

PERSPECTIVE: PART I

A CALL TO ACTION: SUPPORT OUR FEMALE INTERNAL MEDICINE RESIDENTS

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The issue of gender bias and women in medicine has become a "hot topic" in the medical field today, and rightfully so. As of 2019, women now make up more than 50% of incoming medical students; yet, female physicians are still dealing with a gender pay gap and a disparity amongst leadership positions held within healthcare institutions.¹ Fewer female physicians choose to pursue careers in academic medicine compared to their male counterparts.¹.² Various healthcare organizations—including SGIM, the AMA, and the ACP—have highlighted suggestions to address this disparity.² While the progress being made in these areas is encouraging, most initiatives focus on either medical students, or female faculty.

Junior and senior female faculty have many places to find support for gender-based career issues, including the SGIM women's caucus, the American Medical Women's Association (AMWA), and institutional women's groups targeted to empower female physicians and help improve retention in academic medicine and promotion. These same groups often have outreach to female medical students. Zucker SOM, for example, recently opened its own chapter of AMWA for medical students. Despite these great efforts, there is a glaring gap when it comes to a group that may, in our opinion, need it most—female residents. As a female resident, the struggles are many for example, burnout and imposter syndrome seem to be at an all-time high, while control over one's life and schedule can sometimes feel limited. One recent study found that female internal medicine residents were found to report significantly more emotional exhaustion in the workplace when compared to their male counterparts.³ Possibly more concerning are the results of a 2008 study, in which 30% of female internal medicine residents rated gender as their greatest disadvantage in directing patient care, while no male residents listed gender as an issue.4

These differences between male and female trainees are concerning. During residency, critical decisions are

made that determine career trajectory. Given these coinciding factors, the need to provide support to this group is clear, and yet innovations, curricula, and programs in this arena are lacking. In reviewing the literature, we have found few successful programs targeted specifically to female trainees. One that stands out is the Brigham and Women's Hospital program for female Emergency Medicine residents that provides mentoring and professional development trainings for female trainees toward academic careers. Other programs, such as Yale's Office for Women in Medicine, serve as a hub for residents, students, and faculty, as a resource to be matched with mentors, networking opportunities, and attend talks given by successful female physicians.

The reasons for this gap in support, mentoring, and professional development aimed at female residents is likely multifactorial. Residents are busy and often overworked, and it is often difficult to ask them to give any extra time to a training, mentoring, or support session. Residents are also at the whim of their schedule, changing from dayshift to nightshift, working weekends, and some having to travel between various sites. Furthermore, relationships with potential mentors are often brief, with attendings frequently rotating on and off service. But we should *not* let this stop us from trying. Author Amanda Simone remembers all too well the struggles related to being a female resident. Approaching female attendings for support, she was often told that "you get used to it," and was left wanting more. She found herself seeking out support and a mentor who could provide answers to the questions faced as a female physician. After talking to other female residents, Dr. Simone realized that she was not alone, and that they too felt the desire for more support on gender-based issues in the workplace. This prompted the authors to develop a Women in Medicine Professional Development and Mentoring Program for female medicine residents within our institution.

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In our program, we meet monthly to build critical career skills—such as negotiation, public speaking, CV writing, and work-life integration while also providing mentoring and support to each other. We determine our workshop dates and times by poll, allowing our female residents to pick a time that works best for them. Our meetings run for 90 minutes after work, with half of the time dedicated to an interactive, learner-centered workshop on one of the predetermined topics listed above, and the second half of the time dedicated to mentoring. To foster a sense of community and a safe space to share, we serve as facilitators and mentors at each meeting. This was decided after participants from a focus group held prior to launch of our program expressed the desire for stability and comfort with a consistent set of mentors.

As a new and developing program designed to provide mentoring, training and support for female

resident physicians, we hope our program may serve as a place to start. This is what we ask you all to consider: Recognize the needs of your female residents and find a way to help support them. Intervention and support at this formative stage, we believe, will help our trainees go on to be more empowered and successful, and ultimately level the playing field with their male counterparts.

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