

TOWARDS A WOMEN ORIENTED MEDICINE



WOMEN DOCTORS IN LEADERSHIP

João de Deus

FEMS President



WOMEN LEADERS



CEO

WOMAN DOCTOR
ANESTHESIOLOGIST



CLINICAL DIRECTOR

PNEUMOLOGIST



CENTRO HOSPITALAR LISBOA OCIDENTAL

991 DOCTORS

395 MALE DOCTORS (39,8%)

596 FEMALE DOCTORS (60,2%)

39 HEADS OF DEPARTMENT



39 HEADS OF DEPARTMENT

6 WOMEN (15,3%)



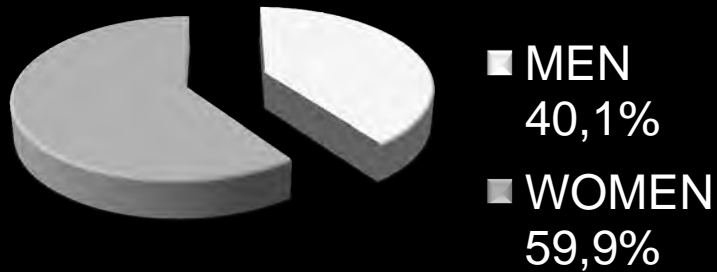
THE PICTURE



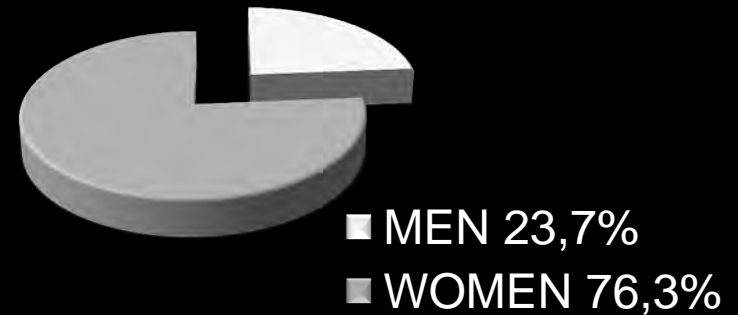
FEMINIZATION

THE PICTURE

