

Women in the UK academic workforce: a comparison with the NHS

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'Gender diversity in top management
is a characteristic of high
performing organisations'

Nicole Smentek 2004

How have women been disadvantaged?

- Under representation of women in RAE highest rated departments
- Women have been disproportionately excluded from the RAE
- Career breaks have not been taken into account
- Women's career advancement (recruitment and promotion) is linked to the RAE (hence salary etc)

Evidence presented to the House of Commons Select Committee on Science and Technology 2002

What aspects of the RAE have been identified to affect women?

- In the 2001 RAE males were almost twice as likely as females to be counted as research active
- There was a greater gender gap particularly in clinical medicine:

	Not research active	Research active	Ratio
females	1065	815	1:0.76
males	1825	2730	1:1.49

Association of University Teachers UK Academic Staff, 2002-3. 2004

How have women been disadvantaged?

- Women do more teaching than research hence do not achieve RAE status
- Data monitoring by gender in the RAE is not available because 'gender is not considered relevant to the assessment'
- Women's achievements do not get the same recognition as men

Evidence presented to the House of Commons Select Committee on Science and Technology 2002

'Women in Academic Medicine'

- 'I cannot get the first authored publications, because my boss is always first author on my studies.....I'm not feeling valued and I'm always being the second author, and it's quite difficult to see how to break through that barrier.'
- 'I've done lots and lots of work and it doesn't show on my cv..'

Focus group comments, BMA 2004

Overview

- Background
- Aims
- Clinical staffing data
- Comparison with NHS consultants
- Variability between medical Schools
- Barriers to be lifted

Aims

- To compare data on gender of staff in Medical Schools with those working in the NHS
- To compare gender differences in academic staff grades between Medical Schools
- To identify where data is lacking

Clinical Academic Staffing Data

- 2005 - 1st time gender data available
 - Clinical Academic Staffing Levels in UK Medical and Dental Schools: data update 2004 (www.chms.ac.uk)
- 2005 Medical Women's Federation request to CHMS for further data
 - Correspondence (MWF 2005)
- 2005 Recruitment and Retention of Academic Staff in Higher Education
 - NIESR Research Report 658
 - 'excluded those on clinical rates of pay'

Clinical Academic Staffing Data

- 2005 Clinical Academic Staffing Levels in UK Medical and Dental Schools: data update 2004 (www.chms.ac.uk)

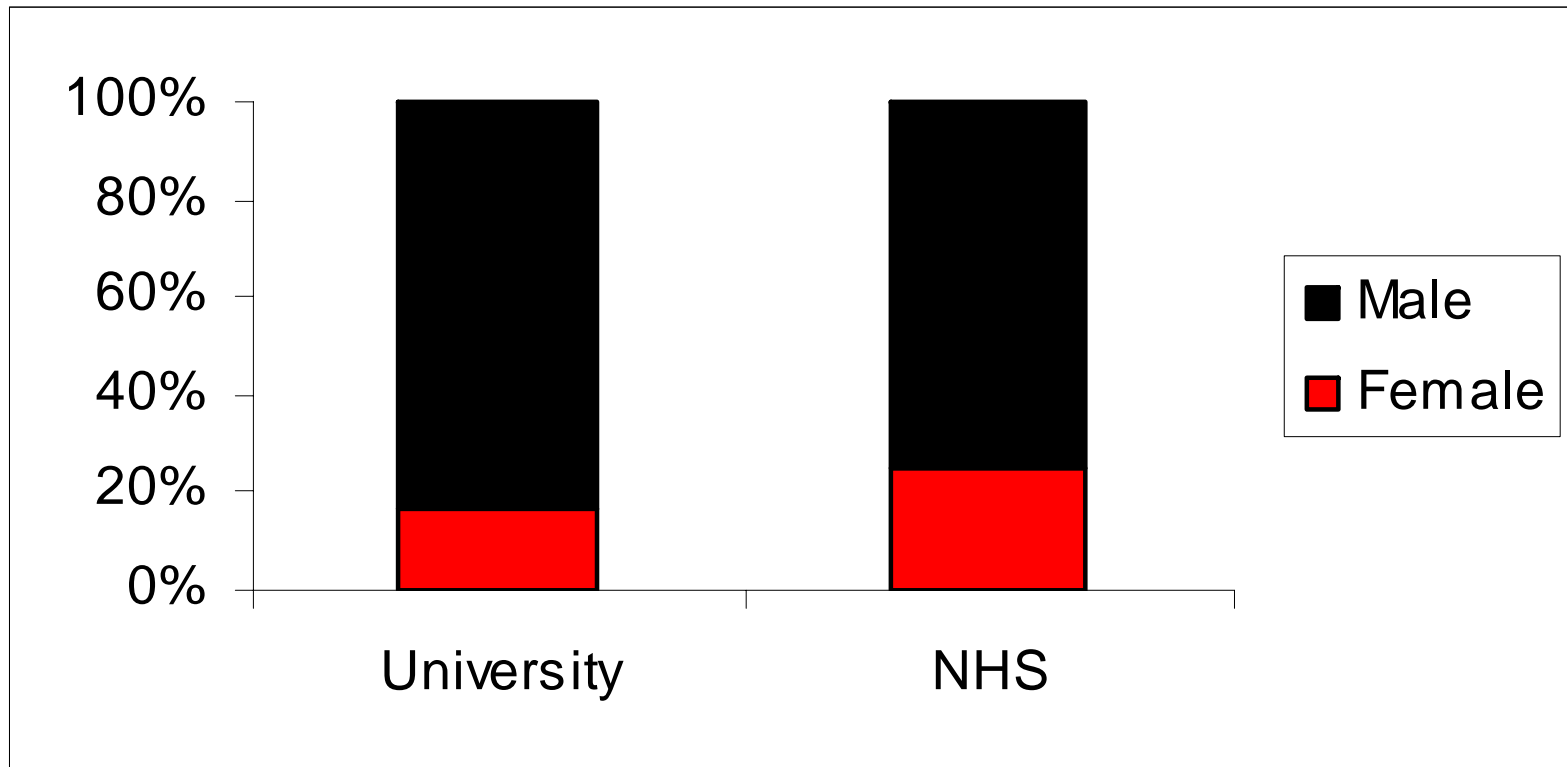
Results from 2000 to 2004:

- Decline in numbers of clinical academics (12% reduction)
- Only growth is in new medical schools
- Increase in numbers of medical students by 40%
- Recognised funding for academic posts from the NHS

Clinical Academic Staffing Data

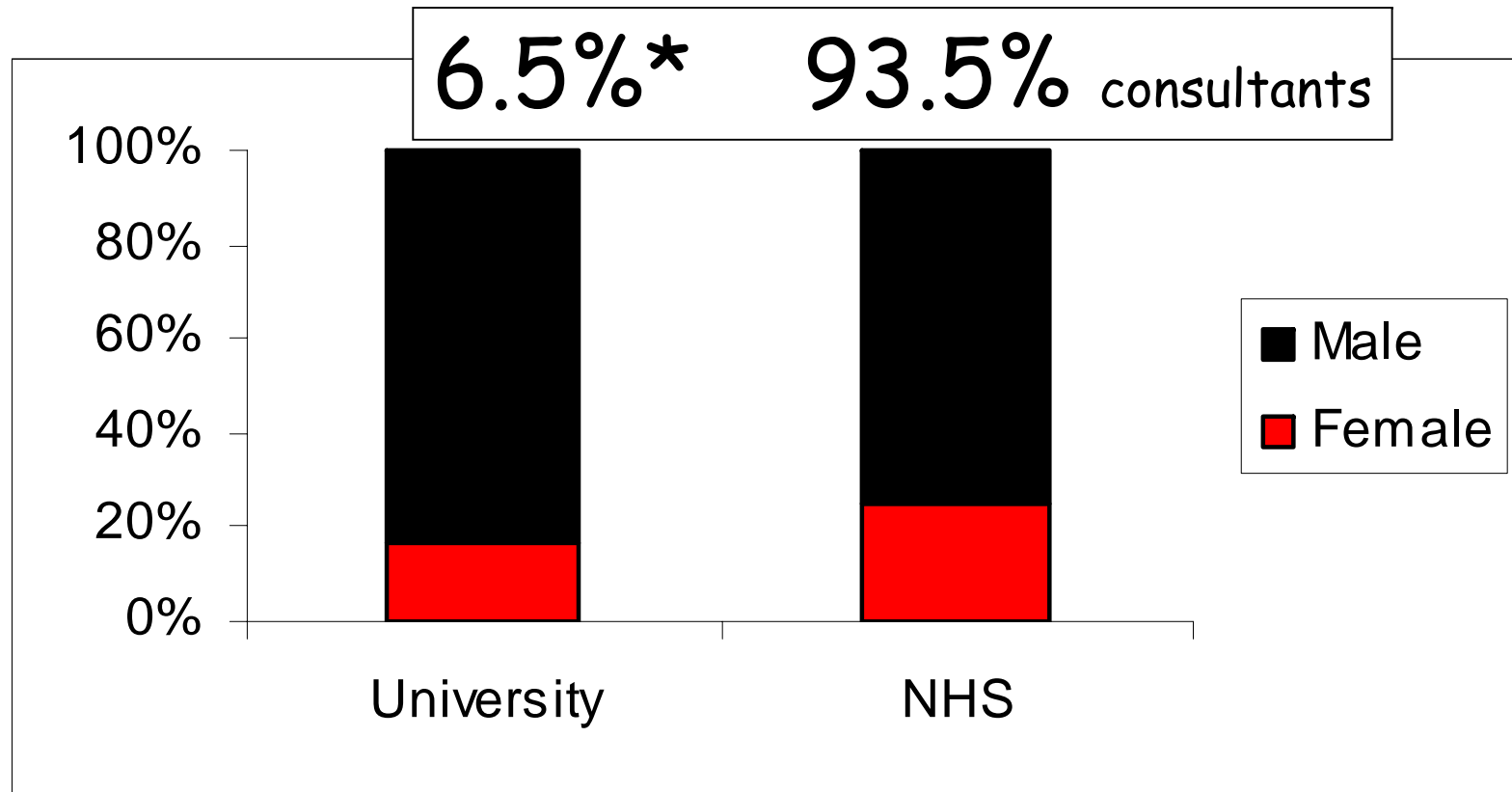
- 2005 Recruitment and Retention of Academic Staff in Higher Education
NIESR RR 658 'excluded those on clinical rates of pay'
- **'women face difficulty in obtaining promotion' - why?**
 - Research output less (more teaching; career breaks)
 - Compounded by RAE
 - Less mobility
 - Part time and flexible working is not available
 - Age structures prevent achievement
 - 'Like' selects like

