

BRIEF REPORT

Promotion Committees and Attending Meetings Improve Promotion Rates for Early Career Faculty

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ABSTRACT

Introduction: Academic promotion is an important goal in an academic physician's career trajectory. Understanding the factors that influence success in academic promotion is important in providing appropriate guidance and resources.

Methods: The Council of Academic Family Medicine Educational Research Alliance (CERA) conducted a large omnibus survey of family medicine department chairs. Participants were asked about recent promotion rates within their department, as well as about whether their department had a promotion committee, whether faculty regularly met with the chair regarding preparation for promotion, whether faculty had been assigned mentors, and whether faculty attended national academic meetings.

Results: The response rate was 54%. Most chairs were male (66.3%), White (77.9%), and aged 50 to 59 (41.3%) or 60 to 69 (42.3%) years. Attendance at professional meetings was associated with a higher rate of assistant-to-associate professor promotions. Departments with a committee to help faculty with promotions had higher rates of promotion for both assistant-to-associate and associate-to-full professor levels than departments without a committee. Promotion was not associated with assigned mentorship, support from the chair, departmental or institutional sponsorship of faculty development regarding promotion, or annual assessments of progress toward promotion.

Conclusions: Attendance at professional meetings and the presence of a departmental promotions committee may be helpful factors in achieving academic promotion. An assigned mentor was not found to be a helpful factor.

INTRODUCTION

Academic promotion is intended as a reward for faculty who successfully fulfill the demanding criteria for clinical service, research, teaching, and administration. Family medicine's promotion rate is lower than those of other medical specialties (25% assistant-to-associate promotion rate versus 38% for all clinical specialties).¹ An understanding of the factors that help or hinder progress toward promotion is critical to improving promotion rates. Previous studies have demonstrated that having at least 25% protected time for scholarship is a strong predictor of successful promotion.²

The availability of high-quality mentorship is consistently cited as critical to junior faculty's success.³ A survey of full-time medical school faculty revealed that about half of junior faculty identified themselves as having a mentor.⁴ Clinician educators were much less likely to be mentored than clinician scientists.⁵ Generally, studies show a positive association between mentorship and promotion. However, a systematic

review showed that studies on mentorship were often low in quality and reported perceptions of importance rather than outcomes. Very few had control groups.⁶

Several factors are known to adversely affect a faculty member's chance of promotion. Lack of available professional development and lack of institutional support for academic endeavors are linked to lower promotion rates. These factors are also predictors of job dissatisfaction, intent to leave academic medicine,⁷ and early attrition of faculty members.⁸ Faculty who never meet with their department chair about promotion also have significantly lower promotion rates.⁹ Surprisingly, being fellowship trained is not significantly associated with academic promotion.⁹ This study aimed to clarify specific, concrete actions that department chairs can take to improve their department's promotion rate.

METHODS

The Council of Academic Family Medicine Educational Research Alliance (CERA) conducted a large omnibus survey of family medicine department chairs. The methodology has previously been described in detail.¹⁰ The CERA Steering Committee evaluated questions for readability, consistency with overall aim, and existing evidence of reliability and validity. We pretested the questions with family medicine educators who were not part of the target population, which resulted in modifications for flow, timing, and readability. The American Academy of Family Physicians Institutional Review Board approved the project in August 2021. We collected the data in August 2021.

The sampling frame for the survey was US family medicine department chairs as identified by the Association of Departments of Family Medicine (ADFM). We sent email invitations with the survey using Survey Monkey. We encouraged nonrespondents to participate through three follow-up emails sent weekly following the initial invitation and a final reminder sent the day before the survey closed. There were 200 department chairs identified at the time of the survey; two had previously opted out of Survey Monkey surveys. The survey was emailed to 198 individuals. Of the emails sent, six bounced, leaving 192 invitations delivered.

Survey Questions

Participants answered questions about themselves and their departments. They answered questions about faculty and faculty promotions (Table 1).

Analyses

The percentage of full-time assistant-professor physician faculty was calculated by dividing the number of full-time assistant-professor physician faculty by the total number of full-time physician faculty. Similar calculations were done to determine the percentages of associate professor faculty, faculty promoted to associate professor, faculty promoted to full professor, and faculty attending annual meetings. Some of the calculations resulted in percentages that were over 100. These were truncated to 100%. We used *t* tests to determine whether assigning mentors, having individuals or committees to help with promotion, and assessing faculty progress were associated with higher promotion rates. Correlations examined associations between attending professional meetings and faculty promotion rates.

