#### Faculty Diversity in the University of California Health Sciences Schools

#### Introduction

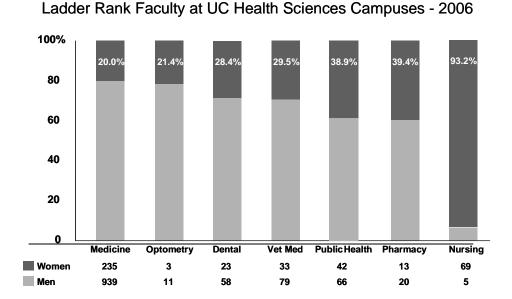
In January 2007, Provost Rory Hume formed a task force to assess the status of faculty diversity in the Health Sciences of the University of California to complement the initial report entitled "The Representation of Minorities Among Ladder Rank Faculty", issued May 2006. From January to May, site visits were made to five UC campuses - Los Angeles, San Francisco, San Diego, Irvine and Davis – and data were collected from the payroll database in the Office of the President, campus reports and national databases. Preliminary results were presented at the Summit on Faculty Diversity in the Health Sciences on May 19, 2007. Teams of faculty and academic administrators attended the Summit and made recommendations to increase faculty diversity at all campuses.

The primary focus of this study is Ladder Rank faculty in the Schools of Medicine (SOM), which represent a large number of academic members supported by state funds. Data from other Health Sciences campuses and other series are also presented. Special emphasis is placed on the analysis of possible disparities in the hiring of women and underrepresented minorities (URM) in the SOM compared with non-medicine schools and national averages.

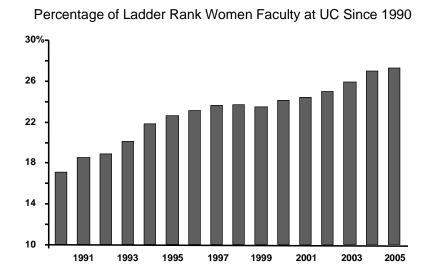
The evaluation of faculty diversity involves the examination of multiple practices and policies, including those encompassing hiring, promotion, retention and compensation of women and underrepresented minorities. Due to time constraints and the nature of the data provided, however, this report is limited and only reflects specific analyses in the area of hiring. We recommend that further analysis be undertaken with additional data to examine promotions and retention of faculty in the Health Sciences campuses.

#### Representation of Women Ladder Rank Faculty

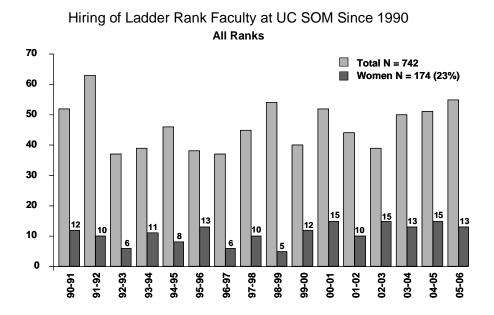
The representation of women Ladder Rank Faculty at UC varies widely among the different fields. This variability is especially noticeable in the Health Sciences fields, ranging from 20% in medicine to 93% in nursing.



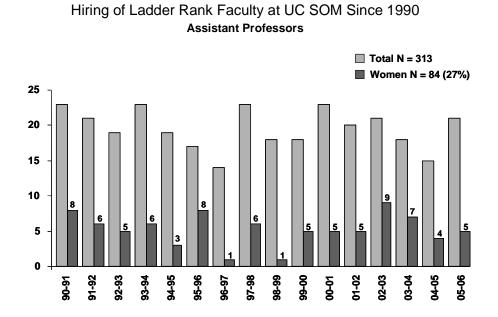
When all schools are considered together, a steady increase in the percentage of women Ladder Rank faculty can be observed over the past 15 years, from ~17% to 27%, as indicated in the Report of the UC President's Task Force on Faculty Diversity of May 2006.



In contrast, the hiring of women in Ladder Rank positions in the UC SOM has remained surprisingly flat over time. Women represented 23% of all hiring in the year 1990-91 and 24% in 2005-06; overall, from a total of 733 faculty hired in the SOM in the last two decades, women comprised only 172 (23%).

