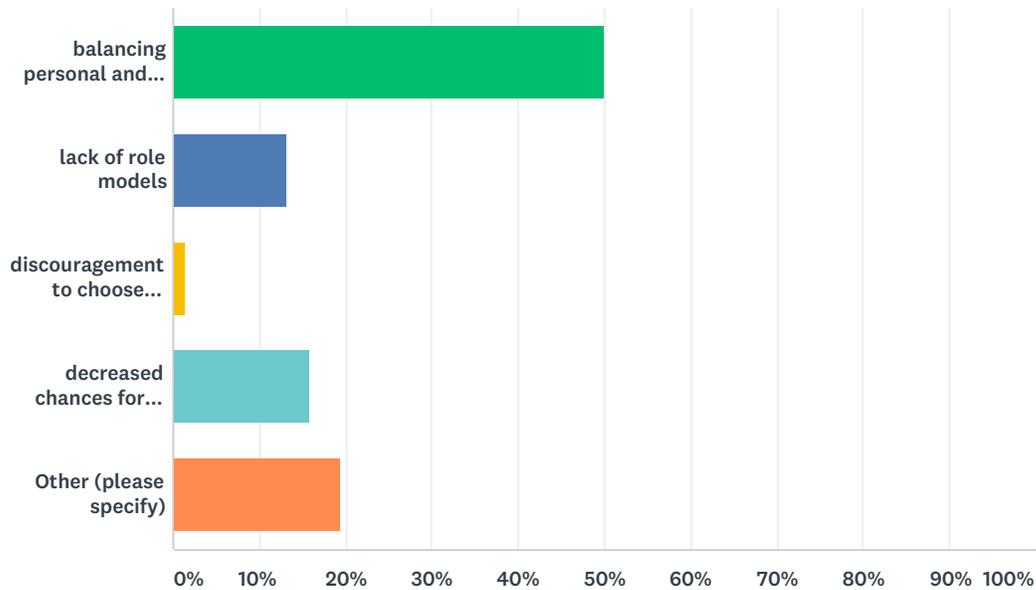


# Q1 What broad challenges do you feel women in emergency medicine face?

Answered: 144 Skipped: 2



ANSWER CHOICES	RESPONSES
balancing personal and professional life	50.00% 72
lack of role models	13.19% 19
discouragement to choose emergency medicine from role models	1.39% 2
decreased chances for equal pay and opportunities for promotion compared to men	15.97% 23
Other (please specify)	19.44% 28
<b>TOTAL</b>	<b>144</b>

#	OTHER (PLEASE SPECIFY)	DATE
1	This question would not let me choose more than one- would identify decreased opportunities compared to men as my greatest concern but the balance of personal/professional life is important as well.	12/28/2015 9:06 AM
2	fewer female leaders, social pressures to be likable at work prevent the assertiveness required for leadership, getting equal treatment from male colleagues/ consultants.	12/23/2015 7:49 PM
3	I do not feel any challenges specific to gender. The challenges of our profession are profound but affects us all.	12/23/2015 11:18 AM
4	I almost feel all of the above are correct	12/23/2015 11:04 AM
5	None of above	12/23/2015 9:25 AM
6	all of these are challenges - the survey would not let me check more than one	12/23/2015 9:10 AM
7	not having other women in ER to talk to about their experiences	12/23/2015 7:14 AM
8	balancing personal and professional life, decreased chances for equal pay and opportunities for promotion compared to men (was unable to check multiple options)	12/23/2015 7:07 AM

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9	Only lets me pick one. Three things. Lack of mentors. Difficulty balancing career and home life. And lack of understanding from leadership that allows women to go part time during childbearing years	12/23/2015 6:19 AM
10	balancing personal/professional life, lack of role models in some places, being treated differently based on gender. It is always more difficult to be heard, and you face a constant struggle between gender roles and never play the male or female part adequately.	12/23/2015 2:40 AM
11	Breastfeeding	12/23/2015 2:06 AM
12	I can't check all that apply. probably balance	12/23/2015 1:20 AM
13	Respect form colleagues and patients.	12/23/2015 12:08 AM
14	In the community/democratic group setting, little provision for maternity leave etc.	12/22/2015 9:27 PM
15	all of above	12/22/2015 7:36 PM
16	This did not allow more than one choice. Lack of role models and decreased chances	12/22/2015 6:46 PM
17	not able to "check all that apply" - I would say: balance, disequal pay and opportunities esp in leadership	12/22/2015 6:13 PM
18	Different time course of advancement. Timing children with residency/ early attending ship	12/22/2015 6:00 PM
19	I would choose 1,2 & 4	12/22/2015 6:00 PM
20	This question does not allow selection of more than one option. My answer would be all of the above. Also lack of mentors and advocates as well as gender-based social expectations that are very ingrained.	12/22/2015 5:40 PM
21	it won't let me check all - so balancing personal and professional life, lack of role models	12/22/2015 4:59 PM
22	Increasing employment and loss of autonomy.	12/22/2015 4:54 PM
23	All of the above. It won't let me check all of them	12/22/2015 4:09 PM
24	balancing personal and professional life, lack of role models and fighting the "boys club"	12/22/2015 4:07 PM
25	the glass ceiling of lack of being put in the way of opportunities in the old boys club still exists.	12/22/2015 3:52 PM
26	All of the above - it did not allow for more than one choice	12/22/2015 3:43 PM
27	First 2 choices above	12/22/2015 3:43 PM
28	only let me choose one of the above I want to choose balancing, lack of role, decreased chances	12/22/2015 3:39 PM

