This binder package contains:

- Interview profile edited to new format
- Original Interview Profile
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- Original Segment Summaries
Elizabeth L. Travis, Ph.D.

Interview #53

Interview Profile

Interview Information:

Two interview sessions: 24 and 25 March 2014
Total approximate duration: 3 hours and 40 minutes
Interviewer: Tacey A. Rosolowski, Ph.D.

For a CV, biosketch, and other support materials, contact:

Javier Garza, Archivist, Research Medical Library
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About the Interview Subject:

Elizabeth L. Travis (b. 29 September, Pittsburg, Pennsylvania) came to MD Anderson in 1982 as an associate professor in the Department of Experimental Radiation Oncology. She is now the Mattie Allen Fair Professor in Cancer Research in that Department, which is part of the Division of Radiation Oncology. She is also a professor in the Department of Pulmonary Medicine.

Dr. Travis is known for her discoveries of how radiation therapy affects normal lung tissue. Since 2006 Dr. Travis has served as Associate Vice President for Women Faculty Programs.

Major Topics Covered:

Personal and educational background

Research in radiation oncology—effects on normal lung tissue

Evolution of thinking about gender and impact of gender on careers/institutions

Formation of Women Faculty Organization

First study of gender inequity at MD Anderson

Formation of the Office of Women Faculty Programs (2006)

Leadership

Advancing women’s leadership within the institution and beyond
Gender issues: life-balance issues; women in leadership roles; leadership styles; unconscious bias; impacts of equalizing gender (and diversity) representation.

A note on transcription and the transcript:

This interview had been transcribed according to oral history best practices to preserve the conversational quality of spoken language (rather than editing it to written standards).

The interview subject has been given the opportunity to review the transcript and make changes: any substantial departures from the audio file are indicated with brackets [ ].

In addition, the Archives may have redacted portions of the transcript and audio file in compliance with HIPAA and/or interview subject requests.
This interview with Dr. Elizabeth Travis (b. 29 September, Pittsburgh, Pennsylvania) takes place on 24 and 25 March 2014 (total duration, approximately 3 hours and 40 minutes). Dr. Travis came to MD Anderson in 1982 as an associate professor in the Department of Experimental Radiation Oncology. She is now the Mattie Allen Fair Professor in Cancer Research in that Department, which is part of the Division of Radiation Oncology. She is also a professor in the Department of Pulmonary Medicine. Since 2006 Dr. Travis has served as Associate Vice President for Women Faculty Programs. This interview takes place in Dr. Travis’ office in Pickens Academic Tower on the Main Campus of MD Anderson. Tacey A. Rosolowski, Ph.D. is the interviewer. Dr. Travis contributed a personal narrative to the book, *Legends and Legacies: Personal Journeys of Women Physicians and Scientists at MD Anderson Cancer Center.*  

Dr. Travis received her B.S. in Biology in 1965 from Indiana University of Pennsylvania (Indiana, Pennsylvania) and her Masters of Education in 1967 from the University of Pittsburgh Graduate School of Public Health and Graduate School of Education in Pittsburgh, Pennsylvania. She completed her doctoral work in Experimental Pathology and Radiation Biology at the Medical University of South Carolina in Charleston, South Carolina (Ph.D. conferred in 1976). Dr. Travis did her post-doctoral fellowship from 1976−1979 as a Research Scientist/Lecturer in the Department of Radiation Biology at the Mount Vernon Hospital Gray Laboratory in Northwood, Middlesex, United Kingdom. She was then recruited to serve as Cancer Expert at the National Institutes of Health (National Cancer Institute, Bethesda, MD), a position she held from 1979 to 1982, when she was recruited to MD Anderson’s Department of Experimental Radiation Oncology. In the research arena, Dr. Travis is known for her discoveries of how radiation therapy affects normal lung tissue. She has had an impact on the institution through her leadership of the Office of Women Faculty Programs.

In this interview, Dr. Travis first sketches her small-town roots in a second-generation Italian-American family, where she was encouraged to get an education but there was limited understanding of where that opportunity might lead a girl. She traces her pathway to the independent research career she envisioned for herself and discusses the innovative research on normal lung tissue that won her attention from the Gray Laboratory in the UK, from the NIH and then from MD Anderson. While discussing her career path, Dr. Travis also describes how her thinking about gender evolved and became a commitment to work on women’s issues at MD Anderson. She provides a historical view of how gender came to the attention of the institution’s executive level under Dr. Charles LeMaistre, gaining real administrative support. She talks first about the formation of the Women Faculty Organization and the initial surveys that revealed gender inequities at MD Anderson. She then talks about the formation of the Office of Women Faculty Programs in 2006 and the work she has done since that time to 

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advance women’s leadership skills and visibility both within the institution and beyond. Throughout, Dr. Travis offers observations on a range of gender and life-balance issues: challenges to women as they move into leadership roles; differences in women’s and men’s leadership styles; how unconscious bias results in gender inequity; how equalizing gender (and diversity) representation strengthens problem-solving power; the fundamental need that all professionals have for a healthy personal life.
Elizabeth L. Travis, Ph.D.

Interview #53

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Interview #53

Segment Summaries

Interview Session One: 24 March 2014

Segment 00A

Interview Identifier

Segment 1
A Passion for Science Leads to Radiation Physics
A: Educational Path

In this segment, Dr. Travis talks about her family background and the educational track that led her to a career in radiation physics. She explains that she is a second generation Italian-American raised in the small town of Wilmerding, Pennsylvania. Her family owned a bar/restaurant and she grew up working there from an early age, developing her work ethic in the process. Though her parents had only finished high school, both insisted that their children go to college.

Dr. Travis notes that she knew very early that she was interested in the sciences, but observes that ideas about careers for women at that time were very limited, and she thought of becoming a dancer or a flight attendant until tenth grade (at Westinghouse Memorial High School). At that point her biology teacher, Mr. Smith, had a great mentoring influence. She describes how Mr. Smith brought together all the science-focused students in her class into a community (where gender was not an issue). He helped her parents understand that she should go to college for the sciences, though she was encouraged to become a teacher at that point.

Dr. Travis attended Indiana University of Pennsylvania (B.S. 1965) and notes influences important during this period, including a course in radiation physics and an opportunity she took to work in a radiation physics laboratory at the University of Pittsburgh during a summer. Dr. Travis explains her decision to go to graduate school for her Masters program. She mentions her marriage at the end of her first year in graduate school and how that influenced the path of her early career, taking her to South Carolina.

Dr. Travis talks about her involvement in training and the satisfaction she takes in developing young minds. She shares her philosophy of mentoring: listening to identify where an individual needs help, offering constructive advice when needed.
In this segment, Dr. Travis explains that she was working as a Research Associate in the Department of Radiation Health, (1965–1967) Radiobiology Laboratories, Graduate School of Public Health, University of Pittsburgh, Pittsburgh, PA) when she realized that she missed the laboratory. She accepted a position that involved teaching and starting up a laboratory at the Department of Radiology at the Medical University of South Carolina (Charleston, SC, 1968–1971).

Dr. Travis recounts a story that she often tells women to demonstrate how women professionals often don’t believe in themselves. She explains that she was offered a position teaching and starting up a laboratory for the Department of Radiology at the Medical University of South Carolina, Charleston, SC, (1968–1971). She first turned the job down. “I had PhDs telling me I could do the job, but I didn’t believe it.” She immediately regretted the decision and called back the next day, taking on that challenge as well as the opportunity to work for her Ph.D. at the Medical University of South Carolina.

Next Dr. Travis talks about her evolving awareness of gender issues. She explains that she had always been aware of gender. She notes that she attended a very good high school (Westinghouse Memorial High School) where she felt that boys and girls were treated equally. She also notes family influences on her sense of equality. Dr. Travis then talks about how the sixties and limitations on women that are unimaginable now.

Dr. Travis also recounts an experience of sexism she had in the Department of Radiation Therapy at the Medical College of South Carolina. She had been hired to set up a laboratory, however when the head of the department hired a man to assist her, he offered this inexperienced new hire $4000.00 more in salary than Dr. Travis was paid “because he had a family and children.” Her salary was increased by $4000 (but no more). “We think it’s a meritocracy,” Dr. Travis says. “But it’s not true. You have to know how to promote yourself.”

Dr. Travis next tells about her decision to go overseas after completing her PhD. The University of South Carolina wanted her to stay, but she wanted to develop her research career and applied for post-doctoral programs, taking a position in London as a Research Scientist (lecturer) in the Department of Radiation Biology at the Mount Vernon Hospital Gray Laboratory (Northwood, Middlesex, United Kingdom, 1976–1979). Dr. Travis explains that the Gray Laboratory was a “Mecca” of radiation therapy and she was selected for their postdoctoral program because of her work on radiation and normal tissue.
Segment 3
The Start of a Research Career on the Effects of Radiation on Normal Lung Tissue
A: The Researcher

Segment 3 Codes
A: The Researcher
A: Professional Path
A: Career and Accomplishments
C: Discovery, Creativity and Innovation
D: On Mentoring
A: Professional Path
D: Technology and R&D
D: Discovery and Success;

In this segment, Dr. Travis explains how her research career really began between 1976−1979, when she was a Research Scientist/Lecturer at the Gray Laboratory (Mount Vernon Hospital, Northwood, Middlesex, United Kingdom). She notes that “they took a chance on her,” as she had never been awarded a grant, but they saw potential and recognized that she had knowledge of lung pathology and radiation therapy. This was key, as the field of radiation therapy was starting to focus on the effects of radiation on normal tissue. Dr. Travis lists the researchers who were at the Gray lab at that time. She talks about the atmosphere and notes some lessons in mentoring she received from the laboratory head, Jack Fowler.

Next, Dr. Travis describes a collaborative project she undertook to develop a non-invasive assay of lung tissue after irradiation that involved measuring the breathing rates of mice as they developed lung damage from radiation therapy. She describes the rationale of the study as well as the challenges of measuring the breathing rate of mice. She describes the device she and her colleagues developed to measure breathing rates (see Figure One) and notes that this was the first time that anyone had measured breathing rates as animals developed lung damage from radiation.

Next she notes that it was very hard to get the field to accept the findings and describes how she and her colleagues addressed this by arranging for their measurements to be confirmed. With that evidence gathered, their paper was published (1977/78). Dr. Travis next describes one regret: that she didn’t patent this device and another (described below): both have been picked up by companies and are still being sold thirty years later.

Next Dr. Travis describes the “jig” she developed to immobilize non-anaesthetized mice for irradiation (see Figure 2). This was developed to simulate how patients are irradiated in the clinic and Dr. Travis explains how they were working with fractionated doses.
Dr. Travis goes on to describe more of her work at the Gray Laboratory and why it was such an ideal environment. She talks about the goals she had set to achieve in London and notes that at the end of her three years there, she had an independent research career.

Segment 4
*Furthering a Research Career at MD Anderson*
A: The Researcher

Segment 4 Codes
A: The Researcher
A: Joining MD Anderson
C: Evolution of Career
A: Professional Path
C: Professional Practice
C: The Professional at Work
D: On Research and Researchers
D: Discovery and Success
C: Collaborations

Dr. Travis begins this segment by explaining that she was aware of MD Anderson throughout her career. After her post-doctoral fellowship at the Gray Laboratory, she was recruited to serve as Cancer Expert at the National Institutes of Health (National Cancer Institute, Bethesda, MD, 1979–1982) and she was recruited by Lester Peters for MD Anderson in 1982. Next Dr. Travis explains how her work on radiation damage to normal lung tissue in mice had implications for patient care. She describes some experiments conducted to explore radio-protectors, radiosensitization, and strategies for changing the fractionation of beams to do less tissue damage. She undertook this work at MD Anderson and mentions individuals she worked with and the seminal data produced showing that it was better to use a lot of radiation on a small area of tissue to do the least damage to normal disuse.

Dr. Travis notes that she came to MD Anderson as an Associate Professor and she was the only woman in the Department of Experimental Radiation Oncology. She describes the department as very vibrant, one of the best in the field, and she brought her focus on normal tissue, which no one else was researching at the time. She also observes that the Department “took a chance” on her, as she had no grant funding at the time. However her first R01 grant proposal was funded; she also had a program project grant.

Dr. Travis describes how writing grant proposals helped her develop as a researcher during her first years at MD Anderson. She explains how a grant proposal creates a road map for an experiment and forces the researcher to articulate hypotheses and think about a research question in a holistic way. “You see it from 35,000 feet,” she says.

Dr. Travis compares her experience at MD Anderson with the environment at the NCI.
Dr. Travis explains how a movement to address women’s issues began in the eighties. The University of Texas System had convened a Commission on Women and Minorities. She also notes that Dr. Margaret Kripke, a major player in these events, came to MD Anderson in 1983. Dr. Kripke put together a small, ad hoc group to work on the status of women at MD Anderson. Included were: Elizabeth Travis, Lillian Fuller, and Judy Watson (Dr. Charles LeMaistre’s “right hand”). They conducted a study (1984) and found inequities: unequal pay for women; women took longer to be promoted, women were not serving on committees or as department chairs or in high-profile positions. Dr. Kripke took the data to Dr. LeMaistre and the Vice President of Research, Dr. Frederick Becker. She notes that women themselves were generally not aware of the inequities prior to the report. Next, the ad hoc group started the Women Faculty Organization to work for access to opportunities for women. She explains why it was important that senior women comprised the core groups. She also reflects on how the activities of the group were received.

Dr. Travis next talks about the rationale for putting together the book, Legends and Legacies, one of the first projects of the Office of Women Faculty Programs.

Dr. Travis tells a story about a table in the dining room of the Clark Clinic where men always ate their lunch. She recalls a day when the women involved in the Women Faculty Organization reserved it, much to the men’s shock. She talks about how humor was important as she and others worked for visibility for women. She tells how the “dining table” incident developed and showed a shift in the culture.

Next, Dr. Travis explains how the Office of Women Faculty Programs operates, stressing that women alone cannot make these changes to culture, the men in the institution must also be engaged. She talks about some measures of success: e.g. in 2007, nine out of the eleven faculty receiving faculty achievement awards were women. She goes on to talk more about the evolution of the early movement to address gender issues, when the faculty group was expanded to include women on the administrative side, as changes were not happening fast enough. In 1996, Dr. Travis observes, another survey was conducted about women in leadership confirming few women in high positions. At that point, Dr. Travis notes, Dr. Margaret Kripke was Chief Academic Officer and was in a position to correct inequities and identify rising-star women. Dr. Kripke was also on the point of retiring and concerned that she would leave a vacuum at the leadership table. (She was the first and only woman to date to sit on the President’s executive committee.) Dr. Travis explains that Dr. Kripke hired consultants (Wanda Wallace and one other consultant) to suggest plans of action. The idea for a dedicated office addressing women’s issues was formed. Dr. Travis applied for the position (and she explains
why she decided to slow down her research career at this point), as she had always been passionate about gender issues.

Segment 06
The Office of Women Faculty Programs: Activities and Challenges
A: The Administrator

Segment 6 Codes

A: The Administrator
B: MD Anderson History
B: MD Anderson Culture
B: Growth and/or Change
B: Gender, Race, Ethnicity, Religion
C: Diversity at MD Anderson
C: Controversies
C: Professional Practice
C: Leadership
D: Women and Diverse Populations
B: Obstacles, Barriers, Challenges

in this segment, Dr. Travis describes some of the main projects developed through the Office of Women Faculty Programs (which opened in 2007). She begins by describing the book, Legends and Legacies (published 2008), that brought together personal narratives written by MD Anderson’s key women scientists and clinicians. She notes that she worked with Mary Jane Schier, Steve Stuyck, and Maria Dungler in the Public Affairs Office. She also explains the rationale behind the photograph best associated with the book: a group photo of the featured women dressed in cocktail dresses. She notes that it was inspired by an Annie Liebowitz photograph, but also notes that the group photo stresses that “We have to build communities of women.” She describes the book launch events and the impact of the book on the institution, noting that the book put a different and more human face on the women of the organization.

Next Dr. Travis describes several early activities of Women Faculty programs, including the website and its monthly online feature, “Women Leading the Way.” She also describes setting up the Kripke Legend Award to honor people who promote and women: it is a highly competitive in cancer medicine and is awarded to women and to men.

Next Dr. Travis describes reactions to the Office’s activities: “Male colleagues were not happy,” and Dr. Travis explains that she was described as “too strident.” There are still naysayers, she observes. Next she describes how she learned to address complaints after a particularly difficult set of personal attacks. She went to Dan Fontaine in the UT System for advice. He said, “Do a survey of Division and Department heads about Women Faculty Programs.” She explains the results and discusses how important it was that she reported the results at the Research Council and Clinical Council –transparency that did a great deal to change the tone of reactions to her work.

Dr. Travis explains that the Office of Women Faculty Programs is an independent office that reports directly to the Provost.
Dr. Travis stresses that the focus of the Office of Women Faculty Programs is to promote women into leadership positions. She explains that women leaders bring a different perspective and different problem-solving strategies to institutions when they are in leadership roles.

Dr. Travis explains some of the changes in culture she has observed at MD Anderson: for example, men on search committees now will say, “There are no women.” Dr. Travis then explains that many people resist thinking about gender as an issue because they feel they are being accused of not being fair-minded. At the end of this session, she talks about how she handles this and how the institution has changed.

Interview Session Two: 25 March 2014

Segment 00B
*Interview Identifier*

Segment 7
*Women Faculty Programs: Its Beginnings; Awards for Progress Made*

B: An Institutional Unit

Segment 7 Codes

B: MD Anderson History
C: Leadership
B: Institutional Mission and Values
B: MD Anderson Culture
B: Gender, Race, Ethnicity, Religion
C: Discovery and Success
C: MD Anderson Impact

In this segment, Dr. Travis reviews the history leading to the formation of the ad hoc committee in the 80s tasked to evaluate the status of women and discusses some documents (not yet in the MD Anderson Archive) related to this history. She talks about the report produced by the Committee to Evaluate the Status of Women (1988/89). (She also has a copy of the report made to the institution by consultant Wanda Wallace, called in to advice how to address gender inequity.) She notes that MD Anderson has a better track record than most medical institutions in promoting women. She notes that MD Anderson received a Leadership Development Award in 2012 from the American Association of Medical Colleges: this recognized the body of work accomplished by the Office of Women Faculty Programs. Dr. Travis herself received this award as an individual in 2009. She outlines the accomplishments that have been made, among them an increase in women in leadership roles from 15% to 27%. Dr. Travis says this is a “model office” and that she speaks all over the country to talk about its structure and role.

Segment 8
*Leading Change for Women; Women as Leaders*

A: The Administrator
In this segment, Dr. Travis discusses the importance of developing leadership skills for women. She opens with the statement that one cannot leave leadership to luck: an individual must be noticed, be visible and prepared for opportunities. She then lists her formal leadership training experiences summarizing data gathered about these programs by Dr. Shine Chung and others confirming that they make a difference in helping women advance into leadership roles. She notes that the Office of Women Faculty Programs has money to send a number of women and some minority men to leadership programs each year. Next, Dr. Travis explains how her leadership training expanded her own skill set. She talks about how the training at Rice University trained her to deal with conflict situations that arose in 2003, when she was Chair of the Faculty Senate. She again stresses that leadership training gives women tools to navigate complex institutions, to self-promote, and to not only know the leadership theory, but to implement ideas.

Dr. Travis next tells a story about a nasty incident that arose during a meeting when men verbally and personally attacked her. She speaks about how shocked she felt and how her training enabled her to handle the situation. She observes that scientists are very accustomed to handling criticism and even attack when it comes to their work and data. But the skill set for handling personal attacks is different.

Dr. Travis next stresses that women must be prepared for opportunities and they must actually take them and not believe that they are not qualified. Dr. Travis defines the “imposter syndrome” that plagues women and discusses the fact that men and women are still perceived differently and that there is a much narrower band of acceptable behaviors for women in professional situations.

Next Dr. Travis turns to the qualities that women bring to organizations when they serve in leadership positions. She talks about women’s instinctive listening and collaboration skills, resulting in a different leadership style. She explains why this is needed (noting that the Sandusky sexual abuse scandal at Penn. State would not have occurred had women been involved).

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2 1992 Executive Development Program, Professional, Rice University, Houston, Texas; Career Development Seminar for Senior Women in Medicine, Association American Medical Colleges (AAMC), Washington, DC, 1996; Fellow, Hedwig van Ameringen Executive Leadership in Academic Medicine (ELAM), Philadelphia, PA, 1999–2000; Executive Education Program, Women’s Senior Leadership Program, Kellogg School of Management Northwestern University, Chicago, IL, 10/2010–10/2012.
Dr. Travis explains that complex problems require different points of view coming together to find solutions and that women bring valuable perspectives to the table. She also cites the importance of women as role models and the fact that women patients and the great numbers of women who serve in caregiving roles can connect to women in leadership positions. She describes a survey of research articles placed in journals: articles with women in the list of authors tend to be placed in higher impact journals.

Segment 09  
Research and Grants Related to Gender and Diversity  
A: The Researcher

Segment 9 Story Codes  
A: The Administrator  
A: The Educator  
B: Institutional Mission and Values  
B: Beyond the Institution  
C: Education at MD Anderson  
C: Discovery and Success

Women and advancement D  
Diversity at MD Anderson

In this segment Dr. Travis describes her grant supported work on gender and diversity projects. She begins by describing the “Gatekeepers and Gender Schemas” project (run through the Office of Women Faculty Programs) – a real-time study of recruitment in the sciences. She also describes her contributions to an NIH U54 Partnership Grant in which MD Anderson is partnering with the University of Puerto Rico to build a cancer research center, a cancer hospital, and to train physicians and researchers. Dr. Travis is a PI on that grant and on the training program. She describes why she enjoys working with students and also what is involved in the training program. The MD/PHD program, she says, is the “jewel in the crown” of the program and this summer its first two graduates will receive their degrees. She notes the commitment of the Puerto Rican students to return to their home country to practice.

[The recorder is paused briefly.]

Dr. Travis notes some differences in the way that gender issues play out in Puerto Rico and in the United States, then describes how the project is administered. Next she observes that her interest in teaching, training, and developing young minds has worked underneath the surface of her career.

Segment 10  
Personal Choices and a Philosophy about the Importance of Having a Career and A Personal Life  
A: Character and Personal Philosophy

Segment 10 Codes  
A: Character and Personal Philosophy  
A: Personal Background
Dr. Travis shares the name of her son, Scott Philips, whom she chose to have as a single parent. She goes on to talk about the issue of women, career and family, noting that she is tired of the question: “We aren’t over this yet.” She also says that it’s disturbing to her that this discussion usually focuses only on people with children. “Everyone deserves a personal life. We must provide people with time.” Dr. Travis notes that her son is an “important legacy” for her to leave and she shares the advice she gives to women considering having children. She observes that the burden of child care still falls on women. Though more younger men are more involved, she still see vestiges of “old school” thinking even in younger men, citing what younger men say about women in leadership roles. Dr. Travis believes that the Office of Women Faculty Programs needs to develop a community of men discussing issues about life balance and personal life. She goes on to explain that careers in medicine and research demand obsession, obligation, and duty, but an individual must have down time to preserve resilience. She talks about her own interest in travel and the symphony and the pleasure she has taken in making friends around the world.