Consultants in the NHS (England)* and UK Medical Schools (MWF2005)



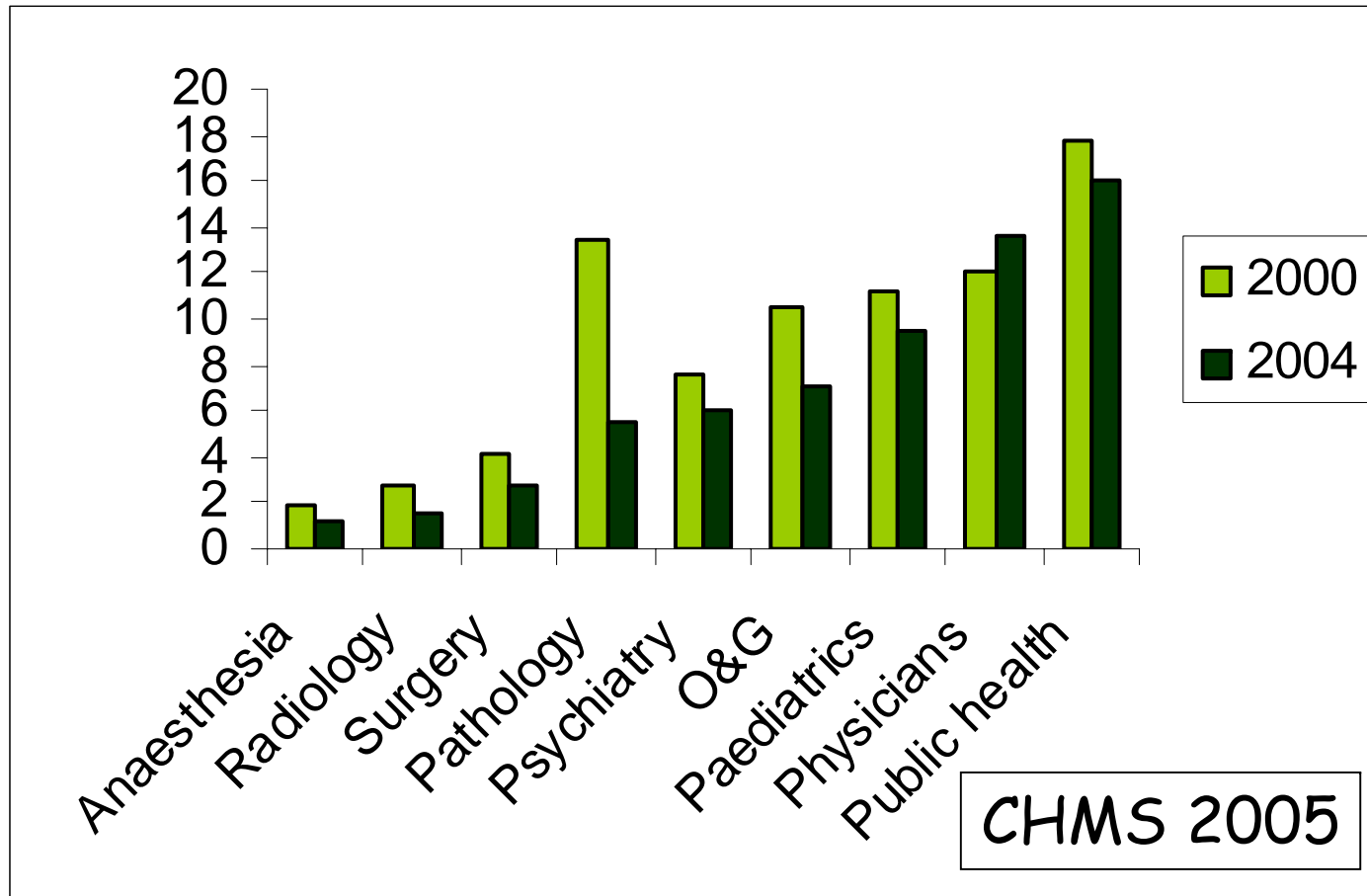
*Department of Health website accessed Oct 2005