## Q2 How have you overcome gender biased challenges in your career?

Answered: 97 Skipped: 49

#	RESPONSES	DATE
1	some - mostly relating to being a woman in a leadership role. nothing overt.	12/28/2015 12:55 PM
2	Yes	12/28/2015 10:51 AM
3	Not much overt gender bias, but certainly more subtle challenges such as being the only woman in a leadership meeting, patients assuming the male resident is my boss rather than vice versa.	12/28/2015 9:06 AM
4	I've chosen my training and practice environments carefully to avoid issues.	12/28/2015 12:43 AM
5	work harder, seek out like minded mentors	12/27/2015 9:40 PM
6	I didn't	12/27/2015 3:19 PM
7	Finding mentors and role models.	12/26/2015 7:58 PM
8	worked harder, longer, faster than many of my male partners.	12/26/2015 6:19 PM
9	Trying to act tougher	12/25/2015 11:37 AM
10	I play like a boy	12/24/2015 6:33 PM
11	Being persistent and acknowledging I will have to work harder than my male colleagues to be a mother, physician, administrator etc.	12/24/2015 10:39 AM
12	Haven't really done anything to overcome it.	12/24/2015 10:08 AM
13	I have not overcome it. Was recently terminated from a position suddenly, without warning, without explanation. I do not think this would have happened to a male colleague in this manner.	12/24/2015 9:32 AM
14	haven't noticed any	12/24/2015 1:28 AM
15	Don't back down. Be yourself, be assertive but professional. Call others out on unprofessional and/or biased behavior. Raise cultural awareness.	12/23/2015 7:49 PM
16	It hasn't been an issue for me other than convincing nursing staff and patients that I really am a physician.	12/23/2015 4:45 PM
17	Hard work, getting along, good male & female role models breaking the barriers which are still there!	12/23/2015 4:38 PM
18	mostly by just forwarding on.	12/23/2015 3:31 PM
19	We have to be more organized, work harder and avoid being wrapped up in drama. Basically rise above the rest to avoid giving credence to the assumptions that lead to limitations for professional women.	12/23/2015 2:31 PM
20	Given 250%	12/23/2015 1:47 PM
21	I do not look at gender as an issue. I feel everyone should be treated equally and if they are not, this is not a place I would want to work.	12/23/2015 1:09 PM
22	Have not run in to much- work hard and do a good job	12/23/2015 12:11 PM
23	learned how to work with the male majority years before when I was an RN and in the female majority	12/23/2015 11:54 AM
24	No	12/23/2015 11:18 AM
25	Simply, by working as hard as the men do, be in their circle of conversation and forgetting that I'm a female.	12/23/2015 11:04 AM
26	focusing on providing excellent patient care and professionalism	12/23/2015 10:43 AM
27	By being persistent.	12/23/2015 10:20 AM
28	I have noticed none	12/23/2015 9:25 AM

