



Promoting gender diversity in leadership within medicine with Sandra Fryhofer, MD [Podcast]

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AMA UPDATE



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Featured topic and speakers

September marks the AMA's #WomenInMedicineMonth. In today's AMA Update, Sandra Fryhofer, MD, AMA's liaison to the Advisory Committee on Immunization Practices (ACIP) and a member of ACIP's COVID-19 Vaccine Workgroup, discusses how she leads with purpose—this year's theme. Dr. Fryhofer also serves as chair of the AMA Board of Trustees. AMA Chief Experience Officer Todd Unger hosts.

Celebrate #WIMMonth and get involved.

Speaker

- Sandra Fryhofer, MD, chair, AMA Board of Trustees

Transcript

Unger: Hello and welcome to the AMA Update video and podcast, an ongoing series covering a range of health care topics affecting the lives of physicians and patients. We're wrapping up Women in Medicine Month. And today, we're going to be discussing the importance of having women leaders in medicine and how we can create an environment that supports and encourages more women to take on leadership roles.

I'm joined today by Dr. Sandra Fryhofer, chair of the AMA Board of Trustees, our vaccine subject matter expert and AMA's liaison to ACIP. I'm Todd Unger, AMA's chief experience officer in Chicago. Dr. Fryhofer, welcome back.

Dr. Fryhofer: Thanks for having me, Todd.

Unger: Well, we're going to talk about something different than what we usually do. We're not talking about vaccines today but something equally important. And that is, how do we do a better job of promoting gender diversity in leadership within medicine? You were recently part of a panel discussion that focused on this topic.

And all of the women on that panel, including yourself, talked about the importance of getting that first nudge and taking it seriously when you do. I'd like to start by talking about what your first nudge was and what led you, ultimately, to the path you're on now which is leadership in medicine.

Dr. Fryhofer: Well, Todd, it's sort of an interesting story. My path to being chair of the AMA Board of Trustees began in 1988 in a small meeting room at the Plaza Hotel at the ACP national meeting in New York. ACP, the American College of Physicians, is my specialty society. And the states of Georgia and Florida were having their states' receptions together. And I had seen this meeting listed on the big schedule and thought it might be fun to attend.

Well, almost no one was there for the first half hour except me, my husband and the governor of the Georgia ACP Chapter, Dr. Bob Copeland who's a brilliant cardiologist from LaGrange, Georgia. And needless to say, Dr. Copeland and I had a long time to visit and at the end of that visit, he said, "Sandy, you need to get more involved in ACP." And I said, "I'd love that." And you might say, the rest is history.

He put me on the Women's Committee of the Georgia Chapter, and then he and Dr. Nick Davies, another internist at my hospital who was also active in ACP, helped me get appointed to ACP's National Clinical Practice Subcommittee. Now, at that time, I was the first young physician to be appointed to a national subcommittee.

That exposure and the mentoring from Bob and Nick got me nominated a few years later to the national ACP Board of Regents which is their name for the board of trustees. It was a contested election but I worked the crowd at the annual meeting, as did my mentors, and I was elected. I chaired the ACP's Committee on Women's Health and a few years later, I was nominated to be president of the ACP.

I became president in 2000 and at the time, I was the youngest person and only the second woman to hold that office in ACP's then 85 year history. I attended my first AMA House of Delegates meeting as ACP president-elect designate. And I was hooked. I loved the AMA from that very first meeting.

Unger: I love that story. All those steps and you can kind of trace them back to that kind of nudge. But then it required you to really take the risk and put yourself out there. What's your advice to young women physicians on putting themselves out there, especially to those who might not be used to it, don't have the experience or could struggle with that kind of thing?

Dr. Fryhofer: Well, first, I love to talk to young physicians about their opportunities. Many women are conditioned to not go for something because they don't feel they're 100% qualified or 100% ready. But most women are more qualified than they think. I encourage both—all young physicians to run for positions or seek appointments to appointed positions, to put themselves out there and to do a good job at whatever they take on.

Second, once younger physicians get in a leadership position, I try to counsel them on how to be successful. Just getting the office or council or board position isn't the end of it. I try to advise them on how to be successful on a board or a council by not talking too much or too little. The importance of listening, especially as a new member, and being collegial with other members.