PUBLIC ADMINISTRATION



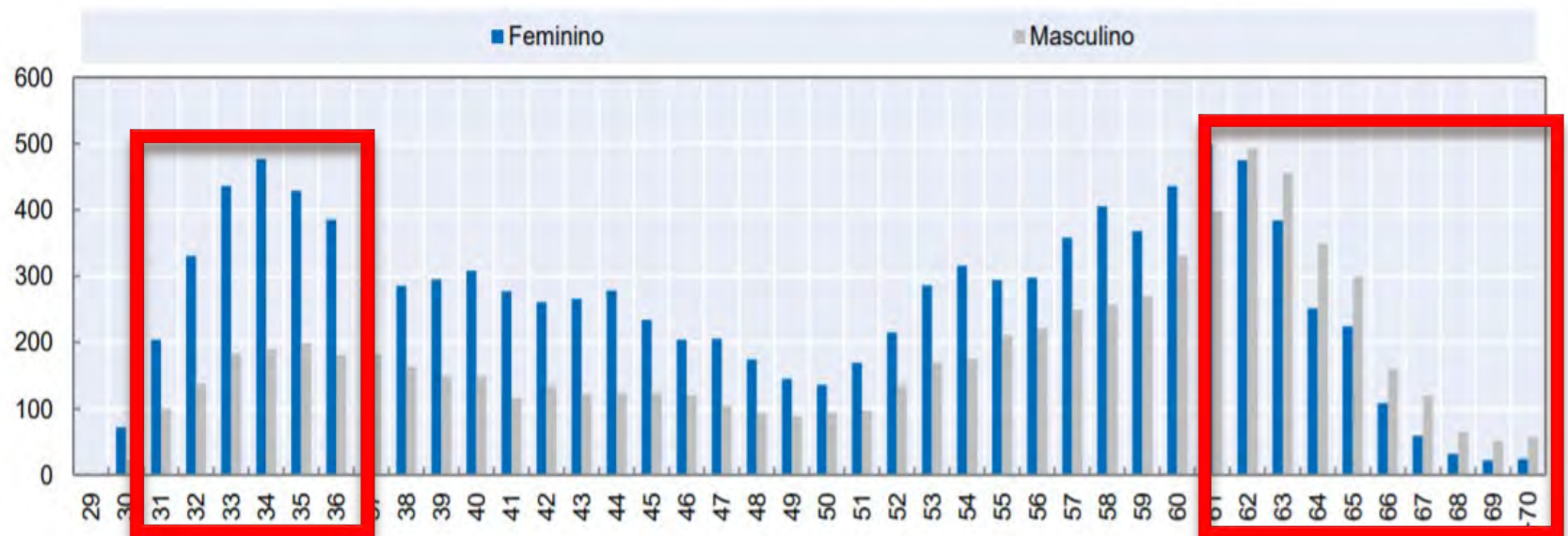
HEALTH



FEMINIZATION

THE PICTURE

Gráfico 45. Distribuição dos médicos sem internos por idade e género



Nota: Não contempla as entidades em regime de PPP

Fonte: Dados provenientes do RHV

FEMINIZATION

CEO



President & CEO

Dr. Kristi Clark



HEALTHTEXAS

PRIMARY CARE DOCTORS



18%

CLINICAL DIRECTOR

25%



DEANS AND DEPARTMENTS CHAIRS

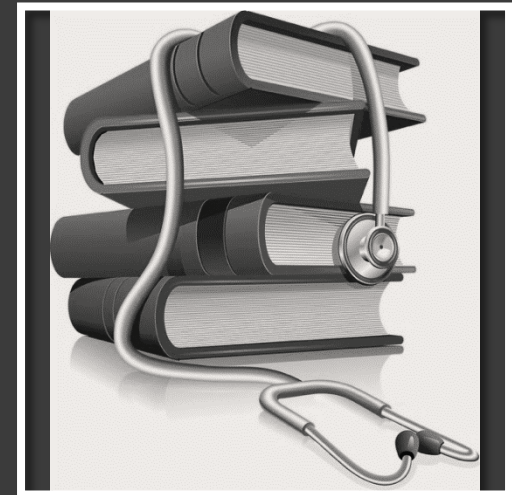
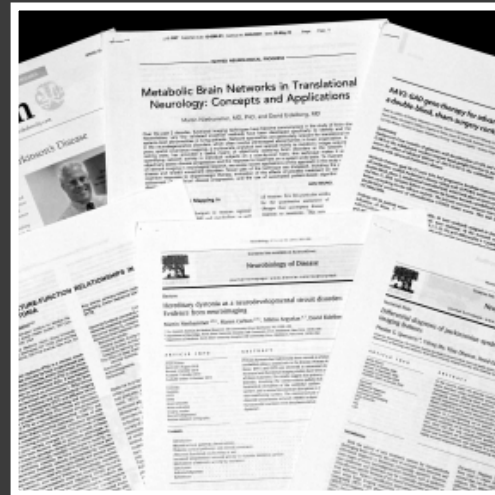
16%



