

Table 1. Sex Differences in Personality Scale Scores.

Scale	Mean	SD	Mean	SD	t	d
<i>HPI Scale</i>						
Adjustment	38.89	31.41	33.29	27.85	.77 ₍₆₆₎	.19
Ambition	27.46	26.22	23.10	22.65	.73 ₍₆₆₎	.18
Inquisitiveness	67.57	22.91	47.68	22.77	3.58 ₍₆₆₎ **	.88
Interpersonal Sensitivity	57.78	32.74	58.58	33.30	-.10 ₍₆₆₎	.02
Learning Approach	51.57	29.18	54.58	25.90	-.45 ₍₆₆₎	.11
Prudence	32.54	26.31	48.32	32.02	-2.23 ₍₆₆₎ *	.55
Sociability	67.24	23.38	49.87	25.16	2.95 ₍₆₆₎ **	.73
<i>HDS Scale</i>						
Excitable	58.80	26.66	53.20	30.73	.75 ₍₅₅₎	.20
Skeptical	64.34	26.56	61.92	22.25	.37 ₍₅₅₎	.10
Cautious	67.63	28.21	72.24	29.02	-.62 ₍₅₅₎	.16
Reserved	60.43	28.71	57.28	30.29	.41 ₍₅₅₎	.11
Leisurely	61.74	28.52	68.60	24.92	-.97 ₍₅₅₎	.25
Bold	40.74	30.98	47.12	33.69	-.76 ₍₅₅₎	.20
Mischievous	53.23	31.11	50.04	34.23	.38 ₍₅₅₎	.10
Colorful	53.97	30.28	45.08	25.69	1.19 ₍₅₅₎	.31
Imaginative	56.80	27.89	44.40	31.78	1.60 ₍₅₅₎	.42
Diligent	55.11	33.20	53.92	27.66	.15 ₍₅₅₎	.04
Dutiful	62.74	26.42	57.56	32.01	.69 ₍₅₅₎	.18
<i>MVPI Scale</i>						
Aesthetics	67.41	27.17	59.80	28.99	1.03 ₍₅₇₎	.27
Affiliation	55.94	30.47	57.52	30.37	-.20 ₍₅₇₎	.05
Altruistic	75.97	21.32	74.56	19.03	.26 ₍₅₇₎	.07
Commercial	29.53	28.02	28.56	21.47	.14 ₍₅₇₎	.04
Hedonistic	73.38	26.18	75.84	26.65	-.35 ₍₅₇₎	.09
Power	47.32	26.25	52.68	27.18	-.76 ₍₅₇₎	.20
Recognition	44.00	31.84	48.72	28.99	-.58 ₍₅₇₎	.15
Scientific	83.74	17.78	82.20	19.41	.32 ₍₅₇₎	.08
Security	47.62	27.36	38.12	25.27	1.36 ₍₅₇₎	.36
Tradition	33.18	25.86	23.72	21.47	1.49 ₍₅₇₎	.39

HDS, Hogan Development Survey; HPI, Hogan Performance Inventory; MVPI, Motives, Values, Preferences Inventory. ns=34 to 37 males; ns=25 to 31 females. Scores on each measure could range from 0-100%. Degrees of freedom are shown in parentheses.

4 Speaker Training Pilot Program for Women in Health Care Decreases Fear of Public Speaking

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Background: Effective and engaging public speaking is a skill that facilitates academic advancement in healthcare by increasing name recognition as a source expert and creating networking and collaborating opportunities. Studies suggest that female speakers are under-represented in academic settings and face unique challenges in developing speaking skills. To address this problem, our institution’s resource group “Women Advancing and Achieving in Medicine” piloted a women’s speaker training program.

Objectives: This study aims to assess feasibility, value to participants, and effectiveness in encouraging public speaking.

Methods: Participants were nominated by department chairs to attend a 6-month program created in collaboration with Speaker Sisterhood, a network of speaking clubs for women. Sessions included didactics, speaking exercises and immediate group feedback, culminating in a final videotaped speech by each participant. Participants completed a before and after validated survey “Personal Report of Communication Apprehension” (PRCA_24). Qualitative reported value to participants was documented in their final videotaped session. Non-parametric Wilcoxon Ranks Signed tests were run in conjunction with descriptive statistics using SPSS software.

Results: 28 participants registered for the program, 57.7 % being attending physicians and the remainder trainees or advanced practitioners. Over 70% of participants reported professional advancement as motivation to attend. 16 completed the pre and post-survey PRCA-24. Post-program scores (55.5, IQR 53.75-63.25) were statistically significantly lower than pre-program scores (65, IQR 58.75-66.5).

Conclusions: This pilot women’s speaker training program resulted in decreased apprehension around public speaking among our participants. Participants reported the program gave them in increased comfort in teaching that may lead to career advancement.

5 When Less is More: A Novel Strategy for Improving Resident Evaluations

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Background: Residency programs from all specialties, including Emergency Medicine (EM) frequently have difficulty obtaining a sufficient amount of meaningful feedback