History of Women in Medicine: A Closer Look into the Transformation of the Female Physician Workforce

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“If society will not admit of woman's free development, then society must be remodeled.”

– Elizabeth Blackwell, MD
Abstract

The practice of medicine has been a heavily male-dominated field throughout most of history despite an early acceptance of female medical education dating back to the ancient times. This movement quickly faded as more women began to face gender discrimination within the profession. The late twentieth century, however, marked a renewed shift in the reform for women’s rights and shaped the advancement in medical education for females. This paper will examine the transformation of the female physician workforce over time by closely reviewing the history of medical training for women, the significant pioneers in the campaign for gender equality, and the characteristics and patient expectations that define the female physician in today’s society.
Introduction

Dating back to the earliest of civilizations, women mostly served as midwives, healers and nurses. However, several historical records portray early female physicians such as Merit Ptah, Metrodora and Agnodice. Centuries later, pioneers such as Dr. Elizabeth Blackwell made significant strides in medical education and clinical training for women. By 1900, only 5.5% of females were entering medical school although the number of women’s medical colleges was increasing. The late 20th century marked the revival of feminism and the passage of Title IX of the Higher Education Act Amendments, prohibiting educational institutions from discriminating on the basis of sex. By 1975, the number of female students matriculating into medical school had nearly quadrupled from the quarter century prior. In present day, with a steadily growing female physician population, studies show that the communication styles and behaviors of female physicians parallel patients’ expectations of medical care more often than their male counterparts. However, these innate characteristics are also contributing factors in the gender disparity that exists among the profession.
Thesis Statement

Studies have shown that the communication styles and behaviors of female physicians parallel patients’ expectations of medical care more often than their male counterparts; however, these innate characteristics are also contributing factors in the gender disparity that exists among the profession.
Discussion

- Women are viewed as more practiced in decoding emotions and nonverbal cues from an earlier age. They face stronger social expectations to be empathetic, and spend an average of 2 minutes longer with each patient.

- Women in primary care engage in significantly “more active partnership behaviors, positive talk, psychosocial counseling, psychosocial question asking, and emotionally focused talk.” Their communication skills are correlated with positive health outcomes by “exerting influence on emotional health, symptom resolution, functional and physiologic status, and pain control.”

- Studies have shown that all physicians, regardless of gender, can be molded to improve skills in meaningful ways through self-awareness, self-monitoring, and training.

- Social and cultural changes in education, work, and family life influence the gender inequality seen in the professional setting.
Conclusion

- The concept of the “female physician” has been transformed over the centuries. Women have evolved from secondary roles such as midwives and nurses and taken on a more powerful role in today’s medical realm.

- The number of female medical students in 2014 continued to increase, yet still remained less than half the total. Moreover, females comprised 36% of the physician workforce in 2015, highlighting the discrepancy between the workforce composition and national population composition.

- Several studies have shown that women complement patient care through communication styles that are more engaging in psychosocial issues, patient counseling, emotionally-centered talk and therapeutic discussion.

- Differences still persist in the socioeconomic practice patterns of male and female physicians and challenges remain in achieving professional visibility while maintaining a balance between family and career responsibilities.
References


References