

# Gender Differences in Work-Family Conflict Experiences of Faculty in Academic Medicine



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## INTRODUCTION

Women face disproportionate challenges<sup>1-3</sup> when striving to achieve “the absence of unacceptable levels of conflict between work and non-work demands.”<sup>4</sup> Little is known about the degree to which academic medical faculty’s work interferes with family, family interferes with work, family influences career progress, one partner’s career takes priority, or how this might differ by gender. To this end, we surveyed recipients of career development awards from the National Institutes of Health (NIH), since holding such grants indicates a baseline desire for promotions and other traditional forms of career success.

## METHODS

We conducted a postal survey in 2014 of recipients of new NIH K08 and K23 awards between 2006 and 2009.<sup>5</sup> We evaluated work interference with family and family interference with work using previously validated measures.<sup>6</sup> Interference scale values are between 1 (least) and 5 (most). We further analyzed perceptions about the influence of family issues on career progress and, among those with spouses/domestic partners (“partnered”), the partner’s employment status, relative importance of the respondent’s career versus the partner’s, and accommodations made by partners to support respondents’ careers and vice versa. SAS (version 9.4, Cary, NC, USA) was used to describe and compare responses by gender using multivariable logistic regression models that adjusted for grant type, year of award, funding institute, institution at the time of initial K-award, degree, and specialty. The University of Michigan IRB approved this study.

## RESULTS

Of the 1719 new recipients of a K-award from 2006 to 2009, 1066 responded to our 2014 survey (62%). Of these, 46.2% were females and 90.2% were partnered: 87.4% of women and

92.5% of men. The mean age was 43 years (SD, 4.3). Of those who were partnered, more women than men reported that their partner was working full-time (87.3% vs. 48.8%). Mean work interference with family score was higher for women (3.6, SD 0.9) than men (3.4, SD 0.8,  $p < 0.001$ ). Mean family interference with work score was also higher for women (2.1, SD 0.8) than men (2.0, SD 0.8,  $p = 0.04$ ).

Among those who were partnered, men were more likely than women to consider their careers more important than their partners (63% vs. 29%, Fig. 1,  $p < 0.001$ ). Women were more likely to have reduced their work hours (35.7% vs. 20.6%,  $p < 0.001$ ) or changed employment location (26.0% vs. 10.6%,  $p < 0.001$ ) to accommodate partners’ careers compared with male respondents. In contrast, women reported that their partners were less likely to have reduced their work hours (34.6% vs. 42.5%,  $p < 0.001$ ) or relocated to accommodate their careers (40.5% vs. 49.7%,  $p < 0.001$ ). Women were significantly more likely than men to report career disruptions due to relocation, child-rearing, partner’s career, elder-care, and other family disruptions but less likely to report disruptions due to financial problems (Fig. 2).

## DISCUSSION

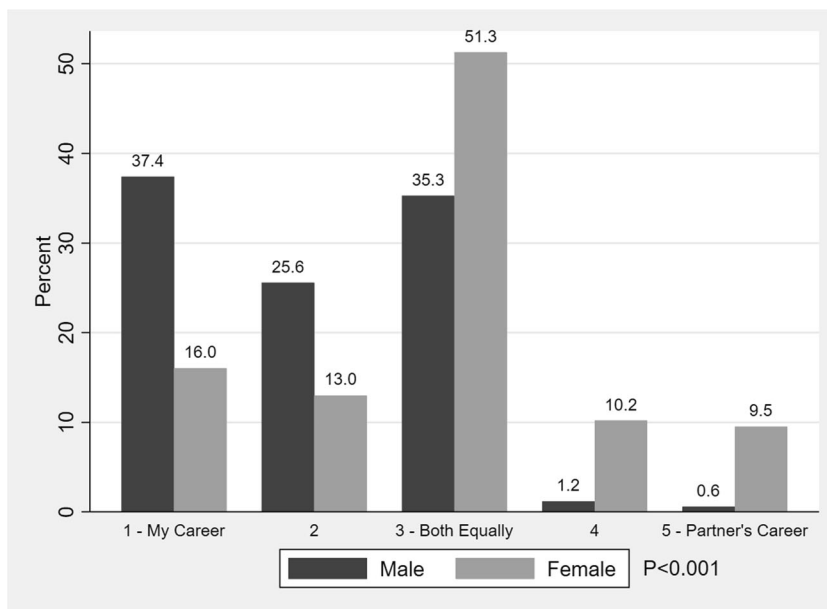
Women in academic medicine are more often than their male peers in relationships with partners who are employed full-time. Our findings suggest that career advancement of women is disproportionately affected by family demands, including child-rearing, elder-care responsibilities, and needs to accommodate a partner’s career. Moreover, women are more likely than men to make sacrifices to accommodate a partner’s career, like reducing work hours or moving; 20% of partnered women reported their partner’s career was more important than their own, compared to only 2% of men. Therefore, traditional routes to promotion and academic advancement such as seeking competing offers and relocation may be more difficult for women, and expectations of such can detrimentally affect their advancement.