Consultants in the NHS (England)* and UK Medical Schools

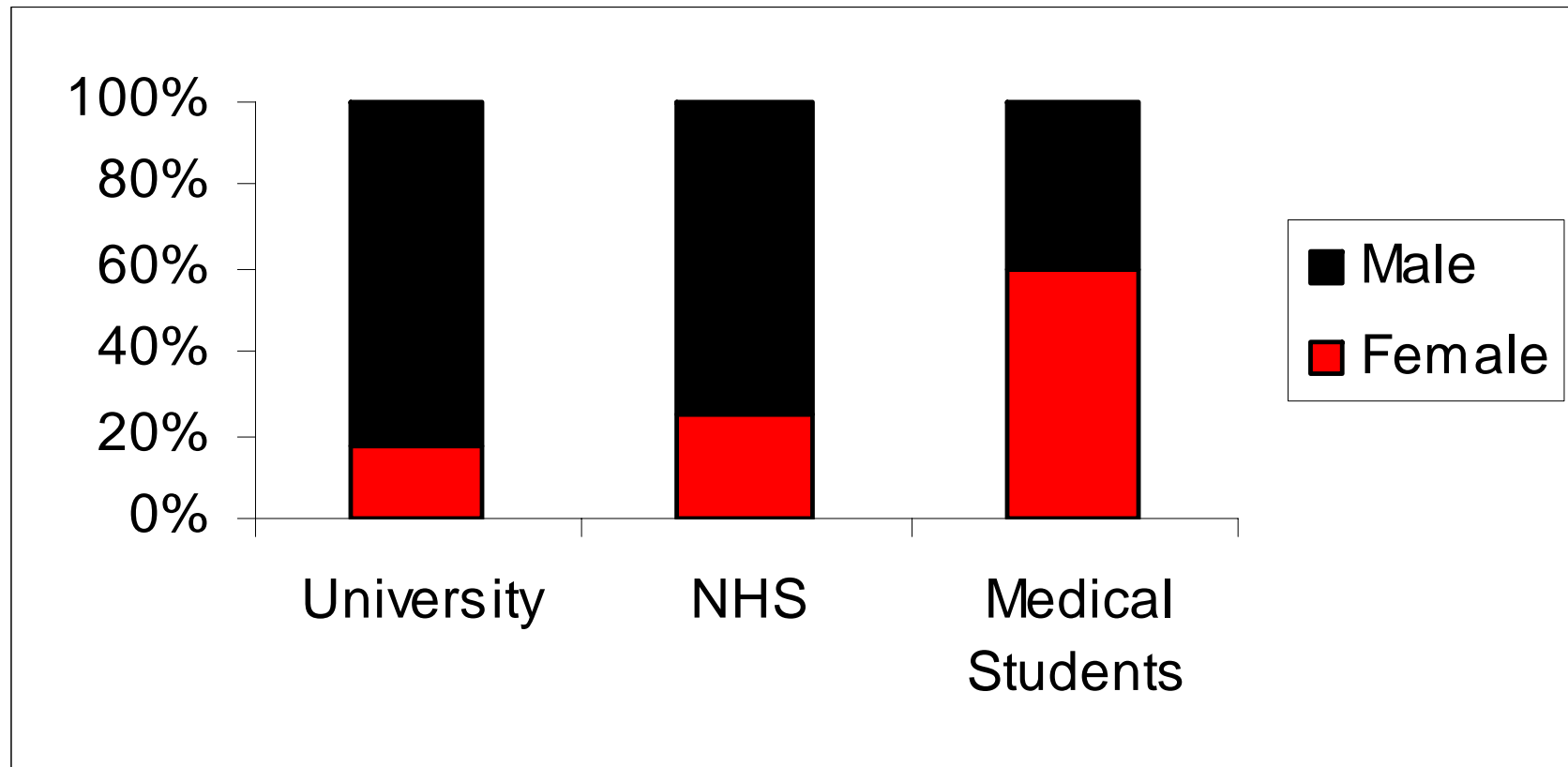


*Variation from <2% in anaesthesia to 16% in public health

% Consultants who are academics

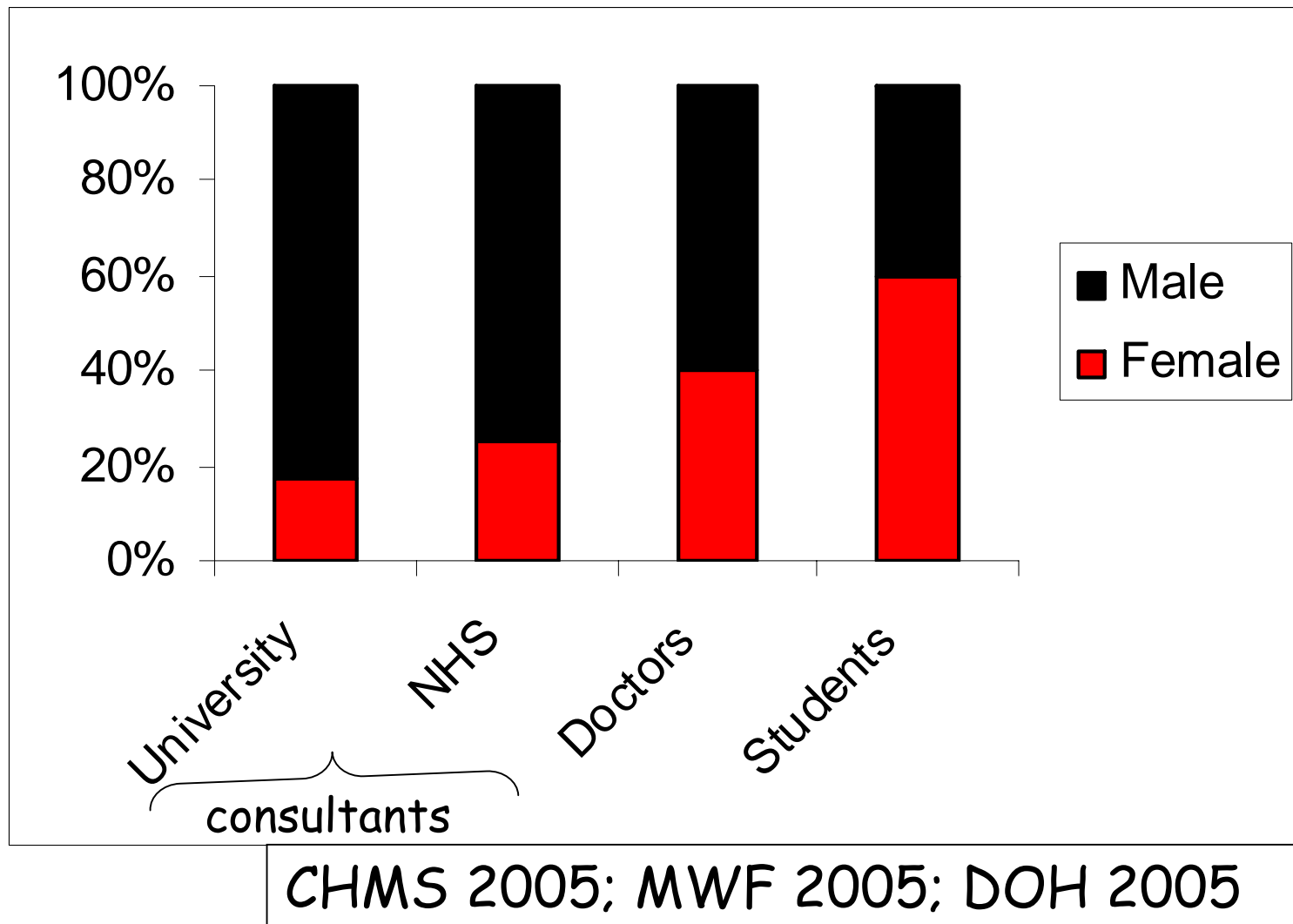


