

AMERICAN MEDICAL ASSOCIATION WOMEN PHYSICIANS SECTION

Resolution 2
(I-23)

Introduced by: Varudhini Reddy, MD, Ross University School of Medicine; Sara Kazyak,
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Subject: Increasing Practice Viability for Female Physicians through Increasing
Employer and Employee Awareness of Protected Leave Policies

Whereas, “Women physicians are significantly less likely to work full time than their male physician counterparts, with 77.4% of female physicians working full time within six years of completing their medical training, compared to 96.4% of male physicians”⁶; and

Whereas, “After various characteristics were controlled for, including professional work hours and spousal employment status, married or partnered female physician-researchers with children reported spending 8.5 hours per week more on parenting or domestic activities than their male counterparts”⁵; and

Whereas, According to the U.S. Department of Labor, the Family Medical Leave Act (FMLA) entitles eligible employees of covered employers to take unpaid, job-protected leave for specified family and medical reasons with continuation of group health insurance coverage under the same terms and conditions as if the employee had not taken leave³; and

Whereas, Based on findings of the 2018 FMLA Employee survey, 24% of women reported a need for leave compared to men and took leave more often (18% versus 14%)⁴; and

Whereas, Additional findings from the 2018 FMLA Employee survey indicated that “substantially fewer women than men receive full pay (32 percent versus 55 percent) while on leave, and more receive no pay (41% versus 25%)”. Survey findings also noted these differences were not exclusively determined by women taking longer leaves⁴; and

Whereas, “Overall, 7% of employees surveyed reported needing but not taking leave (‘unmet need’) for a qualifying FMLA reason in the previous 12 months”⁴; and

Whereas, Beginning July 1, 2022, the ACGME required all Accreditation Council for Graduate Medical Education-accredited Programs to offer six weeks of paid leave to residents and fellows for medical, parental and caregiver leave, “for qualifying reasons that are consistent with applicable laws at least once and at any time during an ACGME-accredited program”¹; and

Whereas, In July 2021, all American Board of Medical Specialties Member Boards with training programs of two or more years duration allowed for a minimum of six weeks away during training for purposes of parental, caregiver, and medical leave, without exhausting time allowed for vacation or sick leave nor requiring an extension in training²; therefore be it

- 1 RESOLVED, That our AMA oppose any discrimination related to physicians taking protected
2 leave during training and/or medical practice for medical, religious, and/or family reasons
3 (Directive to Take Action); and be it further
4
5 RESOLVED, That our AMA will encourage relevant stakeholders to survey physicians and
6 medical students who have taken family leave, in an effort to learn about the experiences of
7 various demographic groups and identify potential disparities in career progression trends.
8 (Directive to Take Action)

Fiscal Note: TBD

Relevant AMA Policy:

1. [FMLA Equivalence H-270.951](#)
2. [Policies for Parental, Family and Medical Necessity Leave H-405.960](#)
3. [Compassionate Leave for Medical Students and Physicians H-405.947](#)

References:

1. ACGME Institutional Requirements. 2021-2022. Copyright 2021 Accreditation Council for Graduate Medical Education (ACGME) ACGME-approved focused revision: September 26, 2021; effective July 1, 2022. Last accessed: 31 August 2023. [ACGME Institutional Requirements](#)
2. "ABMS Announces Progressive Leave Policy for Residents and Fellows." 13 July 2020. Last accessed: 31 August 2023. Copyright 2023 American Board of Medical Specialties. [ABMS Announces Progressive Leave Policy for Residents and Fellows](#)
3. "Family and Medical Leave Act." Wage and Hour Division. Copyright 2023 U.S. Department of Labor. dol.gov/agencies/whd/fmla.
4. Herr, J., Roy, R., & Klerman, J. A. (2020). Gender Differences in Needing and Taking Leave. Produced for the U.S. Department of Labor, Chief Evaluation Office. Rockville, MD: Abt Associates Inc. [Gender Differences in Needing and Taking Leave](#)
5. Jolly S, Griffith KA, DeCastro R, Stewart A, Ubel P, Jagsi R. Gender differences in time spent on parenting and domestic responsibilities by high-achieving young physician-researchers. *Ann Intern Med*. 2014 Mar 4;160(5):344-53. doi: 10.7326/M13-0974. PMID: 24737273; PMCID: PMC4131769.
6. Paturel, Amy. "Why Women Leave Medicine." AAMC News. Association of American Medical Colleges. Copyright 2019. Last accessed: August 31, 2023. <https://www.aamc.org/news/why-women-leave-medicine>