Elizabeth D. Hay



Lynne M. Reid



PUBLICATIONS

SENIOR AUTHORSHIP – 14%

Editor Chief – 7%

#LancetWomen Twitter Chat
Tuesday Dec 5, 1700 h GMT/1200 h EST



Jocalyn Clark
Executive Editor
@jocalynclark



Richard Horton
Editor-in-Chief
@richardhorton1



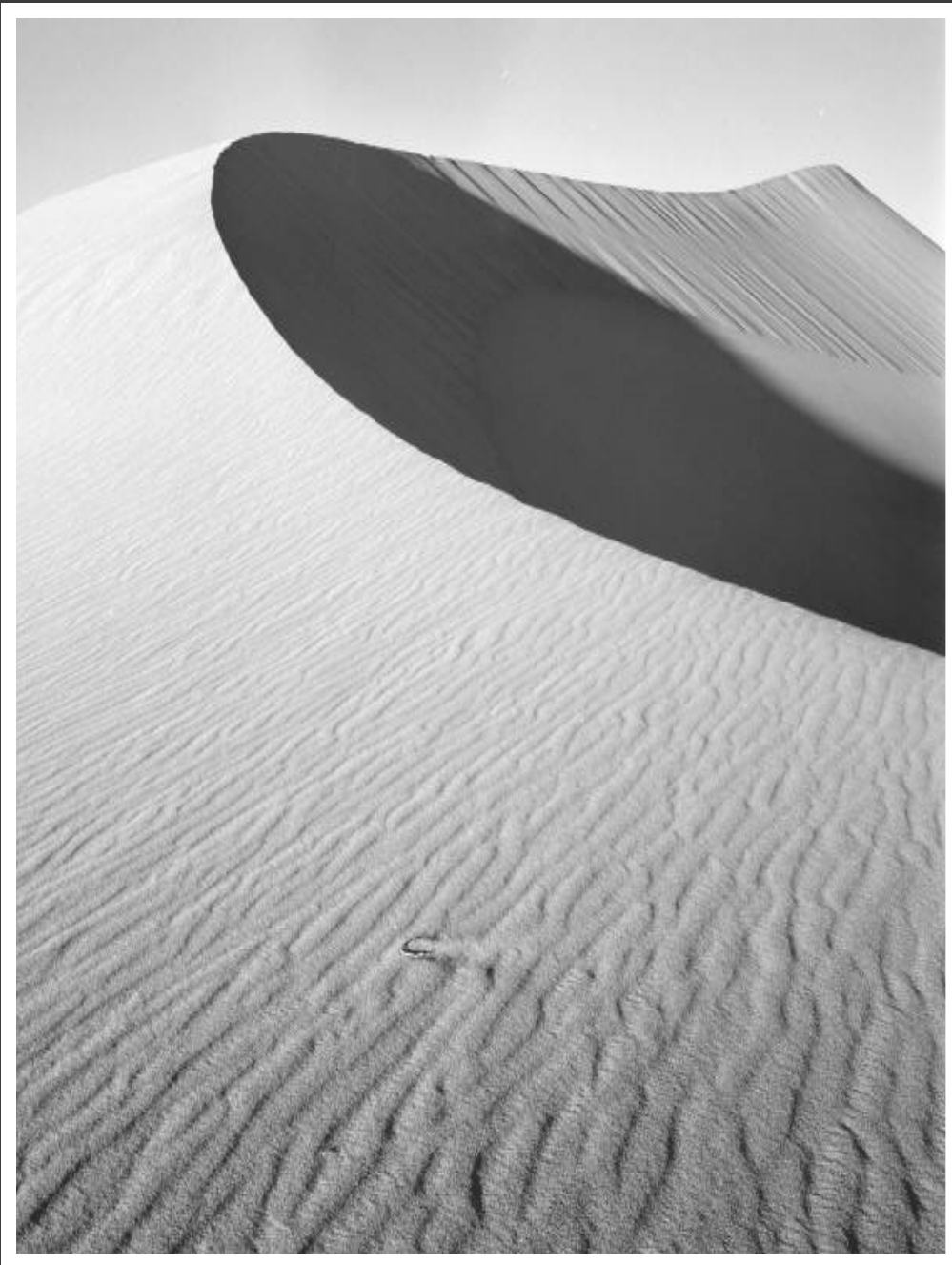
Liz Zuccala
Senior Editor
@DrZucc

THE LANCET

The best science for better lives



AT THE SAME RATE



WHY ?