Comparison with Medical School intake

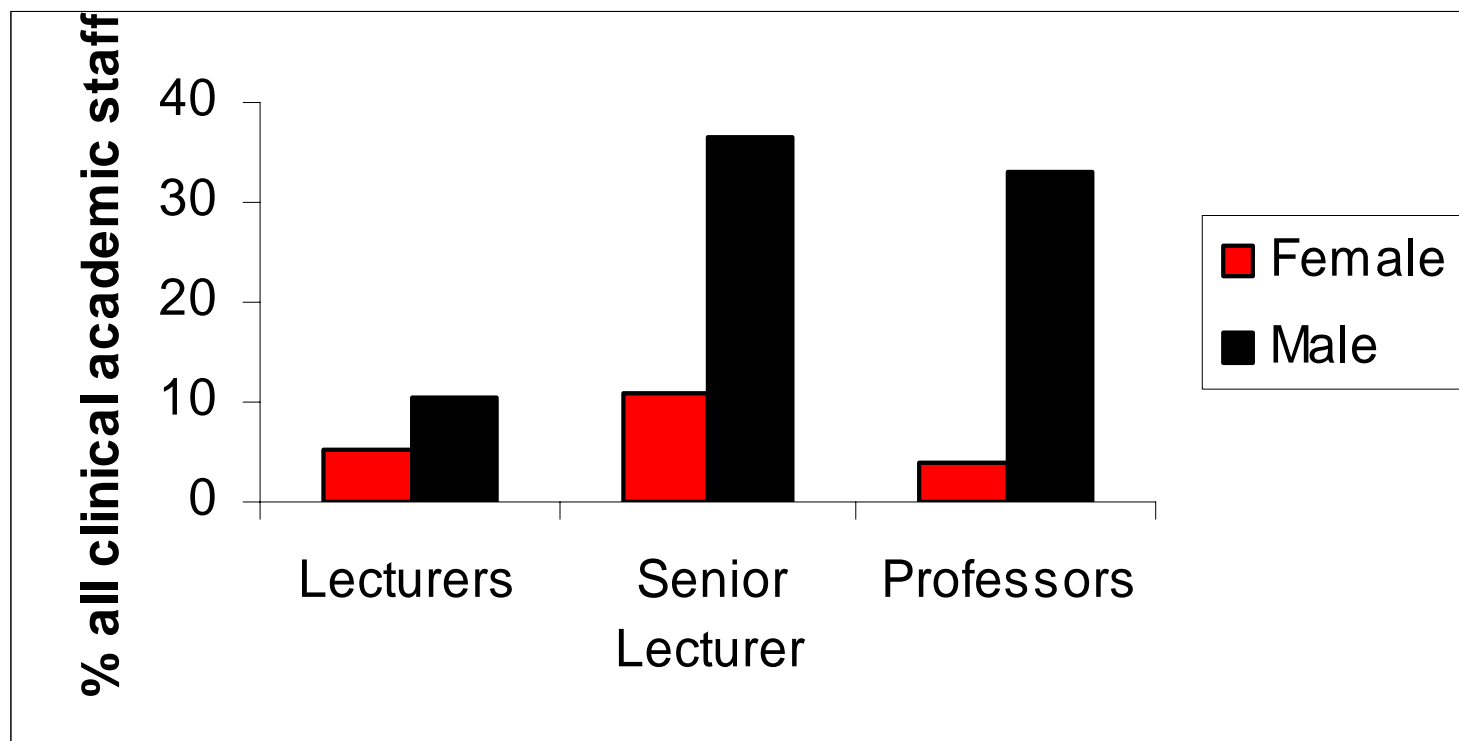


CHMS 2005; MWF 2005

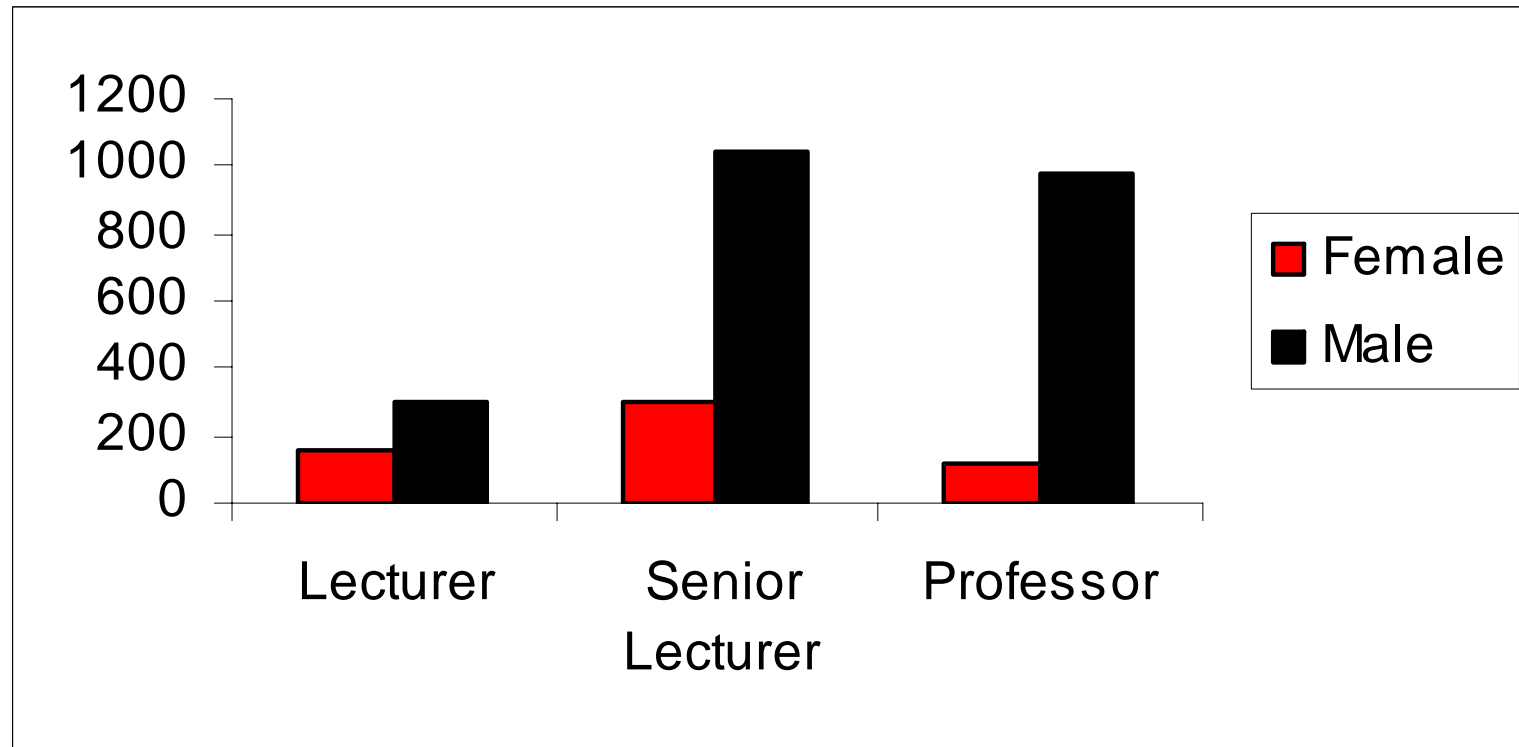
From students to academics



CHMS data from June 2005 report



Number of clinical FTE (UK)

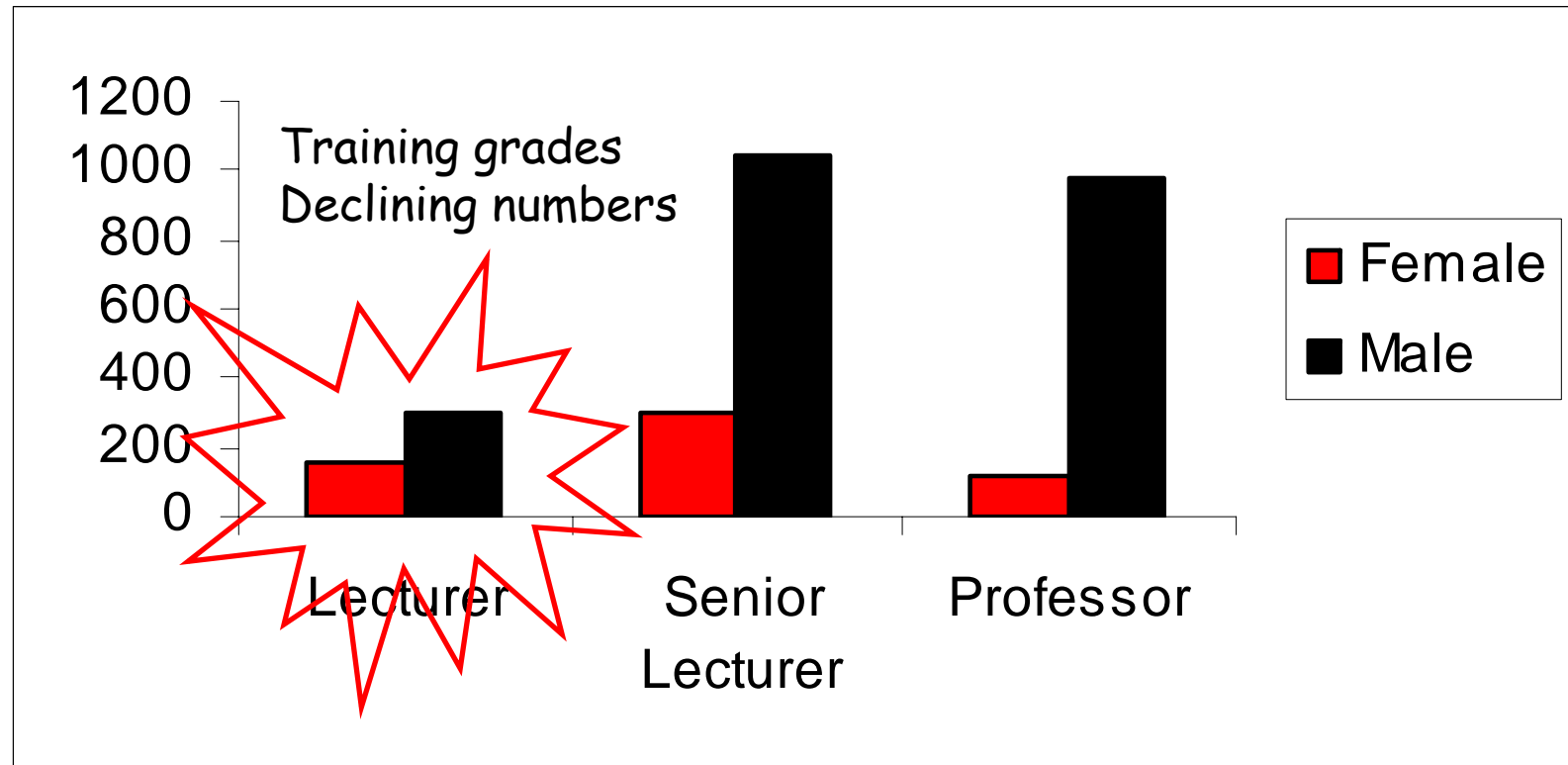


Ratio 1:2

1:3.5

1:8.3 MWF2005

Number of clinical FTE (UK, n = 3113)



