



**WOMEN IN
NEPHROLOGY**
REACHING FOR THE FUTURE

Women In Nephrology recommendations for family-friendly conferences

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Attendance at medical conferences is vital for career development in nephrology for both clinicians and scientists, men and women. Participation in these events allows practitioners and researchers to network with others in their field, present research findings, develop new collaborations, establish contacts for mentoring and sponsorship, and participate in national committee meetings. These types of professional engagements and service are particularly important for junior practitioners and researchers who are establishing crucial career collaborations and national reputations. Professional contacts at outside institutions are particularly important for future job offers and career advancement.

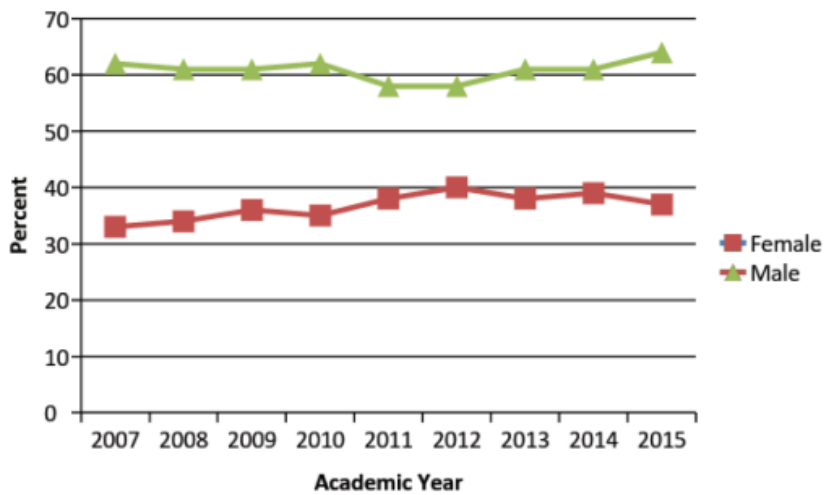
Often, the initial decade of a professional career in nephrology overlaps with peak childbearing and childrearing years. Child-care responsibilities may limit the ability of a practitioner or researcher, particularly women, to attend and fully participate in medical conferences, limiting their future ability to publish, find suitable employment, gain continuing medical education (CME) credits, and to be promoted.¹ This white paper provides a rationale and recommendations for increasing the availability and affordability of child care options at professional meetings and for rethinking of existing conference policies that are barriers to career advancement of professionals with young children.

Our organization, Women in Nephrology (WIN), is committed to the professional advancement and equal inclusion of women and men in nephrology. This white paper is designed to facilitate achievement of these ends by:

- 1) Providing recommendations to professional societies to increase recruitment and retention of women by removing existing family-related barriers to attendance and participation at medical conferences.
- 2) Allowing and empowering junior clinicians and researchers to fully participate in medical conferences to improve their likelihood of career success.

Over the past three decades, there have been dramatic changes in the field of nephrology as more women have entered the workforce and chosen nephrology as a career (Figure 1). Women accounted for 38.9% of graduating nephrology fellows in 2017.² However, this percentage remains less than the percentage of women graduating from internal medicine residencies, suggesting that there remains a barrier for women to enter the field of nephrology.

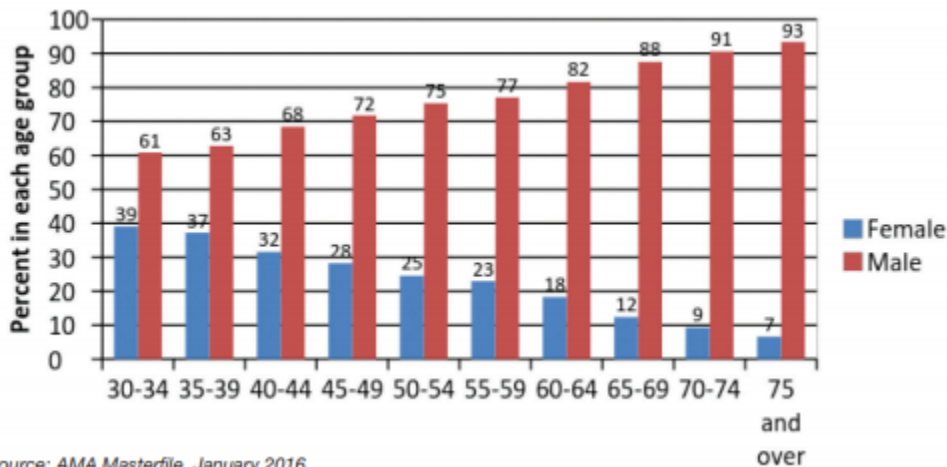
Figure 1: Percent of nephrology fellows by sex. Figure from the ASN report on The US Adult Nephrology Workforce 2016³



Source: ACGME Annual Data Resource Books.