IMPLICIT GENDER AND MATERNAL BIAS



FAMILY DUTIES



SEXUAL HARASSEMENT AT
WORKPLACE

Table 1. Self-Reported Experiences of Gender Bias, Advantage, and Sexual Harassment of R08 and R25 Career Development Awardees

	Reporting No. (%) [95% CI]		Estimate Difference, % (95% CI)	
	Women (n = 493)	Men (n = 573)	Women vs Men	P Value ^a
Respondents who perceived gender-specific bias in the academic environment ^b	343 (69.6) [65.3-73.6]	125 (21.8) [18.5-25.4]	48.0 (42.7-53.3)	<.001
Respondents who reported they personally experienced gender bias in professional advancement ^c	327 (66.3) [62.0-70.5]	56 (9.8) [7.5-12.5]	57.0 (52.1-61.8)	<.001
Respondents who reported they personally experienced gender advantage in professional advancement ^d	129 (26.2) [22.3-30.3]	118 (20.6) [17.4-24.1]	5.6 (0.5-10.8)	.08
Respondents who reported they personally experienced harassment ^e	150 (30.4) [26.4-34.7]	24 (4.2) [2.7-6.2]	26.5 (22.1-30.9)	<.001

^a P value adjusting for specialty, race (majority vs minority), and years in faculty position.

^b This item asked, "Do you perceive any gender-specific biases or obstacles to the career success or satisfaction of faculty by gender in your work environment (ranging from 1 [no, never] to 5 [yes, frequently])?" Responses of 3, 4, and 5 were considered affirmative.

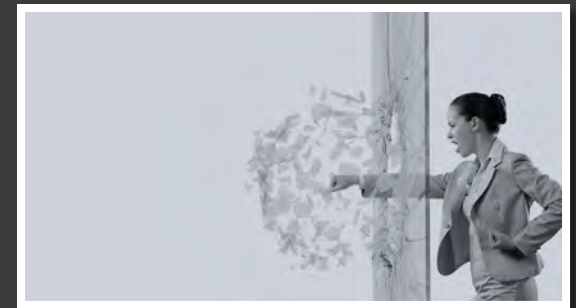
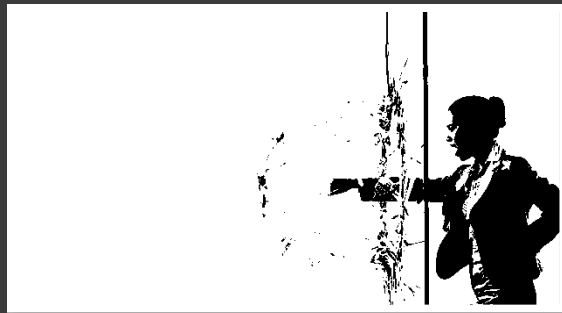
^c This item asked, "In your professional career, have you ever been left out of opportunities for professional advancement based on gender

(1, yes; 2, probably; 3, possibly; 4, probably not; 5, no)?" Responses of 1, 2, and 3 were considered affirmative.

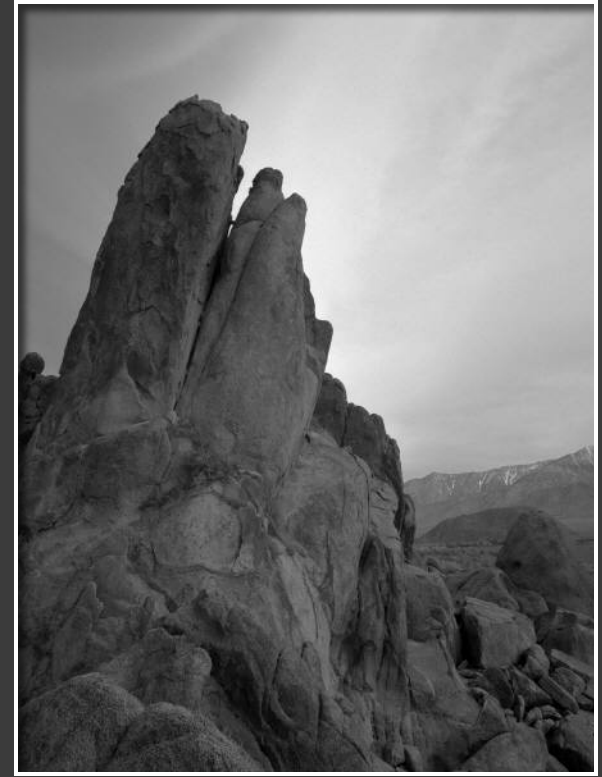
^d This item asked, "In your professional career, have you had increased opportunities for professional advancement based on gender (1, yes; 2, probably; 3, possibly; 4, probably not; 5, no)?" Responses of 1, 2, and 3 were considered affirmative.

