## Increasing Number of Women in Family Practice: An Overdue Trend

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The last ten years have seen a rapid increase in the number of women entering US medical schools. Between 1930 and 1965, the proportion of women within medical school enrollments in this country increased slowly from only four to nine percent. Since 1970, this proportion has increased sharply to a current level of about 25 percent.1 These changes are apparently related to changes in societal attitudes and in women's perceptions of career opportunities as well as the enactment of federal legislation prohibiting sex discrimination in all federally funded health training programs. In 1970, women physicians represented only seven percent of total active physicians in the United States. By 1990, it is projected that they will more than double in number to almost 100,000 (more than 16 percent of the total estimated physician supply).2

Striking changes have also taken place in recent years in the patterns of specialty choice among women physicians. In 1971, for example, women represented 21 percent of pediatricians, 19 percent of public health physicians, 14 percent of anesthesiologists, and 13 percent of psychiatrists. With the exception of these specialties and internal

medicine, women tended to avoid the other specialties: they represented only 4 percent of general/family physicians, 1 percent of general surgeons, and 0.5 percent of orthopedists. 3 There is some evidence that past patterns of specialty choice are influenced by stereotypic thinking concerning the believed greater suitability of women physicians in specialties involving more limited time commitments and requiring qualities and aptitudes commonly attributed to women (eg, pediatrics and psychiatry).4 By 1976, however, major shifts had occurred with respect to the relative proportions of women enrolled in the various specialty residencies. In that year, women residents represented 21 percent of internal medicine residents and 10 percent of general surgery residents, but only 10 percent of psychiatry residents and 2 percent of anesthesiology residents.5 The proportion of women selecting family practice residencies has steadily increased to the present level of almost 17 percent of first year resident enrollment.

In addition to the recent breakdown of traditional patterns of specialty choice among women physicians, there is also evidence suggesting a

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trend toward less sex stereotyping in the practice patterns of women physicians. Comparative studies over the past 20 to 50 years of medical practice have shown that women physicians then practiced fewer years and shorter hours than men physicians. 6.7 More recent studies, however, are now demonstrating convergence of the work weeks of women and men physicians and greater continuity of practice years among women physicians. In 1974, for example, the percentage of active women and men physicians was equivalent (about 87 percent).8 Based on her studies of the practice patterns of women physicians, Heins maintains that differences in productivity between women and men physicians are due mainly to the temporary time taken off from medical practice for childbearing and child rearing. She has observed a disinclination to retire among women physicians, and suggests that this, combined with the longer life span of women, makes it likely that women physicians may become as productive as men physicians over their practice careers.9

It is interesting, but by no means surprising, that similar personality traits have been demonstrated between men and women medical students opting for family practice, which in turn are somewhat different from those of medical students selecting other specialties. In an overall study of personality differences between women and men medical students, Cartwright has found that women are more sensitive to relationship values and more accepting of feelings, and also place greater value on independence and individuality than their male colleagues.10 In another recent study in two medical schools of sex differences in specialty choice and personality traits, family practice was the only specialty in which women and men choosing the same specialty appeared to be quite similar in personality characteristics.11

Women family physicians have much to contribute to the developing specialty of family practice. Their greater numbers and active involvement in this field are welcomed and long overdue.

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