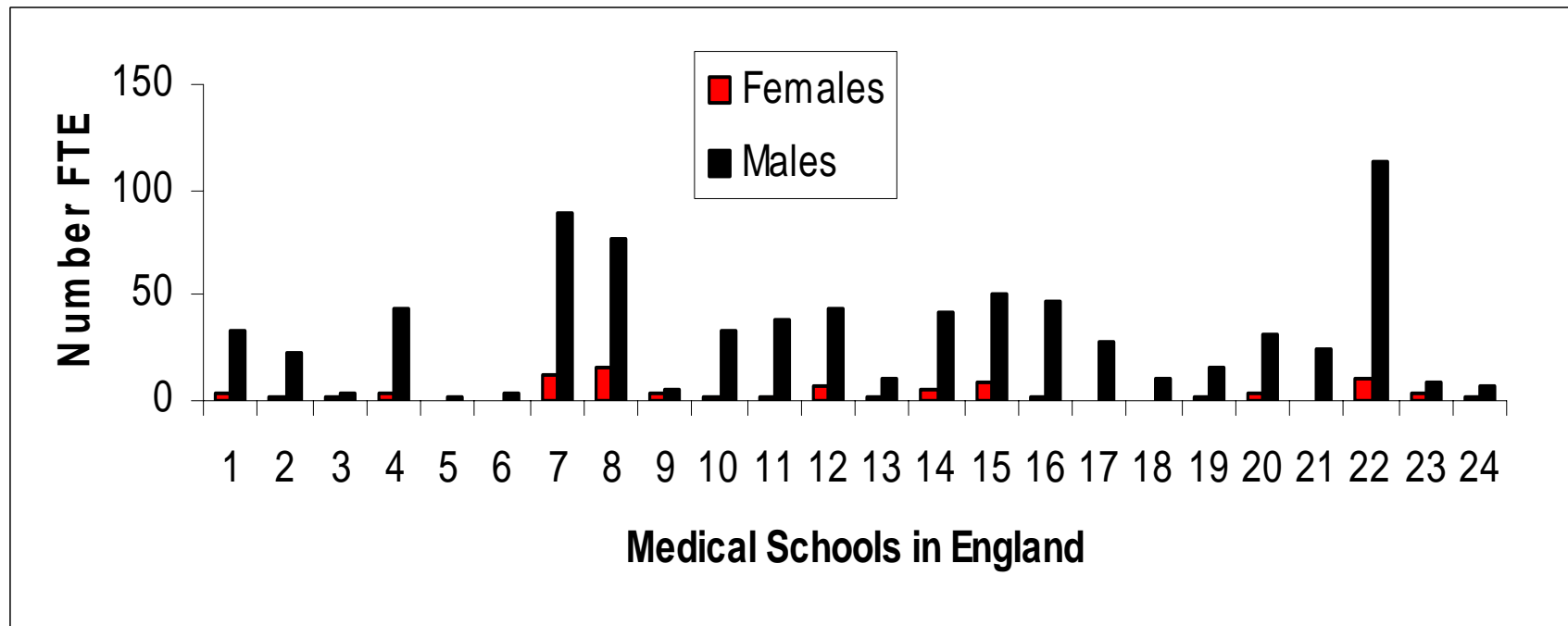
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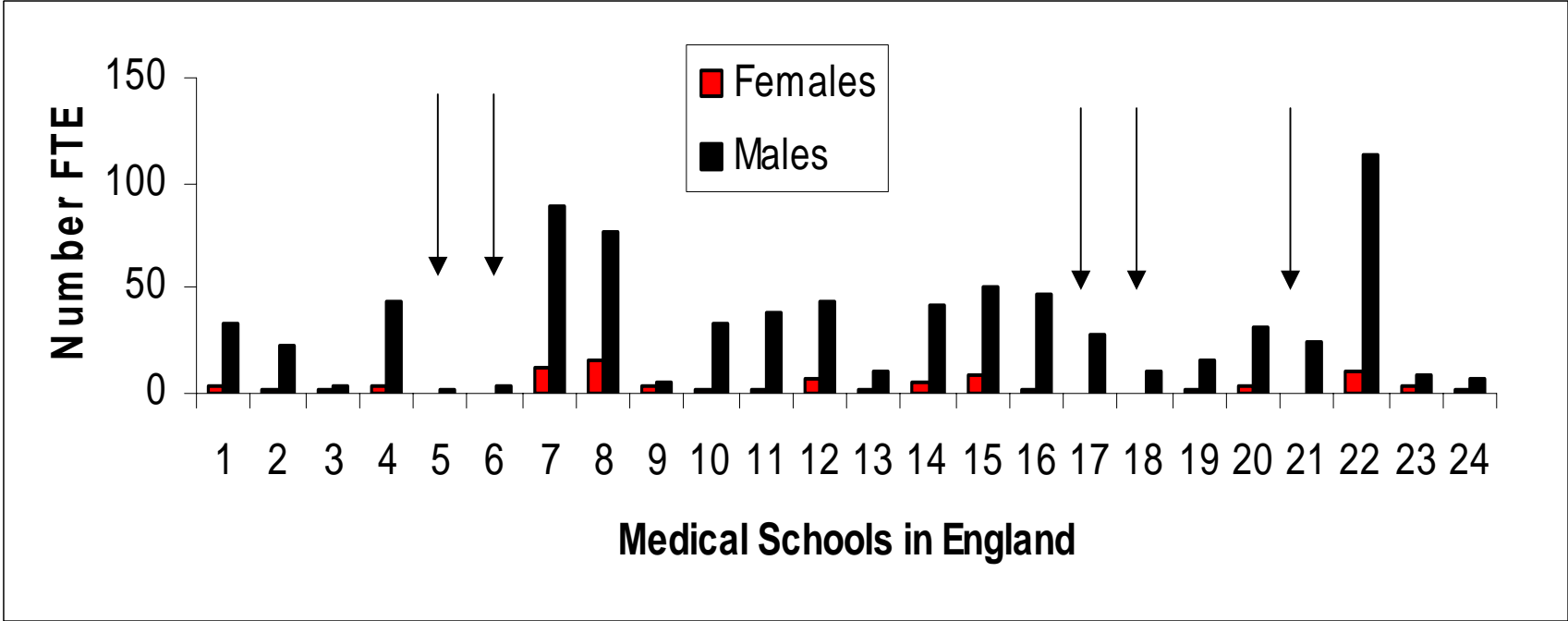
CHMS2005

