For all the efforts undertaken to achieve gender equity in the medical profession, women physicians continue to experience discrimination, discrepancies and disadvantages at work simply because they are women.

A webinar produced by the AMA Women Physicians Section featured a presentation by Margot Savoy, MD, MPH (@MargotSavoy), senior vice president of education at the American Academy of Family Physicians. She focused on four areas in which women physicians can protect themselves—and each other—while furthering their career goals.

Every September, the AMA celebrates women physicians, residents and medical students during Women in Medicine Month. The pandemic posed another set of challenges for women physicians to surmount. That is why the AMA thanks the women physicians who are tirelessly advancing equity and building on change. This September, the AMA is recognizing the endurance and strength demonstrated by women in medicine through the challenges of the past year while being an advocate and ally.

Don’t wait for an invitation

It’s not uncommon for women physicians to be excluded from meetings that they rightfully belong in. To reinforce this point, Dr. Savoy invoked Rep. Shirley Chisholm, the first Black woman elected to the U.S. Congress and the first woman to seek the Democratic Party’s nomination for president, in 1972.

“If they don’t give you a seat at the table, bring a folding chair,” the Congresswoman, who died in in 2005, is known to have said.

“For me, that is just so par for the course for the way that life feels, particularly being a woman in medicine and particularly a woman in medicine who does leadership education,” Dr. Savoy said. “If
you invite yourself, you don't have to stand in the corner ... just bring your folding chair and pull yourself right up to the table and engage in a conversation with everybody else."

Discover other AMA resources for advancing gender equity in medicine.

**Bring other women with you**

It’s likely that if one woman physician is struggling in a physician practice or health care organization, others are too.

“If you don’t ever look back and grab the folks that are behind you and help pull them up with you ... then you’re just as bad as the people who never looked to include them in the first place ... because you know how hard it was to make that step—to jump into that next level,” Dr. Savoy said.

**Value your voice**

“If you're afraid to speak the things that you're thinking about, to walk through the conversation with somebody else and speak those things into existence, you’re never going to really get anywhere,” Dr. Savoy said.

In other words, courage may be a difficult attribute to develop and sustain, but it’s essential for women physicians today.

“You've got to be able to be brave and be bold,” Dr. Savoy said, “even if it makes you uncomfortable— even if it might make the room uncomfortable.”

The bottom line is you have to think about why “people can hear it better from me,” she added.

**Prioritize your well-being**

Another area data shows gender inequity in medicine is in rates of physician suicidality, Dr. Savoy noted.

A big reason why “physician suicide is so high is because we are really, really bad at protecting ourselves, and that you get indoctrinated early on—you get this idea that you have to give all of you in service of someone else. … You never leave space, time or places to be able to take care of yourself.”
If you’re not physically or emotionally well, you can’t trick yourself into thinking you are, said Dr. Savoy, who serves as the champion for Physician Health First—an AAFP initiative created to help family physicians address burnout and find ways to improve their well-being.

“Protecting yourself is critically important,” Dr. Savoy said. “You have to learn that you don't have to be the one to do all things.”

The AMA has developed engaging, evidence-based CME to help educate physicians, residents and medical students assess the risk factors and warning signs for suicidal ideation or behavior. Meanwhile, an AMA STEPS Forward™ toolkit details effective prevention strategies to identify at-risk physicians and facilitate access to appropriate care.