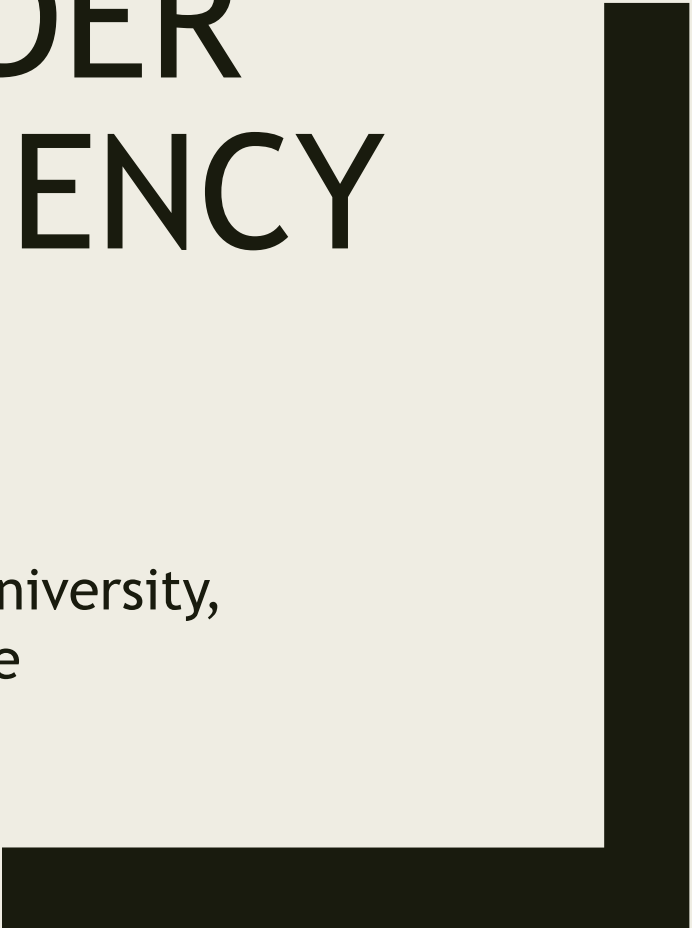




PURSUING GENDER EQUITY IN EMERGENCY MEDICINE

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Financial Disclosures

- None

Other Disclosures



Code Blue Memes
@codebluememes

me: sir can you tell me where you are right now?

patient: the hospital

me: ok and who is the president?

patient:

me:

patient:

me:

patient:

me: you wanna turkey sandwich?