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29	hard work collaborating with other women	12/23/2015 9:10 AM
30	volunteering for committees, other projects.	12/23/2015 8:43 AM
31	Working harder and being nicer than my male colleagues. Recognizing the role/challenges faced by women in EM and working hard to be the best at what I do.	12/23/2015 8:07 AM
32	Perseverance	12/23/2015 7:27 AM
33	No	12/23/2015 7:23 AM
34	I guess I really haven't; still am viewed by peers as not measuring up	12/23/2015 7:14 AM
35	Working hard, joining Women's interest groups	12/23/2015 7:07 AM
36	I did my own thing. I went part time and continue to do my national committee stuff and lectures on my own and three years later my chairman realized I hadn't completely disengaged	12/23/2015 6:19 AM
37	Not had children.	12/23/2015 4:55 AM
38	It takes a lot of courage to stand up and fight for patients when you are a lower rank than male colleagues in particular. It is all in the way things are presented. I have been and continue to learn how to guide different situations.	12/23/2015 2:40 AM
39	working harder	12/23/2015 1:20 AM
40	Have not.	12/23/2015 12:19 AM
41	Sometimes calling people out immediately when inappropriate comments are made or understanding the context might not be right for that and addressing it more behind the scenes with the individual directly. Daily I work hard, be kind, and just do my best and allow my example to speak louder than my indignation ;-)	12/23/2015 12:08 AM
42	being confident in myself	12/22/2015 11:45 PM
43	Try to ignore them and keep going	12/22/2015 10:56 PM
44	ignored the ignorant comments and proved them wrong	12/22/2015 10:48 PM
45	By responding gracefully when patients call me "nurse". By acting more masculine in discussions with fellow male colleagues	12/22/2015 10:38 PM
46	LOCUMS	12/22/2015 10:34 PM
47	Still working on that.... People have confused me for nurse, tech, and taxi driver but I am still waiting to be mistaken for a doctor	12/22/2015 9:51 PM
48	Supporting my peers and fellow women	12/22/2015 9:29 PM
49	I am lucky to be in a group where I perceive little in the way of gender bias. However, in the hospital setting, it is most apparent in dealing with consultants (often older men). I am certain my male colleagues are not spoken to/treated the way I am by many of the consultants. I handle it by being assertive and the "kill them with kindness" strategy, and it seems to help.	12/22/2015 9:27 PM
50	I felt sorry for anyone who was sexist and simply rose above their ignorance.	12/22/2015 9:10 PM
51	N/A	12/22/2015 7:55 PM
52	Ignoring it so it doesn't get me down and just working hard.	12/22/2015 7:48 PM
53	Clinically from respect for expertise Administrative leadership path	12/22/2015 7:36 PM
54	I speak directly just like my male colleagues. I have learned to say "I just said that" when a male colleague repeats what I say.	12/22/2015 7:26 PM
55	no	12/22/2015 6:56 PM
56	Be assertive, direct, and confident	12/22/2015 6:49 PM
57	Been willing to fill in where there are needs even when it was not part of my original career plan	12/22/2015 6:14 PM
58	Still haven't fully overcome them. Things I hear - "I don't think she is interested in leadership because she just had a baby" "She has a busy schedule because she needs to take care of her child" "Only those who negotiate their salary will get a better one - and men do that really well"	12/22/2015 6:13 PM
59	Not gender bias as much as fighting continued sexist attitudes from co-workers and consultants	12/22/2015 6:11 PM

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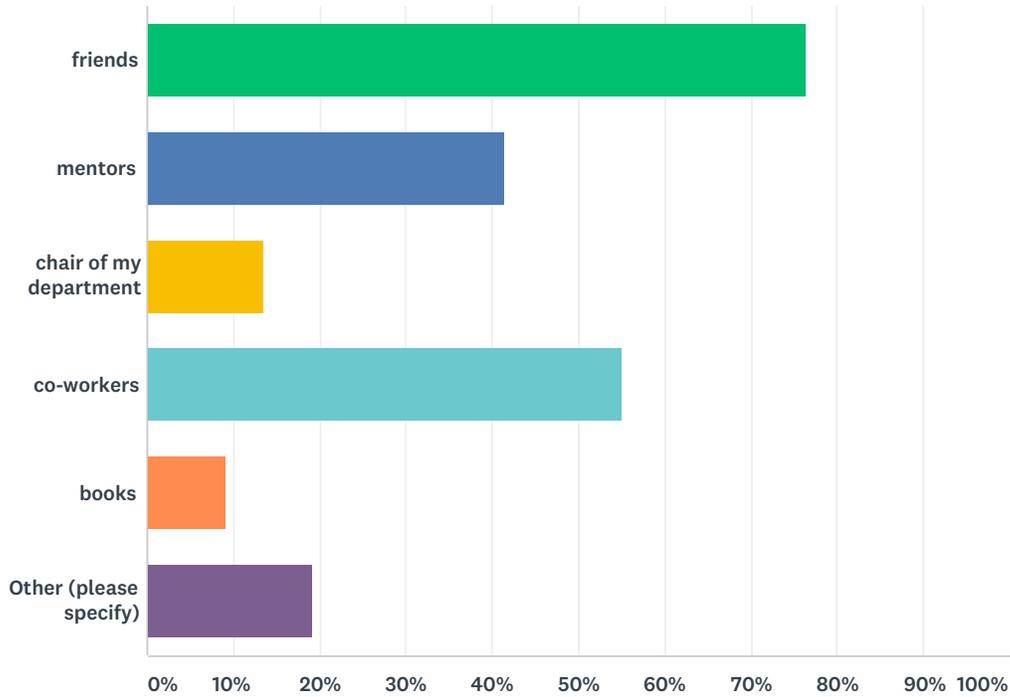
60	I've been lucky in a very supportive program. But when there is a problem, Basically working harder	12/22/2015 6:00 PM
61	I have ignored many of the gender biased comments. I have always tried to do excellent work so that any gender bias does not ring true. I also have begun confronting those who spew negative comments directed toward women, so as to educate them and decrease the negative reinforcement received by younger women entering emergency medicine.	12/22/2015 5:56 PM
62	negotiate salaries. confidence.	12/22/2015 5:54 PM
63	Supportive husband and family	12/22/2015 5:48 PM
64	having confidence and addressing issues head one	12/22/2015 5:41 PM
65	Honestly, I have not found good solutions, but women's groups in EM have helped me with some strategies to improve negotiation and support women against the unique challenges they face. ACEP's Clinical Policy around supporting women in EM has been a small first step in addressing inherent, unconscious biases; I was a member of the team that wrote them.	12/22/2015 5:40 PM
66	I had to prove myself to many people. From my boss all the way down to patients and their families. Sadly the have this vision that doctors are men and old. When they see a young woman and if she's pretty, they think she doesn't know what she's doing, someone gave you the tittle, or as some patients have told me "you too pretty to be Doctor" as if brains equals being non attractive	12/22/2015 4:58 PM
67	Completely ignoring the source of the bias as if it was invisible and moving full speed ahead to complete the task and/or fill the need that exists without them or their input.	12/22/2015 4:58 PM
68	I haven't and I have been practicing for 33 years.	12/22/2015 4:54 PM
69	Worked with as many PHYSICIAN peers as possible to be a strong PHYSICIAN. Biggest gender-biased challenge has come from nursing (nursing leadership at my hospital told me I shouldn't apply to be chief because of my being a mom)	12/22/2015 4:47 PM
70	proven myself through accomplishments	12/22/2015 4:43 PM
71	As both a woman and a DO I know I have to work harder to be considered equal. Fortunately it usually pays off.	12/22/2015 4:43 PM
72	still working on it, but talking with other female EM attendings and realizing we all face similar challenges	12/22/2015 4:43 PM
73	I have been challenged by gender biases within my partnership. I constantly have to remind patients and some staff that I am not the nurse but I do look at that as an insult just as a need to remind others of my role in the care of a patient.	12/22/2015 4:42 PM
74	Working hard and acting as an equal	12/22/2015 4:35 PM
75	No	12/22/2015 4:33 PM
76	I have made a conscious effort to seek out mentors, both male and female, who have pushed me to become the best that I can be while also providing guidance, support, and mentorship.	12/22/2015 4:32 PM
77	Of course	12/22/2015 4:27 PM
78	Haven't	12/22/2015 4:21 PM
79	I have not been able to I have had several ED supervisors who are women	12/22/2015 4:16 PM
80	Work harder, work longer hours, gonout of way to make sure nurses like me and tend to their needs	12/22/2015 4:16 PM
81	Volume helps- coming with concerns with several femal colleagues	12/22/2015 4:15 PM
82	Persistence. Using the bias to propel me because I want to spite them. Bottling it up & now feeling effects	12/22/2015 4:09 PM
83	Being the best EMP I can be Not whining Having a sense of humor instead being offended by everything	12/22/2015 4:08 PM
84	more aggressive female	12/22/2015 4:07 PM
85	By doing what I think I need to regardless of the poor advice. I was told I wouldn't match EM, despite having competitive board scores and grades. I trusted the data instead and went for it.	12/22/2015 4:05 PM

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86	Group keeps women out of admin positions. No way to fight/no recourse. Males in group don't feel there is a difference between male and female physicians. Been told "that stuff is crap" and "doesn't exist."	12/22/2015 4:00 PM
87	Work harder	12/22/2015 3:53 PM
88	mostly by ignoring and sidestepping the blocks. I would have done much better had any mentor other than Nina Mazur ever helped me.	12/22/2015 3:52 PM
89	Yes. As i get older there are fewer issues but i used to have to assert authority and be more aggressive wherever possible when dealing with consultants particularly in surgical fields.	12/22/2015 3:45 PM
90	I have made less than my co-workers for same number of patients seen. It is a combination of being asked to see the more difficult psychiatric patients or difficult patient or sexual assault patients who typically do not pay well and more patients not thinking they saw the doctor. I introduce my self 3 times as a doctor as a result of this finding. I have been the Dept. Chief and IT liaison for the other doctors.	12/22/2015 3:44 PM
91	Striving for excellence, conquering misconceptions with demonstrated performance, pointing out disparities, insisting on equal pay in the face of inequity, mentoring younger females in the field, using my leadership role to affect hiring of faculty and residents.	12/22/2015 3:43 PM
92	Hard work and standing up for my patients and myself.	12/22/2015 3:43 PM
93	Attempting to find good role models in the profession	12/22/2015 3:42 PM
94	Stopped working for a few years when family needed me	12/22/2015 3:40 PM
95	dealt with it	12/22/2015 3:39 PM
96	worked harder	12/22/2015 3:38 PM
97	I can't because it is not based on my sex, it's based on my perceived performance deficit because of the personal distractions I carry to work as a mother.	12/22/2015 3:37 PM

### Q3 What resources do you use when faced with gender issues? (Check all that apply)

Answered: 140 Skipped: 6



ANSWER CHOICES	RESPONSES
friends	76.43% 107
mentors	41.43% 58
chair of my department	13.57% 19
co-workers	55.00% 77
books	9.29% 13
Other (please specify)	19.29% 27
Total Respondents: 140	

#	OTHER (PLEASE SPECIFY)	DATE
1	Patience	12/27/2015 3:19 PM
2	There is one other reasonable woman in my group	12/25/2015 10:32 PM
3	Friends who are also EM physicians	12/24/2015 9:32 AM
4	getting the word out.	12/23/2015 7:49 PM
5	I have not been faced with gender issues	12/23/2015 11:18 AM
6	human resources would be an option	12/23/2015 10:43 AM
7	Does not occur	12/23/2015 9:25 AM
8	Parents/mother	12/23/2015 8:07 AM

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9	Resources are limited.	12/23/2015 7:27 AM
10	Physician Moms Group (on Facebook)	12/23/2015 6:19 AM
11	My personal physicians, psychiatrists	12/23/2015 4:55 AM
12	blogs	12/23/2015 2:40 AM
13	internet groups	12/23/2015 1:20 AM
14	Family.	12/23/2015 12:19 AM
15	Awaem	12/22/2015 7:36 PM
16	feminem, dr milk, other online women in medicine blogs	12/22/2015 6:48 PM
17	friends and spouses	12/22/2015 6:46 PM
18	National organizations	12/22/2015 6:40 PM
19	Med school has a group that they do one a year for cme. I've meet peopLe through that who have had great advice	12/22/2015 6:00 PM
20	Women's groups in EM: AAWEM, AAWEP, FeminEM	12/22/2015 5:40 PM
21	Me, myself, and I.	12/22/2015 4:58 PM
22	internet	12/22/2015 4:43 PM
23	conference attendees	12/22/2015 4:16 PM
24	I don't have any good mentors currently	12/22/2015 4:05 PM
25	nothing really helps, I am a bit of a loner and given that mentors are hard to get, it put me on the slower track.	12/22/2015 3:52 PM
26	myself and evidence based medicine articles.	12/22/2015 3:45 PM
27	websites	12/22/2015 3:44 PM

## Q4 What has your practice done to support women emergency physicians?

Answered: 103 Skipped: 43

#	RESPONSES	DATE
1	allowing women in leadership roles	12/28/2015 12:55 PM
2	Allows 3 month (unpaid) maternity leave	12/28/2015 10:51 AM
3	not much officially though we are trying to have more regular meetings of the women in our group and trying to start a book club for the women in the department.	12/28/2015 9:06 AM
4	I chose my practice because of a strong woman chair and co-workers. The practice is family friendly and the physicians share work-life balance goals and values. For example, we used locums as needed to support long maternity and paternity leaves; equitable scheduling of nights, weekends, and holidays.	12/28/2015 12:43 AM
5	supportive of maternity leave/breast feeding	12/27/2015 9:40 PM
6	None	12/27/2015 7:04 PM
7	nothing	12/27/2015 3:19 PM
8	?	12/26/2015 7:58 PM
9	Given some academic roles to the women who are willing to sacrifice all family and personal life.	12/26/2015 6:19 PM
10	Nothing	12/25/2015 10:32 PM
11	Great role models	12/25/2015 11:37 AM
12	Hired other emergency physicians who are women.	12/24/2015 6:33 PM
13	Nothing specific	12/24/2015 10:39 AM
14	I live in an area that is not very supportive of women in medicine in general.	12/24/2015 9:32 AM
15	nothing	12/24/2015 1:28 AM
16	hiring them.	12/23/2015 7:49 PM
17	Encouraging during maternity leave, covering shifts and schedule changes	12/23/2015 4:45 PM
18	Try to treat each MD equally	12/23/2015 4:38 PM
19	we actually have strong women in our group. The president of our private group is a female. 10 men : 6 females. Not the same in the rest of the hospital---on that regard no role models and no support. No female administrators at all.	12/23/2015 3:31 PM
20	Flexible scheduling.	12/23/2015 1:47 PM
21	I don't think that we have done anything, as I believe everyone should be treated equally. Support should not be based on gender, race, ethnicity, or any other difference.	12/23/2015 1:09 PM
22	Private group with 5 female partners	12/23/2015 12:11 PM
23	equal pay	12/23/2015 11:54 AM
24	Nothing specific	12/23/2015 11:18 AM
25	In our community-based hospital group we have always hired women equally as men.	12/23/2015 11:04 AM
26	my most recent practice did nothing to support and everything to undermine the women in the group and that is one of the reasons I just left. Previous practices were more equitable	12/23/2015 10:43 AM
27	N/a	12/23/2015 10:20 AM
28	i am a medical director and serve as role model to other women Gender does not limit you	12/23/2015 9:25 AM
29	not sure what you mean by this	12/23/2015 9:10 AM

