeking out diverse talent (sometimes outside of one’s more immediate academic circles) will only enrich our field by supporting the inclusion and promotion of women. ♦

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