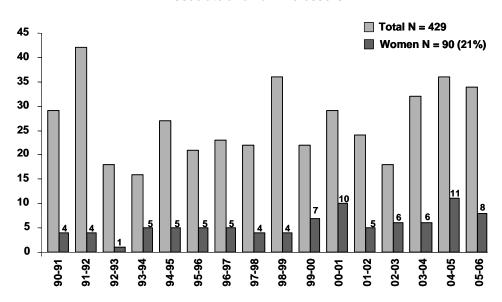


These discrepancies in the hiring of women are reflected at all ranks. In Ladder Rank Assistant Professors, the hiring of women over time has also remained virtually flat, at about 27%; women represented 35% of all hiring in the year 1990-91 and 24% in 2005-06.

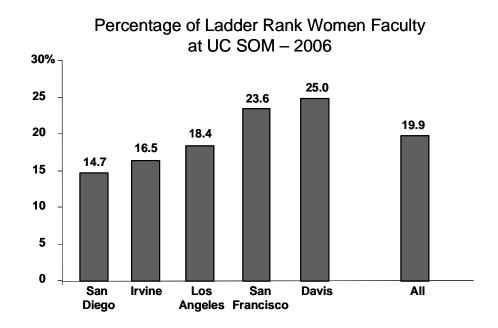


Similarly, in Ladder Rank Tenured Professors, the hiring of women over time has not changed, at about 21%; women represented 14% of all hiring in the year 1990-91 and 24% in 2005-06.

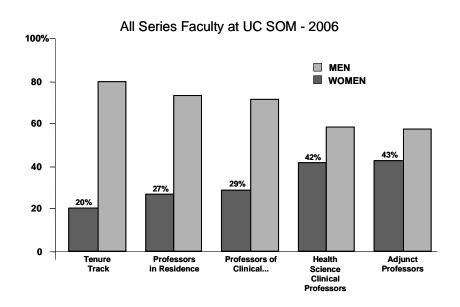
Hiring of Ladder Rank Faculty at UC SOM Since 1990
Associate and Full Professors



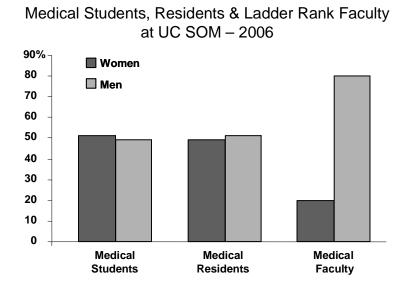
While the overall representation of Ladder Rank women faculty in UC medical schools has not progressed, there are substantial differences in the percentage of women faculty among the various SOM. It is interesting to note the large range of percentages among the SOM, with San Diego showing less than 15% and Davis at 25%.



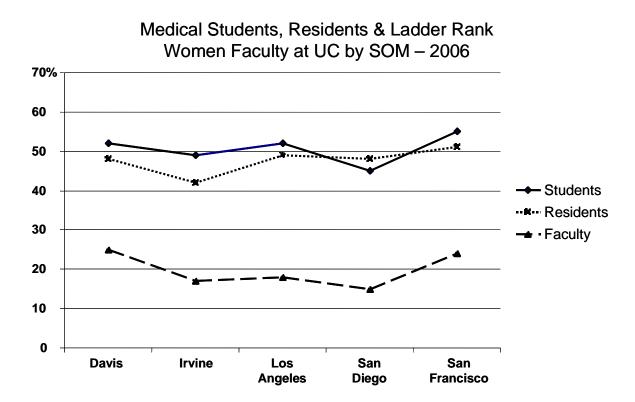
There are five series available, with varying duties and criteria for appointment and advancement (Appendix 1), for faculty in the UC SOM. The most prestigious series, the Ladder Rank, has the lowest representation of women, while the Adjunct and Clinical series have the highest. Indeed, the percentage of women in the latter series more than doubles that of women with tenure and is close to that of men.



In assessing patterns in faculty hiring, it is disturbing to note the disparities in the shape of the pipeline. Although women represent approximately one-half of the medical graduates and medical residents at the UC SOM, they only account for 20% of the Ladder Rank faculty hired. Hence, it appears that gender disparities in Ladder Rank faculty are not the consequence of a smaller number of women medical students or residents.

