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If academia better supported women scientists like me, I may have opted to stay

25 NOV 2021 · BY [AVIKA DIXIT](#)

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The hashtag #GiveHerAReasonToStay appeared on my Twitter feed 1 week after I decided to walk away from academic medicine.

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Growing up in India where infectious diseases are major killers, I wanted a career that would give me an opportunity to alleviate some of the suffering. To follow my calling, I completed medical school in India before moving to the United States for 6 years of subspecialty training and two master's degrees. After a postdoc, I was promoted to an instructor position, which entailed a mix of patient care, teaching, and research. It was a soft-money position that required me to bring in my own research salary, but I was happy. I seemed well on my way to becoming an independent physician-scientist.

Soon after my promotion, my partner and I decided to start our family. I had put it off, as many women in academia do, hoping for a time when my career felt more stable. But I realized that stability on the soft-money path—common for physician-scientists—was an elusive dream. I had my daughter in November 2019 and took 12 weeks of maternity leave. Then, just as I was returning to work and gaining my bearings, COVID-19 hit. I wasn't prepared for what came next.

My hospital was facing financial stress because all elective procedures had been canceled. My research funding and salary came from an internal grant, and I hadn't received a funding extension because of my maternity leave. I began to have an unshakable feeling that I was about to fall off a cliff as the grant's end date neared.

“

I ... wonder how my career would have played out if I'd felt better supported in academia.

AVIKA DIXIT | MODERNA THERAPEUTICS

For more than a year, I went doggedly back and forth between manuscript writing, patient care, and rushing to meet grant deadlines. I submitted seven grant applications in 6 months, all while learning to be a new mother, coping with sleep deprivation, and struggling to secure child care during a raging pandemic. Even as restrictions eased and child care became available, I could not afford enough hours on an academic salary. My partner ended up having to shoulder more than his share.

Eventually, I received good news: The U.S. National Institutes of Health had given my application for a prestigious early-career grant a “fundable” score. But by then I wasn't sure I wanted it. The stress and long hours I'd been working had taken a toll on my mental and physical health and weakened my bond with my daughter. I didn't want to chase yet more funding once that grant came to an end.

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At first, the thought of walking away from everything I had dedicated my life to led to an identity crisis. Then I remembered why I began this journey in the first place: to help others. So, I began to explore nonacademic careers that would allow me to use my skills as an infectious disease expert. Two months ago, I joined a biopharmaceutical company, where I continue to leverage my research skills and clinical experience, without the stress of securing my own salary.

I'm glad I took the leap to industry, but I also look back and wonder how my career would have played out if I'd felt better supported in academia. I might not have considered leaving if I had been offered backup bridge funding and better child care support. I encourage institutions to look closely at the challenges early-career researchers, especially scientist mothers, face and develop policies that give them a reason to stay. We cannot afford to give up on closing the gender gap. The next medical

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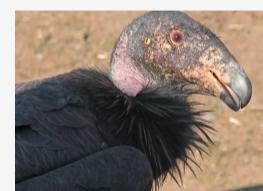
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