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30	nothing	12/23/2015 8:43 AM
31	We have a female CEO.	12/23/2015 8:07 AM
32	Women meet 4 x /yr	12/23/2015 7:54 AM
33	More recently, hires of strong junior women faculty	12/23/2015 7:27 AM
34	still trying to emphasize to patients that I am the Dr., and not the nurse	12/23/2015 7:14 AM
35	Not entirely sure (I am a resident) We have women's dinner every 3 months where all female practitioners get together and we discuss issues	12/23/2015 7:07 AM
36	Hasn't. The women in my department work work work work work	12/23/2015 6:19 AM
37	Nothing	12/23/2015 4:55 AM
38	Changed schedule for my maternity leave	12/23/2015 2:06 AM
39	They were good with pregnancy/maternity backup.	12/23/2015 1:20 AM
40	Nothing. On the contrary.	12/23/2015 12:19 AM
41	women's dinners	12/22/2015 11:45 PM
42	Not much- almost all are men and look out for their own interests	12/22/2015 10:56 PM
43	hired them, promoted them as warranted, kept them on during maternity leaves and insured their return, treated all as equals, not a problem in my 20 years with our ED group, just with non ED docs	12/22/2015 10:48 PM
44	Can't think of anything in particular. We have equal women and men in the group	12/22/2015 10:38 PM
45	NOTHING	12/22/2015 10:34 PM
46	Promoted them to high level admin positions at equal rate to men. And lactating women can pump during shifts now	12/22/2015 9:51 PM
47	we have very strong female role models in leadership positions	12/22/2015 9:29 PM
48	Equal-opportunity hiring.	12/22/2015 9:27 PM
49	We actually very encourage female MDs to get pregnant on their timelines. I discourage delaying getting pregnant in deference to career. We have a great pump room with phone, computer & privacy to allow ease of Brest feeding when returning after delivery, kids are welcomed at staff mtgs. Both moms & dads can bring their kids in.	12/22/2015 9:10 PM
50	Equal treatment. Equal shifts and pay.	12/22/2015 8:13 PM
51	N/A	12/22/2015 7:55 PM
52	Nothing particular	12/22/2015 7:48 PM
53	Protected time to pursue research	12/22/2015 7:36 PM
54	I feel that my opinion is valued and I have the same opportunities as my male colleagues for leadership roles and advancement.	12/22/2015 7:26 PM
55	There are a lot of women in our group and we support each other.	12/22/2015 6:58 PM
56	Too early on to tell. Have not come across any as of now	12/22/2015 6:49 PM
57	equal groups	12/22/2015 6:46 PM
58	Hired more females	12/22/2015 6:40 PM
59	Nothing	12/22/2015 6:33 PM
60	Her chair likes to hire women	12/22/2015 6:14 PM
61	Attempt to have a more transparent salary structure (but it is not transparent) Still only men in leadership positions.....	12/22/2015 6:13 PM
62	We have developed a Women in EM group that meets every other month. This was more "grassroots" than endorsed by the chair.	12/22/2015 6:11 PM
63	Covered maternity leave as a group	12/22/2015 6:00 PM

