Whereas, Studies show that women carry more responsibility than their male counterparts for personal and family life\(^1,3\), and

Whereas, A study following a cohort of faculty from the 1995 National Faculty Survey through 17 years showed persistent gender disparities in rank, retention, and leadership positions,\(^2\) and

Whereas, Prior to the pandemic, due to the culture of medicine, many female physicians made adjustments in their professional roles, including “part-time status, despite the known limitations on professional progression, career advancement, and economic potential. These adjustments further propagate gender inequities and the persistent compensation gap female physicians experience,”\(^3\) and

Whereas, The COVID-19 pandemic is requiring additional adjustments to the professional lives of physicians and many of these adjustments will be made disproportionately by female physicians due to childcare and pregnancy,\(^4\) and

Whereas, Since the pandemic, there has been a decrease in the percentage of physicians working full-time, a rise in the percentage who were laid off, and an increase in changes in physicians' usual activities. The decline in the percentage of parents with preschool-aged children among only female physicians may suggest a disproportionate uptake of childcare responsibilities among female physicians,\(^5\) and

Whereas, In a recent survey, female scientists reported a decline in research time relative to male colleagues during the COVID-19 pandemic, but the most significant factor was having a young dependent less than 6 years of age,\(^6\) and

Whereas, One in five physicians experienced a financial cut or furlough because of the pandemic, but there is limited data on how these cuts and furloughs have impacted female physicians specifically\(^7\); therefore, be it

RESOLVED, That our AMA advocate for research on physician-specific data analyzing changes in work patterns and employment outcomes among female physicians during the pandemic including, but not limited to, understanding potential gaps in equity, indications for terminations and/or furloughs, gender differences in those who had unpaid additional work hours, and issues related to intersectionality. (Directive to Take Action); and be it further

RESOLVED, That our AMA collaborates with relevant organizations to evaluate obstacles affecting female physicians and medical students during the pandemic. (Directive to Take Action)

Fiscal note: Modest - between $1,000 - $5,000
Received: 8/29/2021

Relevant AMA Policy:
1. Principles for Advancing Gender Equity in Medicine H-65.961
2. AMA Principles for Physician Employment H-225.950

References: