

Are women surgical interns pestered with inappropriate pages?

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Timothy M. Smith

Contributing News Writer

Women have long faced discrimination in the medical profession, but research into its manifestations and effects has been in short supply. If the U.S. health system is to achieve gender equity, a profound commitment to more study of the matter is needed.

Two new projects are adding to medicine's knowledge of women physicians' experiences. One, at Brigham and Women's Hospital, is evaluating how female surgical residents are affected by interpersonal communication, particularly in the intern year. Another, at The George Washington University School of Medicine and Health Sciences, is looking at xenophobic experiences of Arab women in academic medicine.



From top left: Maram Alkhatib, MD; Kavitha Ranganathan, MD; Zareen Zaidi, MD, PhD; Timothy R. Smith, MD, PhD, MPH; Cierra Harper.

Each project is funded by the Joan F. Giambalvo Fund for the Advancement of Women, which provides scholarships of up to \$10,000 to support research advancing the study of women in the medical profession and strengthening the AMA's ability to identify and address the issues affecting women physicians and medical students, including:

- Leadership training protocols.
- Gender-based physician practice patterns.
- Physician satisfaction or burnout.
- Retention incentives.
- Practice reentry issues.

The scholarship was established by the AMA Women Physicians Section (AMA-WPS) in conjunction with the AMA Foundation. Its first grant was awarded in 2006, and it has made 33 grants to date. The AMA-WPS celebrates women physicians, residents and medical students every September during Women in Medicine Month.

What it's like in surgery

The Brigham and Women's Hospital's project hypothesizes that interpersonal communication "has contributed to the mistreatment of interns during their first year of surgical residency as determined by the quality, quantity and timing of pages between residents" and other health professionals, according to the grant application written by the investigators.

The principal investigator is Kavitha Ranganathan, MD, and her co-principal investigators are Timothy R. Smith, MD, PhD, MPH, and medical student research assistant Cierra N. Harper. They will evaluate paging data from 2014–2022 to determine whether the frequency of inappropriate, unprofessional or negative pages differs by gender, race, ethnicity and surgical subspecialty.

"We will determine the prevalence of challenging interpersonal communication between surgical residents and nonphysician providers stratified by demographic factors and across time," they wrote.

Being foreign and female

Xenophobia—the fear or hatred of strangers or foreigners—has in recent years disproportionately affected people from Arab countries coming to live and work in the U.S. Consider former President Trump's now defunct ban on travel to the U.S. from six Muslim-majority nations, which the AMA opposed.

It's not an abstract issue for the medical profession—it's crucial to maintaining the workforce. International medical graduates now constitute fully one-quarter of U.S. physicians.

"This qualitative phenomenological interpretive research study aims to explore the experiences of first-generation immigrant female Arab physicians about challenges that they have faced in the U.S. academic medical system, through in-depth interviews," wrote the principal investigators, Maram Alkhatib, MD, and Zareen Zaidi, MD, PhD, of The George Washington University.

The results, the physicians noted, could help identify the problems Arab women in academic medicine face. They might also help program directors and faculty affairs leaders develop new administrative tools to support Arab women in medicine.



“In current times, with increasing nationalism,” the authors wrote, “it is particularly important for academic medicine to highlight the impact of xenophobia on women and bring this to the attention of mainstream diversity, equity and inclusion forums.”

Explore the AMA Center for Health Equity and the AMA’s strategic plan to embed racial justice and advance health equity.