Segment 11
Setting up the Office of Women Faculty Programs
B: An Institutional Unit

In this segment, Dr. Travis describes how she went about setting up an office that could create rapid results for women at MD Anderson. She first hired a data person, because “it’s all about the data.” She explains data is fundamental to all of the Office’s work, decisions about priorities, and role in debunking myths. She describes how her skills in presenting issues and responding to naysayers evolved as she set up the office. Next she explains the elements of the Office’s mission: to increase the visibility of women within the institution and beyond and to have an impact on policy. As an example of the latter role, she describes how the Office was instrumental in changing the policy on tenure clock extension for faculty with a new child. She also talks about the Office’s role in getting people to look at their unconscious biases: she does a lot of teaching about this issue, using a test developed at Harvard University for unconscious bias. She also discusses mentoring. Faculty Development runs the institution’s formal mentoring programs, however Women Faculty Programs addresses issues that this program misses, such as why women don’t like to promote themselves and the skills they lack in self-promotion. She quotes Walt Whitman: “Ya done it, you’re not bragging.” She also talks about training she does for men to help them understand that they must ask women questions.
Next Dr. Travis talks about the concept of “sponsorship.” She has published a paper on sponsorship and defines it in contrast to mentoring, explaining that it’s a business model that she is adapting to a medical/scientific concept. She intends to put together a sponsorship workshop at MD Anderson and will also develop a Women’s Leadership Network spanning all fifteen units of the University of Texas System, further breaking down barriers between faculty and administrative women.

Dr. Travis speaks about one project she has not yet been able to push through: Cultural competency training focused on gender for Department chairs. She explains the need and notes that this is on the calendar for August 2014. She intends this as a pilot program to see how it works.

Dr. Travis talks about the issues that cultural competency training would cover and stresses that she sees her role as helping department chairs develop the best of the best.

Segment 12
*Leaving a Legacy of Visible Women*
A: View on Career and Accomplishments

Segment 12 Story Codes
A: Career and Accomplishments
A: Contributions to MD Anderson
B: MD Anderson Culture
B: Institutional Mission and Values
A: Personal background

Dr. Travis talks about the legacy she feels she will leave at MD Anderson: more women in leadership roles and communities of women who feel visible and recognized. She is particularly gratified by the community building and gives an example of how the Office supports growth of community. She also feels she has had an impact on male colleagues who are now aware of gender issues. Dr. Travis shares some milestones she would like to see accomplished before she retires.

Dr. Travis says she has no immediate plans to retire. She is “having too much fun” and she has worked since she was twelve and would need to have an outlet for her energy. She talks about Dr. Margaret Kripke, who retired for a time, then took on another position.

Dr. Travis makes some final comments about MD Anderson, where “what we do is truly remarkable.”
Elizabeth L. Travis, PhD
Session One: 24 March 2014

A note on transcription and the transcript:

This interview had been transcribed according to oral history best practices to preserve the conversational quality of spoken language (rather than editing it to written standards).

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Chapter 00A
Interview Identifier

Tacey Ann Rosolowski, PhD
00:00:00
So we are recording. I’m Tacey Ann Rosolowski, and this morning I’m on the fifth floor in Pickens Tower on the main campus of MD Anderson in the Department of Women Faculty Programs, and I’m interviewing Dr. Elizabeth Travis for the Making Cancer History Voices Oral History Project run by the Historical Resources Center at MD Anderson Cancer Center in Houston, Texas. Dr. Travis came to MD Anderson in 1982 as an associate professor in the Department of Experimental Radiation Oncology. Correct?

Elizabeth Travis, PhD
00:00:36
Correct.

Tacey Ann Rosolowski, PhD
00:00:37
She is now the Mattie Allen Fair Professor in Cancer Research in that department, which is part of the Division of Radiation Oncology. She is also a professor in the Department of Pulmonary Medicine. In terms of administrative service, since 2006 Dr. Travis has served as Associate Vice President for Women Faculty Programs.

This interview is taking place in Dr. Travis’ office in the Department of Women Faculty Programs, and today is March 24, 2014, and the time is about 10:03. So thank you very much for—
Interview Session: 01
Interview Date: 24 March 2014

*Elizabeth Travis, PhD*
00:01:13
My pleasure.

*Tacey Ann Rosolowski, PhD*
00:01:14
—taking the time for this project.
Interview Session: 01
Interview Date: 24 March 2014

Chapter 01
A: Educational Path;

A Passion for Science Leads to Radiation Physics

Codes
A: Personal Background;
D: On Mentoring;

Tacey Ann Rosolowski, PhD
00:01:16
I wanted to just begin with some general background. If you could tell me when you were born and where, and tell me a little bit about your family background.

Elizabeth Travis, PhD
00:01:28
So I was born in Pittsburgh, Pennsylvania. I’m second-generation Italian, was born into a large extended Italian family. I only have one sister younger than I am. She’s about four and a half years younger than I am. I grew up in this little town outside of Pittsburgh called Wilmerding, W-i-l-m-e-r-d-i-n-g. It was a mill town. Westinghouse Electric and all the steel mills extended way beyond the city of Pittsburgh.

My family owned a small business. My father did not work in the mills, but my maternal grandparents built a small bar and restaurant, basically, in this little town, and so we all worked there at various times. My aunt and uncle had three sons, my three cousins, who also lived in Wilmerding. My one other aunt, my mother’s other sister, also lived there for a while with her one son, and we were all involved in working.

Tacey Ann Rosolowski, PhD
00:02:45
What did you do?

Elizabeth Travis, PhD
00:02:45
Oh, I would help on Saturday mornings and peel potatoes. (laughs) I was in the kitchen mostly. We were always there. The kids were always there, everybody. Small town. There weren’t very many people in this town, and so everybody knew the family. We frequently after school would stop over there on the way home, because my dad worked there, would stop there to say hi to my dad before we went home, or just stopped in because my mother worked there. Saturday morning she would go up and help get ready for dinners on Saturday nights. It was a bar and grill, but
they served typical Italian. Friday night was fish. Fried shrimp, Friday nights. Pizzas, of course. Spaghetti was Thursday night. A traditional night to have pasta in an Italian family was Thursday night and then Sunday. So they had spaghetti and meatballs.

**Tacey Ann Rosolowski, PhD**

00:03:41

Did having those experiences influence you at all in terms of work environment or work ethic? How did that have an impact?

**Elizabeth Travis, PhD**

00:03:50

I think it had a huge impact from the standpoint of work ethic. Both my parents worked all the time. My mother did not work outside the home until I was sixteen, but she was a wonderful seamstress and so she used to do a lot of tailoring and sewing for people. She made all my clothes. Even when I was in college, she was still making me clothes, even though by then she was working in a small boutique, which was my downfall. (laughs) My mother had marvelous taste, marvelous taste, and she had a real flair for clothes, so I blame her for—I have the same taste as she does.

**Tacey Ann Rosolowski, PhD**

00:04:35

That’s nice.

**Elizabeth Travis, PhD**

00:04:36

Yes. She did things like sell china and anything she could do to help the family.

My parents were both high-school educated, neither of them went to college, but they were insistent that we were going to go to college, both my sister and I, because they did see that, like so many people used to, at least, and still do, as, you know, a steppingstone. It’s so common in families that are first, second, third generation, that education’s the thing no one can take away from you once you have it. You always have it, you know.

**Tacey Ann Rosolowski, PhD**

00:05:13

Yes.

**Elizabeth Travis, PhD**

00:05:14

And, of course, at that time it was always when you get married, if something happens to your
husband, you’ll be able to support your family. There was the underlying supposition that you were going to be married, have children, and that was going to be your primary, which I totally ignored. (laughs)

_Tacey Ann Rosolowski, PhD_

00:05:37
So one question I neglected to ask you, will you share your date of birth?

_Elizabeth Travis, PhD_

00:05:43
September 29, 1943.

_Tacey Ann Rosolowski, PhD_

00:05:47
Okay. Thank you.

When did you know that you were going to go into the sciences?

_Elizabeth Travis, PhD_

00:05:54
Pretty early on, actually. I remember in what was then junior high school or even sixth grade, they used to take us down to the planetarium, and we used to have special courses that they’d send us to in the summer down at Carnegie Mellon at Pitt. There were science courses. They always intrigued me, always intrigued me. Actually, I had no clue. I thought, oh, I’d be a flight attendant. Oh, you know, I danced, I took dancing lessons for a long time, and I was very interested in perhaps being a professional dancer, but you have to be really, really, really, really good to do that, and that is, I think, a field and a profession, if you will, where luck really does play a big role.

_Tacey Ann Rosolowski, PhD_

00:06:56
Well, I think in that period, too, when you were coming to young girlhood, young womanhood, there was really a different understanding of what the opportunities were for women.
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*Tacey Ann Rosolowski, PhD*
00:07:10
So how did you see that at the time? You said flight attendant, dancer, even though science was kind of, “Hmm. That’s intriguing.” When did you come to the realization that you wanted to take a different path that maybe what was traditional at the time?

*Elizabeth Travis, PhD*
00:07:26
Tenth grade.

*Tacey Ann Rosolowski, PhD*
00:07:26
Tenth? Tell me about that. We’ve got a moment.

*Elizabeth Travis, PhD*
00:07:29
Teacher, biology teacher, Mr. Smith. He was dynamic. I mean, he had us dissecting all kinds of things. In fact, my mother—I would take things home to dissect, and my mother said, “Don’t you dare put those in my refrigerator.” (laughter) But he just had a love and a passion for science, and he had a love and a passion for students and turning them on to science, if you will.

He also taught us how to square dance. He used to take us all over the State of Pennsylvania and do demonstrations of square dancing, and I was still doing other dancing, but this was a lot of fun, and we had costumes. Wednesday nights we’d have to go to his home, and in the garage we’d practice all our square dancing. So he brought us together as a community of all of us who were—at that time, you know, we had [ ] tracks. You were on the college track or what they used to call the business track. So I was in the college track.

I guess a year or so before then, I guess one of the counselors had told my parents that, yes, I should go to college, although what I was going to do was not yet clear, although, like I said, I had had exposure to the sciences by then and was interested in them. But it was Mr. Smith in tenth-grade biology, that’s what it was.

*Tacey Ann Rosolowski, PhD*
00:08:59
And that’s just such an interesting story. I think it’s the first time that anybody’s told a story about an experience so early where someone integrated the science and the social part, which is very interesting, very interesting.
Elizabeth Travis, PhD
00:09:14
Yes. He was a terrific teacher. There were a number of us from that class that went into science: physicians, myself in science, others in science, some in engineering. He just engendered in us a real love of discovery.

Tacey Ann Rosolowski, PhD
00:09:37
So how did your parents react, or your family, when you said you wanted to try this path?

Elizabeth Travis, PhD
00:09:45
They had no clue what it was, and, quite frankly, I had no idea either what it meant, you know. What they did was they said, “Okay, but you really should get a teaching degree, because that way you always have a job in case something happens to your husband.” (laughs) Again, always the expectation that I was going to be married and have children, and I would have a career, but it would be teaching because we always need teachers. So it was in that context, and so that’s how they could wrap their heads around this, and at that time, for me, too, because I didn’t know any scientists. I knew a teacher who taught biology and taught science.

Tacey Ann Rosolowski, PhD
00:10:33
It’s an interesting dilemma for either a boy or a girl who has a talent in an area that the family hasn’t had experience in, because they really don’t know to advise that child, and you have to kind of make it up on your own unless you’ve got mentors who can really help you.

Elizabeth Travis, PhD
00:10:50
Well, I think that he helped them understand. Mr. Smith helped my parents understand that it was important to me, but, again, it was still in the context I would be a science teacher and, in fact, I was.

Tacey Ann Rosolowski, PhD
00:11:03
So tell me about your decision to go to Indiana University-Pennsylvania. Am I getting that correct?

Elizabeth Travis, PhD
00:11:09
Indiana University of Pennsylvania.
Tacey Ann Rosolowski, PhD
00:11:11

Elizabeth Travis, PhD
00:11:15
Correct. So that’s not where I wanted to go to school. (laughs) So I was the first girl in the family to go to college. I have an older cousin, she’s five years older than me, almost to the day. Her name is Liz too. She always wanted to go to college. Her name is Elizabeth. We call her Liz as well. She was kind of my idol growing up, and she always wanted to go to college, but her father said, “Girls don’t go to college.” He had three boys that he sent to college, but not her. So I was the first girl in the whole family to go to college.

The three cousins, the male cousins I just spoke about—actually, they were second cousins—went to Indiana, and my father was most comfortable with that because they had been there, and so he felt like he knew something about the school. It was actually a state Teachers College at the time, and so they thought I was going to be a teacher, and so it all fit together. And, actually, it was also an issue of money. We didn’t have much money, and it was more affordable, although not easy for them. I mean, I worked in college as well. I worked every summer to help pay for college. So that was how the decision was made.

And it was far enough away. I didn’t want to live at home. My parents always said they couldn’t keep me in the house and they could never get my sister out of the house, because I was always out and about and always doing things, and she was different than that. So it was far enough away from home, but close enough that they used to come up not every Sunday but frequently on Sundays, and bring a whole bunch of food and take me out to dinner. So it was close, but far enough that I didn’t feel like I was living at home, and I didn’t want to live at home.

So it was a matter of familiarity, finances, and proximity to home. So that’s how that happened.

Tacey Ann Rosolowski, PhD
00:13:26
So tell me about what you focused on, your major. How did you feel your gifts, your kind of approach to science evolving during that time?

Elizabeth Travis, PhD
00:13:35
Again, there was another teacher, as a sophomore, and he taught cell biology and physiology, and I got interested in that. I have to admit that I enjoyed my first couple years of college.
(laughs) I studied and I made my grades, but I didn’t probably make the grades that my parents wanted me to make. But he turned me around a little bit back to focusing on science, and I went from there—

*Tacey Ann Rosolowski, PhD*

00:14:16
And his name?

*Elizabeth Travis, PhD*

00:14:17
Oh, I almost said it. [Frank Liegey.]

*Tacey Ann Rosolowski, PhD*

00:14:17
That’s okay.

*Elizabeth Travis, PhD*

00:14:19
I’ll remember it, but right now it’s out of my head.

Mr. Smith was obviously a real giant, of course, and the name Smith is quite easy to remember.

Then there was a physics teacher, so I decided to take a course, an elective course, in radiation physics and radiation biology. It just sounded interesting. He had gone to Oak Ridge National Lab, where they used to have summer programs for teachers to learn about the radiation sciences, to then try and interest students in going into the radiation sciences, remembering that this was the sixties, still a lot of focus on atom bombs, etc., etc., and the destructive nature of that, and also radiation as healing.

So I took that course, and it was interesting. I mentioned—well, my parents always knew what I was doing. I mean, they always wanted to know, were very involved in how classes were, what I was taking. My father’s personal physician, he had an appointment with him, and he always asked about my sister and I, how was I doing, how was Elizabeth doing. I was always called Elizabeth by my family. “How is Elizabeth doing?”

And my dad said, “She’s taking this course in radiation something or other. I don’t know. She seems to like it.”

He ran a lab at University of Pittsburgh with a scientist there, and they invited—he said, “Do you think she’d want to come and work for the summer?” It’s amazing how life really is full of these
twists and turns. So I went there for the summer, worked during the summer there, and then
decided to do my graduate degree there in the School of Public Health in radiation health. So
that’s how I got to my master’s degree, but my master’s degree—this isn’t MD Anderson
history. We’re only talking about me.

Tacey Ann Rosolowski, PhD
00:16:24
Yes, this is how we do it.

Elizabeth Travis, PhD
00:16:28
Okay. (laughs)

So my master’s degree, actually I ended up again getting a degree in education, with a minor in
radiation biology, because I got married at the end of my first year of graduate school, and my
husband was in the navy and he was an officer. Before we graduated, we knew he was going to
be stationed in South Carolina. Yes, those days, your husband didn’t go while you stayed and
finished degrees. You went together, etc. So the only way I could finish and get a degree, which I
was insistent on doing, was to switch to the education school, because I couldn’t finish my thesis
and research in enough time. So then I got a degree in education and went to South Carolina with
him.

And from there, again, kind of the—I taught school for a year, which I actually liked. I really like
teaching school. I love training. I still am very actively involved in training and mentoring
students as well as faculty, but I’m involved with a grant that we have with Puerto Rico, which is
a partnership grant between MD Anderson and University of Puerto Rico, and I’ve been
involved with it for over ten years now. I’m one of the PIs, but I’m also co-leader of the training
program. So every summer we have students come over. In fact, I was just reviewing students
now for the summer program. I go over there a couple times a year. I really enjoy that interaction
with young minds and mentoring them and seeing them develop and helping them. So it’s been a
theme, even though it’s not what I really wanted to do. I didn’t want to teach in a classroom
every day. It’s been a theme throughout my whole career.

Tacey Ann Rosolowski, PhD
00:18:15
What’s your style of mentoring?

Elizabeth Travis, PhD
00:18:17
It depends.
Tacey Ann Rosolowski, PhD
00:18:19
Or philosophy.

Elizabeth Travis, PhD
00:18:20
My philosophy is it’s got to be about the students or the individual. It’s got to be listen to them, what do they think they need, what do they want from a mentoring relationship, and then how can I help them. Sometimes it’s directive, sometimes it’s advisement. I think you have to listen to the individual and talk with them about what they think they need. Then also by reviewing like, for example, with the faculty, looking at their CVs, looking at their summary statements of their accomplishments and identifying the places where they need help and pointing that out to them and trying to direct them. “You want to get promoted, this is what you need. You’re doing well here, but you’re not doing well here, and I would recommend that you seek more opportunities to do this.” Or, “You’re on too many committees. Cut those back. You need to focus more. Your job is to find a niche as an assistant professor.” So it’s really dependent on the individual and on where they are in their career, what kind of advice, but listening is a big part of it, offering constructive advice is a big part of it, and being candid and honest.

Tacey Ann Rosolowski, PhD
00:19:46
I’m curious since obviously you are now mentoring people who are much more—they’ve already selected a professional path, they’re on that path, but for you, when you were starting out, you kind of didn’t know what direction to go in. Have you ever worked with someone who kind of was a little lost? What’s your mentoring style in that situation? How would you have helped yourself? (laughs)

Elizabeth Travis, PhD
00:20:18
Well, yes, I did have great mentors all along the way. All these teachers I’m talking about were guides. They were mentors, they were truly mentors, and high school, undergraduate, graduate school, and then even after graduate school.
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Interview Date: 24 March 2014

Chapter 02  
A: Professional Path;  
Choosing Opportunities to Develop a Research Career: A Growing Awareness of Gender Issues

Codes  
A: Personal Background;  
A: Personal Background;  
A: Experiences re: Gender, Race, Ethnicity;  
C: Evolution of Career;  
C: Women and Minorities at Work;  
D: Women and Diverse Populations in Healthcare and Institutions;

Elizabeth Travis, PhD  
00:20:31 I got my degree at the Medical University of South Carolina. So the story was I taught school for a year, and I missed the lab, and I went to look for a job just for the summer, just to work in a lab. I just wanted to be back in the lab doing research. And I went to the Medical University of South Carolina, and they were looking for somebody in what was then their radiation therapy department. I walked into the Research Office and she said, “Oh, they’re looking for somebody just like you. Go over there and go talk to them,” and so I did.

It was Keene Wallace and Jimmy Fenn. Keene was the radiation oncologist, and Jimmy was the physicist there.

Tacey Ann Rosolowski, PhD  
00:21:13  
Just so I’m getting this right, we’re talking now about the College of Medicine?

Elizabeth Travis, PhD  
00:21:18  
Yes.  
[00:21:19

Tacey Ann Rosolowski, PhD  
00:21:19  
Okay. So this was Department of Radiology, College of Medicine in the Medical University of South Carolina.

Elizabeth Travis, PhD  
00:21:24  
It was the Department of Radiation Therapy.
Tacey Ann Rosolowski, PhD
00:21:26
Radiation Therapy, okay.

Elizabeth Travis, PhD
00:21:28
It might have been—no, it was Radiology, that’s right. That’s before radiation—because it’s ancient history here, before radiation therapy or radiation oncology, as it’s known now, were separate.

Tacey Ann Rosolowski, PhD
00:21:39
So there was a name change?

Elizabeth Travis, PhD
00:21:40
There was a name change after that, so yes.

And they said, “Oh, lovely. You can start a lab. We need somebody to do this. We want you to teach the residents,” etc., etc.

Tacey Ann Rosolowski, PhD
00:21:50
Oh, wow.

Elizabeth Travis, PhD
00:21:51
So I took it on for the summer, and the story is, halfway through, they offered me the job permanently. And I didn’t think I could do the job.

I tell this story all the time when I’m talking to women, because women undervalue their accomplishments. I mean, here were these people who had PhDs and MDs, telling me I could do the job, yet I didn’t think I could do the job. And women still suffer from this. We call it the Imposter Syndrome. “Maybe they’re going to find me out, I really don’t know what I’m doing here.”

And I actually turned the job down and went home and instantly knew I’d made a big mistake. I went back the next day and said, “Can I please have the job if you haven’t given it to the next person yet?”
They said yes, and one of the things they had said, “You know, if you do this, you can go to graduate school,” etc.

So I did that, I went to graduate school, and so that was—again, people who believed in me, who also mentored me, who encouraged me. And that’s what a mentor is. A mentor is many things. But they introduced me to the field of radiation therapy then at the time, went to meetings, and decided that’s really what I wanted to do, finally.

There was a terrific pulmonary physician there; Rusty Harley [phonetic] is his name. Rusty is still alive. And he said, “If you teach me about radiation, I’ll teach you pathology.”

And I said, “Okay, it’s a deal.” So I got my PhD there.

Tacey Ann Rosolowski, PhD
00:23:39
That’s great. Wow. So just for the record, this was the Medical University of South Carolina.

Elizabeth Travis, PhD
00:23:45
Yes. I got my degree in 1976, so I had [inaudible].

Tacey Ann Rosolowski, PhD
00:23:49
Experimental pathology and radiation biology?

Elizabeth Travis, PhD
00:23:51
Yes, experimental pathology, radiation biology, yes. So it was a long time between, because I got married and got divorced and, you know, by this time I had been single since 1970 or 1971, probably even earlier. My marriage did not last very long. Again, it was an issue of, you know, even then, it was not a time when women still weren’t necessarily having their own careers separate from their husband. It was always a secondary. And for us that was a real issue, and I knew that. I finally knew what I wanted to do, and I was not going to give it up.

Tacey Ann Rosolowski, PhD
00:24:40
Since the issue’s come up, what I did want to ask you is kind of how did your awareness of gender issues, women-in-the-workplace issues, how did that evolve? I mean, how early were you aware of this as an issue, and what were kind of the key turning points?
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Elizabeth Travis, PhD
00:25:03
Yes, I think about that a lot because I think it’s been a part of me for a very long time. And I think in high school I didn’t much recognize it because Mr. Smith, he didn’t care if you were—we had equal number of men—this was sophomore year in high school—of boys and girls in that class, and he treated us all the same. And that was true in physics and that was true in chemistry, etc. I went to a very good high school in the small town of ours, really well known throughout the district as really being good on the academics.

Tacey Ann Rosolowski, PhD
00:25:41
What’s the name of the high school?

Elizabeth Travis, PhD
00:25:42
It was Westinghouse Memorial High School.

So I guess I became more aware of it. I know my father was very keen on my going to college, but a lot of people told him things like, “Oh, she’ll only get married and have kids. Why are you sending her to college?” And it would really upset him that people said that, because he felt it was really important. So I guessed I picked up a little bit from him early on that there was this—and also my uncle wouldn’t send my cousin, you know. So I think it was there pretty early on in my psyche.