^e This item asked, "In your professional career, have you encountered unwanted sexual comments, attention, or advances by a superior or colleague (yes or no)?" Responses of "yes" were considered affirmative.

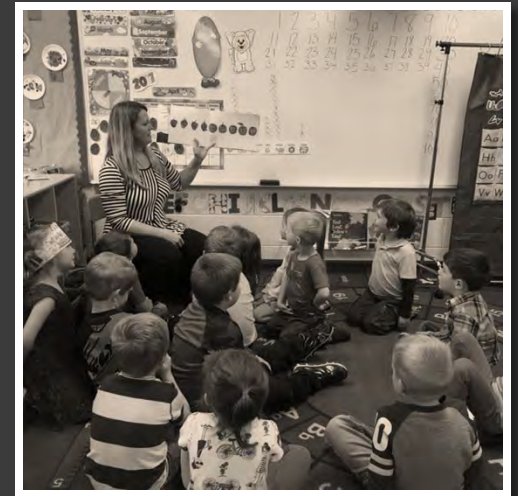
SYSTEM-WIDE POLICIES THAT INCREASE GENDER INEQUALITIES



BARRIERS



WHAT CAN BE DONE ?



FAMILY FRIENDLY POLICIES



SEXUAL HARASSMENT

sexual harassment is...

is behavior that is not only unwelcome, but in most cases repeated

means bothering someone in a sexual way

is defined from the victim's point of view, not the harasser's

the goal is not sexual pleasure, but gaining power over another

... against the law

40% of female workers claimed to have been harassed at work, as opposed to 17% of men.

60% of targets TAKE NO ACTION.

DO

- USE AN ASSERTIVE METHOD CALLED THE "BROKEN RECORD TECHNIQUE"
- STATE YOUR POSITION AND KEEP REPEAT IT
- BE SPECIFIC
- BE CONSISTENT, DIRECT AND COMBINED

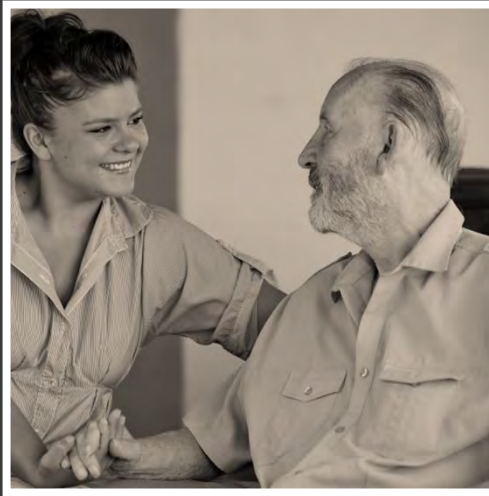
DON'T

- DEBATE OR ARGUE WITH THE HARASSER
- ASSUME ANY RESPONSIBILITY OF THE SITUATION
- ANALYZE THE HARASSER'S PROBLEMS
- REFER TO THE HARASSER'S PERSONAL LIFE

By Heidi Lee, Executive Law Firm

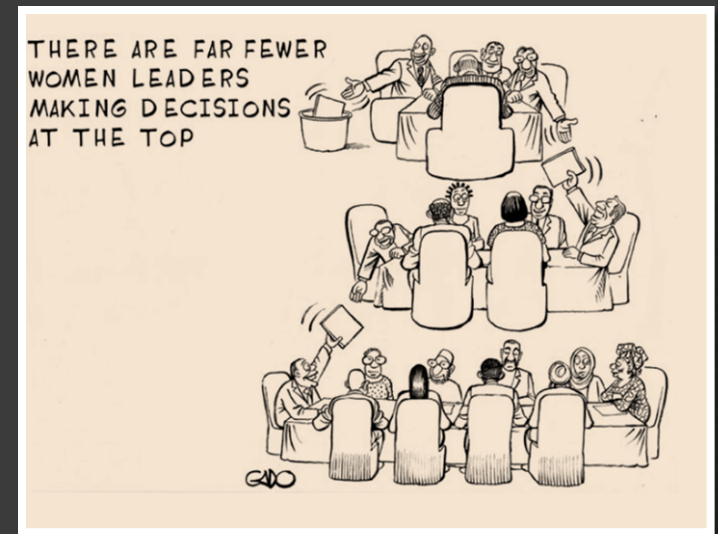


MITIGATE BIAS, DISCRIMINATION AND SEXUAL HARASSMENT

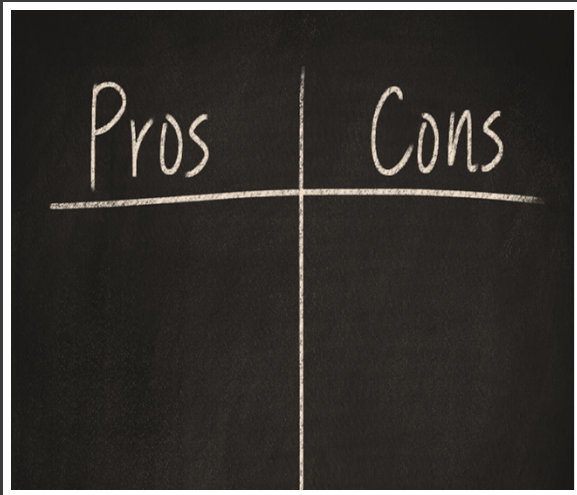


SUPPORT WHEN WOMEN ARE CARING
FOR CHILDREN, ELDERLY OR ILL FAMILY
MEMBERS

According to the Economic and Social Committee, the increase in the female presence in political and decision-making positions has proved to be of benefit to companies in their performance.



WOMEN DOCTORS IN LEADERSHIP PROS AND CONS

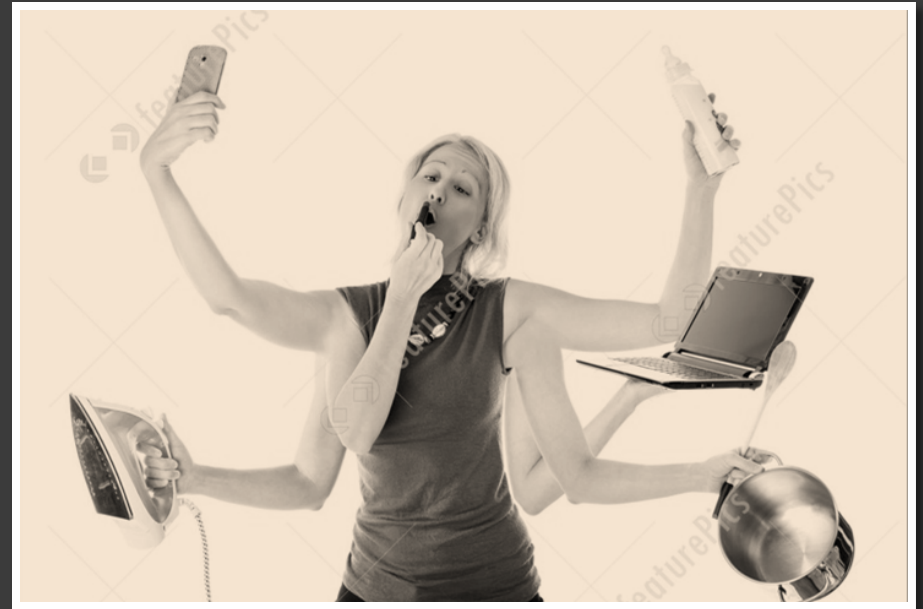


(<https://www.tandfonline.com/doi/full/10.1080/23288604.2016.1225471>)

(<http://www.hrinasia.com/general/pros-and-cons-of-female-leaders-at-work/>)

WOMEN DOCTORS IN LEADERSHIP PROS

Women are commonly skilled at multitasking and managing the household fronts too, include children. A female boss can prioritize issues and manage situations at work with the same dedication as at home.