All politics is local. And at the end of the day, you want to do the right thing but you also want people to like working with you. And that's how you advance. And enjoy the journey. Don't get so focused on your next step that you might miss out on other doors that might open along the way.

Unger: Now, you mentioned a couple of your mentors in the story we talked about a few minutes ago. Talk a little bit about the importance of mentors. What have they brought to your experience?

Dr. Fryhofer: Well, Todd, I can't underscore enough the importance of mentors. For me, my mentors were transformative. Without Dr. Copeland's taking me under his wing at the reception in New York, that might well have been the end of my story in organized medicine. Who knows? Without his and Dr. Davies advocating to get me on a national subcommittee and then get me nominated to the board, I would never have been on the board or had the opportunity to be ACP president.

And without that, I may have never have been an ACP delegate to the AMA and wouldn't be here today as chair of the AMA Board of Trustees. Those were ACP mentors but I've had tremendous mentors in the AMA, Bill Golden, who chairs our ACP delegation to the AMA, Chuck Cutler, my campaign manager. All these men were and still are HeForShe champions.

There are a tremendous early generation of women leaders of the ACP delegation—Mary Herald, Lynne Kirk and Donna Sweet also helped lift me up in the AMA. The next generation of women titans, like Susan Hingle, Sue Bornstein, Jacqueline Fincher and Darilyn Moyer, also Bill Clark who chairs Georgia's delegation to the AMA and Stephen Imbeau from South Carolina who's so active in the AMA southeastern delegation. Dr. Clark and Dr. Imbeau are also powerful HeForShes.

And I try to carry forward my mentoring experience. Women in Medicine Month is a special time at which we honor the tremendous contributions of women in medicine and science across generations. But it's also a time to give a special thanks to physicians and others who've offered their time, wisdom and support to help women physicians advance in their careers. And we salute all of you.

Unger: That's great. It's interesting. When you talk about mentoring and you talk about that nudge and you talk about timing, you've also said, there are no—there's no perfect time to act on those opportunities. You have to take them when they come. Tell us more about what that's meant in your life.

Dr. Fryhofer: Well, it's truly so important to embrace opportunities given to you. And you have to be prepared and do a good job when they come your way. You have to show up. You have to put yourself out there. You have to embrace the opportunities you're given. You have to be prepared and do a good job with whatever you're assigned every time. You also have to grab the brass ring when it comes by, even if it's not the most convenient or optimal time in your life. Because it often never comes around again.

Sometimes opportunities don't come at the best possible time. We had small children when I got on the ACP Board of Regents but my husband was very supportive. And we carried those little babies with us to Philadelphia every three months for board meetings. And if I had passed on that opportunity, I wouldn't be sitting here as chair of the AMA Board of Trustees today. That said, we also have to make it easier for women to step up and feel like they can take on those opportunities when they do come their way.

Unger: Let's talk a little bit more about that, because there are challenges that, in particular, that women physician leaders face. How do we create that kind of environment that you're talking about right now that supports and nurtures women leaders in medicine?

Dr. Fryhofer: I began in practice in the mid 1980s and this was a time of significant disparities for women. When I started at my hospital, Piedmont Hospital, there were very few women physicians there. This was an elite hospital where the heads of Atlanta's major corporations and all the old Atlanta families all wanted to be treated. And as you might imagine, it was dominated by old, white, male doctors. And when I got introduced and spoke at grand rounds or another—some other solemn context, there were usually comments about my appearance.

Now, they were all positive and I'm sure these gentlemen meant well. But they didn't talk like that when they introduced each other as giants in medicine. I didn't let that faze me and tried to keep just doing a good job. And today, much of that has improved but there's still much to be done. Also seeing is believing. Seeing women in major leadership roles in organized medicine conditions everyone observing and interacting with them to see women as equals.

This goes back to the story I told about older male doctors at my hospital in the mid '80s commenting on my appearance and not my intellect or my work. You see, they weren't conditioned to see women as leaders in medicine. At that point, all the prior ACP presidents looked like them, older white males. In the mid-1980s, the ACP leadership was made up of older white men who were deans or chairs of medicine in major academic institutions or major medical centers. They had to be taught.

