

WIP: A Call to Action: Developing A Leadership Program that Supports Academic Caregivers Using the Kotter Change Model

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Introduction

Higher education has adopted a capitalistic model prioritizing productivity and efficiency, often based on the "ideal worker" with no outside obligations. As a result, academics with caregiving responsibilities face added pressure [1]. While caregiving traditionally includes childcare and eldercare, the National Academy of Science, Engineering, and Mathematics (NASEM) defines it more broadly as caring for spouses, dependent children with medical conditions, and extended family members [2]. Since the COVID-19 pandemic, academics, particularly women in STEM, have shouldered a disproportionate caregiving burden that contributes to the underrepresentation of women in senior academic roles [1]. These gendered impacts, including career risks and mental health challenges, have been worsened by the pandemic [3].

The challenges faced by academic caregivers reached a critical point that prompted the NASEM to release a report in April 2024 titled *Supporting Family Caregivers in STEMM: A Call to Action* [2]. The report highlights the invisible labor of caregivers in all academic roles, from faculty to students, staff, postdoctoral scholars, and undergraduates, who often carry out the demanding role of caregiving without institutional support. The report also outlines successful policies and practices that have supported caregivers locally and nationally, offering best practices for policy development and implementation.

In response to growing concerns, NC State University's Engineering Office of Faculty Development and Success launched a forum to address caregiving challenges in academia, aligning with NASEM report recommendations and campus-specific needs. The forum provided a platform for discussing caregiving responsibilities and the "invisible labor" caregivers face, with participants from eight colleges and various university organizations. Following these discussions, the need for more support for academic caregivers became apparent, leading to the development of the Cultivating Action, Resilience, and Empowerment for Academic Caregivers (CARE) Program. Based on Kotter's Change Model [4], the CARE Program supports faculty in designing micro-initiatives that address immediate, high-impact needs for academic caregivers, such as resource access, raising awareness, or fostering community while building momentum for long-term, systemic change through collective action.

Methods

Program Development

The program was inspired by a 2024 ASEE session on caregiving challenges in academia. The emotional response to personal stories highlighted the need for a platform to address these issues at our university. [5-7]. In collaboration with Women in Engineering ProActive Network

(WEPAN) and NASEM, we identified the need for leadership-driven, small-scale change. Conversations across campus confirmed that caregiving affects all academic levels, which prompted a unified response. While developing the CARE Program, we chose to ground it in academic change theory, leading us to Kotter's Change Model, which supports faculty-led micro-initiatives as a path to long-term institutional change. We selected Kotter's Eight-Step Change Model for its clear, flexible structure and alignment with CARE's goals of urgency, coalition-building, and grassroots, faculty-led change.

Professional Development

The CARE Program emerged from an inaugural professional development event titled "Call to Action: Forum for STEM Leaders to Reform the Norms for Academic Caregivers." Co-hosted with NASEM and WEPAN, the forum served as the foundation for the first phase of the CARE Program. It began with powerful personal narratives from STEM academic caregivers, highlighting the emotional and structural challenges of balancing caregiving with academic responsibilities. Following this, a panel of campus leaders, including the Assistant Vice Provost for Faculty Engagement, the Dean of the College of Engineering, a Department Head from the College of Engineering and an Associate Dean from the College of Sciences, offered additional insights and institutional perspectives. As part of a professional development session facilitated by our office, participants completed a graphic organizer, see Appendix, aligned with the NASEM report to identify key barriers, such as lack of work-life balance, limited time for self-care, and the stigma associated with caregiving.

| CARE Phase | Kotter Step | Description |
|--|---|--|
| <i>1. Forum</i> Fall 2024, 2 ½ hour workshop | Step 1: Create Urgency Step 2: Build a Coalition | Raise awareness of caregiving challenges and recruit stakeholders across campus to support the initiative. |
| 2. Vision Development and Initiative Design Spring 2025, 3-4 hour workshop | Step 3: Develop Vision Step 4: Communicate the Vision | Create a shared vision for caregiving support and communicate it clearly to all stakeholders. |
| 3. Implementation and Dissemination Fall 2025, Monthly meetings & Symposium | Step 5: Empower Others to Act Step 6: Generate Short-Term Wins Step 7: Consolidate Improvements | Empower stakeholders to act, highlight early successes, and sustain momentum through ongoing feedback and improvements. |
| <i>4. Community of Practice</i> Spring 2026, ongoing meetings | Step 8: Anchor Changes | Establish a community of practice to institutionalize caregiving support and make it part of the university's culture. |

These conversations informed both the vision and structure of the CARE Program and directly led to subsequent phases of initiative design and implementation, as detailed in Table 1. The program now supports faculty in piloting micro-initiatives that offer immediate impact while contributing to long-term institutional change.

