

Commentary: **The Right Time to Rethink Part-Time Careers**

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Abstract

The demand for part-time academic positions is bound to increase because of the changing demographics of medicine and the needs of both women and men faculty. One of the main benefits of working part-time is the freedom to shape a career that is tailored to one's individualized life needs. Studies indicate

that part-time faculty may enhance quality of care, patient satisfaction, resource utilization, and productivity. Division chiefs and department chairs who have flexible hiring policies to meet the needs of part-time faculty are likely to be more successful in recruitment and retention. The authors describe some of

the benefits and drawbacks of part-time work, and they offer advice for faculty members seeking part-time careers and for leaders seeking to employ them.

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Editor's Note: This is a commentary on Harrison RA, Gregg JL. A time for change: An exploration of attitudes toward part-time work in academia among women internists and their division chiefs. Acad Med. 2009;84:80–86.

Medical school classes across North America are now 50% women, markedly increased from 35% ten years ago. This parallels a dramatic increase in women faculty members: 34% of medical school faculty in 2007 versus 26% in 1997.¹ As in other professions, there seems to be a correlation in medicine between an increase in women faculty and an interest in part-time work, though lifestyle choices and priorities certainly may make part-time commitments attractive to all faculty. Thus the time is right for academic leaders to seriously examine how academic medical centers support part-time careers. In this issue, Harrison and Gregg² tackle this potentially thorny issue through interviews of part-time academics and their division chiefs. In this commentary, we discuss part-time careers on the basis of medical literature and our own personal experiences. One of us is a young faculty member who has worked part-time while child rearing (V.P.); the other is a senior faculty member and chair of medicine who worked part-

time early in her career and now hires part-time faculty members (W.L.).

The Demand for Part-Time Appointments

Interest in part-time academic positions is likely to increase because of the needs of both women and men faculty. A recent Association of American Medical Colleges (AAMC) survey of faculty up to 50 years old found that 1% of men and 18% of women are working part-time as of 2006 (personal communication, Clese Erikson, AAMC, 2008). A recent report has shown that women primarily choose to work part-time in order to raise children, typically returning to more full-time work after their early childbearing years.³ According to AAMC data, men historically have chosen to work part-time close to retirement,⁴ but younger men may be more likely than their older colleagues to make career changes for family reasons,⁵ as men are increasingly sharing child-rearing responsibilities with their spouses. An overall generational effect may account for these trends, with young faculty choosing to pursue other interests outside of work.

This parallels our own personal experiences. Like many women physicians who are part of two-career marriages, we are both married to academic physicians. While we worked part-time, our spouses worked full-time, but they modified their ambitious careers to share in many domestic duties. We debated which of us could work on academic projects on weekends or could travel to competing academic meetings. While in general each

of us carried more of the responsibility for the children than our spouses, we both managed to work out a primary “on-call” roster for home emergencies and schedules for weekday “sign-over” so that no child would be left waiting on the school curb (well, not more than once or twice, anyway). While the specific strategies for managing part-time careers vary, we provide our experiences to highlight the common challenges and sacrifices that part-time faculty face.

The Benefits of Part-Time Work

One of the main benefits of working part-time is the freedom to shape a career that is tailored to one's individualized life needs. Studies in both medicine and other occupations demonstrate greater career satisfaction and happiness in employees who can tailor their work in this way.³ Some participants in Harrison and Gregg's study conceptualized part-time work as “working differently,” meaning they envisioned a personally fulfilling combination of work and other endeavors. They expressed satisfaction with a balance of activities despite the trade-offs this meant for their careers. Other participants saw part-time work as “working less,” meaning being an academic physician in the traditional sense but working fewer hours than others, although this could lead to frustration in not being able to complete work.² We believe this is a very important distinction that resonates with our own challenges in working part-time. On one hand, the choice will allow part-time faculty the time to meet the needs of their families or other outside interests. On the other, there will be consequences, both emotional

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and professional. Faculty may feel inadequate compared with their full-time colleagues who work more. Or they may feel as though they are always letting someone down by giving less than they should: not quite a good enough doctor; not quite a good enough teacher; not quite a good enough wife—as was indeed the case for one of us. There may be a sense of guilt from “underperforming compared with peers.” A consequence of part-time work may be the recognition that lower teaching evaluations on the dimension of “availability to trainees” correlate with happiness among the ranks at home, and that better teaching scores represent too much time at work and occasional domestic crises—as one of us also learned. This “maintenance mode” is hard for academics used to excelling, but, as we’ve learned, reconceptualizing our roles as “working differently” has helped us focus on one major activity at a time.