RESULTS

We received 104 completed surveys for a response rate of 54.17% (104/192). Most chairs were male (66.3%), White (77.9%), and aged 50 to 59 (41.3%) or 60 to 69 (42.3%) years. Department chairs had served an average of 6.3 (SD=6.4) years in their current roles. Correlations found that attendance at professional meetings was associated with a higher rate of assistant-to-associate professor promotion but not with associate-to-full professor promotion. Departments with a committee to help faculty with promotions had higher rates of

TABLE 1. Survey Questions and Study Variables

	M (SD)
Number of full-time academic physician faculty in department	29.3 (27.7)
Faculty at assistant professor level, %	60.3 (17.8)
Faculty at associate professor level, %	22.6 (13.3)
Assistant professors promoted in last 3 years, %	19.4 (16.8)
Associate professors promoted in last 3 years, %	27.2 (45.5)
Faculty who attended professional meetings, %	56.2 (30.6)
Who in your department is responsible for helping faculty with the promotion process?*	%
Department chair or designee	39.2
Departmental promotions committee	6.7
Combination chair and committee	49.5
No one	4.1
	Yes, %
Is assessing progress toward promotion a part of physician faculty's yearly review?	91.7
Does your department assign mentors to assist faculty on progress toward promotion?	53.1

*Categories were dichotomized for analyses into departments with a committee and departments without a committee.

promotion at both the assistant-to-associate and associate-to-full professor levels than departments without a committee. Promotion was not associated with having been assigned a mentor, having the chair assigned responsibility for helping with promotion, having departmental or institutional sponsorship of faculty development regarding promotion, or having annual assessments of progress toward promotion (Tables 2 and 3).

DISCUSSION

Although many prior studies have reported that faculty perceive that having a mentor is important in achieving promotion,^{3,11} rigorous evidence of its effectiveness is sparse.⁶ This study found that about half of departments assign a mentor to assist faculty members in their quest for promotion, but having an assigned mentor was not associated with successful promotion at either the assistant-to-associate or associate-to-full professor level. This contrasts with a previous study that showed that a formal mentoring program in which mentees chose their mentors was associated with earlier promotion.¹¹ Perhaps an assigned mentor is less helpful than one who is chosen by the faculty mentee. In a 2014 study, residents who self-selected their mentors were more satisfied than those who had a mentor assigned.¹² Alternatively, a formal mentoring program may introduce an element of accountability, wherein both parties may be motivated to demonstrate full participation in the process. Many factors related to the frequency, quality, and formality of mentoring may influence promotion rate and

TABLE 2. Promotion Rates of Academic Physician Faculty Over Past 3 Years

Assistant Professor to Associate Professor		
M (SD)	M (SD)	P Value
With assigned mentor	Without assigned mentor	
20.8% (17.7%)	17.6% (15.6%)	.356
With annual review	Without annual review	
20.0% (17.0%)	10.8% (13.2%)	.197
With department committee	Without department committee	.024
22.7% (17.2%)	14.8% (15.1%)	
Associate Professor to Full Professor		
With assigned mentor	Without assigned mentor	
24.0% (30.2)	23.6% (33.5)	.951
With annual review	Without annual review	
24.4% (31.0)	20.0% (44.7)	.766
With department committee	Without department committee	
24.5% (29.7%)	20.6% (33.4%)	20.6% (33.4%)

TABLE 3. Correlation Coefficients Showing Relationship Between Attending Professional Meetings and Promotion Rates Over Past 3 Years

	Faculty Attending Meetings, %	P Value
Assistant professors promoted	0.216	.037
Associate professors promoted	0.016	.881

may be areas for future study.

Surprisingly, undergoing assessment of progress toward promotion through annual reviews was not associated with successful promotion. In contrast, the presence of a committee to assist in promotion was associated with higher rates of promotion at both the assistant-to-associate and associate-to-full professor levels. Perhaps the rigor of a committee review and the accumulated wisdom of multiple members is more advantageous than checking progress during annual reviews. There is little research focused on the impact of academic promotion committees. Attendance at professional meetings appears to be an important predictor of assistant-to-associate professor promotion. The positive impact of professional meetings may be related to the phenomenon of “peer mentoring,” in which organic, helpful alliances are formed around shared interests. This may be especially helpful for underrepresented groups.¹³ A systematic review showed that programs designed to mentor women in academic medicine were met with very high satisfaction rates and improved rates of promotion and faculty retention.¹⁴

A limitation of this study is that we are unsure of whether the respondents were a representative sample of North American family medicine chairs. Chairs may be imperfect in their recall and may not accurately identify members of underrepresented in medicine groups. However, we found gender

and racial distribution rates similar to those of our sample in a recent study examining diversity among family medicine department chairs.¹⁵ There are many facets of mentoring that can be further explored. The structure of the mentoring program, whether the mentor is chosen or assigned, and the frequency of meetings are all factors that may influence a mentee’s likelihood of promotion.

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