So there’s this one incident. I remember I was in junior high school, and I remember telling my mother that I always wanted to have my own money because I never wanted to ask a man for money to buy my underwear. (laughs) So somehow this was—and it wasn’t that my dad was overbearing. My mother was working, like I said, in the house. So I don’t know where that came from. Maybe it was from her. My mother was a pretty independent spirit.

Tacey Ann Rosolowski, PhD
00:27:01
Yes, and it’s funny how you have those moments when you realize that you want to be independent. I mean, I remember a terrible incident when I was in high school, when my mother had gone down to the library to apply for a library card, and she couldn’t get one without my dad co-signing, because she had no job.

Elizabeth Travis, PhD
00:27:17
Yes, right.
Tacey Ann Rosolowski, PhD
00:27:17
And she was just—the anger and humiliation when she came home, and I thought, “Wow. I’m never going through that.” (laughs)

Elizabeth Travis, PhD
00:27:21
Yes. I don’t know if you’ve read the book, Gail Collins’ book, *When Everything Changed*. I mean, she talks about even things I didn’t realize. In the sixties, women couldn’t—you couldn’t own property, you couldn’t have your own checking account, you couldn’t have credit cards. You couldn’t. I mean, to me, that’s like [ ] in my lifetime, and unbelievable.

Tacey Ann Rosolowski, PhD
00:27:43
It is, and I think, you know, young women today, they would be thinking, well, that’s like the Middle Ages. They would have no idea that it’s really within fairly recent history that those things were true.

Elizabeth Travis, PhD
00:27:52
Yes, it is, and I guess I didn’t realize it at the time and certainly had really thought it had been much earlier than that.

So then also a professor, a chemistry professor in graduate school, my master’s degree, there were two women in the class, and he said, “Well, I don’t know why you girls are here. You’re only going to get married.” That infuriated Judy, was her name, and I both because we loved what we were doing. So it was always kind of working out there.

An incident happened when I was working in radiation therapy department, that I’d been there a year, started the program, was teaching the residents and designed a course and everything for the residents, and then it was I taught the diagnostic residents as well as the radiation therapy residents. We decided that—the head of the department, Keene Wallace, decided that we needed somebody else in the lab, I needed help in the lab. He wanted to hire another person, and he hired a man, and he was going to pay him $4,000 more than he was paying me.

So I went to the physicist who was my direct supervisor to me, and I said, “Why are we doing this?”

And he said, “I don’t know.” He said, “I’m not in favor, but you have to talk to Keene.”
So I went in and asked Keene, I said, “Keene.” I remember this conversation. I said, “If I’m not doing a good job, please tell me.”

He said, “Oh, you do a wonderful job.”

And I said, “Well, then why are you going to pay somebody who’s new, has the same experience as me, but hasn’t been in this department, has not started anything, why are you paying him 4,000 more?”

He said, “Because he’s married and has a family.”

And I said, “But that’s not a good enough reason.”

And he gave me the 4,000. He didn’t give me a higher salary, but he at least—but, you know, that was like—this was 1976. This wasn’t that long ago. Or early seventies. It was not that long ago.

*Tacey Ann Rosolowski, PhD*

00:30:08
That always felt so ironic to me. It’s a merit system. It’s a merit system. I was like, “Excuse me. When it comes to men, it’s a need system. You perceive their needs and give them what they need.”

*Elizabeth Travis, PhD*

00:30:18
Yes, and that’s one of the things I always teach the women when I’m teaching women about how to advance and how to get ahead and, in fact, successfully navigating the halls of academic medicine. I tell them, “We, all of us, women in particular, think it’s a meritocracy, and if you just keep your head down and do your work, you’ll get noticed and somebody will reward you. And, no, that’s not true.” Even today it’s not true, and so you have to know how to promote yourself. You have to make sure that you come in and you just don’t sit in your office all day, that you interact, etc. So, yes, you’re absolutely correct.

*Tacey Ann Rosolowski, PhD*

00:31:04
Well, tell me kind of the next move, because you went then overseas. How did that happen? And what an interesting experience.
Elizabeth Travis, PhD
00:31:15
That is probably the most remarkable story, I think, of it all, because I finished my PhD and I started to get a taste of—so they wanted me to stay on as faculty at MUSC, except they had been taking me out to—taking me off the farm, if you will, and taking me to meetings where I was meeting people and see what was going on. And I realized that every time I came back there, I didn’t want to be back there. I wanted to be—I was ready for the big city, if you will.

So I applied for postdocs, which they said, “Yes, absolutely go do a postdoc and then come back here,” and I applied to, I don’t know, twenty. I can’t remember how many. One was MD Anderson. I wasn’t accepted here. But two accepted me. One was Stanford and the other was a lab in London. So I had gotten the acceptance from Stanford and was asked to go there and interview.

And prior to that—so the lab in London—I mean, Stanford was no slouch. It was very well known in the field and had really terrific people. But the lab in London, it’s called the Gray Lab. One of the founders of kind of radiation therapy—and, in fact, there’s a unit which is called the Gray, which measures radiation dose—he started this lab, and it was Mecca in the field, and I wanted to go there. And I remember talking to my father and saying, “You know, Dad, I really want to go to London.” They didn’t want me to go to London, of course. It was too far away. But he realized that I kind of always do what I wanted to do. (laughs)

Tacey Ann Rosolowski, PhD
00:33:12
Can’t keep Elizabeth home. (laughter)

Elizabeth Travis, PhD
00:33:14
Yes, right, couldn’t keep her home, you know. So he said, “Well, Elizabeth, they can say yes and they can say no, but if you don’t ask them, you’re never going to get it.” So I said, “Okay.”

So I wrote the letter, and when I got back from the trip, on my desk in my lab there was a letter from the Gray Lab. When I came back from Stanford and thought I was going to go to Stanford, there was a letter from the Gray Lab, and it said, “Please come.” I was working on normal tissues and the radiation effect on normal tissues. They were a lab that did a lot of tumor work, and so they were just beginning to get in the normal tissue field, and that was my area.

So I said, “Okay,” and so off I went. I put my luggage—or all my furniture in storage, the little bit I had, gave my dad my car that I had just bought, and put three trunks on a ship and jumped on an airplane and moved to London and knew nobody.
Tacey Ann Rosolowski, PhD
00:34:11
Wow.

Elizabeth Travis, PhD
00:34:13
Had met the head of the lab one time. Other than that, knew nobody.

Tacey Ann Rosolowski, PhD
00:34:18
Wow. That’s incredible.
Now, I kind of feel like I need to ask for your guidance here, because we’re talking about your track, but we haven’t talked about your research. Do you want to kind of pick that up a little bit, and let’s talk about how your research evolved?

Sure, yes.

Okay. Let’s do that story, too, so we’ve kind of got both stories going at once.

So this is where my research really evolved. I credit those three years, first of all, MUSC, for giving me an opportunity. I mean, they really did give me an opportunity to see what I could do.

Now, when did your research career really start?

At the Gray Lab in 1976. At the Gray Lab.
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**Tacey Ann Rosolowski, PhD**
00:34:57
But you were already working on—

**Elizabeth Travis, PhD**
00:34:59
I was already working, and I had done some work and I had published some, but, you know, MUSC at the time didn’t have a lot of research going on. Rusty was a great mentor and taught me a lot, but it wasn’t well known in radiation, which was part of the reason why I needed to go somewhere else and develop myself even further if I was going to—I knew I needed that if I was ever going to have an independent research career. I knew that. I saw what I wanted, and I knew that I didn’t have even yet the right pieces to get me there. So I knew I had to get a really good postdoc. So they took a chance on me.

**Tacey Ann Rosolowski, PhD**
00:35:51
The Gray Lab.

**Elizabeth Travis, PhD**
00:35:52
The Gray Lab did. Like I said, I had met the head of the lab one time before then, so he remembered me, but they took a chance, because, you know, I didn’t come from an Ivy school. I came from a small state college. University of Pittsburgh was a good school. Medical University of South Carolina, nobody knew anything about in terms of radiation field. So they took a big chance on me.

**Tacey Ann Rosolowski, PhD**
00:36:17
What do you think they saw in you?

**Elizabeth Travis, PhD**
00:36:19
I think they saw that I had knowledge of something that they wanted. I had knowledge that they wanted. I knew about lung. I knew lung pathology. That’s what I was trained in. And I had some radiation background, and that’s when the field was just beginning to focus more on the side effects of radiation than only on the tumor, which was most of the focus. So I had pathology, and none of them were really pathologists, and that’s what I brought to the lab. And that was just a remarkable both professional and personal experience, being in that. I mean, that is where my research career really developed.
Tacey Ann Rosolowski, PhD
00:37:05
So tell me about that blossoming. How did that take place?

Elizabeth Travis, PhD
00:37:09
It was an exciting environment surrounded by some of the best minds in the field at the time, Jack Fowler, Julie Denekamp, I mean just the most respected people in the field. You couldn’t help but learn. There were other postdocs there and we just all worked together. It was a small lab; it wasn’t big. There were always people there from the States. We met a lot of people. They introduced us.

I mean, the head of the lab, one of the things I learned from him about mentoring is when the big names in the field come to the lab to visit, they didn’t visit with the staff, the faculty there; they visited with the postdocs and the graduate students, because it was an opportunity for them to meet us and for us to talk about our work with them, and so you get your name—the work you were doing, you got to talk with these people about it, which then helps you get a job later on.

But there was a guy who was an engineer and another fellow who was another postdoc, and he knew a lot about the vasculature, and the three of us, we wanted to develop a noninvasive assay for lung damage, which was what I wanted to do, because the only assays we had at that time for lung was when the animal died. So you radiated them, you count the dead bodies, basically, and there was a little bit done about the pathology.

One of the things that I lacked was my quantitative training because I was a pathologist. I was trained at looking at images, recognizing patterns, and how to quantify that is one of the things we did at the lab as well. But we developed—in fact, where’s the picture of it? Where’s my breathing machine? I still have the original somewhere. This is a jig that’s to jig animals. That’s another thing we developed. Where’s my breathing machine? Can’t find it. How can that be?
So anyway, the model was what you used to measure pulmonary function in people, a plethysmograph. Here it is. Here it is. I have a picture.

*Tacey Ann Rosolowski, PhD*
00:39:44
Great. Wow. Do you have that scanned at all?

*Elizabeth Travis, PhD*
00:39:49
No, but we could.

*Tacey Ann Rosolowski, PhD*
00:39:51
That would be great, because if you scan that and the other, I actually can put it right in your interview.

*Figure I: Jig for Irradiating Mice*

Photo Credit: Elizabeth Travis, David Hirst, Boris Vojnovic
Interview Session: 01
Interview Date: 24 March 2014

Elizabeth Travis, PhD
00:39:54
Oh, perfect. I’ll do that.

Tacey Ann Rosolowski, PhD
00:39:55
Yes, that will be lovely.

Elizabeth Travis, PhD
00:39:57
Yes, I’ll do that.

Tacey Ann Rosolowski, PhD
00:39:58
Terrific.

Elizabeth Travis, PhD
00:39:59
Yes, so we developed this little plethysmograph, and so you can see—

Tacey Ann Rosolowski, PhD
00:40:04
I’m sorry, what is that called?

Elizabeth Travis, PhD
00:40:05
A pleth—it measures breathing rate, and the way it measures breathing rate is it’s a sealed chamber. The animal can only be in there for a certain period of time. It has a little pressure inducer in the end. It was a microphone that the engineer modified to measure very small pressure changes in the chamber as a mouse breathed. You closed it up and you left, and we recorded it. At that time, we recorded it out on paper.

Tacey Ann Rosolowski, PhD
00:40:31
The old days.

Elizabeth Travis, PhD
00:40:33
The old days. Then I would look at it and I would analyze these rolls and rolls and rolls of graph
paper with all these little blips going up and down and measure the breathing rate. We standardized how to do that, and this was the first, the very first time that anybody could measure breathing rates. And why it was so important is it measured changes in their breathing rate, because what happened is the animal developed the damage as their lung gets filled up with fluid and cells, and they switch to rapid shallow breathing patterns, but it happens gradually. So we were able to measure changes in lung function in mice that had had both lungs irradiated, long before, and at doses that were sub lethal and long before the animal—we had to sacrifice the animal because he was in pulmonary distress. So it was a real breakthrough. It was really hard to get the field to accept it.

_Tacey Ann Rosolowski, PhD_
00:41:33
Why?

_Eлизabeth Travis, PhD_
00:41:34
Because the mice were breathing very fast, and nobody thought they breathed that fast. So we wrote the paper. We couldn’t get the paper published. So what we did, we filmed slow-motion, filmed an animal in the breathing chamber, such that we then put it up on a screen, and we got a whole bunch of people to sit in the library at the lab. We said, “Okay, we want you to count how many times the thorax of that animal moves.” And everybody did it, and indeed the numbers were right. Our numbers were right.

_Tacey Ann Rosolowski, PhD_
00:42:06
Wow.

_Eлизabeth Travis, PhD_
00:42:07
So then we got the paper published. And this was actually repeated by some very well-known names in the field of pulmonary physiology, and they did the same thing and then they said, “Yes, she’s right. This is correct. We’ve produced these data.”

One of the things I regret, because at that time you never thought of this when you were a scientist. This has, since then, been—[ ] picked up by a company and they are selling them. I was at a meeting about a year or so ago, radiation research meeting, and these two things were both sitting out there, and I went over to the company and I said, “Interesting.” They’ve revised it, and we revised it, too, but this was the original. And I said, “Well, I’m glad to see that.”

And they said, “Yes.” They said, “So-and-so developed that.”
I said, “Oh, no, no, no, no, no, no. He did not develop that.” I said, “You’re speaking to the individual here. I will send you the original paper if you don’t know it.” So this is like thirty years later, and this is still making money for people. Frustrating. Very frustrating. (laughs) And the same with this. So the other thing—

*Tacey Ann Rosolowski, PhD*

00:43:35

And that other—

*Elizabeth Travis, PhD*

00:43:36

So this is a jig to irradiate mice, because the only way people were irradiating mice was to anesthetize them, and so I wanted to get rid of the [anesthesia] —particularly because I wanted to do experiments where I wanted to simulate what we did in a clinic, which was to give a little bit of radiation every day. It’s really hard to anesthetize animals over long periods of time without killing them. They become intolerant to it, and you either don’t get them anesthetized and they squirm around, which you don’t want because you’ll miss the lung. You have to make sure, just like you do with a patient, you have to make sure that the radiation is going where you want it.

So we developed this so that we could irradiate a mouse without anesthetizing him.

I have one of these somewhere, too, my original jig. And there was a young man in the lab who was my technician at the time, who now has his PhD, and he helped do this. It had a slight tilt on it. It was like at an angle. The top of it was at an angle. So what you would do, we did that because mice, they’re small in the thorax, so you want their thorax right in between these two little posts.

*Tacey Ann Rosolowski, PhD*

00:45:06

We’re looking at the image, and there are two pieces of Plexiglas kind of at an angle, and I guess that kind of wedges the animal in?

*Elizabeth Travis, PhD*

00:45:13

This is flat, and then the top of this is slanted. It has a little nose thing that you can adjust, and the lung basically fits into these posts. I mean the thorax fits into those posts.
Tacey Ann Rosolowski, PhD
00:45:25
Between those two angles of Plexiglas.

Elizabeth Travis, PhD
00:45:27
Yes, and what you do is, they like to run into small spaces, so we would pick them up, and you’d get the mouse’s nose going in the opening there, and I would stick my thumb up behind him or her, and they would run in.

Tacey Ann Rosolowski, PhD
00:45:47
“Come on in.”

Elizabeth Travis, PhD
00:45:48
They would just run right in. It did not—and then you’d pull their feet out in front of this. You can’t see it here, but you’d pull the feet out in front of it, and the legs would be here, and you would just swivel these in, and they couldn’t move. You would just hold the thorax.

Tacey Ann Rosolowski, PhD
00:46:03
Right. So they were completely stable for irradiation.

Elizabeth Travis, PhD
00:46:04
They were completely stable. In fact, we did experiments out at Berkeley on neon ions, and that is a horizontal beam, so the animals had to be vertical, and they were on this little track that went along. They had to be, and only one of I don’t know how many hundreds we irradiated, because we did, again, a lot of—it’s called fractionated radiation. We did fractionated doses, and I think hardly any of them fell out of this jig.

So these are the two things I did at the Gray Lab, and then all of the work I did there centered around radiation effects on the lung. It was such an environment because it gave you the opportunity, first of all, you didn’t have to write grants, and it gave you the opportunity—took us a year to develop this chamber, to get it developed, refine it, and get the data out. And I think the first paper was published in 1976, ’77, ’78, maybe, probably ’78.
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*Tacey Ann Rosolowski, PhD*
00:47:14
That actually seems pretty quick, if you got there in ’76.

*Elizabeth Travis, PhD*
00:47:17
Oh, yes, but we were, I mean, laser-focused, laser-focused.
Chapter 04
A: The Researcher;

Furthering a Research Career at MD Anderson

Codes
A: The Researcher;
A: Joining MD Anderson;
C: Evolution of Career;
A: Professional Path;
C: Professional Practice;
C: The Professional at Work;
D: On Research and Researchers;

Elizabeth Travis, PhD
00:47:17]

Plus, I mean, I had two goals when I went to London. Number one was to really develop my research skills, my knowledge, publish, and position myself for an independent career in science. That was my goal. And to do that, I just worked all the time, to the point that Jack Fowler, the head of the lab, used to ban me from the lab on the weekends, you know. He’d say, “No, you can’t work every weekend.”

But it paid off. It paid off because at the end of three years—I went there for between one and three years, and I was supposed to go back to South Carolina, but I decided I didn’t want to go back there. MD Anderson had always been in my sights as a place to be because MD Anderson had a reputation. It was well known for its work on normal tissue damage. Rod Withers was here for years, and he was kind of the father of normal tissue injury.

Tacey Ann Rosolowski, PhD
00:48:24
I’m sorry, his name again?

Elizabeth Travis, PhD
00:48:25
Rodney Withers, W-i-t-h-e-r-s. He was here at MD Anderson as chair of then the experimental— I can’t remember whether it was a department or not, but he ran the Experimental Radiation Oncology Group. So I always had my sights on MD Anderson, and I had met him and a lot of the people here, so I didn’t want to go back to South Carolina.
So I was recruited to the NIH. I went to the NCI for a couple years. At that time, they had a position called cancer experts, which were for new postdocs just developing, coming out of their postdoc, that they thought had promise. I went there for a couple years and—

_Tacey Ann Rosolowski, PhD_

00:49:17

Seventy-nine to ’82 is what I have.

_Elizabeth Travis, PhD_

00:49:19

And I was recruited here by Lester Peters, who was then the chair of Radiation. He was coming here as the head of Radiation Oncology, and he called me, and he said, “You know I’m going to Houston.” I knew him because of the three years at that lab, everybody went to that lab, and Jack took us to every meeting. He made sure we went to meetings. He said, “You have to go to meetings to present your work.” So I knew all these people.

_Tacey Ann Rosolowski, PhD_

00:49:47

Again, great mentoring.

_Elizabeth Travis, PhD_

00:49:48

Great mentoring and sponsorship, which is my new thing I talk a lot about.

Anyway, so Lester called me at the NCI and said, “I’d like you to come and be the normal tissue person. I’d like you for that position.” So I accepted that, and that’s how I got here. A very long story, I’m afraid.

_Tacey Ann Rosolowski, PhD_

00:50:09

No, no, not at all.

_Elizabeth Travis, PhD_

00:50:12

And they took a chance on me, too, because I had no grant money, and I didn’t have to write any grants, ever, but I published a lot. You know, it was work that was making a difference. I had branched out. I had started doing work on the gut as well as work on skin, but mostly lung. I was really known for my work in lung, but we did some really seminal work in the gut as well that’s still frequently quoted.
Tacey Ann Rosolowski, PhD
00:50:44
A couple questions I wanted to ask you. Now, the work that you did on irradiating mice and the noninvasive technique to assess lung damage, in what way did that translate into effects for humans or interventions for humans?

Elizabeth Travis, PhD
00:51:07
Well, the whole goal was to, first of all, assess it, be able to measure it, and then look for ways of intervening. We did a number of it—well, one, there were two ways at the time when I was at the Gray Lab and when I first went to the NCI, what we were working on were radio-sensitizers, which were to desensitize tumors, radio-protectors to sensitize normal tissues or to protect the normal tissues, and also ways of changing the fractionation and the volume of tissue irradiated because that can change. The question was, could we change the effect by changing the way we fractionate. Should we give it in large doses? Should we give it in much smaller doses? And then to ask the question, would that change the therapeutic ratio; i.e., would you have less lung damage for the same amount of tumor damage. So that’s how it translates.

So a lot of the experiments, particularly at the Gray Lab, were focused on fractionation. These were experiments that went round the clock. We did fractionation experiments. We’d fractionate the doses and give it every four hours. We had to deliver a lot of dose in a very short period of time to the animals, so that’s why even when I came here and started the lab here, we did some fractionation experiments in the gut that we went around the clock, for, like, three and a half days or four days.

So it was all about that, and then it was about using protectors and asking the question, if some of the experiments I did at the NCI and then here, too, was using protectors in the lung, how would protectors—

Tacey Ann Rosolowski, PhD
00:52:46
When you say “protectors,” what do you mean?

Elizabeth Travis, PhD
00:52:48
Mostly they were free radical scavengers. In fact, I just finished a grant that I had with a colleague. Up until just a couple years ago, we were still working on that to scavenge the free radicals which basically do the damage, and if we did that, would we protect the lungs.
Then the other thing that we worked on here, which was a woman who’s now one of our radiation oncologists, her name is Xing Liao, L-i-a-o. Xing came to my lab because she had met—all these stories are always so long, aren’t they? People in science are so interconnected and related. She met Kian Ang, who just recently passed away, who was a very good friend. I knew Kian from when I was in London. But she wanted to come. He came to me and said, “Liz, I met this woman from China. She wants to come and work in the lab. Will you take her in your lab?”

And I said, “Sure,” and I did. One of the experiments, she did some of the seminal experiments on irradiating very, very, very small areas of lung, because then we were interested in doing—the question in radiation oncology in the clinic was, should we give a lot of dose to a little bit of lung or smaller doses to a whole lot of the lung. Nobody had the answer to that, so we did those experiments in mice, and Xing did these experiments, and they were the first papers that were done on irradiating very small volumes of mouse lung and then seeing a lot—we called it “a lot to a little, or a little to a lot.” So it was Xing Liao and Sue Tucker, who was here as well, and myself who did these experiments. As I said, they were the seminal data on—people are still doing these kinds of experiments, but it was here at MD Anderson that we did these first.

*Tacey Ann Rosolowski, PhD*

00:55:07
What were the findings?

*Elizabeth Travis, PhD*

00:55:09
The findings of the other question we asked, would it make a difference if it was in the base of the lung or in the apex of the lung, etc., and the findings were that it was better to give a lot to a little than a little to a lot.

*Tacey Ann Rosolowski, PhD*

00:55:28
Oh, yes. I am pausing the recorder at 10:58.

[recorder is paused]

*Tacey Ann Rosolowski, PhD*

00:00:00
Okay. I am starting up the recorder again at actually just a few seconds later, about 10:15.
And I’m going to—because there were some differences in the apex and in the base of the lung as well—

But you can check on that, sure.

So I actually came here as an associate professor. I missed the whole assistant professor piece. Wow.

Is that a good thing?

