

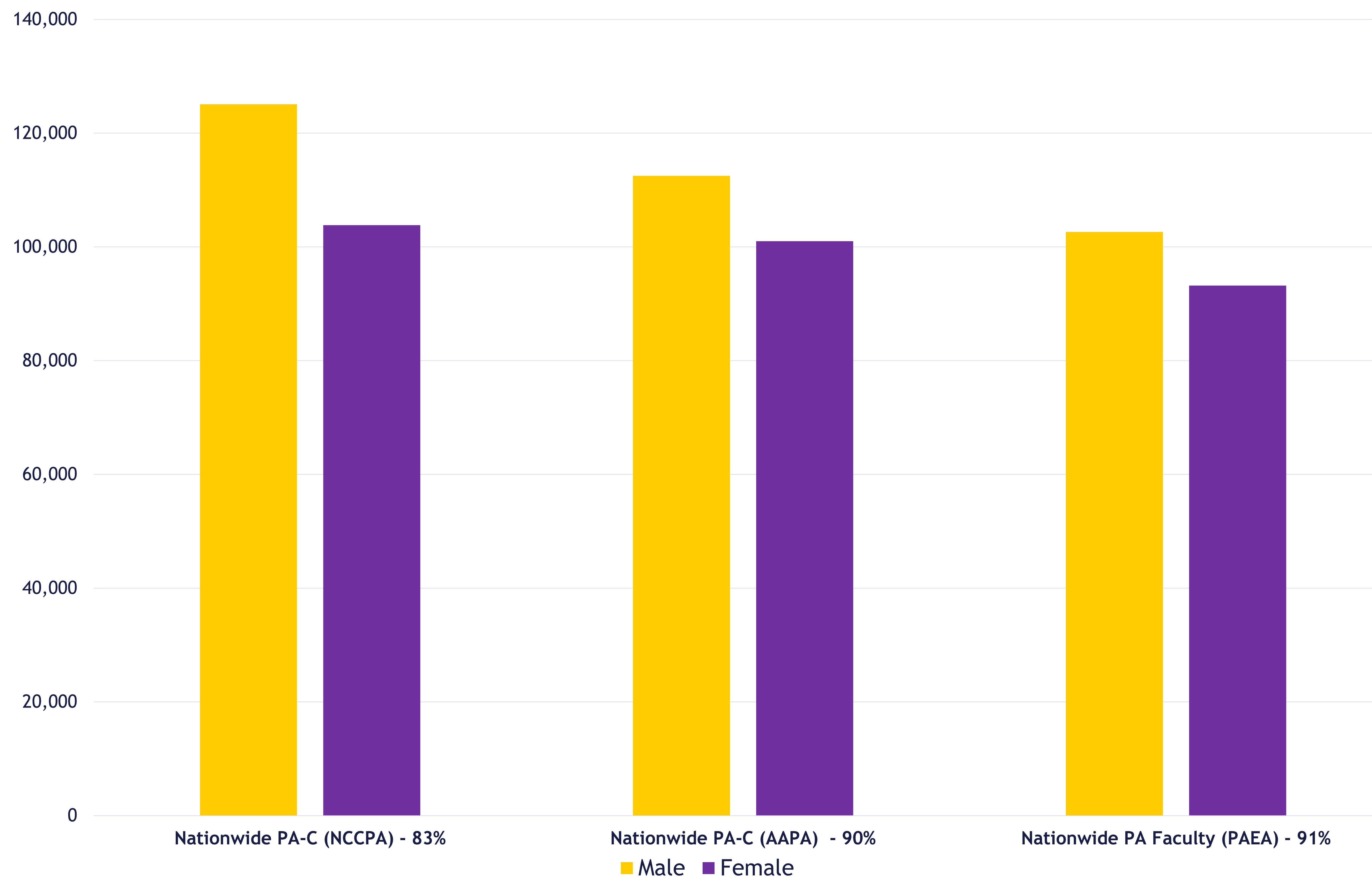
Background

Gender pay disparities in the PA profession have been well documented for decades. A robust source of this data is the annual survey completed by the American Academy of Physician Assistants (AAPA), which cross references this information with various employment factors such as average number of hours worked per week and on-call duties.¹

The number of PAs whose full-time employment is teaching in physician assistant programs is growing rapidly, as the number of PA education programs expands. While colleges and universities are often considered to be progressive environments, research by the Physician Assistant Education Association (PAEA) demonstrates that the gender wage gap persists in this setting, as well.²

The implications of reduced lifelong earning potential for women include limited ability to attain economic stability, increased time to repay student loan debt, and decreased ability to save for dependent's college and personal retirement.³

Gender Wage Gap Data



Methods

The Physician Assistant Education Association (PAEA) 2017 Faculty and Directors report, published in 2018, provides nationwide data stating salary information by gender. The national sample size is 781 faculty members, and a significant gender salary disparity is demonstrated. For those respondents that listed a specific salary figure, as opposed to a range, the mean male salary is \$9,432 higher than the mean female salary (\$102,638 vs \$93,206).²

Similar nationwide data on clinically practicing PAs from National Certification Commission of Physician Assistants (NCCPA) for the years 2016-2018 was obtained.⁴ A significant gender salary disparity is also demonstrated by this data.

Finally, the 2018 AAPA Salary Report was also reviewed, which demonstrated that the mean male salary is \$11,500 higher than the mean female salary (\$112,500 vs \$101,000).⁵

Results

A significant PA gender pay disparity exists among both clinically practicing PAs and PA faculty members. Clinically practicing PAs earn more overall than PA faculty members, and the gender pay disparity is greater for clinically-practicing PAs than for PA faculty members.

For PA faculty members who listed a specific salary figure, the mean male salary is \$9,432 higher than the mean female salary: \$102,638 vs \$93,206.² Female PA faculty members earn 91% of male faculty compensation. NCCPA data demonstrates that female PAs make 83% of their male counterparts' salaries.

The PAEA and NCCPA figures reflect gross data, without adjustment for potential influencing factors. Gross AAPA data demonstrates that female PAs earn 90% of their male counterparts' salaries. When AAPA adjusted for factors that may affect pay, including experience, specialty, leadership roles, and weekly hours worked, female PAs were shown to earn 94% of their male counterparts' salaries.⁵

Discussion

When examining gross pay, a significant PA gender pay disparity exists for physician assistants working full time in both academic and clinical practice settings. The disparity is slightly less for full-time PA faculty members than for all PAs.

Acknowledgement of this disparity as a problem and prioritization of addressing the issue are key initial steps. To reduce the inequity, various options can be considered. Potential approaches include:

1. Performing regular pay equity analyses to ensure that pay remains based on relevant variables, such as education, length of employment, positions, and contributions to the institution, ensuring that promotion and compensation decisions are made fairly.
2. Determining compensation in a group setting and making an overall effort to increase transparency pertaining to salary.
3. Offering salary negotiation education and advocacy training for practicing PAs and PA students.

Further research into this issue is warranted, particularly analysis of factors that may affect pay for PA faculty members to be able to better compare this to the AAPA data. Comparisons of public vs. private settings may be useful, as public entities may have more transparent processes. Identification of PA programs or clinical employers that have gender pay equality may create case studies that could be helpful for other PA employers.

References

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