WOMEN DOCTORS IN LEADERSHIP PROS

Female bosses are generally considered to be more friendly, empathetic and better communicators. They can build effective employee relationships with colleagues, subordinates and even the top management. It doesn't matter to a woman leader, if you are a woman or man employee seated at the other end of the table, female bosses are good listeners and effective communicators to help resolve employee's personal concerns with understanding and empathy.



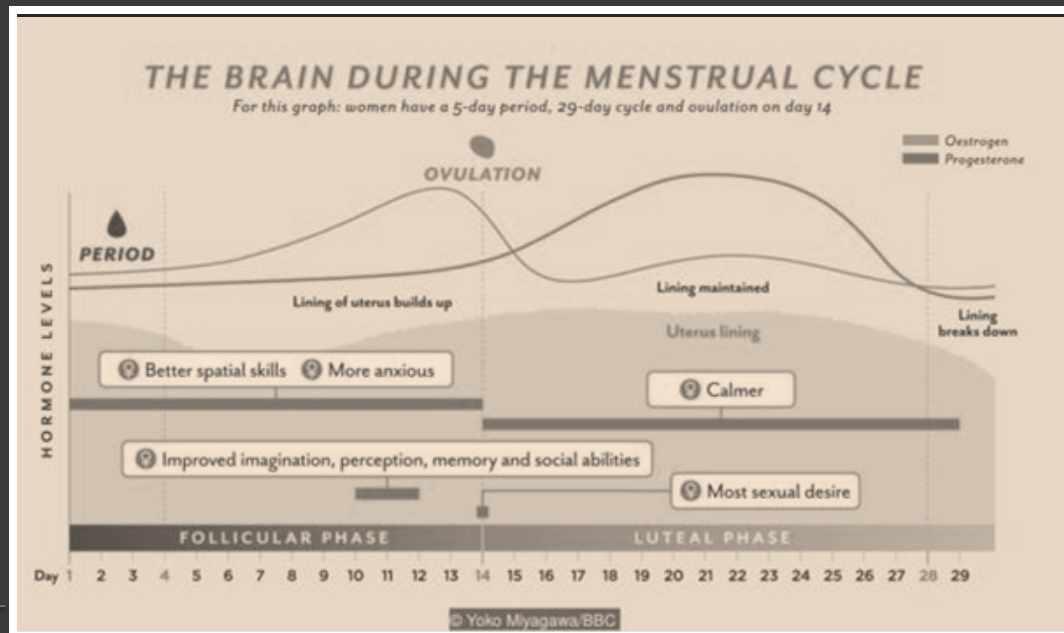
WOMEN DOCTORS IN LEADERSHIP PROS

Women leaders understand and acknowledge their star performers' efforts. They notice smart workers and reward them accordingly. You do not need to sneak your way, to butter up your bosses to get noticed, heard or feel valued for your contributions.



WOMEN DOCTORS IN LEADERSHIP CONS

There have been discussions about whether or not women's behavior in the workplace is affected by the hormonal changes. Actually, both men and women have equal hormonal challenges that sometimes impact their decision making skills and attitudes towards colleagues and subordinates at work. Both can be tired, burnt out, frustrated and stressed. Do really women tend to allow hormonal problems to reflect in their moods and behaviours at work ?



WOMEN DOCTORS IN LEADERSHIP CONS

Women face great hurdles to climb up the career ladders and they may pull other competitive women down to retain the top most secured position in a job.



WOMEN DOCTORS IN LEADERSHIP CONS

Women bosses do depict tendencies of being jealous and backbiting over time.



WOMEN DOCTORS IN LEADERSHIP

COMPETENCE AND SKILL

EQUAL OPPORTUNITIES

CREATE CONDITIONS



THANK YOU

