

**C-CHANGE FACULTY SURVEY<sup>®</sup>**

<b>Dimensions of the Culture</b>	<b>Cronbach <math>\alpha</math></b>
<b>VITALITY: Being energized by work (5 items)</b> <i>Find work energizing and personally meaningful; self-assessment of burnout.</i>	.80
<b>SELF-EFFICACY IN CAREER ADVANCEMENT: Confidence in ability to advance in career (3 items)</b> <i>Confident in ability to progress in career and overcome barriers to advancement.</i>	.80
<b>INSTITUTIONAL SUPPORT: Perception of institutional commitment to faculty advancement (4 items)</b> <i>Perceive that the institution is committed to faculty success and professional development; provides career help, feedback and appropriate credit; faculty feel part of a supportive community.</i>	.88
<b>RELATIONSHIPS/INCLUSION/TRUST: Faculty relationships and feelings of trust and inclusion (5 items)</b> <i>Faculty relationships; being in a trustworthy environment; able to express views authentically; feelings of belonging and being included.</i>	.84
<b>VALUES ALIGNMENT: Alignment of faculty personal values and observed institutional values (6 items)</b> <i>Extent of alignment of faculty personal values with observed institutional values vs. espoused values, including value placed on teaching, clinical excellence and inclusive decision making.</i>	.79
<b>ETHICAL/MORAL DISTRESS: Feeling ethical or moral distress and being adversely changed (8 items)</b> <i>Feel ethical or moral distress; need to behave unethically to succeed; being adversely changed, developing personally undesirable behaviors such as aggression, deceit, self-promotion.</i>	.79
<b>RESPECT: Faculty feel respected; bullying (8 items)</b> <i>Feel valued and personally respected; bullying and intimidation.</i>	.86
<b>MENTORING (6 items)</b> <i>Mentoring received, key components.</i>	.92
<b>LEADERSHIP ASPIRATIONS: Aspiring to be a leader in academic medicine (4 items)</b> <i>Want to make positive change; aspire to be a leader in academic medicine.</i>	.72
<b>WORK-LIFE INTEGRATION: Institutional support for managing work and personal responsibilities (4 items)</b> <i>Institutional support for managing work-life integration; able to take time for personal and family issues; maintain a reasonable balance in life.</i>	.75
<b>GENDER EQUITY: Perceptions of equity for female faculty (7 items)</b> <i>Perceive that their institution treats female faculty equitably and supports the advancement of women; unconscious bias.</i>	.80
<b>EQUITY FOR UNDERREPRESENTED FACULTY: Perceptions of equity for URM* faculty (5 items)</b> <i>Perceive that their institution treats URM faculty equitably; supports the advancement of URM; demonstrates commitment to diversity.</i>	.84
<b>INSTITUTIONAL CHANGE EFFORTS FOR DIVERSITY (3 items)</b> <i>Perceive good faith effort by their institution to advance female and underrepresented faculty.</i>	.84
<b>INSTITUTIONAL CHANGE EFFORTS FOR FACULTY SUPPORT (5 items)</b> <i>Perceive good faith effort by their institution to improve support for faculty through initiating policy and programmatic change.</i>	.86
<b>VALUING DIVERSITY: ATTITUDES AND BEHAVIORS (8 items)</b> <i>(a) attitudes: valuing diversity in work teams</i> <i>(b) behaviors: preferential consideration of diversity in recruitment and advancement</i>	.89
<b>ANTI-SEXISM AND ANTI-RACISM SKILLS (4 items)</b> <i>Extent to which faculty have the skills to identify and effectively respond to sexism and racism.</i>	.84
<b>CHANGE AGENCY FOR EQUITY (7 items)</b> <i>Confident in ability to act as a change agent to oppose racism and sexism.</i>	.82

The CFS also assesses sexual harassment, discrimination and intention to leave.

\*URM indicates individuals from racial and ethnic groups that have been shown by the National Science Foundation and the National Institutes of Health to be underrepresented in health-related sciences and STEM fields on a national basis.

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