

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.<sup>8</sup> Consider targeted funding opportunities for women and formalized mentoring programs. Consider using nongendered terms in applications for funding.<sup>9</sup>

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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.

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## 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 women<sup>1</sup> and subsequently contribute to significant delays in