Despite more women completing nephrology fellowship training and increasing numbers of women entering the workforce, leadership roles in nephrology remain disproportionately held by men⁴ (Figure 2). In order to sustain a positive trajectory and support career advancement of junior nephrologists and researchers, thereby enhancing the pipeline of women for leadership positions, family friendly conference policies are needed to ensure that there are no barriers to participation by women.⁵

Figure 2: Age distribution of Adult Nephrologists by sex. Figure from the ASN report on The US Adult Nephrology Workforce 2016³



Source: AMA Masterfile, January 2016.

Lifestyle is important to both male and female residents, fellows, and researchers when considering career pathways.³ National conferences are often one of the first introductions to nephrology careers for medical and graduate students and residents through participation in programs such as the American Society of Nephrology (ASN) Kidney STARS program or the American Society of Transplant Congress (ATC) resident/student travel grant program. Likewise, “poor work/life integration” in the

current nephrology workforce is noted as one of the driving forces of burnout.⁶ The inclusion of family- and lifestyle-friendly policies at national conferences attended by trainees may further influence their willingness to enter the field of nephrology.

Medical fields with higher numbers of women, such as pediatrics, have been providing accommodations for children at national meetings for years. The American Academy of Pediatrics and Pediatric Academic Society (includes American Society of Pediatric Nephrology) annual meetings both provide childcare and allow children in the exhibit hall. Other large non-pediatric based societies also provide childcare including the American Society for Hematology and the American College of Emergency Physicians.

WIN provides the following recommendations for all nephrology conferences to support the attendance and participation of women with small children. These recommendations are consistent with published recommendations from other groups of women in medicine and science.⁷

1. Provide on-site child care (Kiddie Corp, for example) to offer care at cost for children while their parents are attending sessions.
2. Advertise child care opportunities well in advance to allow for planning. Make this advertisement an obvious part of the conference registration process.
3. Allow children in the exhibit hall and poster sessions with a guest pass and required supervision by a parent. We recognize that parents may be asked to sign a waiver if required by specific conference site or society insurance policy.
4. Allow infants in arms in scientific sessions.
5. Advertise availability of nursing rooms/lactation rooms at convention sites. For large or spread out convention centers, more than one room may be required. Rooms should ideally have a sink for handwashing, fridge for storage of breast milk, and lockable storage units for pumps and equipment.

These suggested policies address one of WIN's key goals; to remove barriers to professional development that may impact workforce diversity and size. Embracing these strategies as a fundamental aspect of conference preparation will lead to enhanced participation and satisfaction by attendees, and may well lead to enhancements in the nephrology workforce pipeline.

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References:

¹Mason MA (August 5, 2013) The baby penalty. *The Chronicle of Higher Education*. Available at <https://www.chronicle.com/article/The-Baby-Penalty/140813> Accessed March 9, 2018

²Quigley L, Mehfound N, Salsberg E, Collins A; Report on the Survey of 2017 Nephrology Fellows prepared for The American Society of Nephrology. https://www.asn-online.org/education/training/workforce/Nephrology_Fellow_Survey_Report_2017.pdf Accessed March 9, 2018

³Salsberg E, Quigley, L, Mehfoud N, Masselink L, Collins A; The US Adult Nephrology Workforce 2016: Developments and Trends prepared for The American Society of Nephrology. https://www.asn-online.org/education/training/workforce/Nephrology_Workforce_Study_Report_2016.pdf Accessed March 9, 2018

⁴Travis EL. Academic medicine needs more women leaders. AAMC News January 2018 Available at <https://news.aamc.org/diversity/article/academic-medicine-needs-more-women-leaders/> Accessed April 11, 2018

⁵Bos AL, Sweet-Cushman J, Schneider MC; Family-friendly academic conferences: A missing link to fix the “leaky pipeline”? *Polit Groups Identities*, 2017

⁶Williams AW; Addressing Physician Burnout: Nephrologists, How Safe Are We? *Clin J Am Soc Nephrol* 2018 13(2):325-327.

⁷Calisi RM and a Working Group of Mothers in Science; How to tackle the childcare-conference conundrum. PNAS, 2018 *in press* <http://www.pnas.org/content/early/2018/03/01/1803153115>