



## Background & Purpose

- The number of PA programs is increasing rapidly
- There is a critical need for a diverse pool of academic leaders to lead these programs and to increase the diversity of the medical workforce
- There is no standardized training for academic PA leaders.

This study characterizes PA academic leaders and examines the impact of doctoral degree credentials, gender, and minority status.

## Methodology

Using the 2019 PAEA Faculty and Director survey, we assessed the relationship between academic leadership groups: Program Director (PD); Academic Director\* (AD); and Clinical Director\* (CD) and:

- Demographic variables (gender, race, ethnicity, underrepresented minority in medicine (URIM) status);
- Time-dependent variables;
- Doctoral degree.

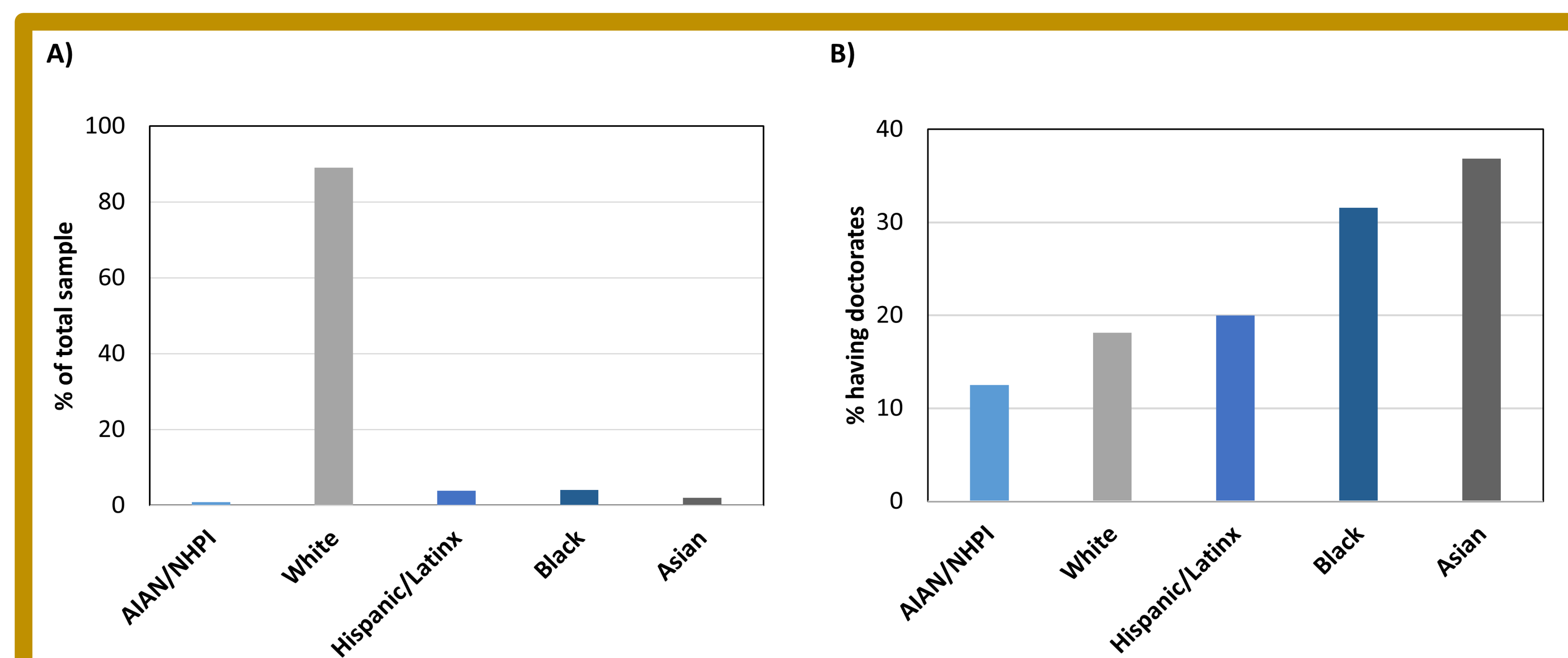
Univariate and multivariable logistic regression models were used to determine the unadjusted odds ratio (OR) and adjusted odds ratio (AOR) of being in a leadership role relative to having no leadership role. Results with  $p < 0.05$  were considered statistically significant.

\* Academic Directors and Clinical Directors may be titled Academic Coordinators and Clinical Coordinators respectively

