This is the most inclusive, accommodating and equitable time for women in the history of the U.S. medical profession. Yet for all the gains posted by women over the last three-plus decades, the playing field remains uneven. Two preeminent women physicians describe how they overcame the odds to become leaders in a male-dominated profession and outline the work that still needs to be done by, and for, women in medicine.

In a recent Permanente Medicine Podcast episode, Susan R. Bailey, MD, an allergist and immunologist and president of the AMA, and Margaret Ferguson, MD, a pediatric hospitalist and president and executive medical director of the Colorado Permanente Medical Group, shared some of the challenges they faced in striving to become leaders in their fields, as well as advice for young female medical students and physicians looking to build careers as leaders.

Things to keep in mind

“Part of my strategy is to intentionally focus on making equity, inclusion and diversity ‘oxygen’ for our company,” Dr. Ferguson said.

Here is some of the advice that she and Dr. Bailey offer to women entering the medical profession.

Don’t expect it to be easy. Just being a woman can make a physician’s job more difficult.

“The biggest challenge I had was actually being the mom of two young children. I was a single mom,
in private practice, raising two boys for a great chunk of that time,” said Dr. Bailey, the third consecutive woman to serve as president of the AMA. “It was all stuff I wanted to do—nobody made me do any of it—but, boy, was it challenging at times. And I have to confess that I didn't always keep all the balls in the air.”

**Be yourself.** “I went several decades without feeling any discrimination or any great difficulties, really until the last couple of years, when the challenges of leading a complex health system like Kaiser Permanente Colorado hit its peak,” Dr. Ferguson said.

People at first didn’t see her style of leadership—which involved steadiness, amiability and curiosity—as a strength.

“The world is seeing that the way women lead—especially when times are difficult—is very valuable,” she added. “So now I'm grateful that I stuck with it, instead of trying to change how I led just to accommodate what the stereotype of a leader should be.”

**Redefine the culture.** More to the point, pounding the table might have been what staff were used to seeing and hearing when Dr. Ferguson took over, but that wasn't her style.

“Eventually folks understand that you have a method,” she said. “You’re trying to lead with data and rationality and kindness. … When someone asked if I ever had felt gender bias, it could be that that was the first time.”

**Call out inequity.** There is still a pay gap between men and women.

“Women physicians still earn 20%–30% less than their male colleagues overall,” Dr. Bailey said. “We have to show our women physicians that they are valued equal to the men, especially with more data coming along showing that many patients prefer seeing a woman physician. … It’s important for the field of medicine that we make sure that we’ve got plenty of women, and that we take very good care of them.”

**Know what you want—and ask for it.** “I tell students and young physicians to decide for yourself what you really, really want,” Dr. Bailey said. “Nobody can make that decision for you. You really have to decide it for yourself and then just make a plan and go do it.”

Learn more about the AMA Women Physicians Section and its leadership on gender equity, public health and diversity in medicine.

URL: https://www.ama-assn.org/delivering-care/health-equity/5-hard-won-bits-advice-tomorrow-s-women-physician-leaders

Copyright 1995 - 2021 American Medical Association. All rights reserved.