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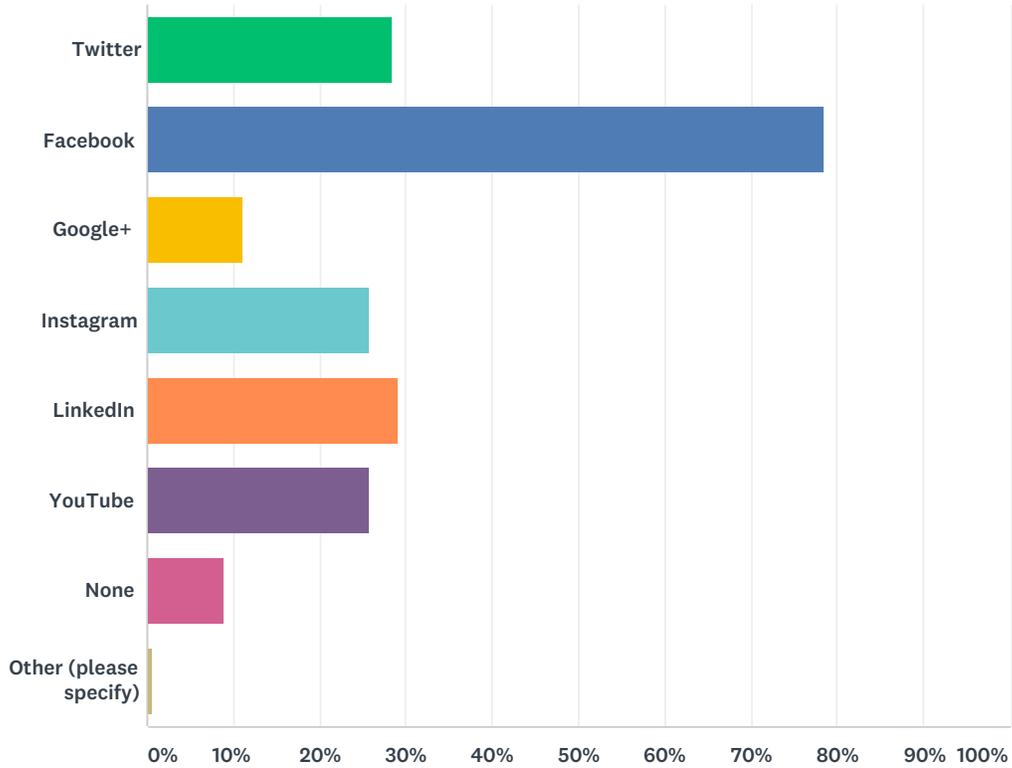
64	Social support from peers only	12/22/2015 6:00 PM
65	Improved acceptance of maternity leave and nursing while on shift.	12/22/2015 6:00 PM
66	They have begun actively working to provide good examples of women in emergency medicine.	12/22/2015 5:56 PM
67	Allowed me a space in the ED when I was breastfeeding and pumping for my child.	12/22/2015 5:48 PM
68	not much	12/22/2015 5:41 PM
69	Deliberate hiring of women; informal and formal women's groups; a vice chair of faculty development who is a woman	12/22/2015 5:40 PM
70	we have a women in EM group	12/22/2015 4:59 PM
71	Not much.	12/22/2015 4:58 PM
72	Stand unified and publicly reveal any veiled or thinly veiled initiatives or actions that even have the hint of gender bias.	12/22/2015 4:58 PM
73	Nothing, ever. Everywhere I have ever worked they perpetuate the myths, and use patient prejudices of female physicians to keep us in our place.	12/22/2015 4:54 PM
74	I personally try to provide the sounding board and guidance for our newest female EM attending physicians (I am the chief of our department). I am particularly sensitive to FMLA and how our hospital - which is fairly generous in its policy by U.S. standards - handles FMLA. I'm also big on making sure we have breastmilk pumping support.	12/22/2015 4:47 PM
75	nothing	12/22/2015 4:43 PM
76	Unfortunate very little. I am the only woman with children who works full time in my group.	12/22/2015 4:43 PM
77	nothing	12/22/2015 4:43 PM
78	a lot: mentorship programs, rapid promotion for both genders to have leadership roles and roles on committees in both our group and within the hospitals	12/22/2015 4:42 PM
79	Equal pay. Maternity leave without issue.	12/22/2015 4:35 PM
80	Large portion of our attendings are women -- and most are better/work harder than the men	12/22/2015 4:33 PM
81	I am not yet in practice	12/22/2015 4:32 PM
82	Yes, after the threat of a lawsuit. My old practice did not care, it was a good ol boys network. I would love to have s women ep group.	12/22/2015 4:27 PM
83	Nothing	12/22/2015 4:21 PM
84	hire them, conscious re: scheduling needs of aging women ED physicians	12/22/2015 4:16 PM
85	Working on schedule- but to be honest having women in our group is relatively new, so we're just addressing these issues now	12/22/2015 4:15 PM
86	N/A	12/22/2015 4:09 PM
87	My group treats and pays everyone the same	12/22/2015 4:08 PM
88	lead by example	12/22/2015 4:07 PM
89	Only what the law requires.	12/22/2015 4:05 PM
90	Zero	12/22/2015 4:00 PM
91	We have our own women in em club that meets biannually.	12/22/2015 3:56 PM
92	Hired more women EP's	12/22/2015 3:53 PM
93	My current practice, CEP, has a women in CEP interest group which is still at the "	12/22/2015 3:52 PM
94	My group has provided education and had been highly supportive.	12/22/2015 3:45 PM
95	Not much directly. My group gives unlimited maternity leave but it is unpaid. We are still fee for service group.	12/22/2015 3:44 PM
96	Allows for part time work, hiring female faculty and providing a good working environment for them, mentoring for female residents.	12/22/2015 3:43 PM
97	Nothing.	12/22/2015 3:43 PM

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98	Provide better work hours or bonuses for working poorer hours	12/22/2015 3:42 PM
99	Current work site is mostly women	12/22/2015 3:40 PM
100	women EM group	12/22/2015 3:39 PM
101	not much. don't get pregnant.	12/22/2015 3:38 PM
102	Nothing - if we are equal we do not require special concessions	12/22/2015 3:37 PM
103	None	12/22/2015 3:33 PM

### Q5 What social media do you use? (Check all that apply)

Answered: 144 Skipped: 2

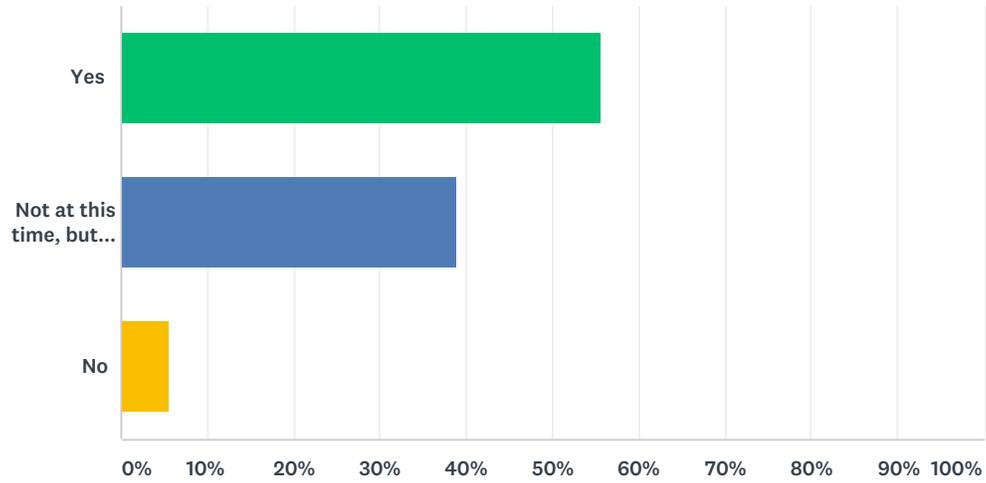


ANSWER CHOICES	RESPONSES
Twitter	28.47% 41
Facebook	78.47% 113
Google+	11.11% 16
Instagram	25.69% 37
LinkedIn	29.17% 42
YouTube	25.69% 37
None	9.03% 13
Other (please specify)	0.69% 1
Total Respondents: 144	