They needed to be shown how women can be successfully—can successfully lead in medicine. That promotes gender equity. Now in the ACP and in AMA, we've had many women leaders in governance and now in management. For example, ACP has Darilyn Moyer as its EVP CEO. The American College of Surgeons has Patricia Turner as its executive director. The more Darilyns and Patricias we have, the better for gender equity in medicine.

Unger: So how do we get more women in leadership roles?

Dr. Fryhofer: Well, in terms of strategies that can help put women in leadership roles, first, we have to help them be able to be present, to show up. Employers need to be flexible and give women the time and space to pursue leadership roles. Five days once a year for one conference isn't enough. It's very important to be inclusive, not just in words but in actions. Women leaders need to encourage other women to run for office and seek appointments.

We need to campaign for them, show them how to succeed and help them get elected or appointed. We also need to amplify their voice. When women make the decision to join us, it's on all of us to create an environment that's supportive and welcoming for them. Now, this happens in big ways and small ways.

Too often, I'm in meetings where a woman will make a really excellent point only to have a man—and it's almost always a man—later on make the same point and get a bigger reaction. We, as women leaders, can't let that happen. Finally, we must be deliberate about who's missing from the conversation and make efforts to include them by reaching out and helping them to be seen and to be heard.

Unger: So I have a question for you about the last few years, because we've seen, in particular, some real challenges come out of the pandemic. In your view, when you kind of look at the last two years, what are those kind of unique challenges that really were affected by this dramatic event for all of us?

Dr. Fryhofer: This year, in particular, it's important to recognize the impact that COVID's had on everyone, especially women physicians. Burnout was a challenge for physicians before the pandemic. COVID's made it even worse. A new study just published in Mayo Clinic Proceedings says, as many as 63% of physicians experienced burnout in 2021.

This is the highest amount of burnout in a decade of recurring studies. This study also showed women physicians have been more affected by burnout during COVID than men. Women suffered higher levels of stress, anxiety and depression as they juggled work and home responsibilities in this dangerous and somewhat disruptive new environment. Not surprisingly, burnout is one of the leading factors in why as many as one in five physicians say they plan to cut back on their clinical hours in the next year or leave their practices altogether.

We're now at a time when more and more women are entering the field of medicine. For the third year in a row, women have made up the majority of those applying to medical school as well as total enrolled students. We have to fix this. It's on all of us to make it easier for women to find work life balance and make it easier for them to step up and take on leadership roles. We have to support women if we want to keep them in the workforce, and AMA is committed to doing just that.

Unger: Well, tell us a little bit about how the AMA is working to address these challenges for women physicians.

Dr. Fryhofer: Our women physicians section, WPS, has more than 100,000 members. And it provides a forum for networking and mentoring that can open pathways for women physicians and aspiring physicians to care for patients and become leaders in medicine. WPS also strongly advocates within our AMA House of Delegates for policies and initiatives that provide women with the resources and opportunities to advance professionally with minimal disruption at home.

A perfect example is a recent resolution specifically addressing maternal discrimination in health care and called for broader support for flexible family leave. A recent JAMA Network Open article offering working women childcare opportunities significantly decreases child care stress and increases professional satisfaction. So this is what all of us should be striving to achieve. AMA is committed to helping create a health system that better supports women physicians through practice efficiency, equal pay opportunities, and greater professional flexibility.

Unger: Well, Dr. Fryhofer, it's been great to have you here to kind of close Women in Medicine Month. There have been so many activities throughout the month just demonstrating AMA's commitment to women physicians. Any final thoughts on how we continue from here?

Dr. Fryhofer: Reducing professional burnout is also a core component of our AMA Recovery Plan for America's Physicians. And it's impossible to talk about the challenges of the last two years without acknowledging the especially heavy burdens placed on our women colleagues in medicine. They deserve more than our respect this month. They deserve our best efforts to fix the working environment that has placed so much on their shoulders.

Unger: Well, thank you so much for being here, Dr. Fryhofer. And I encourage everyone to check out AMA's Recovery Plan for America's Physicians on the AMA site. It's been a great month celebrating women physicians and recognizing all of their accomplishments in medicine. That wraps up today's episode. We'll be back soon with another segment. In the meantime, for all of our videos and podcasts, you can check out [ama-assn.org/podcasts](https://www.ama-assn.org/podcasts). Thanks for joining us today, and please take care.

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31

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