Oh, yes, yes, it is a good thing, because, first of all, I was a little bit older by this time. I mean, I really didn’t start my career till I came here in my first faculty position in 1982. I was thirty-nine years old, you know. That was pretty late to get going on this. For me it was not an issue, I never viewed it, but when I think about it now, I’m thinking people up here are saying, “Aren’t you ever going to retire?” and it’s like I haven’t worked as long as most people. I mean, not in this, at least, not in this career, because I started—I kind of had, I call it, the long and winding road till I finally got to where I wanted to be to be able to do what I wanted to do.

Well, tell me about when you got to MD Anderson and you set up your lab, you started making the connections in this place as an institution. So tell me that story. What pops to your mind as what was key in those first years?

It was very exciting. It was very exciting. I was the only woman in the department. I knew a lot
of the people here. I mean, that was the other thing. I knew Luka Milas, who was then the chair of the department; I knew Meyn, who’s still here; Bill Brock, who’s here; Marvin Meistrick. I met all these people. So it was like it wasn’t coming to a strange place. I knew everybody. I knew Lester. I knew people in radiation oncology. It was very exciting because this, again, was a very vibrant [inaudible], although the focus has changed. It was a very vibrant department, one of the best in the field, and it was exciting to be part of that.

Not anybody at the time was working—Luka was working on tumors and some normal tissue, but I, again, was brought in to really get the normal tissue piece of the department up and running again, and it was a lot of fun. I was single, worked hard, doing experiments around the clock with my technicians, having summer students. I mean, it was just really great fun. Xing came along, did these experiments, and I had graduate students who came in eventually, wrote grants. I came in as a tenure-track associate professor without any grant funding, so I was under the gun, but then so was Lester. I mean, he took a real chance, I mean, and so did Luka. They took a real chance on me, and I think it was because I’d published so much and the data were well accepted and had changed some paradigms.

So I started writing grants, which was a brand-new experience and challenge, to say the least, but, you know, those times are different. I remember, I mean, and this is hard for it to happen, my first R01 got funded. We had a program project grant and I had projects on that, and it was just a good time, a lot of fun, you know, giving talks, doing new science, building your—you know, continuing to develop my career, continued to develop the science.

_Tacey Ann Rosolowski, PhD_
00:04:17
Are there some ways in which your approach to science changed? How did you grow during that period in this new environment?

_Elizabeth Travis, PhD_
00:04:29
I guess it was the whole issue of really thinking about writing a grant. You learned how to write a grant.

_Tacey Ann Rosolowski, PhD_
00:04:35
Well, tell me about that.

_Elizabeth Travis, PhD_
00:04:37
Yes. Well, so, I actually now—when you sit down, when you’re writing a grant, it’s painful.
(laughs) When you’re done with it, at the end of it, it was always—it was like a great accomplishment, like an achievement, because—and what it is, it’s a roadmap, I mean, because, first of all, it really makes you focus on now, what’s the real hypothesis here, and what are the questions I want to answer, and what are the data that support it and what doesn’t support it, and that’s where most of the thinking goes in writing a grant. And then you design the experiments to answer your questions.

So at the end of it, it was always like, “Wow, this is great, because now I have kind of a roadmap.” Of course, you deviate all over the place from that roadmap, because that’s how science is, but at least you’ve really—it really makes you sit down and think about it in a much more holistic way than you would if you were just designing experiments to answer questions, and so you see it in a—if you will, now, granted, you’ve got to step it up to probably the 35,000-foot level and then you’ve got to get down to the ground level, where you start designing experiments then, but you’ve got to start up here and look over all [inaudible].

And the other thing for me that I so enjoyed was being in a department that was in a clinical division. At the NCI, I was in a department that was in a clinical division as well. I was in Building 10, which was the clinical building. I was in the radiation oncology department there. Eli Glatstein was the chair then. Again, I mean, there, too, it was very exciting. In fact, the head of the Gray Lab, Jack Fowler [phonetic], after I’d been in the States for six months, he was a good friend of Eli’s and he knew a lot of people in the States, obviously. He came over, came to NCI, was my technician. I had a technician, and he and the technician did the experiments. I designed them. He said, “You need to get this up and running. You need to be writing the papers from the lab. You design the experiments and [I will] do the experiments.” Now, there’s a mentor.

*Tacey Ann Rosolowski, PhD*

00:06:58
Wow. No kidding. (laughs)

*Elizabeth Travis, PhD*

00:07:00
Isn’t that something? I mean, he had a great time, you know. He knew the people here. It was a good opportunity for him. We had a lot of fun. I mean, I always—for me, it was just always a lot of fun, you know, the interactions with all the people here, the interactions with the clinic. It was an exciting time. It was an exciting time.
Chapter 05
A: The Administrator

Gender Issues at MD Anderson and the Creation of Advocacy and Equity Services for Women

Codes
B: MD Anderson History
B: MD Anderson Culture
B: Growth and/or Change
B: Gender, Race, Ethnicity, Religion
C: Diversity at MD Anderson
D: Women and Diverse Populations
B: Obstacles, Barriers

Tacey Ann Rosolowski, PhD
00:07:22
What about the gender piece here at MD Anderson? When did you start to think about that as an issue you wanted to work on?

Elizabeth Travis, PhD
00:07:31
So Margaret Kripke, who was then chair of the Department of Immunology, Margaret and Josh [Isaiah Joshua Fidler, DVM, PhD [Oral History Interview]] came here the year after I did. I think they came in ’83. I came in ’82. And she put together—and there was an initiative at the time at UT System or in the state. It was—I can’t remember the exact name of it, but it was the Commission on Women and Minorities—I actually probably have that document somewhere—across UT System.

Tacey Ann Rosolowski, PhD
00:08:08
Oh, really?

Elizabeth Travis, PhD
00:08:10
So there was something very early on at UT System that was focused on this, and Margaret was involved with that, and so she wanted us to—she put together a small group. At the time, the president was [Charles A.] “Mickey” LeMaistre, and his right-hand person, Judy [Watson]—I forget her last name. It must be somewhere in the archives.
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Interview Date: 24 March 2014

_Tacey Ann Rosolowski, PhD_
00:08:36
Yes, I remember Judy. I don’t remember the last name.

_Elizabeth Travis, PhD_
00:08:40
So Margaret got Lillian Fuller, who was a radiation oncologist, Margaret Spitz, who was in epidemiology, myself, Judy [ ] Watson—and she was the right-hand to the president, and then Margaret. And we decided to do a survey of the status of women at MD Anderson, and it was eye-opening. Lillian Fuller was a big—she was a big advocate for women, and she felt that there were real discrepancies and inequities at the time, and so she was on this committee, and she and Margaret were both very keen to get the data and to see what they suspected and what we suspected. And so I was asked to join that group.

_Tacey Ann Rosolowski, PhD_
00:09:40
Why were you asked?

_Elizabeth Travis, PhD_
00:09:41
That’s a good question, because I don’t know if I know the answer to that. I’m not so sure that I do, except that Lillian, I think, because she was in Radiation Oncology and she had spoken with me and she knew that I had some interest in this as well. And so I think, again, there’s always been that undercurrent throughout my whole life, of equity, you know, particularly for women.

So I was delighted to join this group, and we indeed found inequities. This was in—I’m trying to think what year it was. It wasn’t right away. It must have been ’84 or ’85. Probably Margaret has it in her history. I know it was before my son was born. My son was born in ’86. Maybe it was shortly after, because I remember I think I was the twelfth woman professor.

And what we found was the pay wasn’t the same, there were inequities in pay. We found that it was taking women longer to get promoted than the men. So this went forward to the president and to Dr. [Frederick] Becker [Oral History Interview], who was head of Research then, and changes were made at that time.

_Tacey Ann Rosolowski, PhD_
00:10:54
What kind of changes?
Salaries were fixed. I think they paid more attention to women and their promotion, because it was clear that it was taking women longer. I mean, if you’re on the tenure track, it didn’t take you longer, but the men were getting promoted on the tenure track earlier than the women, and, you know, the issue with that is it’s a money issue. It’s not just about the promotion, because with that promotion comes a bump in salary. So if you’re a few years behind, you know, you’re missing—it’s like compound interest—the raises. So the women were falling behind in salary.

Tacey Ann Rosolowski, PhD
00:11:35
Now, did you find at the time that women’s awareness, that there were equities? Were women aware that there were inequities when this survey was done?

Elizabeth Travis, PhD
00:11:48
I don’t think so. I don’t think so. I can’t remember how many women we actually had at the time, but there weren’t many. I think some of the more senior women like Lillian and some of the others might have been aware of it, but I don’t think it was—you know. Well, there just weren’t that many women.

Tacey Ann Rosolowski, PhD
00:12:13
Yes, and I’ve talked to a number of women who had these kinds of aha moments. It was like, “Oh, my god, I had no idea this was going on,” and suddenly—

Elizabeth Travis, PhD
00:12:23
Like Lily Ledbetter [phonetic]. (laughter)

Tacey Ann Rosolowski, PhD
00:12:26
Yes.

Elizabeth Travis, PhD
00:12:28
Years later, somebody—you know, male colleagues said—
Did you know.

And often these stories are accompanied by feelings of betrayal and, you know, like, “Oh, my gosh. I can’t believe the institution did this to me,” or, you know, so they’re not happy stories often.

Yes. I mean, I think—I don’t know. I didn’t have any sense that this was an unhappy story. For us it was about data, and I maintain this office—to this day I always say data are necessary but not sufficient. But you have to have the data, and the data speaks for itself. So I don’t—I mean, I think it was a matter here of the data, what are we going to do about it. Margaret took it to the president, and, you know, Judy Watson—it was Judy Watson—Judy was his right-hand person, and he agreed to have her on this committee so that he could be informed about this. So, you know, there was a buy-in, if you will, from his—at least from a knowledge standpoint, and then things were corrected. But one of the things we all know, and to this day is the case, you can’t take your eye off the ball, even today. It’s something you have to monitor.

And so what happened after that is we started an organization, loose organization called the Women Faculty Organization, volunteers all of us, to monitor data, to raise the visibility. By that time, Genie Kleinerman [Eugenie Kleinerman, MD [Oral History Interview] ] had come, and she was head of pediatrics. Who else was here? But we were beginning to have at least a critical mass, a small critical mass, if you will, of women who were very interested in the topic and wanted to make sure that women were paid fairly, were getting promoted, were provided opportunities. It’s about providing opportunities and access to the opportunities. I mean, I always say, “All I can do is open a door for you. When you walk through that door, you have to—you’re on your own.” But it’s opening those doors and providing access to those opportunities, I think, that’s so important.

Now, it sounds as though these were very senior women who were involved at this time.
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Elizabeth Travis, PhD
00:15:02
Yes, yes.

Tacey Ann Rosolowski, PhD
00:15:03
And to what degree did that make a key difference?

Elizabeth Travis, PhD
00:15:07
I think it makes—I think it’s critical, because you have credibility. You know, you’ve earned your stripes. You have your grant. You’ve written your papers. We all had done some service to the institution. Lillian Fuller was an internationally known radiation oncologist, well respected. Margaret, of course, was the first woman department chair and built up the Chair of Immunology. I think I was a professor when we did this. I was well established in my career by that time, had grants, and was well known in my community. So I think that it was critical that we all had tenure. (laughs) We were all tenured.

Tacey Ann Rosolowski, PhD
00:15:54
Yes.

Elizabeth Travis, PhD
00:15:55
And Margaret Spitz—so Margaret Spitz has an interesting story because she took off to raise her kids and then came back. She was part-time for a while, and I can’t remember if she was then still part-time, but she was a chair at the time. So I was probably—and Lillian wasn’t a chair, and neither was I, but, yes, Margaret Spitz and Margaret Kripke. And then, of course, Judy Watson was really key to this because she had the ear of the president. And being senior, I think, was critical. I’m not so sure it would have gotten the attention of the president, I’m not so sure that the changes would have been made if you didn’t not only have senior women who had credibility.

Tacey Ann Rosolowski, PhD
00:16:37
Were there any effects on the culture? I mean, how were you seen? I mean, did people think, oh, you’re—
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Elizabeth Travis, PhD
00:16:45
Troublemakers. (laughs)

Tacey Ann Rosolowski, PhD
00:16:46
Okay. Well, tell me about that. I mean, what—and you understand how I’m asking, I mean, just because it’s got to be, kind of, you’re throwing pebbles in the pool here.

Elizabeth Travis, PhD
00:16:55
Yes, yes, you are, and, you know, the men were skeptical. I mean, one of the things that has always won us champions is when you do a salary analysis and men get their salary increased, too, because some of them weren’t being paid.

Tacey Ann Rosolowski, PhD
00:17:15
Oh, really.

Elizabeth Travis, PhD
00:17:17
Yes, that happened to one individual who’s still in the institution, who—we did a second salary analysis in—it wasn’t 1996. It was before then. Maybe it was that first analysis. But anyway, he came up to me and he said, “Liz, I have to thank you.”

And I said, “Okay. For what? You’re welcome, but for what?”

He said, “You know, it was—I got my contract and I had this salary increase, and I went in to the chair of my department. I said, ‘Thank you, but what is this? How did this happen?’ He said, ‘Those women analyzed the salaries of all the faculty and both the women and men were—there were some men, and we had to fix your salary.’”

Talk about how to win an advocate, because it’s for both. It is for both. Everything—I mean, I do salary analysis, and every year, it doesn’t matter, you look at everybody, and if it’s not there, it’s not there. I don’t care what you look like and what gender you are. It’s just that simple.

Tacey Ann Rosolowski, PhD
00:18:25
Absolutely.
Elizabeth Travis, PhD
00:18:25
It’s just that simple. But there were inequities. I mean, yes, there—women weren’t on a whole lot of committees. They certainly didn’t have any high-profile positions until Margaret was appointed in the nineties to—Margaret Kripke—into a leadership position. There were very few department chairs who were women, very few professors who were women, and it was just working on all those issues.

I remember one of the things we wanted to do, just like that picture up there—

Tacey Ann Rosolowski, PhD
00:19:08
Oh, the Legends and Legacies picture.

Elizabeth Travis, PhD
00:19:09
The Legends and Legacies, yes, and one of the reasons for that picture was to raise—or for the book, was to raise the visibility still—and this was, what, 2008—to raise the visibility of the women and say here is—this is just a small sampling of the women in this institution and what they have—what they are doing, and also to have a representation of that in a picture, you know, because—and so the way we chose to do that, there used to be, when we had the faculty dining room, which is over on the eleventh floor in the Clark Clinic Building, used to be a big table down the middle, big rectangular table, could seat about ten or twelve, always occupied by men.

So by that time we had enough of us, and this is when the Women Faculty Organization, we decided we were going to make ourselves visible, and so we told the dining room staff we were reserving that table that day. So the men all came in, their table was reserved, and they were moderately horrified. Who would reserve their table? Then, of course, all the women came in and sat down. There were mouths dropping open. (laughs) I went up to then the salad bar to get something. On the way back, one of the guys jokingly, but only half so, said, “Liz, what are y’all doing over there? Plotting a downfall?”

“No,” I said, “just a takeover.” (laughs)

So there was—we tried to—you know, humor always goes a long way, if you can do this with some humor, and I think that—

Tacey Ann Rosolowski, PhD
00:20:54
Was that something you did regularly, reserve that table, or was that a one-time kind of show?
Elizabeth Travis, PhD
00:20:59
Well, it was—I don’t think we ever reserved it, but it was interesting. So women started—I started to sit at that table with the men, and so did other women. So that’s how you change culture, to the point that a group of those men around that table would go out for a big dinner once a year, and they thought of me so much as one of them that they even thought about inviting me to that dinner [inaudible]. (laughs)

Tacey Ann Rosolowski, PhD
00:21:30
They didn’t invite? They did invite you?

Elizabeth Travis, PhD
00:21:32
They didn’t, but they told me they were thinking about it. I said, “That’s okay. You guys can have your night out. I don’t need to do that.” But I think that’s how you start to change culture.

You start—you change culture by, you know, now one of the things we did when the office opened, is we never—we don’t do anything for the women, particularly for nominating them to go to leadership development awards or career development—or leadership development programs, career development programs like the AAMC. I would call the chair of the department and I’d say—you know, most of them—by now I have been here a long time, and I’d say, “You know, Jim, here’s so-and-so in your department. We think she’d really be great, you know. Give her some opportunities.” And we would tell them, and this is true for awards, we would say, “We’ll do all the work, and if you agree, you get to sign the letter and send it in, but we’ll prepare all the documents for you.”

And they said, “Sure.”

So we continued to do that now. Now, and the process changed a little bit, but now they’re sending us names. That’s how culture changes.

Tacey Ann Rosolowski, PhD
00:22:38
Yeah.

Elizabeth Travis, PhD
00:22:39
And it was our willingness, I think, to reach out and say—you know, because you’ve got to engage them. I’ve said this from the very beginning, “You can’t do this. Only the women can’t
do this. You have to engage the men.” And I think they’re pretty engaged these days. Faculty achievements awards a few years ago, there was not one woman who got it one year. And, oh, I was just more than shocked. Unbelievable.

But my son’s father, his motto is, “You don’t get mad; you get even.” I don’t always ascribe to that theory, but this time I did. And there’s a picture up there. See that behind—there’s a whole bunch of women. Here they are. It was two thousand—

_Tacey Ann Rosolowski, PhD_
00:23:29
Oh, okay. Yes.

_Elizabeth Travis, PhD_
00:23:32
These were all faculty convocation 2009.

_Tacey Ann Rosolowski, PhD_
00:23:35
2009.

_Elizabeth Travis, PhD_
00:23:36
Out of eleven awards, nine of them were women.

_Tacey Ann Rosolowski, PhD_
00:23:39
Wow.

_Elizabeth Travis, PhD_
00:23:40
And that was done by just doing it.

_Tacey Ann Rosolowski, PhD_
00:23:44
Right.

_Elizabeth Travis, PhD_
00:23:44
By just getting the chair to say, “We think so. What do you think about so-and so for faculty achievement award in education or research?” And, you know, I don’t think—I don’t think it’s
ever intentional. I choose to think it’s not intentional, and I don’t think it is. I think people just think of people who look like them. And I think you have to be—raise your awareness to think of others. Even women. I mean, I’ve had women who are putting together programs, you know, for a meeting, and they’ll say, “I didn’t have any women.”

And I said, “I know. That’s what happens. You have to be aware of that.” And I think it was just making—helping the men, the chairs. I’d say, “What do you think? She looks really good to me for this award. What do you think?”

They said, “Yeah, let’s do that.”

“Oh, we’ll write it for you. We’ll send you a draft of the letter. You can do whatever you want to fix it, we don’t care, and then we’ll take care of it. We’ll submit it. You don’t have to do anything. We’ll do all the hard work.” And we still—we still help with that. We still help to do that, because I think that they just think of whoever off the top of their heads.

_Tacey Ann Rosolowski, PhD_

00:25:03
So tell me how you moved from the committee to having this Department of Women Faculty Programs. How did that happen?

_Elisabeth Travis, PhD_

00:25:14
I actually had nothing to do with that. That was Margaret Kripke and John Mendelsohn [Oral History Interview]. So Margaret, in her position as the chief academic—we still had the Women Faculty Organization. Then we became the Women Faculty Administrators Organization.

_Tacey Ann Rosolowski, PhD_

00:25:30
How did—why that split or change?

_Elisabeth Travis, PhD_

00:25:36
Because we felt it was important to engage as many women as possible. We felt it was important. There are a lot of women on the administrative side of the house who also, you know, weren’t getting promoted, you know, and the issues are the same. So we have the organization, but the changes weren’t happening quickly enough.
In 1996 when John Mendelsohn was here, we did another survey, and it was mostly about women in leadership, and there were still pages and pages and pages of men in leadership positions, with very few women in leadership positions. And this was 1996.

So Margaret at that time—and I can’t remember the exact date that Margaret—she was appointed as, I think—well, she finally became the chief academic officer and executive vice president. Prior to that, she was, I think, vice president for academic affairs, but I’ll have to check that because I can’t remember exactly what her title was. But as the chief academic officer, in particular, she could kind of look over the landscape and make—you know, if there were inequities, she could right them. She could, you know, identify rising-star women, you know, and help get them to the AAMC programs. We sent, and we continue to send, women to the program, which develops women leaders for academic medicine.

So she decided to step down and retire, and at that point she was concerned that there would be nobody in her position in that office, in the President’s Office, and she was at that point at the leadership table. She was one of the four at that time, and she was at the leadership table. She was the first woman to be at that leadership table and continues to be the only woman to be at that leadership table. So when she decided to retire, she was really afraid that things would slip again if somebody wasn’t watching it, brought in a couple—I was on the committee, brought in a couple consultants to tell us how do we—number one, we’re not happy with the pace this is happening, and, number two, how do we make sure that it continues and pick up the pace? And their recommendation was you needed to be, as I say, somebody’s day job. You can’t do this work and run a lab full-time.

*Tacey Ann Rosolowski, PhD*
00:28:23
Can I ask you, who was the consultant that you brought in?

*Elizabeth Travis, PhD*
00:28:29
There were two of them, actually.

*Tacey Ann Rosolowski, PhD*
00:28:32
And did they specialize in gender issues or—

*Elizabeth Travis, PhD*
00:28:35
Yes, one of them for sure did. I can go back and look.
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Tacey Ann Rosolowski, PhD
00:28:39
Okay. I was just curious.

Elizabeth Travis, PhD
00:28:40
Yes, I’ll go back and look.

Tacey Ann Rosolowski, PhD
00:28:42
Thank you.

Elizabeth Travis, PhD
00:28:46
So at that point, I decided that—you know, I had become very, very interested in doing this and was doing a lot of work around this and decided to go ahead and apply for the position. Also, you know, I’d been doing research for, what, twenty years or so by then, and if you can continue to do more research, this just sounded like it was something I’d always been interested in, passionate about, and it was a new challenge. And I’ve always loved challenges, obviously, and so I decided to apply. It was a national search, and I was, you know, given the position.

Tacey Ann Rosolowski, PhD
00:29:36
Now, so there was a decision to, as you said—

Elizabeth Travis, PhD
00:29:42
There was a search committee, etc.

Tacey Ann Rosolowski, PhD
00:29:43
—make it someone’s day job.

Elizabeth Travis, PhD
00:29:44
Right.
Chapter 06
B: Building the Institution;
The Office of Women Faculty Programs: Activities and Challenges

Codes

A: The Administrator
B: MD Anderson History
B: MD Anderson Culture
B: Growth and/or Change
B: Gender, Race, Ethnicity, Religion
C: Diversity at MD Anderson
C: Controversies
C: Professional Practice
C: Leadership
D: Women and Diverse Populations
B: Obstacles, Barriers, Challenges

Tacey Ann Rosolowski, PhD
00:29:44
To what degree was the Department of Women Faculty Programs kind of thought out, or did you come in really on the ground floor figuring it out?

Elizabeth Travis, PhD
00:29:53
Ground floor. Ground floor.

Tacey Ann Rosolowski, PhD
00:29:54
So tell me about that process. How did you start to build what this looked like?

Elizabeth Travis, PhD
00:30:02
Well, I kind of thought we had to hit the ground running, and we had to get something going pretty quickly and identify key areas. One was raising the visibility of women. The book was one of the first projects.

Tacey Ann Rosolowski, PhD
00:30:19
And that’s Legends and Legacies, just for the [inaudible].
Elizabeth Travis, PhD
00:30:24
Legends and Legacies, yes. Legends and Legacies. All of my colleagues, my good friends, female colleagues, thought I was crazy. They thought, “Oh, nobody’s ever going to buy this book, but we’ll humor her. We’ll humor Liz. We’ve known her a long time. We’ll humor her. We’ll do this.” And it’s ended up being a signature of the office, actually. We take that book when we go out to schools. You know, we’ve sent it to a lot of deans of medical schools. When I go and give talks, I always bring a couple of copies for the women’s program there.

