

# Gender Differences and Themes in Peer Nominations for Chief Resident: a Qualitative Analysis

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## INTRODUCTION

We sought to describe what qualities residents recognize in peers nominated for the Chief Resident (CR) position and whether particular attributes are valued differently in male and female nominees.

## METHODS

We analyzed peer CR nominations from the University of Chicago Internal Medicine Residency Program for academic years 2013–2015. Nominations were solicited via email and nominators were encouraged to include qualitative comments. We used a constructivist paradigm and grounded theory approach to describe attributes noted for CR nomination and gender differences in those nomination comments. Nominator comments were reviewed using an iterative process and data were analyzed using a constant comparative method with no a priori hypotheses. Themes and sub-themes were generated and refined via discussion to develop a final coding strategy. Two investigators then coded the entire sample using this framework, resolving disagreements by discussion. Descriptive statistics were performed on the data related to gender and post-graduate year of the nominator. The University of Chicago IRB granted this project exemption. This study adheres to the criteria established by the Standards for Reporting Qualitative Research.<sup>1</sup>

## RESULTS

A total of 365 residents (51% female, 49% male) were eligible to submit nominations and be nominated. Female residents represented 44% of the total nominators (126/288), while male residents represented 56% of all nominators (162/288). Of

those female residents who chose to nominate a classmate for the chief resident role, 23% (29/126) were interns, 32% (40/126) were PGY-2, 42% (53/126) were PGY-3, and 3% (4/126) were PGY-4 Medicine-Pediatric residents. Of the 162 male nominators, 6% (9/162) were interns, 36% (59/162) were PGY-2, 57% (93/162) were PGY-3 and <1% (1/162) was a PGY-4 Medicine-Pediatrics resident.

Female residents received 136 (47%) of 289 total nominations, with 87 (64%) of these containing comments. Male residents received 153 (53%) nominations; 93 (61%) contained comments. Female nominators provided comments for male and female nominees at similar rates with 26% of female nominations and 24% of male nominations including comments. Similarly, male nominators provided comments at similar rates, including comments for 38% of female nominations and 37% of male nominations. Self-nominations were infrequent, with only 2% (3/136) of female and 3% (5/153) representing self-nomination.

Seven themes resulted from the iterative coding of the nomination comments. Under each theme, several sub-themes were subsequently described (Table 1).

## DISCUSSION

To our knowledge, this is the first study to describe a skill set that peers identify as important for the role of chief resident of an internal medicine residency program. Our data suggest that four of the Accreditation Council for Graduate Medical Education (ACGME) competencies<sup>2</sup>—Interpersonal and Communication Skills, Patient Care, Medical Knowledge, and Professionalism—are most valued by peer nominators, irrespective of nominator or nominee gender.

Interestingly, our qualitative data suggests that nominators value the same qualities in both male and female CR candidates, and our quantitative analysis showed no significant differences in the rates of nominations by gender. The strikingly similar quantitative and qualitative findings are particularly illuminating in light of the existing leadership gender gap that is evident for women in academic medicine. Despite women comprising nearly half of medical school graduates since the early 1990s, gender inequity continues in academic

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**Table 1 Themes and Sub-themes Generated for All Nominations**

Theme	Sub-theme	Representative quote(s)	Total mentions
Interpersonal and Communication skills	Enthusiasm	“always upbeat” “positive attitude”	241
	Humanism	“integrity and thoughtfulness”	
Patient Care	Approachability	“easy to approach”	171
	Confidence	“confident and outspoken”	
	Interpersonal relationships	“easy to get along with... pleasure to be around”	
	Work ethic	“assists colleagues when needed” “always goes the extra mile”	
	Clinical ability	“strong clinically” “amazing doctor”	
	Coolness under pressure	“composure in...chaos”	
	Organization	“organized and efficient”	
Medical Knowledge	Team management	“runs her team very well and creates a fun, collaborative environment”	145
	Teaching and learning	“motivated as a teacher and a learner”	
Professionalism	Fund of knowledge	“incredibly smart”	116
	Well-respected	“universally respected by her peers”	
Administrative Ability	Leadership	“a natural leader”	44
	Role model	“valuable role model for other residents”	
	Program advocacy	“great advocate for the program”	
Special Attributes	Ability work with administration	“would work well with administration and staff to make good lasting changes for us”	37
	Research experience	“lots of research experience”	
	Career plans	“committed to academia” “plans to go into General Internal Medicine”	
	Partner factors	“[she’s] married to [him]and it would be cute if they were chiefs together”	
Concerns	Personality traits	“problem-solver”	9
	Technical skills	“asset because of skill with iPads”	
	Personality traits	“can be a bit reserved” “is not super extroverted”	
	Job characteristics	“may not like bureaucracy”	

medicine, with evidence suggesting that disproportionately fewer women fill leadership positions<sup>3</sup> and achieve senior academic ranks.<sup>4</sup> From this perspective, our findings may offer some hope that the current generation of physicians in training may be on track to disrupt this status quo.

In conclusion, our data describe a peer-determined skill set valued as important in the role of Chief Resident, and highlight four ACGME competencies: Medical Knowledge, Patient Care, Communication, and Professionalism. Our qualitative data and quantitative data are similar between genders, demonstrating a similar value of specific qualities regardless of the gender of the nominator or nominee. These findings may have important implications for selection of Internal Medicine Chief Residents in the future and for female trainees in internal medicine aspiring to leadership roles.

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#### **Compliance with Ethical Standards:**

**Conflict of Interest:** The authors declare that they do not have a conflict of interest.

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