Work interference with family levels in this sample (3.4 for men and 3.6 for women) appear qualitatively similar to those previously reported in a previous study of managers (3.3 for men and 3.7 for women),<sup>6</sup> whereas family interference with work levels (2.0 for men and 2.1 for women) appear more pronounced than in managers (1.7 for men and women).

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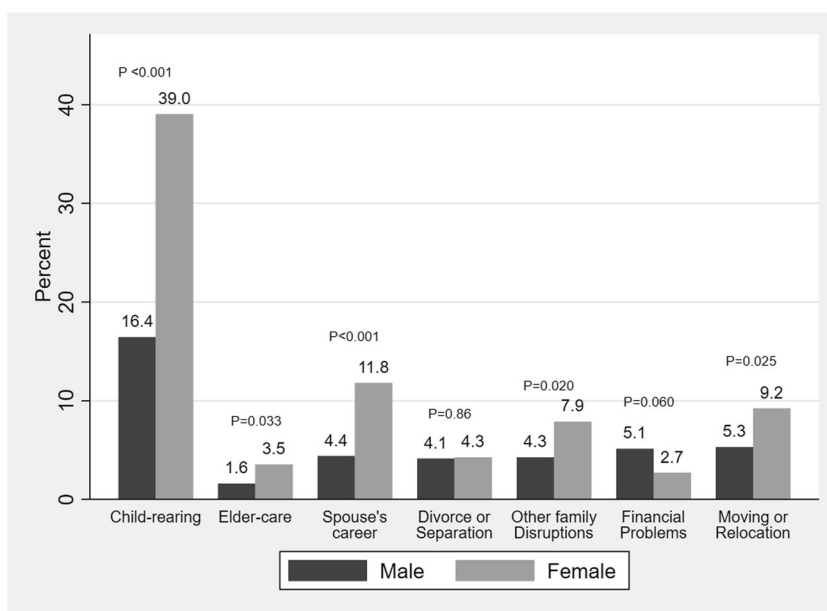
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**Figure 1** Among those married or having a domestic partner, this bar chart illustrates male and female responses to an inquiry seeking to evaluate the level of importance that is placed on the respondent's career compared with their spouse's/partner's. Item asked, "If you are married or in a domestic partnership, whose career is more important in the relationship?" Response options were as above, with the ends of the scale marked as "my career" and "partner's career" and midpoint marked "both equally."

Our study has limitations including the possibility of non-response bias and lack of information on partners' gender. We cannot determine whether these findings reflect freely willed choices within partnerships or reflect societal norms, such as expectations that women will partner with men whose careers will be prioritized. Nevertheless, to

optimize gender equity, retain professionals, and promote diversity that is essential for the vitality of the field, institutions should explore policies intended to reduce work-family conflict, like alternative promotions paths, particularly during a pandemic that has increased acuity and visibility of these challenges.



**Figure 2** Influence of family responsibilities on academic career trajectories. Among all participants, this bar chart illustrates male and female responses to the question, "Thinking back over your career until now, how much did each of the following slow the progress of your career?" Percentages are for the proportion of respondents who indicate the factor slowed the progress "a lot" or "a great deal."

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#### Compliance with Ethical Standards:

**Conflict of Interest:** Dr. Jagsi has stock options as compensation for  
 her advisory board role in Equity Quotient, a company that evaluates  
 culture in health care companies; she has received personal fees from  
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## REFERENCES

1. Jolly S, Griffith KA, DeCastro R, Stewart A, Ubel P, Jagsi R. Gender differences in time spent on parenting and domestic responsibilities by high-achieving young physician-researchers. *Ann Intern Med.* 2014;160(5):344-53. <https://doi.org/10.7326/M13-0974>
2. Strong EA, De Castro R, Sambuco D, et al. Work-life balance in academic medicine: narratives of physician-researchers and their mentors. *J Gen Intern Med.* 2013;28(12):1596-603. <https://doi.org/10.1007/s11606-013-2521-2>
3. Ferrante L, Mody L. Dual-physician households: Strategies for the 21st century. *JAMA.* 2019;321(22):2161-2.
4. Greenblatt E. Work/life balance: wisdom or whining? *Organizational Dynamics.* 2002;31(2):177-93.
5. Jagsi R, Griffith KA, Jones RD, Stewart A, Ubel PA. Factors Associated With Success of Clinician-Researchers Receiving Career Development Awards From the National Institutes of Health: A Longitudinal Cohort Study. *Acad Med.* 2017;92(10):1429-39. <https://doi.org/10.1097/ACM.0000000000001728>
6. Gutek BA, Searle S, Klepa L. Rational versus gender role explanations for work-family conflict. *J Appl Psychol.* 1991;76(4):560-8.

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