But it also, for me, it was an opportunity to—first of all, those women, talk about diverse backgrounds. It was a way of saying not everybody comes from privilege. You don’t have to come from privilege to have a position. You don’t have to come from privilege to be a physician or a scientist. And that’s all their individual stories and their—do you have a copy of the book?

Tacey Ann Rosolowski, PhD
00:31:25
I do.

Elizabeth Travis, PhD
00:31:26
Yes, you do, right. I thought that we had given you one.

Tacey Ann Rosolowski, PhD
00:31:28
Yes.

Elizabeth Travis, PhD
00:31:29
And some of them are incredibly compelling. I didn’t even know them, even though I knew everybody in that picture, although they didn’t all know each other.

Tacey Ann Rosolowski, PhD
00:31:37
Which is so funny, because as I’ve learned from conducting these interviews, I mean, most of the men don’t come from privilege.

Elizabeth Travis, PhD
00:31:44
Right. That’s right.
Tacey Ann Rosolowski, PhD
00:31:45
So why do women believe they have to in order to succeed?

Elizabeth Travis, PhD
00:31:49
Yes, exactly.

Tacey Ann Rosolowski, PhD
00:31:49
It’s very strange.

Elizabeth Travis, PhD
00:31:50
Exactly. And also just say, “Look what all these—.” And if you look at that picture, it’s diverse in all ways. It represents all the mission areas of the institution. It’s diverse across race and ethnicity. I mean, it’s diverse across—it’s mostly our senior—it was all the women leaders at the time and some of whom are now leaders, some of whom are now leaders.

But it was in their own words, and I told them, I said—so I worked with Mary Jane Scheir [phonetic]. I worked with Steve [Stuyck [Oral History Interview], Maria Dungler in Public Affairs, and I told them—and Diane Tomasi [phonetic] in the publications, she did the editing. We told them, we gave them—we said, “This is how long we want it. We want your personal story. Do not tell me your CV. I know your CV. This isn’t what this is. This is about you and your story. And you write it. We will lightly edit it just for grammar, whatever.”

And if you’ve read the stories, you know they’re all very different, they’re told differently. We had them put in personal pictures, because this book was to be not only about your accomplishments, about how you got there, offering pointers to our younger women, and, secondly, being a woman, which is why that picture is what it is.

Tacey Ann Rosolowski, PhD
00:33:17
Yes, with the evening dresses just for eveningwear, which is great. “I can look like this and still have a high-powered career. I don’t have to have a tie.”

Elizabeth Travis, PhD
00:33:26
Right. Because originally—and I told them we wanted to do a group picture, and everybody
thought of course we’d be in lab coats and stethoscopes and all the rest of that, you know, our professional garb, and I said, “Hm-mm [negative].”

And this was when Annie Leibovitz did the photo shoot for *Vanity Fair* of the stars, and Maria Dungler came up to me in my office, I was over in HMB at the time, and they were in the same building. She said, “Dr. Travis, look. This is what we’re going to do,” and that’s what that was. That was our model for that. And I sent it to the women and they were like, “You’ve got to be kidding me.” Somebody said, “I’ll be Gina Lollobrigida.” (laughter) We had a great time.

That was the first and it was also the—the other thing to me, I said, “We have to build communities of women,” and this was important because the head of Vet Med didn’t know the surgeons. A lot of those women didn’t know each other because some were in lab, some were in the clinic. Now, some of them did, but a whole lot of them—Margaret and I knew everybody in that picture, but a lot of them didn’t know each other.

*Tacey Ann Rosolowski, PhD*
00:34:34
That’s kind of amazing.

*Elizabeth Travis, PhD*
00:34:35
It is amazing. So this is the first community of women that we built, and they still hang together. And so it was—and then we had a big event to roll the book out. We had it over at Trevisio’s, and we had that picture and we had a big one of it. Nobody had seen it but me and Maria in Public Relations. Nobody else had seen the picture, and we had it covered. I mean, we just had—we invited everybody. It was a big event. We unveiled the book, we had the books, and then we unveiled the picture. And I mean, there were gasps. (laughs) I mean, everybody was—it was a terrific evening. It was a terrific evening. So that was one of the first things.

The other thing—

*Tacey Ann Rosolowski, PhD*
00:35:23
Can I just ask you—

*Elizabeth Travis, PhD*
00:35:24
Sure.
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Interview Date: 24 March 2014

_Tacey Ann Rosolowski, PhD_
00:35:25
What was the impact of the book? I mean, once you had this great event, the book comes out, what was the aftermath?

_Elizabeth Travis, PhD_
00:35:30
The aftermath is we did book signings in the institution, we sold it here for like twenty dollars, and we would do book signings around. We did numerous book signings. I mean, people, all the—it’s in the book shop, it’s in the gift shops, we sell it in the gift shops.

_Tacey Ann Rosolowski, PhD_
00:35:48
Did it make a change?

_Elizabeth Travis, PhD_
00:35:50
I think it did. I do think it did. I think it, number one, raised awareness of all the things we wanted it to, that—look at these women. And people would read the stories of women that they knew and they’d said, “I didn’t know that.”

I think the other thing it did, it made everybody human. You know, people—it’s like, “I didn’t know you did this,” or, “I didn’t know you were that,” or, “I didn’t know you loved to dance,” or—you know, so it put a different face, if you will, on the women of the organization. We all became a little more personal to people, and I think that also is important for building morale. And yet nobody abused that kind of us opening ourselves up. I don’t think there was any—not any pushback, you know.

And then the website. We started a website, and that was another thing. Then immediately—

_Tacey Ann Rosolowski, PhD_
00:36:59
A website related to _Legends and Legacies_?

_Elizabeth Travis, PhD_
00:37:02
No, we started a website for Women Faculty Programs.
And we decided we were going to have things like, again, “Women Leading the Way,” that every month we were going to feature one of our women faculty who we felt led the way; did she get an award, a new department chair. And we still do that every month.

And when was that website started?

2008. Probably 2007, probably in the fall, because the office opened February 2007. I had one E.A., and then I had a part-time project director, who was hired by Faculty Development, by Janis Yadiny, and she shared her. Vicky Thompson worked with me in the beginning, and she did the website. But we did “Women Leading the Way.” I mean, we just were just firing on all cylinders, I’d say.

Then the other thing we did not long after that was our Kripke Legend Award, that we have an award that honors Margaret Kripke and her advocacy of women, and it’s gender-neutral and it is—we’ve had a National Academy member, Nancy Hopkins [phonetic], got it. Marge Foti got it. Ed Renz. A man can get it. And it’s a national award.

And the rationale for the award is?

To honor those who advocate and promote the careers of women in cancer science and cancer medicine, because you need these people and you need to acknowledge the work that they’ve done on behalf of women, and so we did that. The president recently followed that up—last year was our first one—with the President’s Leadership Award, which actually honors one of our internal faculty for the same thing, for advancing the careers of MD Anderson women.
So that’s been the impact. So the impact is—I mean, we have a committee, a selection committee. They are Cancer Center directors from around the country. We have applications. It’s highly competitive. You wouldn’t believe the applications that come in, highly competitive, well known around the country.

*Tacey Ann Rosolowski, PhD*

00:39:26

Wow.

*Elizabeth Travis, PhD*

00:39:28

And the orchid, you know, the book cover, you know, has the white orchid on it. That’s kind of a signature of the office. I send that when a woman—we get new women chairs. I send it to women who are appointed Cancer Center directors. I send them to women who are from this office, from MD Anderson, congratulations. So, you know, we try to be out in the community as well.

So it was a website, it was “Women Leading the Way,” then working on awards, sending women to the AAMC programs, career development programs. Those were some of the first things we did. And you were asking about pushback, and, I mean, there was pushback initially.

*Tacey Ann Rosolowski, PhD*

00:40:14

Tell me about that. How’d that take shape?

*Elizabeth Travis, PhD*

00:40:22

I was not—I mean, I—and maybe I had my head in the sand or maybe I was just, you know, so focused on doing what I was doing that I wasn’t picking up the signals. But there were some of my male colleagues who were not happy with what we were doing, how we were doing it, and how I was doing it, and they complained to the president, who complained to the provost, who told me about it.

*Tacey Ann Rosolowski, PhD*

00:40:46

What were they complaining about?

*Elizabeth Travis, PhD*

00:40:47

They thought I was too strident. That was one of the things. And perhaps I was. I don’t
remember that, but, you know, perhaps I was. But, again, the question is, what do you do about that, and I obviously was not happy about it. I also made the statement that, “You know, if somebody wasn’t complaining about me, if I were you, I’d be worried, because that probably means I’m not doing my job right,” because, I mean, surely we had to expect that there would be pushback, you know, have this office committed to women, etc.

And, yes, even to this day, I know there are naysayers, people who don’t particularly agree, and I’ve learned to deal with that by you treat them the same as you treat everybody else, they’re entitled to their opinions, and treating the women faculty the same as I treat the rest of them, invite them to everything and make sure they have the opportunities, but to just—I’ve worked with the men who I know are allies and who are vested in doing this and want to do this.

So what I did then, because I really didn’t know how else to go about this, I actually went to a good friend in the institution, male, who I—

Tacey Ann Rosolowski, PhD
00:42:09
Now, when you said “then,” is when you confronted some of the complaints?

Elizabeth Travis, PhD
00:42:12
So I didn’t know how to confront the complaints, and so I talked to—he probably won’t mind this. I went to Dan Fontaine. I have a good relationship with Dan and I do—I don’t always agree with him, but that’s part of the relationship. But I told him what had happened, and I said, “What do you advise?”

And he said, “Do a survey.” So that’s what I did. I surveyed all the chairs and division heads, and I said, “This is your opportunity. Tell me what you like, what you don’t like.”

Tacey Ann Rosolowski, PhD
00:42:53
So, about what Women Faculty Programs was doing.

Elizabeth Travis, PhD
00:42:55
About what we were doing, and I also told them, “It’ll be totally anonymous. It’s going to be formed up. You can say what you want.” I said, “What I’m interested in knowing is what do you like and what don’t you like, and I will come back and report off the data to you at Research Council and at Clinical Council.” And I did that, and I think that’s probably the biggest single thing I did to gain respect for what we did in the office, because I heard what—okay, they
weren’t all unhappy, but some were. And I said, “Okay.” And then when I reported back, I said, “Here’s what you had to say, and I agree with these things, and some of these things we can change and some of them we can’t.” [00:43:42]

*Tacey Ann Rosolowski, PhD*

00:43:43

What were the results of this survey?

*Elizabeth Travis, PhD*

00:43:46

Basically that mostly they were happy with what we—there will always be—like when you do a 360, you know, there are always people who think you walk on water, and there are always those who think you’re the devil incarnate, and everybody’s kind of in the middle, in between. But there wasn’t anything that was particularly outrageous, you know. I think it was more about—it was so, I guess, not unimpressive, but I think that it did for me was, number one, some of the things we were doing, they liked. I think they wanted a change in tone. We didn’t have to change very much, quite frankly. (laughs)

*Tacey Ann Rosolowski, PhD*

00:44:35

Well, sometimes it just seems like change itself is the problem.

*Elizabeth Travis, PhD*

00:44:38

Yes, but I think it was the fact that I said, “Okay, I heard you, I want to hear from you, and then I will come back and report back to you on what you said. You will see the data. The data will be analyzed and we’ll get it. I will present it. I will stand up here and present to you whatever it is, and we can have a conversation.”

Some of them were unhappy about the focus on women, weren’t quite sure why we needed it, you know, and we were trying to make a lot of changes. We really were. Like I said, I figured I was given a job to do and I needed to do it, and I didn’t want to waste much time. I think the pace of things was a little shocking to people. You know, I’m not so sure a lot of them liked the book so much.

*Tacey Ann Rosolowski, PhD*

00:45:39

Why?
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Elizabeth Travis, PhD
00:45:41
Well, I guess it was just the focus on the women. A lot of people didn’t think that was important, even though the data supported that it was important. I think when you set up an office like this—this is an independent office that reports to the provost—I think it usually makes people a little jittery about whether other people are going to be treated fairly. I mean, we’ve all heard the stories now about white men think they should have their own organization.

By the way, I have to say tomorrow Gloria Steinem turns eighty, which is unbelievable.

Tacey Ann Rosolowski, PhD
00:46:23
Unbelievable, yes.

Elizabeth Travis, PhD
00:46:24
Unbelievable, but talk about a person who really did a lot to raise the issue, the gender issue and the inequities and etc., at a time when it really was unpopular in the sixties.

Tacey Ann Rosolowski, PhD
00:46:36
No kidding. No kidding.

Elizabeth Travis, PhD
00:46:38
But I think it’s changed, you know, and they weren’t sure how this was going to help the organization, and, “Oh, by the way, don’t you want the best in terms of—?”

And I always say, “Yes,” and then you don’t have to say anything else. People kind of look at you. That happened to me one time. I was a program chair for a big international meeting of one of my professional societies, and I told my whole committee, men and women both, that, “Do not bring me a symposium without a woman.” This was 2007. “Do not bring me a symposium without at least one woman, because I’ll send it right back, because we have a lot of women in the organization.”

And somebody said—male—who I knew really well—I was past president of this organization. He was my secretary-treasurer. He said, “Liz, but don’t you want the best?”

And I said, “Yes.” He kind of looked at me, and he finally got it, you know. Yes, the point is, yes, and we’re not tapping all that talent.
So I think that change is always—it’s hard for people, and this was a big change. This was an office committed to advancing—recruiting, promoting and advancing women faculty. That was a lot to swallow, quite frankly, you know. But I didn’t let that stop me from doing the job, and I always figured, you know, the provost will let me know, which he did that one time when they got complaints, and so I took care of that. But I was given a job to do, and I had to do it and I had to show them results.

That’s the other thing we focused on. For me it’s about leadership. Still and yet, it’s about leadership. I think the more women and minorities in leadership, the better off an organization is. And there’s plenty of data that support that, in the business world and the academic world, I might add. Their bottom line is better.

*Tacey Ann Rosolowski, PhD*

00:49:04

Why is that?

*Elizabeth Travis, PhD*

00:49:05

Because you bring a different perspective to the table. You bring a different approach to problem solving, and the more differences of opinion, the data show—there’s a man whose name is Scott E. Page, who has done a lot of extensive research on diversity, and all of his studies, the data show that the more diverse opinions you have at the table, the product is more innovative, there are better solutions, because if you’re all thinking the same, there’s no opportunity for innovative and new ways of doing things.

So it’s about leadership, and about having women at the leadership table, and having women’s voices being heard, having minority --and, in this case, the intersection of gender and minority women-- hearing what they have to say. They have a different viewpoint. You know, we do think differently. We’ve been socialized differently. To this day, women are socialized differently, like to not self-promote and other things. Men have to be—I think we all have to be aware of that, because a woman may be speaking or a minority may not be speaking up when, in fact, they have the talent to do a job. You have to think, “I know they can do this, and I’m going to give them that opportunity.” So I think it’s about leadership.

The other thing is, it’s like putting a sign out, “No women or minorities need apply,” if there are no women in leadership positions. So that was the other big push. I mean, working with search committees. I mean, to this day I’m on every leadership search committee. We changed policy very early on. Identified policies, we changed our search committee policy to—the policy says that there have to be women and minorities, and it’s a critical mass. It’s not numbers. It’s not a
number. One is not enough because you’re a token and your voice isn’t heard. It’s 30 to 40 percent. And there was pushback about that. There was pushback about, “Why do we need that?” Well, it’s because women are 35 percent of the organization, you know, and they will bring a different perspective.

Originally and initially I was always the one saying, “We don’t have any women candidates here,” but the way my approach to that was, I would always, every search committee, even now, I go with the names of women. We in this office, we do some research. We surface names of women. But it’s changed to the point now that men on search committees will say, “We don’t have any women.” That’s culture change.

But, you know, initially, people don’t like you asking that question. You know, it just makes people uncomfortable, and so I would ask the question or I would say, “Here are some women that we need to review.”

*Tacey Ann Rosolowski, PhD*

00:52:17
Why do you think men were so uncomfortable having to ask that question or having you ask that question? Why was it the gender question that made them so uncomfortable?

*Elizabeth Travis, PhD*

00:52:30
I think because everybody thinks they’re fair. We all—I mean, and this is not only men. Women do the same thing. In studies where they compare, there’s been one site just done recently where they sent out—and these were just résumés, same résumé for a research position in a lab, and they sent them out, changed the name from John to Jane. Then they sent them out to, I don’t know, two hundred scientists in the community, actually, and said, “Who would you hire?” blah, blah, blah.

Well, the bottom line was—and they sent it to men and women. The bottom line was everybody preferred John over Jane, and when they hired Jane, they hired her at $4,000 less. Here’s that magic number, $4,000 less even today. But it wasn’t dependent on who the gender of the reviewer was. So in other words, it’s not only men who do this.

So I think that because everybody thinks they’re fair, and by saying that, I think the implication is they felt I was saying, “You’re not being fair,” would be one interpretation, I think, that, “Well, of course we want the best and we have the best,” and so I think it’s that. I think that’s basically it. We all don’t like to think that maybe we are not fair. None of us like that, myself included. And so I think it just makes people uncomfortable, you know. I think all these discussions around underrepresented minorities, and women who are not a minority but who are
a minority in the academic ranks, make people uncomfortable, men and women. It’s not only the men. In fact, I think it’s because, in a way, you’re implying that we’re not being fair.

I think change is hard, you know. I think any change is hard. In a way, I think they feel that you’re point a finger at them saying, “You haven’t been doing this,” and that was not the intent. The intent was always, “Here are people that we should consider. Let’s look at their CVs.” And that’s my approach, has always been, I vet them before I even take them to the leadership search committee because I know what’s going to fly and what isn’t. I know what kind of credibility. I know where the bar is. You have to know where the bar is for anything when you’re doing this, and you have to at least meet this bar. So I would vet them and bring them to the table and say, “So here’s some we should review.”

We’ve made great strides in terms of women in leadership positions. Women are on search committees. There now are search committees have women on them. Women on the short lists. I mean, that has changed in the past seven years.

Tacey Ann Rosolowski, PhD
00:55:44
Well, we’re almost out of time. Shall we leave it there for today?

Elizabeth Travis, PhD
00:55:46
Sure.

Tacey Ann Rosolowski, PhD
00:55:47
[inaudible] on a high note.

Elizabeth Travis, PhD
00:55:48
It is. Perfect place to stop.

Tacey Ann Rosolowski, PhD
00:55:51
Thank you very much.

Elizabeth Travis, PhD
00:55:52
Thank you. I’ve enjoyed it.
Tacey Ann Rosolowski, PhD  
00:55:53  
Yes, me too.

I’m turning off the recorder at about 11:54. Thank you very much, Dr. Travis.

Elizabeth Travis, PhD  
00:56:01  
Thank you, Tacey.  
(end of Segment 6)
Elizabeth L. Travis, PhD
Session Two: 25 March 2014

Chapter 00B
Interview Identifier

*Tacey Ann Rosolowski, PhD*
00:00:00
Okay, cool. All right. So we are recording, and today is—oh, my gosh, it’s the 25th—26th. I’ve forgotten the date. Isn’t that sad? (laughs) I’m Tacey Ann Rosolowski, and I’m—

*Elizabeth Travis, PhD*
00:00:15
The 25th.

*Tacey Ann Rosolowski, PhD*
00:00:16
The 25th. And today is the 25th of March, 2014. What a thing to blank on. Better than blanking on your name.

*Elizabeth Travis, PhD*
00:00:23
Hey, that’s all right. (laughter) Happens all the time to me.

*Tacey Ann Rosolowski, PhD*
00:00:27
And I am on the fifth floor of Pickens Tower for my second session with Dr. Elizabeth Travis, who is the Associate Vice President for Women Faculty Programs. Thank you again for participating.

*Elizabeth Travis, PhD*
00:00:43
My pleasure.

*Tacey Ann Rosolowski, PhD*
00:00:44
I had a great time talking to you yesterday. I’m looking forward to deepening our conversation today.

*Elizabeth Travis, PhD*
00:00:48
It was fun, actually.
Tacey Ann Rosolowski, PhD
00:00:51
And you said that you were able to get some additional information to clarify some points that were left a little bit open last time, so—

Elizabeth Travis, PhD
00:01:00
Correct.

Tacey Ann Rosolowski, PhD
00:01:00
So please let me know what you have.
Okay. The first thing I want to clarify is what this institution did way back in the eighties around the issue of women and minorities, and I mentioned yesterday that there was a small committee of Lillian Fuller, Margaret Kripke, Margaret Spitz, Judy Watson, and myself.

And, again, what was that committee called?

Well, I think we didn’t have a name. I think it was an ad hoc committee that then reported to Dr. LeMaistre with some recommendations, and he then established a committee that was the Committee to Evaluate the Status of Minority and Women Faculty and Administrators.

This report was 1989. The study was done—this was August ’89. The study was done that year of ’88, ’89, and was initiated because of the work of this small group of women that I spoke about, got together and identified inequities. Then we have a huge report of fifty-six pages. Margaret Kripke was the chair of that committee.
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Tacey Ann Rosolowski, PhD
00:02:30
Now, is that report in the archives?

Elizabeth Travis, PhD
00:02:35
You know, I don’t know that, and we probably should archive it.

Tacey Ann Rosolowski, PhD
00:02:38
Yes, it should be archived if it has not been.

Elizabeth Travis, PhD
00:02:41
Yes. So, in fact, I just had mentioned to somebody in my office, we need to pdf this and get it in the files, because it goes data all the way back to 1978.

Tacey Ann Rosolowski, PhD
00:02:51
Yes, that would be so important.

Elizabeth Travis, PhD
00:02:54
It really—okay. So definitely we will do that.

Tacey Ann Rosolowski, PhD
00:02:56
Yes [inaudible].

Elizabeth Travis, PhD
00:02:57
So I wanted to set the record straight on that.

The other thing is the committee consisted of men and women faculty and administrators, so it was a mixed committee that reported directly to Dr. LeMaistre with their findings, and, like I said, Margaret Kripke was the chair of that committee. So that kind of clarifies what we talked about yesterday.

There actually has been commissions in the state, Governor’s Committee. In fact, I think there still is a Governor’s Committee on Advancement of Women and Minorities, and this was in the
1990s. But the one that’s critical to this institution is the first report that Margaret did for Dr. LeMaistre.

**Tacey Ann Rosolowski, PhD**

00:04:11
And I wanted to ask you, what is your evaluation on where MD Anderson stands vis-à-vis peer institutions in addressing these questions of women and minorities?

**Elizabeth Travis, PhD**

00:04:24
We are doing better than most and have received a couple of awards because of the work that this—so the office—I received an individual award, and then the institution just two years ago received an award for the work we have done.

**Tacey Ann Rosolowski, PhD**

00:04:43
Can you tell me about those, please.

**Elizabeth Travis, PhD**

00:04:45
They’re from the Association of American Medical Colleges. It’s the group on women in medicine and science, which is—the Association of American Medical Colleges, all medical schools belong. MD Anderson is a member as well, even though we’re a Cancer Center without a medical school. We have a different status, but we are full members. I’m very involved in the organization. I, in fact, am the chair-elect of the group on women in medicine and science. And these awards recognize both an individual—it’s called the Leadership Development Award.

**Tacey Ann Rosolowski, PhD**

00:05:24
Oh, okay.