## Characteristics of Participants by Leadership Role

Characteristic	Total	No Leadership (NL)	Academic Director (AD)	Clinical Director (CD)	Program Director (PD)	P value
		# (%)	# (%)	# (%)	# (%)	
	956	472 (49.4)	95 (9.9)	156 (16.3)	233 (24.4)	
<b>Has a doctorate</b>						<.0001
No	771 (80.8)	407 (52.8)	76 (9.9)	142 (18.4)	146 (18.9)	
Yes	184 (19.3)	65 (35.3)	19 (10.3)	13 (7.1)	87 (47.3)	
<b>Gender</b>						0.0279
Male	270 (28.8)	128 (47.4)	23 (8.5)	36 (13.3)	83 (30.7)	
Female	667 (71.2)	336 (50.4)	69 (10.3)	116 (17.4)	146 (21.9)	
<b>Race/Ethnicity</b>						
White	817 (85.5)	405 (49.6)	84 (10.3)	131 (16.0)	197 (24.3)	
Asian	19 (2.0)	10 (52.6)	1 (5.3)	4 (21.1)	4 (24.1)	
African American	38 (4.0)	17 (44.7)	6 (15.8)	6 (15.8)	9 (23.7)	
Hispanic	36 (3.8)	17 (47.2)	3 (8.3)	7 (19.4)	9 (25.0)	
NHPI/AIAN	8 (0.8)	4 (50.0)	0 (0.0)	1 (12.5)	3 (1.3)	
Other or no answer	38 (4.0)	19 (50.0)	1 (2.6)	7 (18.4)	11 (29.0)	
<b>URIM Status</b>						0.9523
Non-URIM	831 (91.0)	413 (49.7)	84 (10.1)	134 (16.1)	200 (24.1)	
URIM	82 (9.0)	38 (46.3)	9 (11.0)	14 (17.1)	21 (25.6)	
	<b>Mean ± SD</b>	<b>Mean ± SD</b>	<b>Mean ± SD</b>	<b>Mean ± SD</b>	<b>Mean ± SD</b>	<b>p value</b>
Age	45.6 ± 10.2	46.3 ± 10.0	43.8 ± 9.8	44.0 ± 10.3	50.1 ± 9.5	<.0001
Years in PA Education	2.9 ± 1.4	3.2 ± 1.3	2.5 ± 1.3	2.6 ± 1.3	3.9 ± 1.1	<.0001
Years at Current Program	2.5 ± 1.3	2.6 ± 1.2	2.2 ± 1.3	2.3 ± 1.2	3.1 ± 1.2	<.0001

## Representation of racial/ethnic groups



A) The percent of the total sample identifying as each racial/ethnic group.  
B) Percent of each racial/ethnic group having a doctorate degree.

## Results/Discussion

- PDs had more doctoral degrees than ADs and CDs (ADs>CDs). Having a doctoral degree increased the odds of being a PD by 2.38. May be due to:
  - Recent demand for doctoral trained PDs
  - Peer pressure, desire to climb academic ladder
- Males and females are equally represented in leadership roles
- URIM faculty are equally represented in leadership roles as non-URIM
- URIM faculty are grossly underrepresented in PA education
  - Due to disparities in URIM matriculation, few in pipeline
- Although fewer by proportion, URIM are more likely to have doctoral degrees than non-URIMs
  - “Do twice as much phenomenon”
- More time in PA education increased odds of being a PD or AD, but not CD
  - “Home grown leaders”

## Odds ratios for predictors of having leadership role

	Any leadership role (N=904)			
	OR	pvalue	AOR	pvalue
Doctorate: yes vs no	2.05 [1.47 - 2.86]	<.0001	1.46 [1.01 - 2.11]	0.0421
Yrs in PA education	1.07 [1.05 - 1.09]	<.0001	1.07 [1.04 - 1.09]	<.0001
Gender: female vs male	0.89 [0.67 - 1.18]	0.4115	1.08 [0.80 - 1.47]	0.6158
UR in Med vs Non-UR in Med	1.14 [0.73 - 1.80]	0.5631	1.05 [0.65 - 1.70]	0.8492

	OR	pvalue	AOR	pvalue
<b>Academic Director/Coordinator (N=91)</b>				
Doctorate: yes vs no	1.57 [0.89 - 2.76]	0.1224	1.23 [0.67 - 2.24]	0.5037
Yrs in PA education	1.06 [1.03 - 1.10]	<.0001	1.06 [1.03 - 1.09]	0.0001
Gender: female vs male	1.14 [0.68 - 1.91]	0.6116	1.24 [0.73 - 2.09]	0.4247
URIM vs Non-URIM	1.16 [0.54 - 2.51]	0.6968	1.06 [0.47 - 2.38]	0.8848
<b>Clinical Director/Coordinator (N=146)</b>				
Doctorate: yes vs no	0.57 [0.31 - 1.07]	0.0821	0.56 [0.29 - 1.09]	0.0874
Yrs in PA education	1.00 [0.97 - 1.03]	0.9633	1.01 [0.98 - 1.04]	0.5962
Gender: female vs male	1.23 [0.80 - 1.88]	0.3468	1.32 [0.84 - 2.06]	0.2294
URIM vs Non-URIM	1.14 [0.60 - 2.16]	0.6994	1.04 [0.53 - 2.06]	0.9111
<b>Program Director (PD) (N=219)</b>				
Doctorate: yes vs no	3.73 [2.57 - 5.42]	<.0001	2.38 [1.57 - 3.59]	<.0001
Yrs in PA education	1.11 [1.09 - 1.14]	<.0001	1.10 [1.07 - 1.12]	<.0001
Gender: female vs male	0.67 [0.48 - 0.94]	0.0205	0.88 [0.61 - 1.29]	0.5233
URIM vs Non-URIM	1.14 [0.65 - 2.00]	0.6444	1.04 [0.56 - 1.92]	0.9070

## Conclusion

PA academic leaders differ by doctoral degree attainment but not by gender and URIM status. URIM faculty are grossly underrepresented in the PA professorate, but disproportionately have doctoral degrees. Academic training opportunities for all PA academic leaders and strategies to increase URIM faculty are needed.

## References

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