Division chiefs and department chairs, like those interviewed by Harrison and Gregg, need to weigh the pros and cons of this arrangement. Recent surveys show that more than 80% of departments in academic medical centers employ part-time faculty, particularly in pediatrics, family medicine, and internal medicine.^{6,7} The decision to do so is likely based on rational self-interest. Because the pipeline is full of potential women faculty members, departments that are flexible in meeting their needs are likely to be more successful in high-quality recruitment. For instance, departments of surgery that have historically attracted mainly men applicants have learned that changes in their employee policies can enhance recruitment of women.⁶ Department chairs may question whether part-time faculty members can adequately fulfill their professional obligations, but several studies indicate that part-time faculty may be comparable with or may even outperform full-time faculty in certain measures of quality of care, patient satisfaction, resource utilization, and productivity.^{2,3}

Our experiences support the benefit of part-time careers for effective recruitment and retention. We have spoken with women students and residents who perceive less flexibility in academic medicine than in community practice. They question whether it is worth the effort to seek additional training in research, often their first

choice, if they will complete training and find the work environment inhospitable for their life needs. Some leave for community practice hoping they will be able to return to academics later—not a common outcome. We believe that the number of faculty members who do choose to develop academic career paths is a small proportion of those who would if part-time options were more readily available.

Advice for Faculty and Leaders

There are a host of practical aspects to be taken into account when considering the issue of part-time work. We offer some advice for faculty members seeking part-time careers and for leaders seeking to employ them.

Potential part-time faculty members should talk to others who have worked part-time and self-reflect about how they would shape “working differently.” They should carefully consider academic and personal priorities and clearly articulate their overall goals and plans to trusted mentors. Our experiences show that it is neither possible nor necessary to do everything at once. One of us did not publish a single paper in a peer-reviewed journal until 10 years after completing her training; the three children kept her busy. The other arranged “every-other-year” didactic teaching, less clinical load overall, and a mini-sabbatical to complete some research projects when her children were very small.

Faculty should also be informed about their institutional policies for part-time work before meeting with department leaders. The faculty bear some responsibility for advance planning and offering solutions to challenges that might be raised by the division chief. Most barriers can be overcome with planning, clear expectations laid out beforehand, and some flexibility and humor along the way.

We encourage chairs and division chiefs to proactively consider the option of part-time work in their manpower planning. Clarity about institutional policies regarding part-time responsibilities and privileges is essential. Practical issues likely to enhance recruitment and eventual faculty success include prorated pay and benefits, flexible promotion times, focused mentoring, provision of fairly apportioned administrative support, and sensitivity to

the challenges of finding adequate child care.³ The peace of mind and subsequent ability to concentrate on work afforded by secure child care arrangements cannot be underestimated by departments. End-of-day meetings or rounds add significant stress to faculty trying to meet hard deadlines for picking up small children. Our divisions have rescheduled these meetings for earlier in the day with success.

We also suggest that division chiefs review part-time policies with other divisional members before any active candidates are considered. This allows divisional members to openly discuss issues related to part-time work on their philosophical or practical merits, not as they relate to a specific candidate. The chair or division chief can assuage common concerns about fairness, remuneration, and productivity. Open discussion may even awaken opportunities for existing faculty members who had not previously thought about working part-time. Seeing the emotional benefits that a part-time position can offer, a harried division chief declared to one of us on a stressful day a few years ago, “You have the perfect job. I want your job!” We submit that although no job is perfect, being part-time faculty has worked very well for us personally and that supporting part-time employees can help a department to attract and retain excellent faculty members.

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