**Elizabeth Travis, PhD**

00:05:31
So it’s the AAMC Leadership Development Award, and I received—

**Tacey Ann Rosolowski, PhD**

00:05:38
This is your personal award.
Elizabeth Travis, PhD  
00:05:40  
This is my personal one. I received it in 2009 for the work that we were doing in the office for promoting and advancing women. In 2012, MD Anderson received the award for the work that the institution, basically this office, was doing to promote and advance what we had been doing and the advances we have made in advancing women in medicine and science.

Tacey Ann Rosolowski, PhD  
00:06:11  
And what did you feel was kind of the tipping point for that, that resulted in you receiving the award in 2009 and then resulted in the institution receiving the award in 2012?

Elizabeth Travis, PhD  
00:06:26  
So I think it was the body of work for the institution, large body of work over then five years of the office being open. I think particularly it was both the individual award as well as the institutional award was the increases we had made in putting women into leadership positions here, primarily as chairs, most of them as chairs of departments, but some in higher leadership positions. And I think that was the real tipping point for the award. I think we have made great strides in that regard. We’re well ahead of the national average, and since the office opened, we’ve gone from 15 percent to 27 percent of our leaders are women. We use percentages because the numbers are the numbers, but it’s relative to how many leaders you have and the numbers of leaders increased over those years. So just in a relatively short time, and that was—and I think the individual award was because we had put policies in place that allowed for more consideration of women and minorities for leadership positions.

As I said yesterday, we in a relatively short time did a lot on improving the visibility of women, not only in the institution but outside the institution, policy changes that were making real on-the-ground changes in behavior and culture, and then I think it was just the whole body of work that the office did and that promoted the organization into basically a model.

Tacey Ann Rosolowski, PhD  
00:08:19  
Wow. Now, when you say “model,” is this office something that other institutions come to to see how have you been doing this?

Elizabeth Travis, PhD  
00:08:33  
They come here, and I speak all over the country about that.
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Tacey Ann Rosolowski, PhD  
00:08:37  
Wow.

Elizabeth Travis, PhD  
00:08:38  
I’m invited to speak about what we do. So we’re unique in that we have a dedicated office reporting directly to the provost, and that’s how it was set up from the very beginning. There was the recommendations of the two focus groups we spoke about, which, by the way, one of those focus groups or one of those studies, the consultant was Wanda Wallace, and I have her report as well.

Tacey Ann Rosolowski, PhD  
00:09:07  
That would be also great to have in the archive, yes.

Elizabeth Travis, PhD  
00:09:10  
Okay. We will do that.
Chapter 08
A: The Administrator
|
Leading Change for Women; Women as Leaders

Codes
A: The Administrator
A: Professional Path
B: Gender, Race, Ethnicity, Religion
B: Diversity Issues
C: Professional Practice
C: Diversity at MD Anderson
C: Leadership
C: Mentoring
C: Women and Minorities at Work
D: On Leadership
D: On Mentoring
D: Women and Diverse Populations in Healthcare and Institutions

Tacey Ann Rosolowski, PhD
00:09:20
I have several directions I wanted to go, but maybe the first one is to know that you yourself have done quite a lot of leadership training programs, and I wondered if you could comment on that, you know, intentionally taking on training for leadership positions instead of kind of leaving it to luck, or lack of luck, as it were. (laughs)

Elizabeth Travis, PhD
00:09:49
Leaving it to luck. Leaving it to luck usually doesn’t work.

Tacey Ann Rosolowski, PhD
00:09:52
Yes.

Elizabeth Travis, PhD
00:09:53
And I think it is a mistake, if you will, that a lot of women make. We think it’s a meritocracy, I think, as we said yesterday, but you have to pick your head up and you have to be noticed, and you have to be visible, and you have to be prepared. Luck favors the prepared mind, is, I think, the saying. So it’s not all about luck. It’s about being ready when something becomes available,
an opportunity to submit your CV, your letter, your résumé for that position. And part of it is, I think, getting training, getting real didactic and hands-on training on leadership.

I started—we had a program here in the early nineties that was with Rice University. There was an executive development program. I probably have it somewhere around here. [inaudible]. That was the first thing, if I remember correctly, that I did. I attended the AAMC Mid-Career Development Workshop for Women, specifically. I did that. I went to the ELAM, the Executive Leadership for Academic Medicine, which specifically prepares women for leadership positions, and I’m talking about department chair all the way up to deans. They have helped place deans in a number of institutions.

Recently, an individual from our own organization, Dr. Shine Chang, and her colleague, Dr. Deborah Howitzer, have analyzed data from all of these programs. The AAMC has an early career and a mid-career program for women, and then the ELAM. The question they asked was, does this have any impact on careers. They haven’t published the data yet, but the answer is, yes, it does. Yes, it does. And I can’t cite the data because I haven’t—I’ve heard it but I haven’t seen it.

So these programs work, which is one of the reasons that—so every year, I have money in my budget to send four women to both the early and mid-career, I send four women to the Aspiring Leaders Workshop, and I send them to—there’s a workshop specific for minority career development, so I send our minority women to that, but I also last year sent some men as well.

*Tacey Ann Rosolowski, PhD*

00:12:42

Interesting, yes.

*Elizabeth Travis, PhD*

00:12:44

I had the funds in my budget, and the way we do this is I pay registration from my office. It’s part of my budget every year. You know, it’s a line item in the budget. The departments pay expenses and any other expenses, travel, etc. That way, the department has to get in the game. The chair, you know, knows what’s happening and has skin in the game, and, in fact, the chair now is the one who has to nominate the woman and write the letter for them to be considered for these programs.

*Tacey Ann Rosolowski, PhD*

00:13:14

Interesting, because that is creating shared responsibility for chairing—
Elizabeth Travis, PhD
00:13:18
Yes, it is.

Tacey Ann Rosolowski, PhD
00:13:18
—for changing the culture.

Elizabeth Travis, PhD
00:13:20
Yes.

Tacey Ann Rosolowski, PhD
00:13:20
Yes. Now, what was your reason for using the department funds to send men to some of these programs?

Elizabeth Travis, PhD
00:13:27
Because it’s minority men only.

Tacey Ann Rosolowski, PhD
00:13:30
Okay.

Elizabeth Travis, PhD
00:13:30
Because there’s so little that we are doing, and I talked with the provost, you know, and said, “What do you think?”

He said, “Yes, if you have the money in your budget, let’s do it.”

So it was a shared decision. I checked with him and said, “I think we should do this.”

And, again, the departments were all in favor of it. They were very—the department chairs said, “Oh, absolutely,” and gave us a list of names.

Tacey Ann Rosolowski, PhD
00:13:59
Wow. That’s great.
Elizabeth Travis, PhD  
00:14:00  
Yes. So I expect we’ll continue to do that. It’s not my charge, that’s for sure, but—

Tacey Ann Rosolowski, PhD  
00:14:07  
Right, but you can pick up that piece [inaudible] right now.

Elizabeth Travis, PhD  
00:14:11  
I can pick up that piece, yes.

Tacey Ann Rosolowski, PhD  
00:14:13  
So I get a sense of what these programs are really capable of doing, what did you learn about yourself going through these leadership programs and what were the skill areas that you felt evolved as a result of that training?

Elizabeth Travis, PhD  
00:14:29  
Self-knowledge is a big one. (laughs) You know, identifying what your strengths and weaknesses were. You came out of that having full knowledge of that and then learning, being a better listener, realizing that not everybody always agrees with where you want to go, what your vision is, and being able to listen, and I mean truly listen and hear that input and then consider it, really seriously take it into consideration. So, yes, that’s a good point, and we need to think about that. To me, that was a big, big turning point.

How to run, how to—I had already been doing things, like I was chair of our—for what was then the Promotion Tenure Committee, but it wasn’t called that then, but I was on the Faculty Classification Committee. So I had been in some leadership positions before I did these programs, but I think the Rice was the first one I did, and I think that—let’s see. I was Senate chair. So I was chair of the Senate 2002, 2003, which was after I did the Rice program, and that was really helpful in leading that.

That group of rather—I mean, it was a group that everybody had—there were a lot of different ideas. There was some very senior faculty and some more junior faculty, and there were a lot of contentious issues that year, and it was learning how to manage those very disparate views around the table and trying to bring everybody to at least—you can’t always—everybody says you want to get consensus. I’m not sure that you always try for consensus. I think you try for
getting people invested. But, sometime you just have make the decision if you are a leader. Bottom line comes down to not everybody may agree, and sometimes you just have to make a hard decision, and there were a few of those that were made that year.

Again, I think it’s just knowing, try to ferret out what are the real issues that were then facing the faculty, and skill sets on navigating, things that women don’t do well and I talk about a lot. Women don’t self-promote. Now, that’s kind of—everybody goes, “Oh, you don’t want to self-promote.” Well, there are ways to do it so that it’s not offensive, and I think learning—there was some skill set learning, particularly in the mid-career development workshop. There was a lot of—there was theory, but there was actually “Then this is what you do about that.” This is what we see, and this is how I teach all the things I do to—that I do teach to women. It’s always about here’s the theory, you know, and here’s how you can implement this, because I think it’s important not to have just talk up here at the 50,000-foot level but bring it down to take home messages that they and that I could try and implement.

It also taught me—there was one incident that happened when I was in my faculty or my academic department, and I won’t go into the particulars of it, but it was a pretty nasty situation, actually, and I was then—there was one other woman in the department besides me. I was a tenured professor by then. But basically the men were very vocal in a department chair meeting about something they were very unhappy about with me, and I felt that it was a—I felt that I was really under attack. I was shocked, I was really shocked by what happened, and I was really shaken by it, quite frankly.

So this is where I think both these classes helped me, including ELAM. I came out of that and figured, “Okay, what am I going to do about it?” So I got each of them in my—I had them each talk with me individually and impressed upon them that, “Number one, if you ever have something you would like to talk to me about, talk to me about it in my office, see if we can’t reconcile this or solve our differences,” I said, “rather than ganging up.” And I went to each one of them and did it, and that never happened again. And I think that was something, you know, that I learned. I’m not sure what I would have done without those training programs, you know, because you feel basically under attack and victimized. And then how do you step back from that? How do you become not a victim, you know, and take control?

_Tacey Ann Rosolowski, PhD_

00:20:39

Yes, I’m thinking of all the situations in which women are taken by surprise, basically, and never having been thrown into a situation like that, so literally learning on the job if you haven’t had some kind of discussion of scenarios and techniques for solving related things.
Elizabeth Travis, PhD
00:20:57
And it wasn’t about science. I mean, I think we’re all—if you’re a scientist, part of what you do is you listen. You’re always going to get criticism. You send your grants in, they come back, they’re not funded, your papers come back, but it’s not always constructive, but mostly it’s meant to be constructive. Sometimes the tone of it doesn’t feel that way, and so you’re used to that because that’s our job.

Our job as scientists is to, first of all, review our own work with a critical eye, but also review other people’s work, and I do that, you know. I review other people’s work when you send back, you have questions or recommendations or, “Maybe you should have done—have you tried this?” This was different than that. This was not about that. This was very personal, and it was—yeah. And you’re used to dealing with being in front of an audience, and sometimes somebody’s asking you questions, and sometimes they can get pretty—make statements that you’re like, “Really? They’re saying that in that way?” But you expect it there. You don’t expect it among colleagues.

Tacey Ann Rosolowski, PhD
00:22:08
Very difficult situation. Wow. Yes.

Elizabeth Travis, PhD
00:22:15
So I think they’re critical. I think that women have to be prepared for opportunities. Now what they have to do is they have to take them, because women are all too ready to say, just like I did, “Oh, I don’t think I’m qualified,” when, in fact, if you took the list and you checked all the boxes, they would check 90 percent of the boxes of qualifications for a certain position. So women are always afraid of—well, there’s a syndrome called the Imposter Syndrome, that somebody’s going to find me out, that I really don’t know what I’m talking about here, and I think that really plagues women. So one of the issues, how do you overcome that.

Tacey Ann Rosolowski, PhD
00:23:09
Does that still—is that still true today with women coming out?

Elizabeth Travis, PhD
00:23:13
Uh-huh.
Tacey Ann Rosolowski, PhD
00:23:13
Wow. Where do you think that comes from?

Elizabeth Travis, PhD
00:23:19
I don’t know. I think it’s a function of still being socialized differently than men, and I think it’s a function of the culture, although decidedly different from in the sixties, when Gail Collins wrote the book. She wrote the book *When Everything Changed* and talks about how women couldn’t own property, couldn’t have credit cards in their name, couldn’t have a checking account in their name. That has changed, but we all know that there still exists perceptions of women and men, and women have a much narrower band of behavior, as we like to say. You know, if you’re too aggressive or if you’re seen as too aggressive, then you’re called some not nice words, and “bossy” seems to be the newest word that everybody’s talking about and how actually that’s good. But if you’re too nice or seen as too nice, then you don’t have the right stuff, if you will, for leadership. And yet that does not apply to the way men are viewed, so I think there are still these differences in the perceptions that women still fight all the time.

Tacey Ann Rosolowski, PhD
00:24:55
Now, given all that, and the differences in socialization and how women come to the challenge of leadership, are there some things that women bring to leadership roles because of their different socialization that an institution, patients, colleagues can really benefit from?

Elizabeth Travis, PhD
00:25:15
Yes. I think that women bring a lot to the table as leaders. One of the things, I think the strongest thing a woman brings to the table is the fact that we like to work with other people, we are collaborators by nature, we don’t think that it’s our way or the highway. I’m not saying that all men think that, but I think women instinctively listen, talk with others. I think it’s one of the—and the leadership style is very different. The leadership style is different. It’s more collaborative. And I think going forward that’s—not only going forward, what we need now, what we’ve needed for at least some number of years, is a more collaborative style of leadership, less hierarchical leadership style.

Tacey Ann Rosolowski, PhD
00:26:17
Why?
Elizabeth Travis, PhD
00:26:19
Why do I think we need that?

Tacey Ann Rosolowski, PhD
00:26:21
Uh-huh.

Elizabeth Travis, PhD
00:26:23
I think we always needed that, quite frankly. I mean, I can think of some incidents that—do you think it would have happened if—I’m thinking of the Penn State incident a couple years ago. Do you think that would have happened if there were women?

Tacey Ann Rosolowski, PhD
00:26:40
Could you describe for the record what that is, just—

Elizabeth Travis, PhD
00:26:42
That was the abuse of boys by the coach, and everybody looked the other way. Do we think that would have happened if there were women, not on the board or in the boardroom? We can’t do the study, but I suspect perhaps not.

So I think that that’s one thing, but I also think that, again, complex problems require different inputs, different ways of thinking, different ways of solving problems, and the more that’s on the table to choose from, the greater probability that you will come up with a solution that hopefully will work.

I think women as leaders reflect our constituency. I mean, the population, first of all, in medicine and science, it’s the women who usually make the healthcare decisions for their families. Our patients, there’s a lot of women patients and minorities. And just like people like to choose people who look like themselves without realizing it, that they’re doing that, patients may, some of them, like having a doctor who looks like them.

Tacey Ann Rosolowski, PhD
00:28:13
I’ve been interviewing Lovell Jones [Oral History Interview], and, of course, he talks an awful lot about that.
Elizabeth Travis, PhD
00:28:18
Right, right, the need for—but there are also then, like I said yesterday, they’re role models. They signal to the community that you, too, can do this if you’re a woman or African American or Hispanic. You, too, can do this. And I think you don’t have to say anything, we just have to be, and being in that position speaks volumes.

Tacey Ann Rosolowski, PhD
00:28:49
I’m wondering—I mean, this is a slightly more focused question. Maybe your response would be the same. But, I mean, we’re talking in this institution on women who are clinicians or who are basic researchers or who are administrators who have chosen specifically to focus on healthcare.

Elizabeth Travis, PhD
00:29:10
Yes.

Tacey Ann Rosolowski, PhD
00:29:10
I mean, is there a particular impact of women being leaders in healthcare? I mean, certainly the constituency is a huge issue, but are there some other ways in which you feel women bring something unique to these kind of institutions?

Elizabeth Travis, PhD
00:29:32
Well, I know you want to focus the answer, but I think the answer is exactly the same regardless of what the industry is, if you will. I think it’s that we just bring a different viewpoint.

Tacey Ann Rosolowski, PhD
00:29:46
Yes.

Elizabeth Travis, PhD
00:29:47
It’s a different viewpoint. There’s just a study, though, an interesting study that came out. It was in ecology, but it was a science, and they were looking at authorship on papers. The study was asking the question, if you have women as authors on papers, what are the impact factors of the journals these papers are published in. And interestingly, the papers that had more women on them had higher impact factors, in other words, being published in higher-impact journals, than the ones that didn’t.
Tacey Ann Rosolowski, PhD
00:30:22
Was there any speculation on why that was the case?

Elizabeth Travis, PhD
00:30:25
Just, again, you know, bringing different expertise, different way of viewing.

Tacey Ann Rosolowski, PhD
00:30:31
More complex way of handling the information.

Elizabeth Travis, PhD
00:30:32
Yes.

Tacey Ann Rosolowski, PhD
00:30:33
Wow.

Elizabeth Travis, PhD
00:30:34
More complex, yes. Yes, it was a very interesting—I thought it was a very interesting study.

Tacey Ann Rosolowski, PhD
00:30:38
No kidding.
Chapter 09
A: The Researcher
00:30:38+
Research and Grants Related to Gender and Diversity

Codes
A: The Administrator
A: The Educator
B: Institutional Mission and Values
B: Beyond the Institution
C: Education at MD Anderson

Tacey Ann Rosolowski, PhD
00:30:38]+

That brings us to the topic, too, of the research that you have done and grant-related projects you have done in this office. Would you like to talk about that now?

Elizabeth Travis, PhD
00:30:51

Sure. So five years or so ago, the NCI came out with an initiative where they were looking for—it was a dedicated request for applications that was focused on causal factors—they’re called the causal factors grant—causal factors that interfere with women’s advancement. So this office, along with Virginia Valian, who is the well-known sociologist who wrote the book Why So Slow?, initially talking about women’s lack and slow advancement, particularly in the sciences, and then two sociologists from Rice who were also working on this issue. One is Mikki Hebl, H-e-b-l—it’s M-i-k-k-i H-e-b-l—and Randi, R-a-n-d-i, Martin.

The four of us wrote a proposal called “Gatekeepers and Gender Schemas,” and the question we were asking and what we were looking at, a number of things. First of all, from this office, we were doing a real-time study of our recruitment of associate professor tenure-track position in the basic sciences—or in the sciences, let me put it that way, because we have a relatively prescriptive process. There’s a national call. There’s an interview, etc. So that was the one project done from this office.

[The other project that was done, that Virginia did, was looking at award nominations for women. I mean, we know that over and over and over again women are not getting awards and not prestigious honors and awards. What we don’t know is if it’s because they’re not being nominated or they’re not being chosen. So she is doing that study and she’s looking at neuroscience awards in particular.]
Tacey Ann Rosolowski, PhD
00:33:14
I’m sorry. At?

Elizabeth Travis, PhD
00:33:15
Neuroscience awards.

Tacey Ann Rosolowski, PhD
00:33:15
Neuroscience. Okay.

Elizabeth Travis, PhD
00:33:17
So our study is complete, data is being analyzed, but basically what we did was we took the CVs, we quantified, we gave numbers to everything on a CV you possibly could, you know, including what was the world rank of their institution, their undergraduate, graduate institution, did they do postdocs in the labs of Nobel laureates and IOM members, National Academy members. So we quantified everything you possibly could, including publications in high-impact journals, in all the journals, and then we asked the question, were women underrepresented in the offer pool. The data are not published yet, so I’m not free to say, but I can tell you that that was not the conclusion of the study. So that’s been a lot of fun, because I always say that if you’re a scientist, grant writing is in your DNA, you know, and so it was an opportunity to write a grant for this office instead of for my research lab, which was fun.

The other grant I’m involved in is a very different grant, but it’s also an important grant, and it has to do with a minority institution. So, again, the NIH has an initiative, they’re called U54 Partnership Grants, and ours is between MD Anderson Cancer Center and the University of Puerto Rico, all the various campuses. Overall, the goal was to build a cancer research center, which we’ve already built; it’s to build a new cancer hospital, which they just broke ground on last month; and then to train physicians and scientists to do cancer medicine and cancer research. So I’m a PI on that grant and I also am the co-leader of the training program.

So it goes back to, you know, my early life being involved with students and developing young talent, and I like the project because I like students. They keep you fresh, they ask questions that you usually can’t answer, they make you think, and they just keep—you know, they remind you that there is hope. (laughs) Sometimes it looks pretty bleak. You see these young people who are so bright and so engaged and so enthusiastic, and they are going to make a difference, and it’s nice to—I mean, they do—it’s up to them, but what we do is help guide them and point them in the right directions. So that’s a fun grant too.
So this is training with leadership in mind or [inaudible]? 

No, this is just training them to be physicians and scientists, cancer medicine. So we bring them over for a summer. There’s an application process that they have to undergo, and we bring ten or twelve of them over every summer to work in the lab and sometimes to shadow physicians, because they’re not quite sure what they want to do.

Probably the jewel in the crown of the program is our MD/PhD Initiative, so we have a partnership and an agreement with the University of Puerto Rico where they get their medical degree, and then the University of Texas, the graduate school where they get their PhD degree. And we run it the same way, it’s done the same way the MD/PhD program is run over at UT.

And so they do three years of medical school in Puerto Rico, they have to get accepted into the graduate school here, and then the fourth year, what would be their fourth-year medical school, they come over here, do their PhD and then go back to finish their fourth year.

We will be graduating our first two MD/PhD students this summer from that program. They’re both outstanding. They’ve both been accepted to residency programs.

So that’s very exciting. So they’re the first two that we’re going to do our best to recruit and keep in Puerto Rico. And there it’s interesting because a lot of these young people really do want to go back to Puerto Rico because they have very strong family ties, their families are there, and they feel some obligation that they want to help the people of their island, their people.
Tacey Ann Rosolowski, PhD  
00:37:55  
Very, very refreshing.

Elizabeth Travis, PhD  
00:37:56  
It is.

Tacey Ann Rosolowski, PhD  
00:37:57  
Let me pause the recorder just for a second.  

[recorder paused]

Tacey Ann Rosolowski, PhD  
00:00:00  
Okay. We’re back again after just a few seconds of break. Now, you run that through that office. Are you monitoring the balance of women to men in that program as well? How is that working out?

Elizabeth Travis, PhD  
00:00:14  
It’s interesting. You don’t have to monitor that one. There are equal, if not more, women applying.

Tacey Ann Rosolowski, PhD  
00:00:19  
Really?

Elizabeth Travis, PhD  
00:00:20  
It’s a very interesting culture, actually. I noticed that immediately when I went there, that there were a lot of women in leadership positions, and there are a lot of young women who are applying every summer.

Tacey Ann Rosolowski, PhD  
00:00:37  
Do you have any insights into that?
Interview Session: 02
Interview Date: 25 March 2014

Elizabeth Travis, PhD
00:00:39
No, I don’t, actually. I mean, it’s quite remarkable that you would have thought quite the opposite, considering what we think we know about the culture. Obviously, we don’t know everything about it, or at least I don’t.

And, yes, we have—let’s see. The two who are graduating this year with their MD/PhD’s, one woman and one man, and I think it’s just about 50/50 in the MD/PhD students.

Tacey Ann Rosolowski, PhD
00:01:04
Wow. That’s pretty amazing.

Elizabeth Travis, PhD
00:01:05
That is pretty amazing.