Key Findings

CARE Forum Participants

There were 45 attendees at the forum, with 15 serving as speakers, panelists, or facilitators in the professional development activity. Participants in the initiative came from a diverse range of departments across the university, including 8 of the 12 colleges, such as Engineering, Sciences, Natural Resources, Veterinary Medicine, Agriculture, Humanities, Education, and Design. The College of Engineering represented 42% of the participants, while university-level organizations, including the Provost's Office, Office of Equal Opportunity, and University Libraries, made up 25%. Participants included directors, faculty, graduate students, librarians, and administrators, each offering perspectives shaped by their distinct roles within the university.

Professional Development Activity

Forum participants engaged in a guided discussion within their five groups, analyzing a specific academic community within the university (faculty, undergraduates, or graduate students) based on the registration they completed before the event. Participants completed the previously mentioned graphic organizer as part of a professional development activity aligned with the NASEM report. This activity helped them identify key obstacles, such as a lack of work-life balance, limited time for self-care, and the stigma associated with caregiving. These obstacles can lead to a lack of empathy or understanding from supervisors and colleagues. Overall, a recurring theme consistent with the report is that caregiving responsibilities are often invisible, with policies being inconsistent or difficult to access, especially for those balancing childcare, elder care, and other family obligations. Graduate students were identified as a particularly vulnerable group that faced more significant challenges, such as high childcare costs and confusion over their eligibility to receive benefits that are stated in university policies.

Post-Survey

Participants completed a post-event survey assessment that provided valuable insights and perspectives. Post-survey assessment data included participant feedback, key challenges, proposed solutions, and the impact and next steps after the event were collected. Ten participants completed the survey, including five from university offices, two university leaders, and three faculty members or instructors representing the colleges of engineering, sciences, and veterinary medicine. Demographically, the group consisted of 80% females and 20% males, with representation from diverse ethnic backgrounds, including African-American/Black,

Asian/Pacific Islander, Caucasian/White, and multiple other ethnicities. Participants' experience ranged from fewer than three years to over 36 years, with caregiving roles spanning parenting, elder care, bereavement, and spousal care. In addition, many noted their efforts to support caregiving due to its impact on colleagues and students.

The survey asked participants to rank the forum's impact using a five-point Likert scale, where 5 represented "Strongly Agree" and 1 represented "Strongly Disagree." Participants rated the following areas highly: the forum raised awareness of key challenges faced by academic caregivers (M=4.80); facilitated understanding of caregiving needs and typologies (M=4.80); positively impacted participants' confidence in initiating small actions to support caregiving (M=4.3); enhanced their sense of belonging (M=4.4), and overall, found the forum to be valuable and impactful for their understanding and engagement with caregiving (M=4.80).

The event encouraged STEM academic leaders to bring attention to reforms like establishing equitable caregiving policies, creating and implementing a supportive community, and offering resources such as flexible work environments or arrangements, and even providing caregiver grants if feasible. The participants also emphasized the strong need for leadership training to develop inclusive practices in academic departments and advocate for the caregiver communities.

Future Work and Discussion

The data provided the participants' perspective on the event, indicating that the forum successfully raised awareness about caregiving challenges and motivated STEM academic leaders to take tangible actions within their departments and work culture. However, some participants indicated the need for further follow-up initiatives for their department leadership and additional tools to implement short- and long-term actions. Despite having thought leaders at each table, many were equally engaged with the participants, which affected the documentation process. For future events, we plan to simplify facilitation with guided questions and provide training for designated recorders. Based on feedback and our experience with previous sessions, we recommend conducting all forums and workshops in a single mode, either entirely in-person or fully virtual, for consistency, accessibility, and effective delivery.

As part of our expansion, we are developing a one-year "CARE Certified" program for faculty and staff, offering a designation that can be displayed in email signatures or on platforms like LinkedIn or Credly to visibly signal support for caregiving leadership. We are also seeking external funding to scale the program nationally and build a growing network of academic leaders committed to caregiving support. While the post-survey provided valuable initial insights, future iterations will incorporate expanded data collection to assess the long-term impact and refine our approach more accurately. Through continued development, recognition, and research, the CARE Program aims to shift institutional culture and build a more inclusive, supportive academic environment for caregivers.

References

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Appendix

A Call to Action Activity [2]