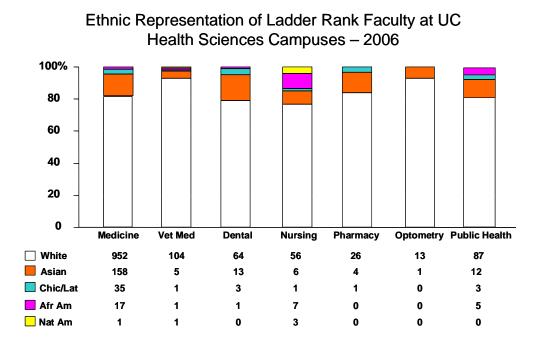


This disparity in gender composition between medical residents and tenure faculty can be observed throughout all five medical campuses, with slightly lower prevalence at UC Davis and greater at UC San Diego, where, in 2006, the percentage of Ladder Rank women faculty hired was one-third that of women medical residents.

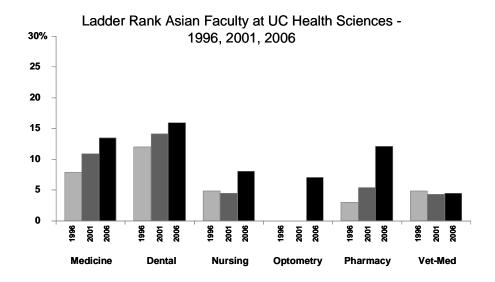


#### Representation of Minorities in Ladder Rank Faculty

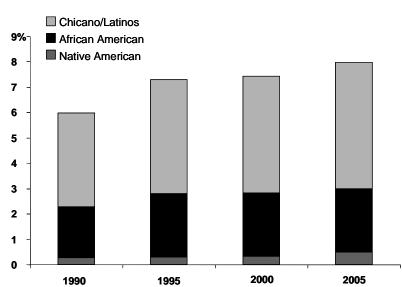
There is a considerable amount of variability in the ethnic distribution of Ladder Rank faculty among UC Health Sciences schools. In 2006, Asians represented the greatest number of minorities, while Native Americans represented the least.



During the past ten years, representation of Asians has steadily increased in most of the Health Sciences schools, the exception being veterinary medicine. This trend is representative of the increase in Asian faculty at UC, as indicated in the Report of the UC President's Task Force on Faculty Diversity of May 2006.

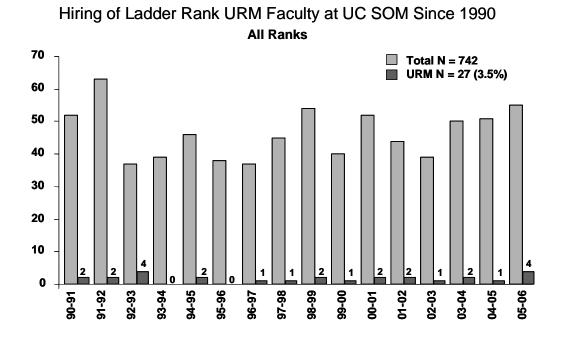


Because Asians are well represented and their numbers are steadily increasing, this group will not be included in further evaluations, which reflect URM comprised of African Americans, Chicano/Latinos and Native Americans. Overall, there is a small, but noticeable escalation in the percentages of Ladder Rank URM faculty at UC during the past two decades.



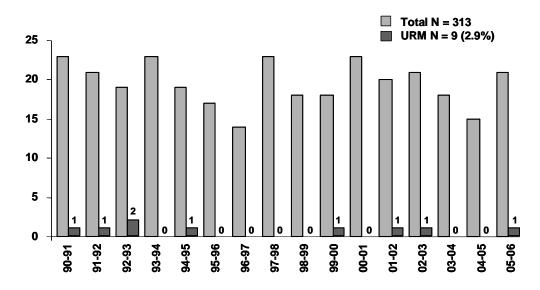
Ladder Rank URM Faculty at UC - 1990, 1995, 2000, 2005

In contrast, since 1990-91, the hiring of URM in Ladder Rank positions in the UC SOM has remained flat. From a total of 742 faculty hired in the SOM, URM comprised 27 (3.5 %).