So it’s not run out of the office here. So there are four PIs. Gabé Lopez —so this is again one of these multi-PI grants. Dr. Lopez-Bernstein [phonetic] is the—he is what we call the contact PI, but it’s actually run out of—Sherri De Jesus and Sunita Hamilton are the administrators who they do all the hard work. They keep track of everything. I mean, Dr. [Michelle] Barton, Shelley Barton, is another PI on the grant, and David Wetter from Outreach. So it’s—the grant is—

Tacey Ann Rosolowski, PhD
00:01:42
Spread.

Elizabeth Travis, PhD
00:01:43
Yes, it’s spread out. So there’s a research component, there’s an outreach component, there’s a training component to the grants, to try to—the research is to have them do small research projects and then have them get grants to continue this and become independent funded investigators.

Tacey Ann Rosolowski, PhD
00:01:59
Now, when did this project start?
Elizabeth Travis, PhD
00:02:01
This actually started in the late nineties. I think I became associated with it probably in 2002. I had a part-time appointment in Steve Tomasovic’s office—I’d actually have to look back at my CV to see exactly when that was—which preceded this position. And he was one of the—

Tacey Ann Rosolowski, PhD
00:02:32
2004 to 2006, Associate Vice President, Academic Affairs, 30 percent appointment.

Elizabeth Travis, PhD
00:02:38
Right. So it was then. It was then. It was in 2004 that I became associated with the program. So he was getting busier and busier because of the global programs, a lot of things going on, and so I then took over. At that time, I took over only the training program, and probably that didn’t happen till really 2006, and then I became a PI in—the year I can’t remember, but it was shortly after that. It was probably when we did a competitive renewal of the grant. When he kind of stepped back from the grant totally, I became a PI. It must have been 2008.

So that’s a really fun project. I get to see all these young people frequently. I go there a couple times a year, and we actually do a lot of teaching over there now. We send people over to do short courses in cancer biology and cancer genetics, and they are eager to learn. So it’s a lot of— I like it because I think it is doing some good and it’s a lot of fun. And to me, developing the future generation is really what it’s all about at this point in my career, you know. It’s about what legacy do you want to leave in your years in this institution, basically, because this is pretty much where my whole career has been. And for me, it’s leaving a cadre of outstanding women leaders and who will become leaders, and leaving or developing a cadre of young people to be physician scientists and physician scientists in Puerto Rico.

When I ran my lab, of course, there it was developing students to be scientists. My former graduate students now have positions in various—some of them chose to step away from the bench and go into—one of them is working in patents and one is an associate professor at a university. So, again, I think what’s always has been under the surface with me has been this issue of teaching and training and developing young people. When I taught school, I loved it. I really did. I just knew that I didn’t want to do that only for the rest of my life, which is why I took the position in South Carolina.
Tacey Ann Rosolowski, PhD
00:05:16
Well, it’s an interesting balance. I mean, training other people to have accomplishments versus having your own accomplishments and helping them, others do it too.

Elizabeth Travis, PhD
00:05:29
Right.

Tacey Ann Rosolowski, PhD
00:05:29
Yes, and I think when women of our generation were going into teaching, that’s what we were told we should do, was help other people make their accomplishments. (laughs)

Elizabeth Travis, PhD
00:05:42
That’s right. Yes, that’s true. That’s right. Absolutely. But you know, for me it’s very satisfying, particularly to see these two young people who have just finished their MD/PhD’s, you know, it’s very satisfying to see that and know that they will have a—I’m sure they will have a productive career. We’ve given them—it’s like I told my son, I told him, “I’ve given you as much as I could in terms of making sure you got educated.” He went straight through for his master’s degree at Texas, and I said, “You know, after this, you’ve got to do it. All I can do is provide you with the skills and the opportunities, and then after that—.” It’s the same thing with these people, with young people. You provide them with the knowledge and the skills and open doors, but then they have to walk through those doors and they have to perform.
Chapter 10
A: Character and Personal Philosophy

Personal Choices and a Philosophy about the Importance of Having a Career and A Personal Life

Codes
A: Character and Personal Philosophy
A: Personal Background
B: MD Anderson Culture
A: Professional Values, Ethics, Purpose
D: The Life and Dedication of Clinicians and Researchers

Tacey Ann Rosolowski, PhD
00:06:36
Now, you mentioned your son. What is his name?

Elizabeth Travis, PhD
00:06:39
Scott. Scott Philips. His middle name is my family name, La Torre. Twenty-seven.

Tacey Ann Rosolowski, PhD
00:06:46
Wow.

Elizabeth Travis, PhD
00:06:48
Recently married.

Tacey Ann Rosolowski, PhD
00:06:50
Big milestone there.

Elizabeth Travis, PhD
00:06:51
Big milestone, yes.

Tacey Ann Rosolowski, PhD
00:06:53
And that brings up the whole issue of career women, women in leadership, families. Do you want to talk about that a little bit as an issue for women?
Sure, because I have to tell you that as much as I felt like I don’t want to talk about it, it’s not that I don’t want to talk about it, it’s like, why aren’t we over this yet? But we’re not, and every time I go somewhere and give talks, I always have to talk about work life, never call it “balance,” call it fit, call it integration, call it whatever you want, but you never balance it. It’s a little disturbing to me. One of the things that disturbs me about this is that when we talk about this, we only think about people with children, when, in fact, I think everybody deserves a personal life, whether you have children or not, whether you’re married or single, you deserve time to rejuvenate. You deserve a personal life, and I think that we have to make sure that we provide people the time to do that.

Now, the issue with children, of course, is that they add an extra burden, so I don’t think we can totally ignore that either, but I think we always have to remember that everybody—it’s like the old thing of “Oh, you don’t have children, so you can take call on Christmas.” Well, no, I don’t want to do that. I don’t want to do the experiment on Christmas all the time just because I’m single. So I think our sensitivity needs to broaden to include everyone, not just women and men with children.

But on the subject of women with children, I’m glad I had a child. I mean, I think I would have been very unhappy at the end of my life had I not had one. I think that, I said, for me, in addition to all the stuff I’ve done here, you know, I think a legacy is that you have hopefully produced a functioning and contributing member of society in the next generation. It’s been a lot of fun having a child. Now, how was it trying to do that, a single mother most of the time, and how to— you know, I always tell women, first of all, I was professor, so I had a little more flexibility. I was a tenured—I was actually tenured associate professor. I became a professor when he was two. So that provided me a little more flexibility in my time and things like that. But I have plenty of colleagues who’ve had them in graduate school and in postdocs, you know, so I think there are a lot of role models around here of women who have had children, been successful. Margaret Kripke has one daughter. She was chief academic officer. Now, she had hers on the other end of the childbearing spectrum. I had mine on the later end of the childbearing spectrum. I had mine on the later end of the childbearing spectrum.

I always tell women, buy all the help you can get. Time is a precious commodity, and, to me, I wanted to spend my time two places: on my career and on my son. And I didn’t want to spend it doing a lot of other things, and so I didn’t. You know, I had somebody who cooked dinners, at least when he was real young. When he got older, I didn’t. But I had help. I had somebody there every day. Even when he was in high school, I had the same housekeeper I’d had. I still have her, actually, because what she does is she gives me time back, gives me time even now, to—like this...
weekend, just go to the art museum and see the Sargent watercolors and the Impressionists and have, again—even though my son is married, we don’t have any—Jerry [_____] and I don’t have any kids at home anymore, but it’s time to step away from here.

So I tell women, you know, buy all the help you can get. You have to know when it’s a—when the office needs your attention and when your family needs your attention, and sometimes they’re in competition, and that’s when it gets tough. When a grant is due, a grant is due. When a patient is sick and you have to be in, a patient is sick and you have to be in, and that’s where your help, you know, can help you out in that regard.

Tacey Ann Rosolowski, PhD
00:11:31
Now, I notice when you were listing the role models, they were all women, of course.

Elizabeth Travis, PhD
00:11:35
Yes.

Tacey Ann Rosolowski, PhD
00:11:36
We still don’t talk about this as an issue for men? How is that [inaudible]? 

Elizabeth Travis, PhD
00:11:44
Well, it’s because the burden still falls [primarily] on women. All the data support that. Men are becoming more engaged, you know, the young generation becoming more engaged with their children, the men want to coach the soccer teams, you know, they want to see their kids play the sports, they want to be more involved. It is changing, but it’s nowhere near 50/50. There are some isolated incidents where I think it is. I mean, I do know of individuals, yes, my colleagues here, who have children, and their husbands also work here. So I think there are—it is changing, but it’s not changing very quickly. (laughs) And maybe with this next generation it might, but I think there’s still vestiges of the old school, if you will, even in younger males.

Tacey Ann Rosolowski, PhD
00:12:48
How does that show itself? In thinking of specific examples, what are you thinking of particularly?
Elizabeth Travis PhD  
00:12:56  
Just some attitudes and actually statements that—

Tacey Ann Rosolowski, PhD  
00:13:13  
Do you feel you can share any of those? (laughs)

Elizabeth Travis, PhD  
00:13:14  
No, I can’t, but it’s things about—you know, men will say, “Well, you know, those are choices that—,” or that women don’t choose to be leaders or they don’t choose this, when, in fact, they aren’t asked. And that’s—you know, women need to say, “I want this,” rather than always be asked [to do it].

But there is still a little bit of a—it’s not as pervasive as it used to be, and, if you look, our president [Dr. Ronald DePinho] and his wife [Dr. Lynda Chin] have three children. They are good role models. She is a department chair. She’s a very internationally recognized scientist, and so is the president, and yet I know they spend time with their family, with their children. They make it a point, and I think they’re good role models for both men and women.

I’m glad you asked that, because I actually had not verbalized that about them. The provost [Dr. Ethan Dmitrovsky] is married, and he has now one son still at home. His wife [_____] doesn’t work, so there’s another. So there are all different models of this, but I know that his family time, his personal time is very important to him and he guards it. So I think there are role models. In fact, one of the things we probably need to do from this office is have a panel of men talking about this rather than women.

Tacey Ann Rosolowski, PhD  
00:14:47  
Yes, I think that would be interesting, and I was also interested in the way you led this particular—your response to my first question in this section about the idea of personal life, not just family and children, but that everyone deserves a personal life. And, I mean, I’ve been struck with some of the individuals that I have interviewed, that it doesn’t seem like they have much of one, or there were many, many, many years when they didn’t seem to have a great deal of personal life, as if that was what the profession demanded, that you had to really sacrifice that dimension of yourself. And I wonder if things have changed to the degree that suddenly there’s an outcry of people who realize, “Yes, I do need this. I need this for my health, my well-being, my spiritual well-being,” all the dimensions of humanity that need to be fleshed out so you’re an actual functioning human creature.
You know, there’s always tension between the need for downtime, personal life, if you will, versus what the job demands. I think that all of us knew going into this—I think we did, perhaps not, but I think we did—what this profession is about. In fact, last night Jerry and I had dinner with a friend of his who has just recently retired from medicine, and we were commenting on how obsessive those of us who’ve chosen medicine and science as a career are. And it’s true, we are, and I think we do everything with that same obsession. (laughs) I mean, I’m not dancing right now because I can’t find the time, speaking of no personal—I have a personal life. That just doesn’t happen to be part of it right now. I just can’t find time for it, unfortunately. But how you go after it, I mean, you know, it’s always very focused, do it, do it, do this, do this. So I think part of it is it’s demanding. It’s demanding, and I can’t imagine—I mean, it’s very demanding being a physician. And so I think going into that, I don’t think anybody was unaware of that. I think everybody, I think, comes into this also with a real sense of obligation, a real sense of duty, but they enjoy that. I mean, it’s why we’ve chosen it, you know.

I said when I was at the Gray Lab and working on weekends and doing the experiments, why? Because I loved it. I loved doing them, I loved getting the data, and it was a lot of fun. I think what there’s more focus on now is understanding that you can’t work all the time, because you’re not very resilient. You don’t have anything stored up, any energy stored up, should something happen that requires more energy. So I think it’s an issue of resiliency and learning how to be resilient.

I mean, I can’t think of a time when I didn’t have a personal life, not that I leave the office at five and come in at nine, no, every day, no. Was I off every weekend? No. But I can’t—I look back and I’m just thinking of the time I was in London for three years, and, yes, I worked weekends, but I also went to the symphony on Sunday night, because the symphony halls were all open on Sundays. And I traveled in Europe.

And I think the other thing that is one of the real benefits and one of the wonderful things about this career has been the opportunity to travel and make friends all over the world, and I think that’s a wonderful opportunity, you know, that I never envisioned that when I wanted to be a scientist. I just never even thought about that, but it certainly, I think, is—we all know people all over the world, and so it’s a big community.

Tacey Ann Rosolowski, PhD
00:19:17
I’m thinking about that comment that they couldn’t keep Elizabeth at home. (laughter)
Interview Session: 02
Interview Date: 25 March 2014

Elizabeth Travis, PhD
00:19:22
Right.

Tacey Ann Rosolowski, PhD
00:19:22
You always wanted to be out there.

Elizabeth Travis, PhD
00:19:25
Yes, I always wanted to be out there.

Tacey Ann Rosolowski, PhD
00:19:27
Ever, ever widening circles.

Elizabeth Travis, PhD
00:19:28
Yes, yes, yes, that’s right. (laughter) That’s right. But I think all of us really enjoy that, you know, and I think a lot of times what you do is, you know, if I go to a meeting in a place where I’d like to spend some time, I take some vacation around it. So, I mean, when we went to India, I did—there was a meeting and gave a bunch of talks, and then we took a week off after and traveled around. Would I have done that without that? Maybe, maybe not. But the point is, again, I think you take your opportunities—you have to see where the opportunities are to have that kind of life, but I can’t say that I didn’t have a personal life.

Tacey Ann Rosolowski, PhD
00:20:06
And you have to give yourself permission, too, to do it.

Elizabeth Travis, PhD
00:20:09
Yes.

Tacey Ann Rosolowski, PhD
00:20:09
It’s okay to have downtime.
Yes, and that’s really hard for us to do, I think, you know. It really is hard for us to do. Yes, the job, the position throughout has demanded, but I think, like you said, you have to know when it’s time to say, “I need some time.” If you let it, it’ll eat you alive, that’s for sure. I think it’s difficult now because there’s a lot going on in healthcare in general, in how it’s being delivered, and there’s a lot of pressure on physicians, and it’s going to make it more difficult, I think, throughout the medical community. So it’d be interesting to know whether individuals who demanded it, did they mind that. I do think we all make choices of how much we are going to put into our work, our careers, always recognizing that there are always tradeoffs. None of it comes without a price, and the question is, what are you willing to pay for that?
Chapter 11
B: An Institutional Unit
Setting up the Office of Women Faculty Programs

Credits
A: The Administrator
A: Professional Path
B: Gender, Race, Ethnicity, Religion
B: Diversity Issues
C: Professional Practice
C: Diversity at MD Anderson
C: Leadership
C: Mentoring
C: Women and Minorities at Work

Tacey Ann Rosolowski, PhD
00:21:42
I wanted to shift gears just a little bit, and we’re kind of backtracking a little, but I did want to get more of a sense of how you intentionally went about setting up this office, you know, at this big leadership position, big opportunity to make big impact on the institution. So what was your thinking, your strategic plan, as you went about building this office?

Elizabeth Travis, PhD
00:22:10
The first, beside an EA, the next person I hired—and I had a part-time project director. My first hire for the office was somebody, a data person. And I think, again, that comes from my background, you know, of being in science and it’s all about the data. It’s still all about the data. So the first initiative was always about understanding what data we needed, understanding what questions need to be answered, who do we benchmark against, how do we know we’re doing better, and then setting up the systems and the processes to identify those data, monitor those data, track those data, look for trends, and analyze them every year, because data not only—they inform you, but they also tell you where you need to put your efforts, because this office, there wasn’t any. There was nothing.

So it’s like where do you start? Well, you start by looking at what’s there and then try to identify where the points of intervention need to be. It’s the same thing as like in award nominations. Is it because there are not enough women being nominated or because they’re not getting them? If it’s because they’re not being nominated, that’s easy. You get more nominated, you know. And that’s been one of our approaches, one of the interventions, make sure there are women nominated every year for our internal Faculty Achievement Awards and make sure there are
enough of them. This year we made a major push to do that and succeeded in having a lot of our women nominated for Faculty Achievement Awards. So that’s one way.

The other way is Are they not being chosen. Okay. So then you say, “Well, why aren’t they? Are there women on the selection committees?” And if there aren’t, then you add women on the selection committees, and then you continue to monitor. Then if they still aren’t being chosen, you have to ask the question I always ask. We nominate people, both male and female faculty, for big external awards when we’re considering candidates, and I have a committee that does this. The question I always say, “Here’s the bar; i.e., here’s who’s received this award over the past three to five years. Does this individual we’re thinking about meet that bar?” If they meet the bar, we nominate them. If they don’t, we don’t.

So I think you have to be very tactical about it as well, but if you know that your individuals are meeting the bar and they’re still not getting chosen, then you have to perhaps get in front of the committees and say—I don’t know. This is one of skill sets I learned as instead of saying, “Why aren’t you,” say, “I don’t understand this, and please can you help me understand what it is that we’re not doing to make these candidates as attractive to you as we possibly can.” So that’s a skill set. Took a long time to learn that one, but I’ve learned how to do that.

*Tacey Ann Rosolowski, PhD*
00:25:02
That’s sort of a reframing thing.

*Elizabeth Travis, PhD*
00:25:03
Yes, it’s a reframing.

*Tacey Ann Rosolowski, PhD*
00:25:04
Wow.

*Elizabeth Travis, PhD*
00:25:05
And, you know, instead of saying, “You aren’t doing,” whatever. “Why aren’t you doing—you’re not choosing women,” instead of blaming, you know, it’s saying, “Help me understand. And what can I do better? What are we not doing that we need to do?”

So data was, and continues to [ ] drive this office, and also then reporting out the data, because there are a lot of myths, if you will, out there, urban myths about there aren’t women here and there aren’t women being nominated for this and there aren’t this, and if the data say that’s correct, then I say, “Yes, that’s correct, and this is what we’re doing about it.” But if the data say, “No, that’s not correct,” then here are the data.
Tacey Ann Rosolowski, PhD
00:25:51
For example, myths that are debunked?

Elizabeth Travis, PhD
00:25:56
Well, myths that women aren’t on the search committees for leadership positions. They are. They are. I mean, the average is about 35, 40 percent. For me, the benchmark is we have 36 percent of—37 percent faculty are women. But you have to be really careful what your benchmark is. So when you’re looking, for example, at the Endowed Positions Committee, that committee has to be tenured professors, so your denominator, if you will, is the number of tenured female professors and tenured male professors, not the number of women on the faculty. So we’re very careful about our analyses and make sure that we’re using the right benchmark, if you will.

Tacey Ann Rosolowski, PhD
00:26:46
And I’m sure being clear about those processes to the institutions helped build the credibility, enormous credibility of the office.

Elizabeth Travis, PhD
00:26:57
Yes, I think that was—you know, that absolutely helped build the credibility of this office. It was—if you’re going to—women and gender equity has been a hot-button issue for a very long time, and one of the ways to reduce it from being such a hot-button issue is to present data, because you can’t argue with data. You can argue with the interpretation, you can argue with what you’re going to do about it, but the data are what the data are. And then when you can actually do things, that you start to see trends over time of things changing, that is a big—that also builds credibility, and also to know when to sunset things that aren’t working, you know. This isn’t working, we’re not doing that anymore, or else we’ll approach it differently. Maybe our approach is wrong.

So I think that was the one big—for me, data. Make sure we get our duck—as I say, always have our ducks in a row, never be caught flatfooted without the data and the correct data. And that is a philosophy of this office. I have one person who does that.

Tacey Ann Rosolowski, PhD
00:28:19
Wow. So what were the pieces set around data?
Well, then when you have the data, it is about increasing the visibility of women and ways of doing that, not only increasing the visibility of internal women, but external woman; in other words, making sure that our internal women were on committees, were being nominated for our Faculty Achievement Awards, were going out to give talks places, taking them out to schools. We have an outreach. We do a little bit of outreach from the office, too, to try and—I take panels of our women faculty out, diverse panels of women faculty, to, again, role-model for these young women, these young students in middle school and high school. “You, too, can do this and listen to these stories.”

But, you know, so you have data so you can then identify where you need to put the efforts, raise the visibility, nominating them for the awards. That was one thing. Raising the visibility of—again, bringing in women who are role models who speak to—without saying it, but speak to other faculty here, that, “You, too, can do this.”

There’s another picture up there of we have—Funmi Olopade. Funmi is a professor at University of Chicago, she’s African American, originally from Nigeria. And I brought her in. I tried to bring in—always focus on the diversity of our mission area, our four mission areas, and the diversity of our faculty, and see—I want them to see people who look like them, and I don’t want to be accused of doing the same thing the men do, which is always choosing only white men for things. (laughs)

So we brought Funmi in and had her meet with our African American faculty, and she had lunch with them, and, you know, it was specifically—she gave an institutional-wide address because you want everybody to see her and everybody to see that there are women who are doing this great work in breast cancer, for example, for Funmi, you know, who don’t look like you. So I think that was a big thing that we did, and so we had what we called our “Women Leading the Way” lectures. We had Renu Khator when she was first appointed chancellor of University of Houston, she was one of our “Women Leading the Way,” and she is a—have you ever heard her speak?

Nuh-uh.

Elizabeth Travis, PhD
00:30:57
Her story is absolutely—she’s a dynamo. You can tell because in, what, five short years, it’s become a research or tier-one university—

_Tacey Ann Rosolowski, PhD_

00:31:08

Wow.

_Elizabeth Travis, PhD_

—which speaks volumes for her.

So we did that. Also, so you look at, okay, so there aren’t—we’re not bringing in women leaders. What does our leadership search policy look like? Who’s on the search committees? Where do we need to put in place some policies, if you will, that increase the probability or at least increase the chances that we will attract or be able to bring women in as leaders? So just looking at the infrastructure, looking at what supports all these committees that make these decisions, and saying, “There are no women on these committees,” you know. And that doesn’t guarantee they’re going to choose women. That’s not what it’s about. It’s about making sure you get the qualified women to be reviewed by the committees and seen as candidates. That was one thing.

The other thing was, again, back to family-friendly, if you will, because it is an issue. We looked at—so when I chaired with the Faculty Classification Committee, we put in place a policy, a long time ago now, that allowed an extension of a tenure clock for kind of life events that happen. In other words, things happen in all of our lives, and, you know, our tenure is not life, it’s not lifetime. It has to be renewed every seven years. Well, things happen to everybody, you know, family members are ill, the Gulf War, etc. So we put in place a policy that was an extension of the tenure clock for family reasons, etc., but you had to ask permission. By the way, the first person to take advantage of it was a man who went to the Gulf War. He was called to duty. So these things work. These are gender-neutral policies.

So one of the things the office did, we looked at that policy again, and we changed two things about it. One was to make sure it was gender-neutral and men knew they were entitled to this time off too. Secondly, we made it for new child in family by birth, adoption, or foster care, so any new child in family. We allowed people to take this up to six months after they had a child, because we all think we can do it all. Then you get into it sometimes, and you just don’t know. You just don’t know, but you think, “Oh, yeah, I can do everything.” Then you find out, oh, maybe not. So up to six months. After six months, they can’t have this.

And the other thing that really changed, you used to have to ask for somebody’s permission to do this. Well, I said, “You know, we’re all adults here, and we all know that if you take a couple years’ extension of your tenure clock, that means your promotions may be delayed, etc., but we
need to make our own decisions about what’s best for us in our lives.” So now you don’t ask permission. You just inform both the chair and the provost that you are taking a year, this year extension of tenure clock.

