LETTER



Using the curriculum vitae to promote gender equity during the COVID-19 pandemic

Vineet M. Arora^{a,1}, Charles M. Wray^{b,c}, Avital Y. O'Glasser^d, Mark Shapiro^{e,f}, and Shikha Jain^g

We commend Malisch et al. on their Opinion (1) on immediate solutions to ensure gender equity during the COVID-19 pandemic given the disproportionate burden placed on women due to childcare and household responsibilities. Given early reports showing fewer women are submitting academic papers during the pandemic (2), we encourage institutions to immediately examine how to improve gender equity in the promotion and tenure process. While Pandemic Response Committees can hold institutions accountable for ensuring gender equity, we wish to highlight a simple solution at the individual level, for consideration.

The primary currency of measuring an academic faculty's scholarly output and productivity for promotions and tenure is the curriculum vitae (CV). Therefore, it is critical that the CV for promotions and tenure accurately reflect the full scope and context of an individual's work during COVID-19. To that end, we recently created the COVID-19 CV Matrix (3) to better enable academic health professionals to better document their contributions and also any disruptions they faced during the pandemic. While professional contributions may occur in a variety of traditional categories such as research, teaching, and clinical care, it is also possible that the COVID-19 pandemic results in advocacy or service activities to support frontline teams. For example, several basic science researchers in

one of our institutions led an initiative to donate personal protective equipment (PPE) to frontline clinicians. In addition to contributions, it is equally important to document disruptions in scholarly work. For example, a research trial may have halted enrollment due to a shelter-in-place order, thus slowing participant accrual and trial advancement. Similarly, many faculty have had conference posters or presentations canceled due to the pandemic. Such instances can disproportionately impact junior faculty who require these experiences to advance their careers. Documenting these experiences provides a more holistic picture of both contributions and disruption on a CV for promotion and tenure to evaluate. In addition to contributions and disruptions, the COVID-19 CV Matrix can also account for caregiving responsibilities during this time period, including caring for children while schools are physically closed or for other high-risk individuals who may have contracted COVID-19.

To ensure promotions and tenure committees are equitably evaluating the pandemic period for all faculty, it is critical that a process to evaluate contributions while accounting for disruptions is implemented. The COVID-19 CV Matrix is a potential framework that enables faculty to account for their contributions, disruptions, and caregiving responsibilities and better provide promotions and tenure committees a way to fairly evaluate them.

¹ J. L. Malisch et al., Opinion: In the wake of COVID-19, academia needs new solutions to ensure gender equity. *Proc. Natl. Acad. Sci. U.S.A.* **117**, 15378–15381 (2020).

² G. Viglione, Are women publishing less during the pandemic? Here's what the data say. Nature, 20 May 2020. https://www.nature.com/articles/d41586-020-01294-9. Accessed 21 June 2020.

³ V. Arora, Vinny Arora on the minority tax and Covid19 upheaval in promotions. Explore the Space Podcast, 20 June 2020. https://www.explorethespaceshow.com/podcasting/vinny-arora-on-the-minority-tax-covid19-upheaval-in-promotions/. Accessed 21 June 2020.

^aDepartment of Medicine, The University of Chicago, Chicago, IL 60637; ^bDepartment of Medicine, University of California, San Francisco, CA 94110; ^cDivision of Hospital Medicine, San Francisco VA Medical Center, San Francisco, CA 94121; ^dDepartment of Medicine, Division of Hospital Medicine, Oregon Health & Science University, Portland, OR 97239-3098; ^eSt. Joseph Health Medical Group, Santa Rosa, CA 95405; [†]Hospital Medicine, Santa Rosa Memorial Hospital, Santa Rosa, CA 95405; and ^gDivision of Hematology and Oncology, University of Illinois at Chicago Cancer Center, Chicago, IL 60612

Author contributions: V.M.A., C.M.W., A.Y.O., M.S., and S.J. wrote the paper.

The authors declare no competing interest.

Published under the PNAS license.

¹To whom correspondence may be addressed. Email: varora@uchicago.edu. First published September 17, 2020.