Objectives

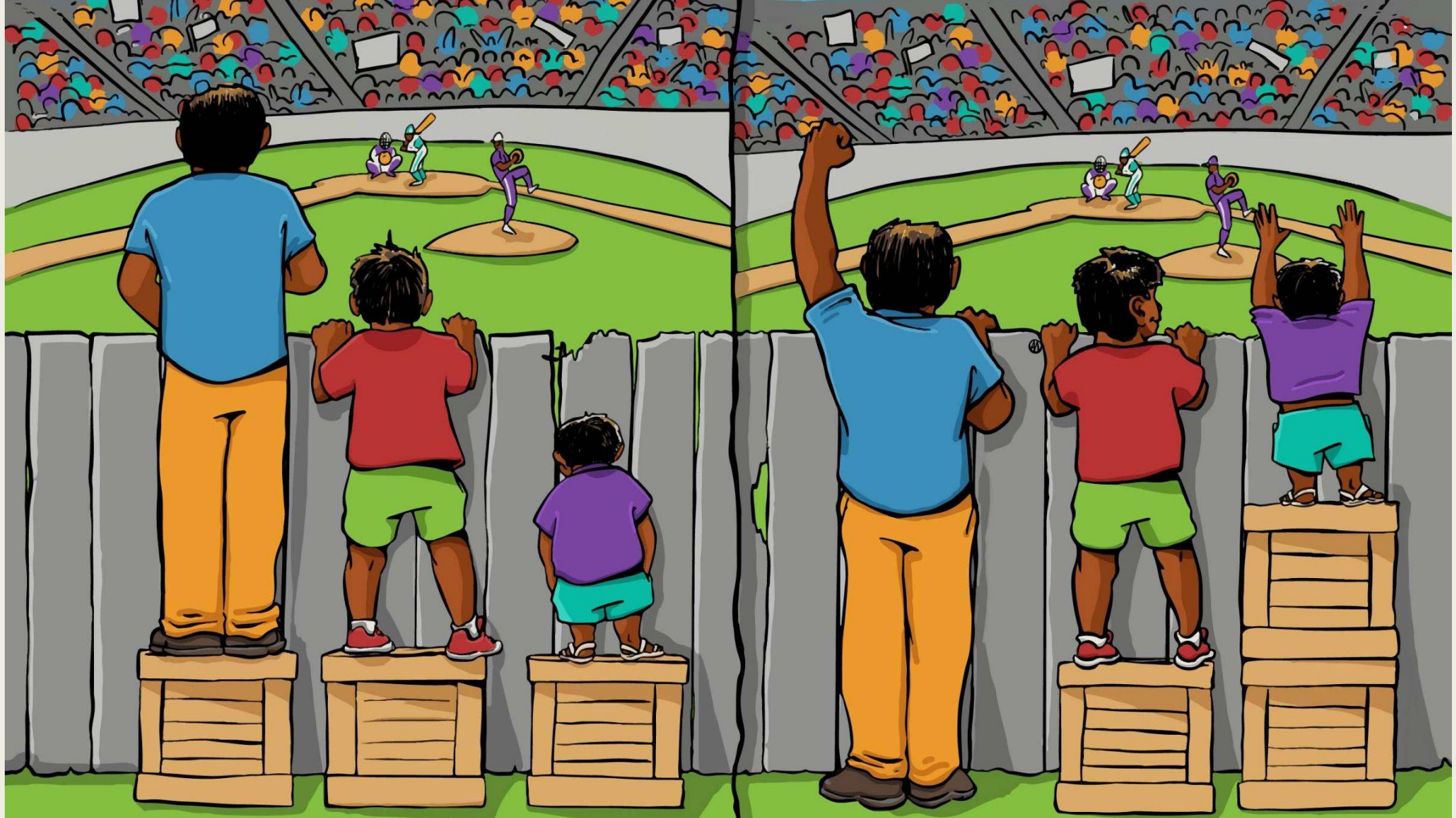
- Status of gender equity in healthcare
- Approach to the issue of inequities
- Tangible policies

Caveats

- Focused on gender
- Presents it in a binary way
- Centered from a heteronormative perspective



GENDER EQUITY IN MEDICINE



EQUALITY

EQUITY

Issues facing women in medicine

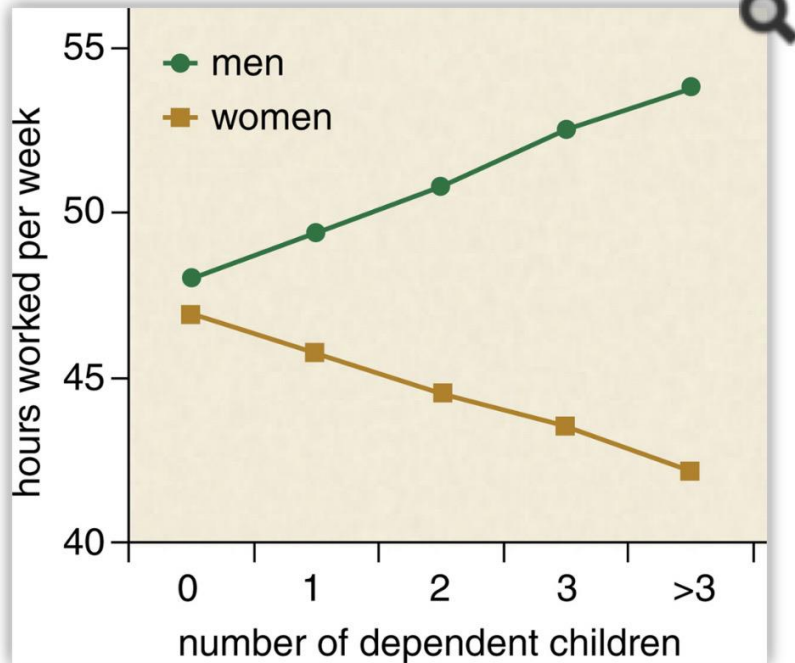
- 50% of female medical students experience sexual harassment
- 15.6% gender pay gap between among Ontario physicians
- Male surgeons promoted to full professor at 3x rate of females across 17 Canadian universities