And the good news is that sometimes you take it and you think, “Oh, I really didn’t need that,” so you’re ready for promotion at the appropriate time, at the regularly scheduled time, you can go forward. So there’s like no downside to it for anybody. So, again, it was, you know, looking at where we might make some changes that could help men and women, and men and women both have taken advantage of that policy.

Then looking at trying to get people to look at their own biases, what’s called unconscious biases, which, like I said, we all think we’re fair, but we all have them, and try to get the people teaching—and Harry and I teach together in a course for the Faculty Leadership Academy in the Heart of Leadership where we talk about these implicit biases, how they play out in academic medicine, and how they—actually, you make decisions based on these biases that you don’t think you have, but you have, and they actually determine what decisions you make, and to be just be aware. Make yourself aware. There’s a test you can take to identify these biases that you have, and we all have them, and then just be aware of that. Am I saying no to this individual because of this, or is it really because of their qualifications? Be willing to ask yourself, “Am I really being as neutral on this as I need to be or not?” and then act accordingly.

_Tacey Ann Rosolowski, PhD_  
00:36:18  
You mentioned Harry. That’s your teacher?

_Elizabeth Travis, PhD_  
00:36:19  
[No.] Harry Gibbs.

_Tacey Ann Rosolowski, PhD_  
00:36:19Harry Gibbs. Now, where did that test come from? Is that—

_Elizabeth Travis, PhD_  
00:36:25  
It’s from Harvard.

_Tacey Ann Rosolowski, PhD_  
00:36:26  
From Harvard.
Interview Session: 02  
Interview Date: 25 March 2014

Elizabeth Travis, PhD  
00:36:27  
It’s a well-known test.

Then the other thing is it was about educating, you know, educating our women, what we were talking about earlier, you know, making sure that they are aware that there are opportunities to be educated, so that they’re aware, and then talking to them about preparing themselves for a leadership position. “I see you as a rising star. I see you as a potential chair. What do you think?”

“Oh, I don’t know.”

“Yeah, you do know.” (laughs) “This is what you need to do to get ready for that.” And then they go about doing it. So that’s, again, it’s a way of bringing others up.

Tacey Ann Rosolowski, PhD  
00:37:07  
Now, did this office start any kind of formal mentoring program? Do women come to you if they—how does that all work?

Elizabeth Travis, PhD  
00:37:15  
So we didn’t start it—we do have a formal mentoring program that’s run out of what used to be Faculty Development, and they’ve changed their name, and I can’t remember their new name because they changed it again. But whatever it is, they run a formal mentoring—they run a formal—the institution has a formal mentoring program, I’m on that committee, that we just started, let’s see, five or six—about five years ago.

Tacey Ann Rosolowski, PhD  
00:37:39  
Oh, really? That’s that recently?

Elizabeth Travis, PhD  
00:37:40  
Right. So what we do is I don’t want to reinvent the wheel. I don’t want to do what somebody else is doing. I don’t want to do what’s already available. What I always wanted to do was to say, “What are we missing?” Particularly when it comes to women, what are they missing in their leadership development courses or in just their mentoring women, that we can enhance?
And what did you discover?

Well, they just weren’t focusing on things like, you know, women understanding why they don’t like to promote themselves, and then finding ways to do that that’s comfortable for them. I mean, again, like I’m going a couple places next week, and some of the groups are talking to women exactly about this. I did a webinar for the group—it’s a leadership group for the Gastrointestinal Society, American Society of Gastro—ASGE, Gastroenterology—and it was all about advancing themselves. It was on promotion, promoting yourself, how to do it, making them understand here’s what women, not all, but generally, do, we know, and here’s how you can overcome that. Then you can do this. You can always have an elevator speech ready so that when you get on the elevator—so this was good. I have a PowerPoint that says you need an escalator, an elevator, and a stairway speech. (laughs) And it’s true, because you never know. And I tell them it always has to be up to date, and so when you get on the elevator with the president or the provost or your division head you haven’t seen for a while, and they say, “So, what have you been up to? What’s going on? What are you doing?” instead of saying, “Oh, you know, everything’s going fine,” that you be ready to share. “We just got this paper out,” or, “We just got this grant,” or, “We’re working on this clinical protocol. Here’s some exciting data we have.” Whatever it is, be ready.

I did a session here not long ago for some of our women faculty, and one of them emailed me a couple days after, because that’s what I talked about was elevator speeches. She said, “I got on the elevator,” and there was her division head, who said, “What are you doing?” And she said, “I was all ready to say the usual, nothing, and I said, ‘Oh, we just had this paper go out,’ etc., ‘and we’re getting ready to send another one out.’” And a few days later, I think he either emailed her or saw her, but said, “Well, what happened with your paper?” And that’s what you want to have happen.

—and that’s why you have an elevator speech.

So it’s not—so Walt Whitman said—women never want to use the “I” word, they never want to brag, they were taught not to. We’re taught it’s not nice, etc. Walt Whitman said, “If ya done it,
it ain’t braggin’,” and that’s what I tell them. “If ya done it, it ain’t braggin’.” We’re always, “my team” or, “I was lucky,” and I say, “Throw the word ‘luck’ out the window. Yes, your team is important, but if you did it, you did it.” It’s that simple.

_Tacey Ann Rosolowski, PhD_

00:41:01

Yeah.

_Elizabeth Travis, PhD_

00:41:03

There was another talk I gave at a place here in the State of Texas, and at the end of—this talk was about women in leadership and some of these issues around not only women understanding them, but men understanding, too, that women are not going to be the ones with their hand up in the air, “Look at me,” you know, make them realize that you have to ask questions and you have to go to the woman or the minority and say, “What do you think about this?”

So I gave this talk, and at the end of it, at the question-and-answer, a woman said, “Well, you know, I don’t like to do that. Women are uncomfortable,” etc. She said, “What do you suggest?”

And, you know, I spoke to her and I said, “Just get over it.” (laughs)

And the dean, who was there, got up and he said, “Two take-home messages.” He thought it was great. He said, “Two take-home messages that you just got. One you just got is ‘Get over it,’ and the second is ‘elevator speech.’ Those are the take-home messages.” He said, “Just get over it.” So I think you just have to—but you have to know how to get over it.

_Tacey Ann Rosolowski, PhD_

00:42:13

Yeah, and you have to practice.

_Elizabeth Travis, PhD_

00:42:16

And you have to practice.

_Tacey Ann Rosolowski, PhD_

00:42:17

Yeah, yeah, because it’s not just, “Oh, now I have a new skill. I get to do it.” You know, when you’re socialized in a certain way, it brings up all of these very uncomfortable emotions you’ve got to push aside.
Elizabeth Travis, PhD
00:42:27
Right. Yeah, and you have to practice.

Tacey Ann Rosolowski, PhD
00:42:28
And retrain yourself.

Elizabeth Travis, PhD
00:42:29
Right. And somebody said, you know, “You get in front—,” like if you’re going in to ask for a raise or a promotion, “You get in front of that mirror and you practice, practice, practice, and you go in there.” So you’re an actress, but that’s okay. Or an actor, if you will.

Tacey Ann Rosolowski, PhD
00:42:45
Uh-huh, yeah, because men deal with these issues, too, with performance anxiety—

Elizabeth Travis, PhD
00:42:49
Sure.

Tacey Ann Rosolowski, PhD
00:42:50
—and sometimes lack of confidence.

Elizabeth Travis, PhD
00:42:52
I don’t see too much of that. (laughs)

Tacey Ann Rosolowski, PhD
00:42:55
Really?

Elizabeth Travis, PhD
00:42:58
Maybe we can strike that from the record. (laughs)
Tacey Ann Rosolowski, PhD
00:42:59
Maybe not here.

Elizabeth Travis, PhD
00:43:00
Maybe we can strike that from the record.

Tacey Ann Rosolowski, PhD
00:43:00
I’ve seen it at other places. Maybe not here. (laughter) Interesting, interesting.

Elizabeth Travis, PhD
00:43:07
And I think the other thing the office you’re asking about, the data, then what we did was the issue of getting a grant, contributing to the body of knowledge. Part of it is by giving these talks, part of it is by publishing papers. I finally found time to write a paper on sponsorship. It was published in Academic Medicine in October 2013, which is a—it’s a model that’s used in the corporate world for promoting women and minorities into leadership, and my suggestion is we try and adapt it to the academic world.

Tacey Ann Rosolowski, PhD
00:43:43
Now, when you use the word “sponsorship,” what does that mean, in contrast to mentoring?

Elizabeth Travis, PhD
00:43:48
Yes, it’s really very different. Mentoring is pretty much a—it’s behind the scenes. The mentor doesn’t have to stick their neck out. A mentor can be at any place in the organization. There’s peer-to-peer mentoring. It could be an assistant professor mentors students, graduate students and postdocs.

A sponsor has to be somebody with power and influence, who publicly sticks their necks out and vouches for someone who others may not know very well and say, “You know, I think this person would be really good for—,” you name it.

The big difference is it’s a public statement and there’s risk. You know, there’s risk involved with being a sponsor. There’s not risk involved with being a mentor. Mentoring is around usually—I mean, there are many things you get mentored for, but frequently it’s how to develop
your professional career, writing grants, writing papers. Sponsorship is, specifically in the business world, about putting women and minorities in leadership positions.

*Tacey Ann Rosolowski, PhD*
00:44:56
And it almost seems as though it’s adding the caché of that powerful person—

*Elizabeth Travis, PhD*
00:45:02
It is. Right.

*Tacey Ann Rosolowski, PhD*
00:45:03
—to a certain degree, whoever is being advanced, that, you know, “If you don’t have 100 percent, you’re not a 100 percent known quantity right now, I will lend you a little bit of my glow so that people [inaudible].”

*Elizabeth Travis, PhD*
00:45:14
And also help you as well. There is an individual who was the president of Princeton, Hal Shapiro is his name, who sponsored a number of women to be university professors. So it can be done in academia. I mean, Shirley Tillman [phonetic], Amy Gutman [phonetic]. I mean, there are five or six women that he sponsored.

Again, a sponsor only opens a door. A protégé has to walk through that door and perform. I always give the example—I always start these talks with examples of mentors and sponsors—or not mentors—sponsors and protégés. One of the mentor-protégé or sponsor-protégé relationships that I have there is John McCain. I’ll have Sarah Palin’s picture, and I’ll say, “Who was her sponsor?” Sometimes people, they don’t know. And I say, “It’s John McCain.” Then at the end of the talk, I’ll circle back and I’ll say, “This is a failed relationship, sponsor-protégé relationship, not because they lost the election; because she didn’t know her stuff. The Katie Couric interview. She wasn’t knowledgeable. She was not loyal. She did not have his back. And that’s what a protégé needs to do. You have give 110 percent. You have to be loyal.”

And sponsors benefit as well. You have someone who’s a little lower in the organization, you hear different things, you know. You hear things you may not hear otherwise. It gives them an opportunity to leave a legacy of developing future leaders and putting leaders in place. I think it’s a very—I’m doing a lot of talking on that around the country now, trying to put together—here we’re going to put together a sponsorship workshop, but we’re always—we started an initiative two years ago—it’ll be two years. Two years? Yes. Across all fifteen components of
the University of Texas System, a Women’s Leadership Network, Dr. Patty Hurn, who is the Vice Chancellor for Research and Innovation at UT, and I. So we have all the components. We have women from all the components involved, both administrators and faculty. So we really want to cross—we want to bridge the gulf between the faculty and the administrative side of the house. And next we’re trying to do a workshop on sponsorship. We’re going to do it, if not in the fall, in January for sure. That’s an exciting initiative, because our goal is to position more women in leadership positions across the University of Texas, across the components.

**Tacey Ann Rosolowski, PhD.**

Yeah, yeah. What—I mean, as you look back, you’ve talked a lot about the programs that you feel have been successful and achieved. Has there been something that you wanted to set in place that for some reason you couldn’t push it through?

**Elizabeth Travis, PhD**

00:48:39
So I’m still hoping to do it, so I wanted to do cultural competency training for particularly the leadership, for the chairs, and it’s always been on the agenda, it’s never been—I have to take the responsibility for it, for whatever reason it just hasn’t come up to as high a priority as it needs to be, but it is on the calendar right now for August. I’m doing it with our leadership consultants who work here, the EDG group, Executive Development Group. I’m doing it with one of the individuals from there, and he’s all gung-ho to go, and I’ve been the one who has delayed this, so it all falls on me on this one. And it’s a function of saying yes to too many things, and this now has to be a priority. I’ve got talks and some things to do now, and that’s my next priority, because I am committed to getting this done. We want to do a pilot program and see how it runs. We want to bring new ideas and new theories and try to get the leadership to think about this a little differently.

**Tacey Ann Rosolowski, PhD**

00:50:02
Why is this—what would be under the umbrella of cultural competency from the perspective of this office?

**Elizabeth Travis, PhD**

00:50:10
Well, it would be about—everything about gender, everything about gender. It would be about what is stereotype threat and how does that play, you know. Some of the things we’re already doing, the unconscious bias, the data, because everybody here has a job to do, and this is not their job. This is my job, and my job is make them aware of places where these issues might play out that you’re not even aware of it and to alert them to that so that they become more culturally
competent about these issues, that they are aware that women and, most likely, a lot of minorities, too, particularly the intersection of underrepresented minority women or underrepresented women faculty, don’t perhaps ask for what they want and don’t stick their hand in the air.

So making them aware of the differences, the cultural differences, that we all think we know, but probably we’re not as aware of them as we need to be. I think it can only be helpful to them, at least I hope so, in doing their job, and their job is to develop the best of the best, retain the best of the best, and position for leadership the best of the best. So whatever ways I can increase their knowledge, improve their skill set in doing that, it’s part of the charge of this office, quite frankly, to do that. It’s not only to educate the women; it’s to educate everybody.
Chapter 12
A: View on Career and Accomplishments
about 11 minutes
Leaving a Legacy of Visible Women

Story Codes
A: Career and Accomplishments
A: Contributions to MD Anderson
B: MD Anderson Culture
B: Institutional Mission and Values

Tacey Ann Rosolowski, PhD
00:52:06
What legacy do you feel you will leave when you leave this particular office?

Elizabeth Travis, PhD
00:52:15
I think it’ll be a legacy of a community—communities—plural—of women, that women feel visible, recognized, that there will be women leaders, more women leaders. I think it’s the communities that’s very important, building those communities. I also think a legacy is that our male colleagues are cognizant and have now picked this up, too, in terms of recognizing their own women faculty, that they deserve awards, you know, being more cognizant of it.

Tacey Ann Rosolowski, PhD
00:53:15
A real cultural change.

Elizabeth Travis, PhD
00:53:18
I hope so, you know, but I think just building the communities of women, that women feel that this is a place for them, that there are women here, there are a lot of women here. We just had a group—they started—it was grassroots. It didn’t start from this office. And I think that’s really what this office should be about, is they wanted to start a moms’ group. I said, “What can we do to help you?” So when somebody comes to me, I say, “You know, great. What do you want us to do? Tell us what you would like us to do, and we will do it.”

And they said, “Well, not very much. We want to keep it informal, etc.”

I said, “Okay, it’s up to you. You want to do this.”
The two of them came to me, the two women who were running it, and now it’s really gained some momentum, but it started out as a total grassroots. So they have this group of moms, women faculty, and they share things, like who’s a good babysitter, just all the kind of things that moms need to know about. They’re doing it, and I think that’s great. I mean, I think that—and I think I have to credit the fact that we have this office helps facilitate that. It helped not only facilitate it, but it plants the seed that you can do this and it will be supported, and I think women feel that they can do these things and that it doesn’t have to come from up here, that they, too, can do this. “We’re behind you, we got your back, and we’ll help where you need us and where you want us.”

*Tacey Ann Rosolowski, PhD*

00:54:56
What would you like to accomplish before you leave this office and/or the institution?

*Elizabeth Travis, PhD*

00:55:06
I’d like to see at least one more woman as division head. I mean, that is a goal. (laughs) One more woman division head. We only have one at the present time, and it’s kind of lonely there. I’d like to see two, but I’m working, we’re working hard on—

*Tacey Ann Rosolowski, PhD*

00:55:22
And her name is?

*Elizabeth Travis, PhD*

00:55:24
Genie Kleinerman, pediatrics.

So working hard on that, you know, making sure to bring really talented women to the search committees, and we have a number of division-head searches going on. Place more women in department chairs in the clinical side of the house. We’re doing pretty well in the basic science side. Some departments we could be doing better. We have a lot of women in the pipeline. Surgery has a lot of women. We have a lot of gender-balanced departments here, and they’re ones that you wouldn’t think would be, like surgery. And the chairs of the departments are just quite pleased with themselves that they’ve managed to recruit women.

One of the things we do, because we think you should give credit where credit is due, and so if it’s a gender-balanced department, we feature that department with the department chair, whether it’s a man or a woman. So we feature the men and we get a little statement from them, and they can tell us about it, and, you know, again, that’s a way of recognizing and of, I think, changing
the culture. So having more men do this as well, but certainly positioning women into higher
leadership positions, starting with division head, continuing to increase women in chair positions
and hopefully even up the ladder, because we are not looking very—we have an associate or we
have a vice provost, who is Dr. Helen Piwnica-Worms, but we don’t go any higher than that.
Either gender or race, it kind of stops there. So, looking for those opportunities, and all you can
do is bring the best of the best forward and hope that somebody looks around the table and says,
“Hmm.”

*Tacey Ann Rosolowski, PhD*
00:57:26
Yes, “There’s a place here.”

*Elizabeth Travis, PhD*
00:57:28
Yeah.

*Tacey Ann Rosolowski, PhD*
00:57:29
Now, I haven’t asked you, do you have specific plans to retire?

*Elizabeth Travis, PhD*
00:57:33
No. (laughs)

*Tacey Ann Rosolowski, PhD*
00:57:36
Well, imagining that future time, what do you visualize yourself doing?

*Elizabeth Travis, PhD*
00:57:41
I don’t know, and that’s probably one of the reasons—first of all, I’m having too much fun here,
so that’s an issue. Secondly, I’m having too much fun now that I have the UT—you know,
working across the UT System. I’d really like to see that initiative up and at least really
embedded and going, so that when you take your eye off the ball, that it’s going to be passed on
to others. So I have to get it to a point where it’s passed on to others. Then you can step back
from it.

So I don’t know. I mean, I think that’s a problem. In fact, this friend of Jerry’s we just had dinner
with last evening, retired a few years ago, and he was in medicine, and he was saying, “You have
to have something, something to do. You have to—.” I mean, I can’t imagine waking up, “Okay,
I’m retired. What do I do today?” I’ve worked since I was twelve. That’s one thing. So for me, I mean, I was kind of like my mother, and I guess I took some lessons from her, and my dad, but, you know, I was always doing something, selling Christmas cards to make money to buy Christmas gifts for people. So I was always—so I can’t imagine not doing that.

And the question is, so where do you take that energy? I mean, Margaret Kripke retired in two thousand—I can’t remember. Maybe it was 2010. I can’t remember exactly. So she stayed retired for a couple years, but she is now chief scientific officer for CPRIT. And why did she take it? First of all, it was an opportunity to make a difference, it was a challenge. You know, so even she couldn’t stay retired. (laughs)

**Tacey Ann Rosolowski, PhD**
00:59:21
Now, you’ve mentioned Jerry.

**Elizabeth Travis, PhD**
00:59:22
Uh-huh.

**Tacey Ann Rosolowski, PhD**
00:59:24
Do you want to share—

**Elizabeth Travis, PhD**
00:59:25
My significant other, if you will. (laughs) We’re not married. We were just talking about this last night, seventeen years.

**Tacey Ann Rosolowski, PhD**
00:59:33
Wow.

**Elizabeth Travis, PhD**
00:59:34
And helped raise each other’s kids.

**Tacey Ann Rosolowski, PhD**
00:59:39
His last name?
Interview Session: 02
Interview Date: 25 March 2014

_Elizabeth Travis, PhD_
00:59:39
Hyde, H-y-d-e.

_Tacey Ann Rosolowski, PhD_
00:59:41
Okay. Yes, thank you.

_Elizabeth Travis, PhD_
00:59:45
So I don’t know when that will be. I mean, you think about it and you think there are other things you want to do in your life. I love to travel. We love to travel. We travel really well together. We’re good travelers, love going places. He’s retired, which makes it a little interesting and challenging in some ways.

_Tacey Ann Rosolowski, PhD_
01:00:01
Sure.

_Elizabeth Travis, PhD_
01:00:01
It’s not yet, and I keep—and I talked to my best friend from high school. I was there in Pittsburgh not long ago. She just retired. And I said, “Ah, Sheila, tell me how you did this.”

And she said, you know, she was ready. She said, “You’re not ready.” She said, “I know you. You know you. You’ll know when you’re ready. So when you’re ready, you’ll retire.”

And I think that’s true. I think it’s like having my son. When I look back on it, it was like just thinking—listening to what that inner voice is saying to you, you know, and really listening to that and making sure that it’s correct. You can never be sure, but you can have some pretty good ideas. And then acting on that. I haven’t heard that inner voice say, “You know, it’s really time for you to do something.” You see, I’m not even saying “retire.” I’m saying, “Do something else.” (laughs)

_Tacey Ann Rosolowski, PhD_
01:00:56
Do something else. (laughter)
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*Elizabeth Travis, PhD*

01:01:00
Telling, isn’t it? That’s a very telling comment. (laughter) That might be the end of the interview.

*Tacey Ann Rosolowski, PhD*

01:01:10
I was kind of thinking that, too, though I did want to ask you if there was anything that you wanted to add.

*Elizabeth Travis, PhD*

01:01:15
Yes, only that this is—my intention was never to be at MD Anderson as long as I have been. I always, you know, wanted to go to California. Maybe I’ll retire there. (laughs) But it’s been a great place to be. It’s been a great career, actually. I mean, it’s not been without its ups and downs, and I’ve talked about those. Nothing’s perfect. But, you know, when I look back over it, the opportunity to be in this organization and to—I mean, just—this is a marvelous institution. I’ve had a number of family members here, and what we do is truly remarkable. And to work in a place with such talented and committed physicians to what they do is really a privilege, you know.

And, I mean, there are benefits. Sometimes, you know, you live in a bubble, we all do, and you don’t realize how lucky you are. People don’t have healthcare, they don’t have insurance, people have to work, they’re sick, they need surgery, whatever, but they can’t not—they don’t have insurance or else they can’t not work, and you realize what a privilege it is to have some of those things. Now, granted, yes, you work for them, granted, you got a degree, and there are things that come with that, but nonetheless, recognizing that so many people don’t have those things.

And I think it’s, I guess, if I look back, would I have thought this is what I would be doing or what I would be doing, I had no idea, but I probably would not have envisioned this. [My] undergraduate university a couple years ago—I was named the distinguished alum, and it was really quite an honor. It was so much fun. But I really was sad because my mother had just died in November and this happened like right after Christmas. And she would have been just so proud, you know, so proud.

So, yes, I’m glad I’ve had this opportunity, continue to have this opportunity, and think this is a great organization. I’m sure it will continue to be great.
Tacey Ann Rosolowski, PhD
01:03:57
Well, I want to thank you for your time.

Elizabeth Travis, PhD
01:03:58
My pleasure. It’s been a lot of fun.

Tacey Ann Rosolowski, PhD
01:04:01
It has been. And I’m turning off the recorder at 11:58. Thank you so much, Dr. Travis.

Elizabeth Travis, PhD
01:04:10
Great.
(end of Segment 12)