

on committees, panels, and board of directors. Recognize and amplify accomplishments and contributions of women in your practice or department. Speak up when you see implicit or overt gender bias.

6. *Increase funding opportunities for women*: Recent investigations reveal a gender disparity in the amount of NIH funding received by first time female and male principal investigators with a mean difference of \$39,106.⁸ Consider targeted funding opportunities for women and formalized mentoring programs. Consider using nongendered terms in applications for funding.⁹

Rena D. Malik

Division of Urology, Department of Surgery, University of Maryland School of Medicine, Baltimore, MD

References

1. American Urological Association: The state of urology workforce and practice in the United States 2017. 2018. Available at: <https://www.AUAnet.org/common/pdf/research/census/State-Urology-Workforce-Practice-US.pdf>, accessed June 22, 2018.
2. Valsangkar N, Fecher AM, Rozycki GS, et al. Understanding the barriers to hiring and promoting women in surgical subspecialties. *J Am Coll Surg*. 2016;223: 387-398.e2.
3. Souders C, Wong D, Anger J, et al. MP02-19 speaking roles of women urologists at annual aua meetings: a proposed index of gender representation. *J Urol*. 2018;199:e19–e20. Available at: <https://www.jurology.com/doi/abs/10.1016/j.juro.2018.02.145>. accessed January 24, 2019.
4. Cancian Madeline, Aguiar Liza, Thavaseelan Simone. The representation of women in urological leadership. *Urol Pract*. 2018;5:228–232.
5. Spencer ES, Deal AM, Pruthi NR, et al. Gender differences in compensation, job satisfaction and other practice patterns in urology. *J Urol*. 2016;195:450–455.
6. Tsugawa Y, Jena AB, Figueroa JF, et al. Comparison of hospital mortality and readmission rates for medicare patients treated by male vs female physicians. *JAMA Intern Med*. 2017;177:206–213.
7. August 2 O and 2017: Statement on gender salary equity. Am Coll Surg Available at: <https://www.facs.org/about-acs/statements/101-gender-salary-equity>, accessed January 25, 2019.
8. Oliveira DFM, Ma Y, Woodruff TK, et al. Comparison of National Institutes of Health Grant Amounts to first-time male and female principal investigators. *JAMA*. 2019;321:898–900.
9. Alvarez SNE, Jaggi R, Abbuhl SB, et al. Promoting gender equity in grant making: what can a funder do? *Lancet*. 2019;393:e9–e11.

striving to hire and retain female urologists. In fact, well-defined leave benefits, productivity targets, salary components, bias training, and other examples a fair employee treatment should be provided to all urologists when considering joining a practice, not just women. Such clearly explained benefits are common place in federal and academic practices which may explain, in part, why women urologists gravitate toward these jobs despite lower compensation.

For practices eager to hire women urologists, whether academic, hospital-based, or independent practices, awareness of the contractual issues that can be perceived as unfair and biased is critical to successful recruitment. For practices already fortunate enough to have women urologists among their ranks, consider what measures can be taken to retain those individuals.

The responsibility also falls on those urologists, both male and female, that are seeking employment or considering renegotiating a contract. Asking for clarification on benefits and expectations for promotion or partnership is appropriate. If a potential employer is unwilling to provide such clarification, that fact should send a strong message regarding how the urologist will be treated by that employer.

Sherita A. King

*Section of Urology, Medical College of Georgia at Augusta University, Augusta, GA
Section of Urology, Charlie Norwood Veterans Affairs Medical Center, Augusta, GA*

Katherine Fratino

Section of Urology, Medical College of Georgia at Augusta University, Augusta, GA

Martha K. Terris

*Section of Urology, Medical College of Georgia at Augusta University, Augusta, GA
Section of Urology, Charlie Norwood Veterans Affairs Medical Center, Augusta, GA*

<https://doi.org/10.1016/j.urology.2019.05.060>

UROLOGY 133: 3, 2019. © 2019 Elsevier Inc.

EDITORIAL COMMENT



The authors point out many gender disparities in the field of urology. Many are being rapidly addressed in our field. One example is the focused effort by organizers of the American Urological Association Annual Meeting to include women as expert panelists and presenters of meeting highlights. Similarly, the Trustees of the American Board of Urology are 17% female even though the proportion of urologists that trained 20-25 years ago to have reached the level of eligibility for Trustee is only approximately 6% female.

The authors provide an excellent outline of contract components that should be considered by practices

AUTHOR REPLY



The field of urology is certainly making strides to address gender disparity. However, there continue to be outstanding concerns of implicit bias that mitigate efforts toward gender equality and continue to impact women and underrepresented minorities in the workplace even after contractual negotiations are undertaken. Both men and women participate in unconscious behaviors and beliefs that are biased against women¹ and subsequently contribute to significant delays in

time to promotion, decreased publication productivity, grant funding, societal awards, and mentorship for women in comparison to men.²⁻⁴

One example of implicit bias is microaggressions or “subtle snubs, slights, and insults directed towards minorities, women and other historically stigmatized groups, that implicitly communicate or at least engender hostility.”^{5,6} While many of these overt expressions of bias and discrimination are limited, microaggressions are pervasive and can have significant impact on whether a person feels welcome. These can be as simple as referring to a woman physician by her first name rather than the title “Dr.” or promoting the “myth of meritocracy, which is the belief that hard work pays off and that race or sex play no role in determining a person’s success.”⁵

While transparency in policy may exist in some academic centers, it is often skewed toward the promotion and success of men physicians who more often pursue traditional academic research endeavors while women physicians may focus more on education and service to the university. There are multiple influences on men and women’s career paths, including differing mentorship, sponsorship, and home responsibilities. Ultimately, it’s important for all to continue to recognize and understand unconscious behaviors such as microaggressions and respond to them appropriately.

Rena D. Malik

Division of Urology, Department of Surgery, University of Maryland School of Medicine, Baltimore, MD

References

1. Salles A, Awad M, Goldin L, et al. Estimating implicit and explicit gender bias among health care professionals and surgeons. *JAMA Netw Open*. 2019;2. e196545-e196545. <https://doi.org/10.1001/jama-networkopen.2019.6545>.
2. Ellinas E, Rebello E, Chandrabose R, Shillcutt S, Hernandez M, Silver J. Distinguished service awards in anesthesiology specialty societies: analysis of gender differences. *Anesth Analg*. 2019. <https://doi.org/10.1213/ANE.0000000000004132>. Publish Ahead of Print.
3. Oliveira DFM, Ma Y, Woodruff TK, Uzzi B. Comparison of National Institutes of Health Grant Amounts to first-time male and female principal investigators. *JAMA*. 2019;321:898–900. <https://doi.org/10.1001/jama.2018.21944>.
4. Saltzman Amanda, Hebert Kristi, Prats Samantha, et al. Women urologists: trends in mentoring and career choices. *Urol Pract*. 2016;3:302–308. <https://doi.org/10.1016/j.urpr.2016.01.005>.
5. Torres MB, Salles A, Cochran A. Recognizing and reacting to microaggressions in medicine and surgery. *JAMA Surg*. July. doi:10.1001/jamasurg.2019.1648.
6. Sue DW, Capodilupo CM, Torino GC, et al. Racial microaggressions in everyday life: implications for clinical practice. *Am Psychol*. 2007;62:271–286. <https://doi.org/10.1037/0003-066X.62.4.271>.

<https://doi.org/10.1016/j.urology.2019.05.061>
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