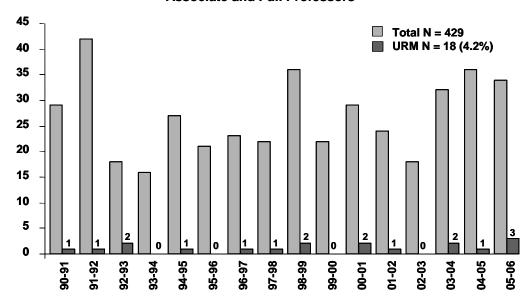
These discrepancies are reflected at all ranks. In Ladder Rank Assistant Professors, the hiring of URM over time has also remained virtually flat, at about 2.9%. Half of the fiscal periods since 1990 reflect a zero hiring of URM.

Hiring of Ladder Rank URM Faculty at UC SOM Since 1990
Assistant Professors



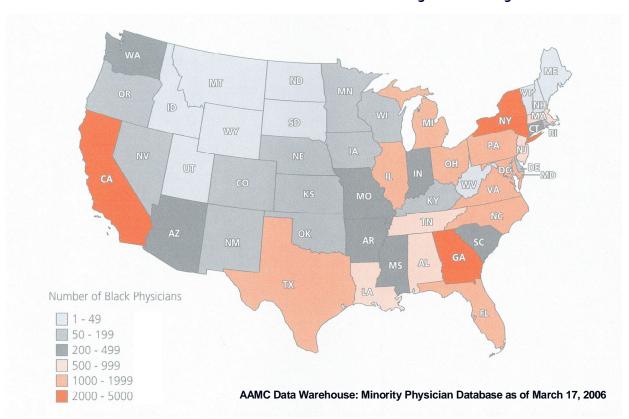
Similarly, in Ladder Rank Tenured Professors, the hiring of URM over time has not changed, at about 4.2%. It should be noted that the numbers of African Americans, Chicano/Latinos and Native Americans are so small, that independent analyses of changes over time for each group are impeded.

Hiring of Ladder Rank URM Faculty at UC SOM Since 1990
Associate and Full Professors

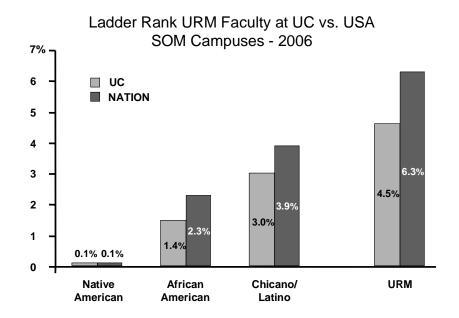


Based on data from the Facts & Figures 2006 report on Diversity in the Physician Workforce by the Association of American Medical Colleges, in 2004 California had a greater number of African American, Chicano/Latino and Native American physicians than any other state in the U.S. (3,422, 3,746, and 325, respectively).

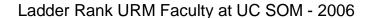
## Distribution of African American U.S. Physicians by State

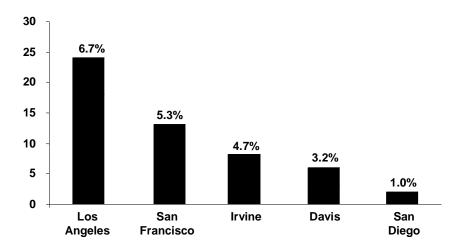


However, the percentage of UC SOM URM Ladder Rank faculty is lower than that of the national average, and this is true for both African American and Chicano/Latino faculty. Currently, the UC SOM faculty body does not reflect the racial and ethnic diversity of the population it serves, nor the numbers of URM physicians in the state.



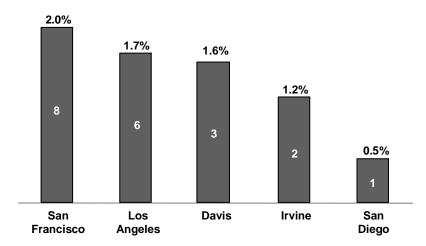
While the overall representation of Ladder Rank URM faculty in UC SOM has not progressed and, overall, does not achieve national levels, this representation, (4.5% vs. 6.3%, respectively), there is a large variation among medical campuses. Los Angeles, for examples, exceeds national levels, while San Diego reflects the lowest percentage, at 1.0%.