Medical Schools in England, 2004



Individual results for FTE male and female professors

Medical Schools in England, 2004



Medical Schools with no female professors

Summary of CHMS data

- In England 1 in 10 Professors are women compared with 1 in 4 consultants
- Medical students (*doctors*) lack female role models (*Allen BMJ 2005*)
- Women in academic medicine are working in lower grades than men
- Large variations in gender ratio between Medical Schools

Barriers to be lifted

- Data monitoring (e.g. specialties)
- Culture
 - Long hours (exclusion of career breaks and flexible working)
 - Negative expectations (career pathway, promotion)
- Performance rating (needs to reflect variety of achievements)
 - Criteria for promotion (RAE 2001 generated)
 - 'Scientific age' versus 'chronological' age
- Lack of recruitment and retention (CMO 2003)

Thanks to

Medical Women's Federation
Council for Heads of Medical Schools
British Medical Association



Gender analysis by grade: total FTE (mean, range)

	Lecturer (Trainee)		Senior Lecturer (Consultant)		Professor (Consultant)	
	F	M	F	M	F	M
England n = 24	92.1 (3.8, 0 - 17.2)	195.9 (8.2, 0 - 29.4)	240.5 (10, 0 - 48.1)	815.8 (34, 0.6 - 111.6)	88.3 (3.6, 0 - 15.0)	772.5 (32.2 2.0 - 113.9)
Wales n = 2	10.0 (5, 0 - 10)	8.1 (4, 0 - 8.1)	13.4 (7, 0 - 13.4)	54.7 (2, 0 - 52.7)	5.8 (3, 0 - 5.8)	45.9 (23, 11 - 34.9)
Scotland n = 5	47.7 (9.5, 8.4 - 19.3)	84.9 (17, 9.6 - 35.3)	35.8 (7.2, 0 - 10.5)	128.9 (25.8, 0 - 44.3)	19 (3.8, 0 - 6.0)	127.2 (25.4 3.0 - 40.0)
N. Ireland n = 1	4.0	18	4.97	44.3	4.0	30.0
Total FTE	153.8	306.9	294.7	1041.7	117.1	975.6
Ratio F:M	1:2.0		1:3.5		1:8.3	