Issues facing women in medicine

- 64% of women physicians defer important life decisions for career
 - *85% vs 71% satisfied with their choice*
- Working night shifts and call shifts during worse pregnancy outcomes
- Resident attrition rate in EM is .8%, 21.5% of women cite family reasons versus 9.6% of men

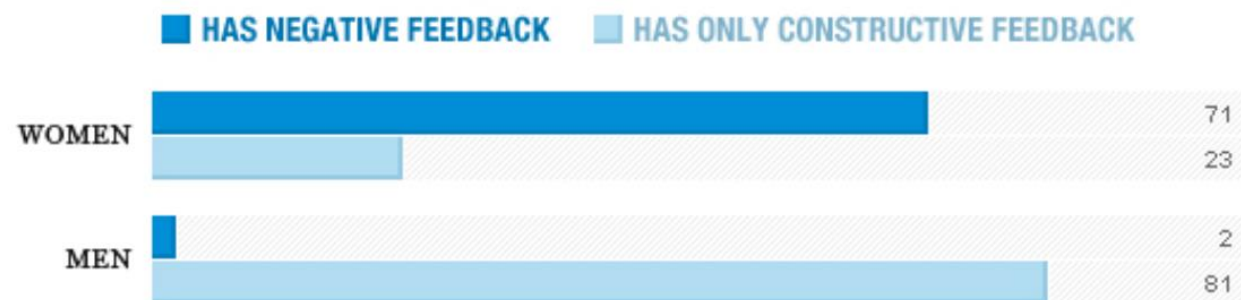
reaches its peak and begins to

x Figure 6



Women with children spend fewer hours per week on career-related work the more children they have (*gold*). But for men, the picture is almost the reverse: The more children they have, the more time they spend per week on their careers (*green*). A penalty for women in building a scientific career is, at least in this data set, an asset for men. (Graph based on data from [D. W. Leslie, 2007.](#))

