PATHWAYS OF CLINICAL TRACK FACULTY - WHO IS HERE? WHY? HOW?

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CLINICAL FACULTY TOWN HALL, MARCH 4, 2020



This research was made possible by:

2019 Research Project Grant For Associate Professors

from the

Susan Bulkeley Butler Center For Leadership Excellence

Study (ongoing): Non-Tenure Track Faculty - Opportunities, Strategies, Challenges



Qualitative Study: Non-Tenure Track Faculty Opportunities, Strategies, Challenges -- A semi-structured interview-based study

Recruitment
Data Collection
Data Analysis
Ongoing

Purpose: To understand NTT faculty's career trajectories

Pathways to clinical track, Expectations, Fit, Roles, Responsibilities, Opportunities (& barriers) for professional growth, Applicability of criteria for promotion, Rewards, Recognition, Satisfaction, Mentoring, Supports.



Non-Tenure Track Faculty – Opportunities, Strategies, Challenges

Study inclusion criteria:

Full-time, non-PVM ¹ Purdue faculty member in a NTT position on West Lafayette campus ²

IRB-approved study

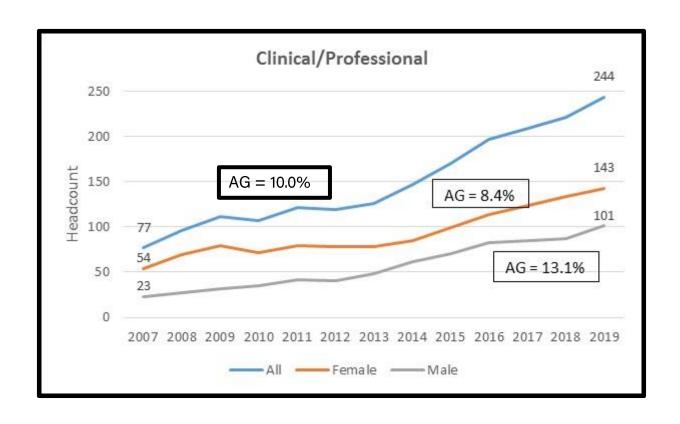
Information on 'Pathways To Clinical Track' based on interviews from <u>16 participants</u>, predominantly female, representing all ranks at time of interview

PRELIMINARY RESULTS

Non-PVM to avoid appearance of conflict of interest due to my appointment within the VAD
 Includes those with clinical practice appointments at clinical sites



Number and Annual Growth of Clinical Track Faculty at Purdue University (West Lafayette campus)

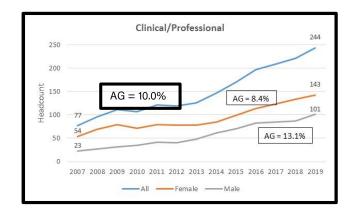


Data Source: Purdue's Data Digest



Number and Annual Growth of Clinical Track Faculty Vs. Tenure Track / Tenured Faculty at Purdue University (West Lafayette campus)

2,000



1,600 1,431 AG = 1.7% 1,338

1,200

800
475 AG = -0.6%

400

2007 2008 2009 2010 2011 2012 2013 2014 2015 2016 2017 2018 2019

All — Female — Male

Tenured/Tenure Track

AG = 0.06%

Data Source: Purdue's Data Digest



1,920

Pathways to Clinical Track: Who is Here?

Most were trained in a typical PhD program, under a tenured major professor

Immediate positions held prior to clinical track entry:

- -- Research trainee / researcher
- -- Administrative / clinical / practicing professional in healthcare or university setting (with or without teaching responsibilities)
- -- Faculty in higher education (without or without administrative responsibilities)

Ranks at time of hire into clinical track: All

What factors determine the rank at hire? Variable, Unpredictable.

Not always a linear progression

Pathways to Clinical Track: Who is Here?

Some roles & responsibilities:

Undergraduate teaching (heavy teaching commitment)

Graduate teaching

Graduate student/clinical trainee supervision

Educational program administration

Clinical service

Mentorship

Engagement activities

Research

Professional service, leadership



Pathways to Clinical Track: Why Clinical Track? Life and Career Factors

Consistently:	Variably:
Passion for teaching, higher education activities Clinical track seemed better fit for	Personal needs, family responsibilities Geographic move: To be close to family To follow partner / spouse
their strengths or life stage than TT Possibility of potential balance with personal responsibilities	Desiring or accepting change in: Career position Career direction Desiring change in:
	Employment sector



Pathways to Clinical Track: How? Recruitment, Application, Hiring Processes

Application to an open, advertised position
Application in response to targeted recruitment
Internal recruitment to meet program's needs
For retaining a valuable individual
For needing specific skills
For filling an area's/unit's faculty needs

Interviews (highly variable formats historically; evolving towards uniformity)
Contracts and negotiations (also evolving)



Pathways to Clinical Track: Some Take-Home Messages

Purdue's clinical faculty are generally positive about where they are now, to have the opportunity to balance their faculty interests, responsibilities with their personal reasons for accepting the clinical track opportunity (from the 'WHY' theme)

BUT

As a group do not have a clear understanding of how ranks at hire ('WHO') were determined

-- Lack of university-level guidelines or policy?

Cause for further distress down the read when promotion criteria and processes are unclear

Cause for further distress down the road when promotion criteria and processes are unclear and a move up the rank seems somewhat impossible

Also, some lack of clarity about how original contract and breakdown of responsibilities across domains of faculty activities came into being ('HOW')



Pathway to Associate Rank within the Clinical Track: My Story



THANK YOU

Study participants for your time and commitment

Meghana and Vinayak Ranade Family Endowment through the Susan Bulkeley Butler Center for Leadership Excellence and the Center's Director and Chair, Dr. Mangala Subramaniam, for her role in setting up new opportunities for innovative faculty research grants

Town hall attendees & fellow clinical faculty members for your attention

Dr. Lisa Mauer, Associate Vice Provost for Faculty Affairs, for this invitation to present