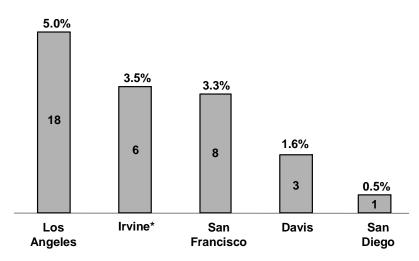


These differences in the patterns of distribution of URM among campuses are apparent for both African American and Chicano/Latino Ladder Rank faculty. Indeed, Los Angeles has ten times the number of Chicano/Latinos, and San Francisco has four times the number of African Americans, than San Diego. For the most part, the large variations among campuses are not representative of the physician pools in those areas.

### Number and Percentage of Ladder Rank African American Faculty at UC SOM - 2006



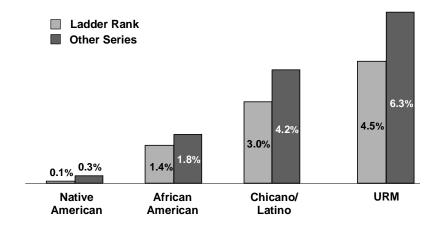
### Number and Percentage of Ladder Rank Chicano/Latino Faculty at UC SOM - 2006



<sup>\*</sup>Includes 1 Native American

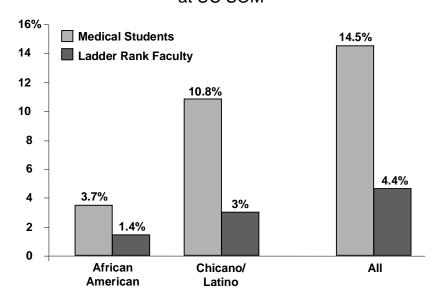
Similar to the distribution seen in women across the five faculty series, the more prestigious series, Ladder Rank, has a lower representation of URM than the remaining series that are not supported by state funds. This is true for all URM when considered together and for each ethnic/racial background when considered independently.

# Ladder Rank URM Faculty vs. Other Series Faculty at UC SOM Campuses - 2006



It should be noted that, based on data from the AAMC report, "Minorities in Medical Education Facts & Figures 2005", the pool of URM medical students at the UC campuses is about three times greater than that of URM Ladder Rank faculty in 2006. This is true for both African American and Chicano/Latino groups. Hence, it appears that ethnic/racial disparities are not the consequence of a smaller number of African American or Chicano/Latino medical students.

# URM Medical Students & Ladder Rank Faculty at UC SOM



#### Conclusions

Several significant conclusions regarding faculty diversity at UC SOM may be drawn from this report. Unfortunately, only a cursory examination of the findings described herein is needed to recognize the disparities that not only currently exist, but have been ongoing for nearly two decades.

Despite the rise in the number of women training at UC medical schools, the hiring of women in the SOM Ladder Rank faculty positions in the last 15 years remains remarkably flat, unchanged and low. Although women currently comprise about half of the UC medical students and half of the UC residents, these numbers are not reflected in current faculty hires. In 2006, women represented only one-fifth of the UC SOM Ladder Rank faculty.

Similarly, despite the comparatively larger pool of African American and Chicano/Latino graduates at UC medical schools, the hiring of URM Ladder Rank faculty has remained flat and unchanged, and is currently lower than the national average. Yet, our state has the greatest number of African American and Chicano/Latino physicians in the U.S.

Two of our findings during this investigation are especially notable and may eventually aid in promoting greater gender and racial parity in the UC SOM. First, the striking variability in gender and ethnic/racial representation among campuses suggests that parity is achievable. Knowledge of the differences in hiring practices between UC SOM should stimulate a healthy rivalry among campuses and encourage the drive toward gender and ethnic balance. Second, the large discrepancy between the pool of women and URM medical trainees and their hires in the Ladder Rank faculty suggests the bottleneck to be primarily located at the department level. While reviews of applicants to UC medical schools and residency programs are highly standardized and overseen by committees, strategies for recruiting faculty are primarily the responsibility and decision of the chairman. Notwithstanding the efforts of programs intended to increase the pool of faculty who are underrepresented in medicine, new strategies for assessing recruitment and accountability of faculty from diverse backgrounds are needed, starting at the department level.