FEEDBACK RECEIVED IN CRITICAL REVIEWS



REVIEWS INCLUDING CRITICAL FEEDBACK



248

REVIEWS

141 BY MEN / 107 BY WOMEN

FROM

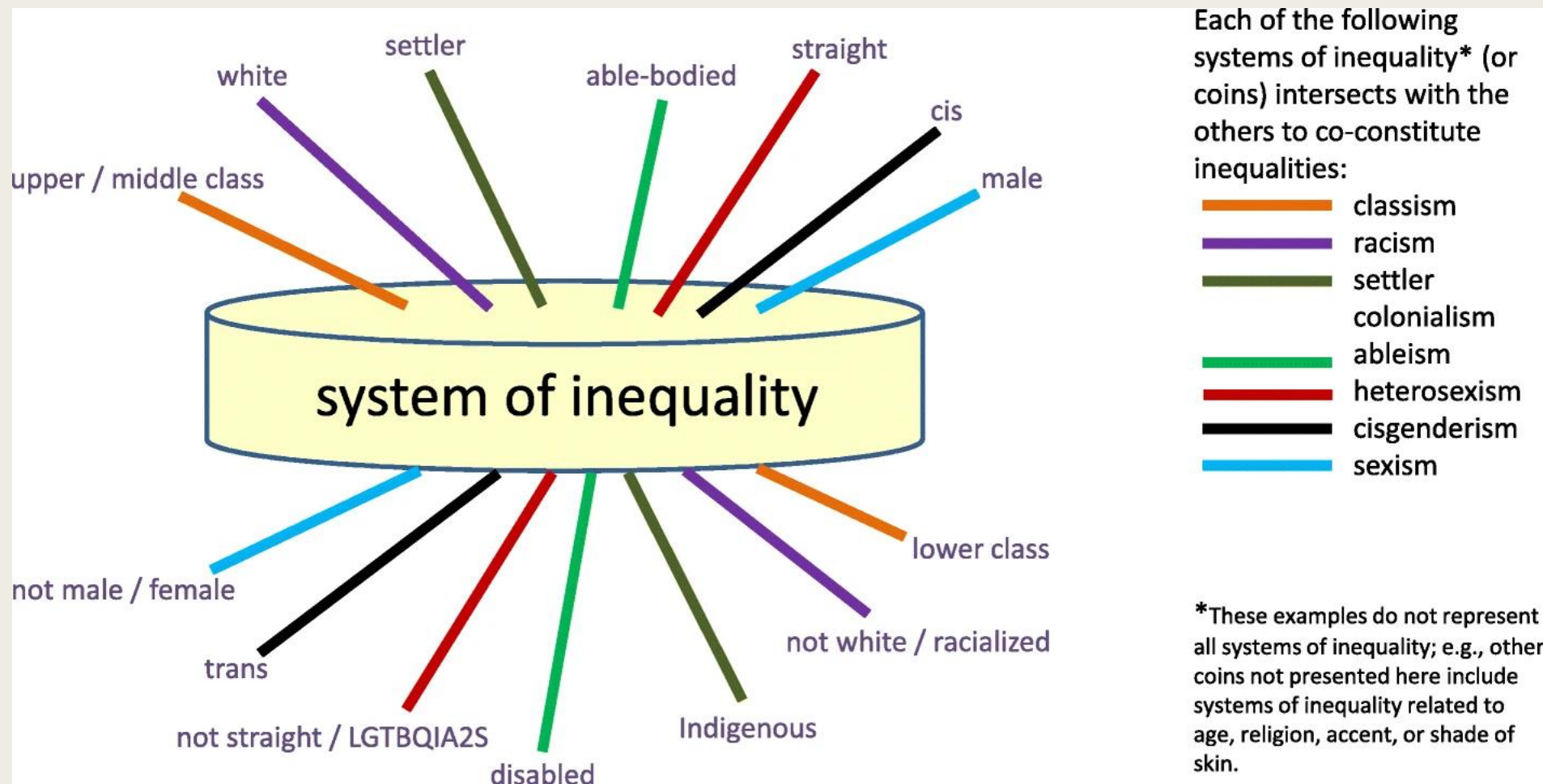
180

PEOPLE

105 MEN / 75 WOMEN



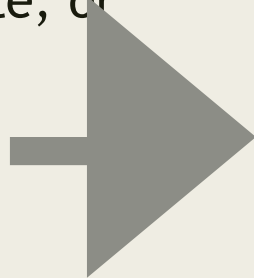
APPROACH TO INEQUITY



Nixon, S.A. The coin model of privilege and critical allyship: implications for health. *BMC Public Health* 19, 1637 (2019). [https://doi.org/10.1186/s12889-019-7884-](https://doi.org/10.1186/s12889-019-7884-9)

Allyship

- I wish to help the less fortunate, or
- I use my expertise to reduce inequities for marginalized populations



- I seek to understand my own role in upholding systems of oppression that create health inequities.
- I learn from the expertise of, and work in solidarity with, historically marginalized groups to help me understand and take action on systems of inequality.
- This includes working to build insight among others in positions of privilege, and *mobilizing in collective action* under the leadership of people on the bottom on the coin.

