How surgical residents’ views on future earnings differ by gender

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A recent study of resident trainees sheds some light on the way current residents view future earnings and career goals by gender, and how those views may contribute to the physician gender pay gap.

The study—"Career Goals, Salary Expectations, and Salary Negotiation Among Male and Female General Surgery Residents,” was published in JAMA Surgery, and found that male and female general surgery residents have similar career goals. Their expectations for their first post-residency salaries, however, differ significantly by gender.

The AMA House of Delegates has adopted principles to advance gender equity in medicine. The principles outline opposition to workplace discrimination and affirm that compensation should be equitable, based on demonstrated capabilities and not associated with personal characteristics.

Gap in salary expectations

The study of 427 general surgery residents at 19 general surgery programs aimed to gain perspective on residents’ career goals, future salary expectations, views on negotiating and lifestyle goals.

Among survey respondents, the study’s authors found a statically significant difference between male and female residents in terms of their future salary expectations, both immediately after completing residency and in their long-term outlook. The average anticipated future starting salary for women was $249,502. That figure was $18,198 less than the $267,700 figure that male respondents reported.

When looking at what respondents considered to be an “ideal” starting salary, there was also a difference: The average ideal starting salary for female respondents was $334,709, nearly $30,000 less than the average salary for male respondents.

“Given that the women in our study anticipate working similar hours and retiring at the same age as
their male counterparts, this $30 000 difference, multiplied during a 30-year career, would amount to a $900,000 potential difference in lost wages over a lifetime,” the study’s authors wrote. “This pay disparity between men and women in the medical profession has been well established, with studies showing that women earn less independent of rank, clinical hours, research productivity, or training.”

The gap in salary expectations did not extend to the respondents’ career goals. Men and women who responded to the survey expressed ambition to become department chair, division chief or program director at similar rates.

Women, however, were more likely to place importance on practicing in a setting that serves an underserved population. Men, on the other hand, voiced more enthusiasm for working in medical innovation or device development.

**Need to negotiate**

Both male and female respondents to the survey were somewhat pessimistic about their initial salary offer. When asked their feelings on the statement “I believe I will be offered a fair salary without needing to negotiate,” nearly two-thirds disagreed. Three-quarters of respondents also disagreed with the statement, “I believe that I have the tools to successfully negotiate an appropriate salary.”

When breaking down responses by gender, the study finds that women had less enthusiasm for negotiating, with 18.6% of women believing they had the tools to negotiate an appropriate salary compared with 31.7% of men. When asked if they found the concept of negotiating a salary appealing, 21.5% of female respondents said that they agreed with the statement, compared with 34.3% of male respondents.

“These gender differences in approach to salary negotiation can also contribute to a gender pay gap, given that an individual who negotiates for their salary can earn significantly more during the course of their career,” the study’s authors wrote. “Similarly, research looking at women in nonmedical careers has demonstrated that they view salary negotiation less favorably than men and are less likely to ask for what they want.”

**Lifestyle factors**

Women were nearly three times more likely to agree or strongly agree with the statement “I anticipate that I will have a greater responsibility at home than my significant other” than male respondents.
Women surveyed were also less likely to be married, have children or desire children in the future.

The authors pointed to a November 2018 article in *JAMA Surgery* finding that among “female general surgeons who had one or more children during residency, 39% had seriously considered leaving residency and nearly one-third reported they would advise a female medical student against pursuing a career in surgery because of the difficulties of balancing pregnancy and motherhood with training.”