

# Challenges faced by women physicians don't disappear with age

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Challenges faced by younger women physicians do not disappear with age or seniority, according to a recent study, indicating that issues such as balancing family and work responsibilities, combating harassment and bias, and promoting healthy work environments should be addressed by the health care system throughout a woman physician's entire career to prevent and reduce physician burnout and attrition.

Published in the *Journal of Women's Health*, "Issues Faced by Senior Women Physicians: A National Survey," was co-authored by Kim Templeton, MD, professor of orthopaedic surgery at the University of Kansas School of Medicine and Health System, Dr. Anne Walling, professor emerita at the University of Kansas School of Medicine-Wichita, and Kari Nilsen, PhD, research educator and assistant professor of family medicine at the University of Kansas School of Medicine-Wichita. It is the first study to look in-depth at the careers of senior women physicians.

Drs. Templeton and Walling, both AMA members, received a grant from the Joan F. Giambalvo Fund for the Advancement of Women in 2017 to help them complete this research about the concerns and challenges facing female senior physicians. Understanding the concerns of these women could help to improve the work lives of women at all phases of their careers.

"When you're looking at issues that women physicians face today, yes, we need to continue to work on issues of younger women physicians," said Dr. Templeton. "We need to look at childcare and maternity leave, but the thing that's important to realize is that the issues that women face don't go away just because they get further along in their careers and become more experienced or their children get older. They still face very similar issues throughout their careers because women are expected by society to be caretakers no matter their age or occupation."

Nilsen said “it may look different now, but older people are still experiencing some of the same issues that they did before. There are still gender bias and sexism issues, and people are still lonely and experiencing burnout.”

## Professional isolation

The survey—sent electronically to female physicians 60 or older—found that about one-third of respondents reported feeling lonely during late career, and 46% reported feeling that way after retirement. In early career, 49.2% of the current senior female physicians reported professional isolation.

“One of the many concerning areas noted in this study is the high prevalence of loneliness among this group of doctors,” said Dr. Templeton.

“Part of it is the fact that in many specialties, women are a minority and anytime you’re a minority, you are to some degree isolated and don’t feel like you belong,” she said. “In addition, even if you are not a minority in your specialty or department, a woman’s voice is frequently not heard, and that’s hard to overcome.”

Dr. Walling said she had a rough transition to retirement and often felt “very alone and isolated.”

She felt that way because “there were a few of us and then we really had no role models and no concept of where we were going as senior women.” Loneliness is of concern, given the increasing information about its impact on mental and physical health.

## Impact of family responsibilities

Work-life integration for women physicians has traditionally been focused on pregnancy and childcare. However, half of the survey respondents experienced the impact of family responsibilities and work-life issues later in their careers.

“Women are supposed to be the ones who take care of their children and go to the school activities,” Nilsen explained. “While that is changing in the United States, and I think a lot has changed since the ’70s and ’80s, we still do primarily place the caregiver burden on women.”

“We need to make sure that men and women are able to take care of children or take care of their parents or their spouse,” she said, adding that “we do have more of the sandwich generation.”

Read more about the sandwich generation and how this contributes to burnout in women physicians.

This happened to Dr. Walling, who had to help care for her elderly parents in Britain for many years. She used her own sick leave through the Family Leave Act, leaving her without time when she later required surgery.

“When you’re looking at policies to help women in their careers, we can’t stop just with maternity leave and childcare,” said Dr. Templeton. “We have to look at the broader expanse of family leave because women are going to need to take time off to care for family members at some point during their careers.”

## Gender and age discrimination

In early careers, 76% reported gender-based discrimination, 56.7% during mid-career and 35.8% in late career. To add to that, age-based discrimination was also reported in all career stages for women physicians. In senior women physicians, 11.9% reported frequent and 18% occasional age-based discrimination, which included bullying or verbal abuse.

“Women are subject to age bias when they’re younger because they’re thought to be too young to know what they’re doing,” said Dr. Templeton. “And then when they’re older, they’re thought to be too old to keep up with current changes in medicine.” For women, this compounds issues from gender bias.

“A primary driver of burnout is that there is a disconnect between the values and goals of a physician and those of the place or environment in which they work,” she said. “The more disconnected those are, the more burned out people are going to be. Women may be working in an environment in which they or the way they approach patient care aren’t valued or they are subjected to bias or sexual harassment. These stresses are in addition to that of trying to balance work with family responsibilities or other demands in their lives.”

“We don’t want these tens of thousands of younger women physicians to have any impediments,” said Dr. Walling. “We want them and more senior women physicians to flourish. The end part of your career should also be really terrific.”

What we learn from more senior physicians can help inform change to improve the lives and careers of other women at all stages of their careers.

The AMA Women Physicians Section works to increase the number and influence of female physicians in leadership roles. This group also advocates for and advances the understanding of women’s health issues. The AMA Senior Physicians Section provides a way for physicians to remain



active and involved in the Association and medical community. The group supports projects of interest to the senior physician community.