“Stop trying to save or fix people on the bottom of the coin”



Equality

Equity

”Nothing about us without us”

“Step Back”

- 4/16 of the University of Calgary School of Medicine department chairs are women
- 4/30 awards listed on the departmental website are women
- 4/23 individuals listed on the departmental organization chart are women

Additional Steps to Critical Allyship

- Take active steps to learn about systems of inequality and your implicit biases
- Recognize the need for action at the systemic, institutional, interpersonal, and internal levels
- Speaking up when you witness moments of inequity (sexism, racism, ableism)
- Having uncomfortable conversations with your family, friends, work places



REAL LIFE APPLICATIONS

Combating bias and creating a culture of allyship

'It's Not a Female Resident Problem'

By Anita Chary, MD, PhD; Emily Cleveland, MD, MPH; Farah Dadabhoy, MD, MSc; Melanie Molina, MD; Margaret Samuels-Kalow, MD, MPhil, MSHP; and Adaira Landry, MD, MEd | on July 21, 2020 | 4 Comments

Making space

Avoiding gender bias in reference writing

Got a great student? Planning to write a super letter of reference?
Don't fall into these common traps based on unconscious gender bias.

Mention research & publications

Letters of reference for men are 4x more likely to mention publications and twice as likely to have multiple references to research. Make sure you put these critical accomplishments in every letter!

Don't stop now!

On average, letters for men are 16% longer than letters for women and letters for women are 2.5x as likely to make a minimal assurance ('she can do the job') rather than a ringing endorsement ('she is the best for the job').

Emphasize accomplishments, not effort

Letters for reference for men are more likely to emphasize accomplishments ('his research', 'his skills', or 'his career') while letters for women are 50% more likely to include 'grind-stone' adjectives that describe effort. 'Hard-working' associates with effort, but not ability.

We all share bias

It is important to remember that unconscious gender bias isn't a male problem. Research shows that women are just as susceptible to these common pitfalls as men. This is a problem for all of us - let's solve it together!

brought to you by:



THE UNIVERSITY OF ARIZONA
Commission on the
Status of Women

Research from Trix, F & Psenka, C. Exploring the color of glass: Letters of recommendation for female and male medical faculty. *Discourse & Society*, 2003; and Madera, JM, Hebl, MR, & Martin, RC. Gender and letters of Recommendation for Academia: Agentive and Communal Differences. *Journal of Applied Psychology*, 2009.



Keep it professional

Letters of reference for women are 7x more likely to mention personal life - something that is almost always irrelevant for the application. Also make sure you use formal titles and surnames for both men and women.

Stay away from stereotypes

Although they describe positive traits, adjectives like 'caring', 'compassionate', and 'helpful' are used more frequently in letters for women and can evoke gender stereotypes which can hurt a candidate. And be careful not to invoke these stereotypes directly ('she is not emotional!').

Be careful raising doubt

We all want to write honest letters, but negative or irrelevant comments, such as 'challenging personality' or 'I have confidence that she will become better than average' are twice as common in letters for female applicants. Don't add doubt unless it is strictly necessary!

Adjectives to avoid: Adjectives to include:

caring	successful
compassionate	excellent
hard-working	accomplished
conscientious	outstanding
dependable	skilled
diligent	knowledgeable
dedicated	insightful
tactful	resourceful
interpersonal	confident
warm	ambitious
helpful	independent
	intellectual

Follow us at: www.facebook.com/uacsw

For an electronic copy of this graphic, see:
www.csw.arizona.edu/LORbias

Improved work hours for pregnant
physicians

Improved parental leave

Conclusion

- Status of gender equity in healthcare
 - *Women in medicine experience more harassment, fewer promotions, less pay, receive more negative feedback, and more work-life balance issues*
- Approach to the issue of inequities
 - *Need to move to a system of allyship*
- Tangible policies
 - *Policies are possible and there are examples to draw from*

Questions?