#	OTHER (PLEASE SPECIFY)	DATE
1	Facebook for personal use only; am on linked in but do not use it.	12/23/2015 7:27 AM

## Q6 Are you willing to serve as a mentor for other women in emergency medicine?

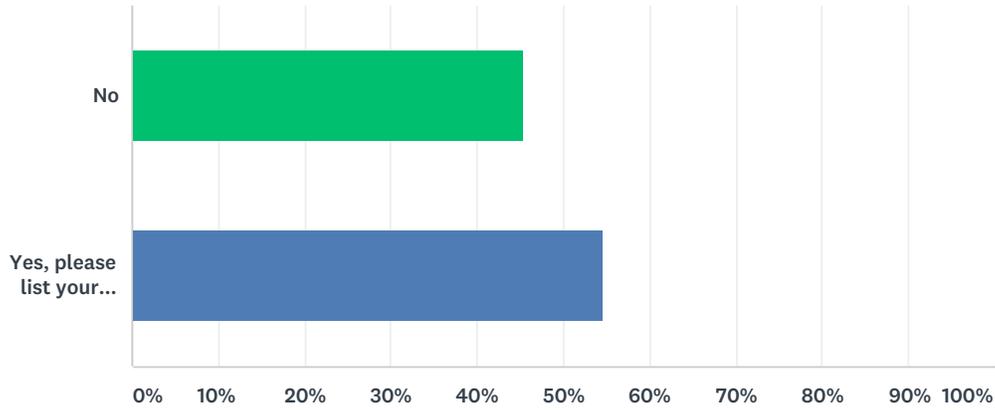
Answered: 144 Skipped: 2



ANSWER CHOICES	RESPONSES	
Yes	55.56%	80
Not at this time, but possible later	38.89%	56
No	5.56%	8
<b>TOTAL</b>		<b>144</b>

**Q7 Do you have a specific interest or background that you will be willing to serve as a resource? (e.g., academics, international, community hospital, area of focus, etc). If so, please list.**

Answered: 130 Skipped: 16



ANSWER CHOICES	RESPONSES	
No	45.38%	59
Yes, please list your expertise	54.62%	71
<b>TOTAL</b>		<b>130</b>

#	YES, PLEASE LIST YOUR EXPERTISE	DATE
1	academics, program leadership	12/28/2015 12:55 PM
2	International	12/28/2015 10:51 AM
3	Palliative medicine	12/28/2015 12:43 AM
4	Academics	12/27/2015 7:04 PM
5	FOAM	12/27/2015 3:19 PM
6	rural medicine, EMS, wilderness medicine, married to another physician and raised three children	12/26/2015 6:19 PM
7	community	12/26/2015 10:36 AM
8	EMS	12/25/2015 3:46 PM
9	Academics, leadership, operations management, systems engineering	12/24/2015 6:33 PM
10	academics, pediatric EM, military EM	12/24/2015 10:39 AM
11	academics	12/24/2015 10:08 AM
12	Community practice, work/life balance	12/24/2015 9:32 AM
13	Air Medical Transport, out of hospital care	12/23/2015 4:45 PM
14	international	12/23/2015 3:31 PM
15	Community EM	12/23/2015 2:31 PM
16	Former academics, now community based.	12/23/2015 1:47 PM
17	Community, management	12/23/2015 1:09 PM
18	current president of my group/have been medical director as well/community hospital	12/23/2015 12:11 PM

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19	international, ultrasound	12/23/2015 11:25 AM
20	Community based hospitls	12/23/2015 11:04 AM
21	Administration	12/23/2015 9:25 AM
22	academics, critical care, neurocritical care	12/23/2015 9:10 AM
23	community hospital	12/23/2015 8:43 AM
24	Academics/ED Administration	12/23/2015 8:07 AM
25	Research in AMC	12/23/2015 7:27 AM
26	Academics, public speaking	12/23/2015 7:23 AM
27	community hospital	12/23/2015 7:14 AM
28	cardiology, echocardiography, international	12/23/2015 7:07 AM
29	Palliative care, working part time clinically and still making it work.	12/23/2015 6:19 AM
30	Academics	12/23/2015 6:16 AM
31	Education, international EM	12/22/2015 10:38 PM
32	CONCIERGE, INTERNATIONAL , LOCUMS	12/22/2015 10:34 PM
33	Will be an ultrasound fellow next year	12/22/2015 9:29 PM
34	Academics, education, simulation	12/22/2015 8:34 PM
35	Paramedic	12/22/2015 8:24 PM
36	Academics	12/22/2015 7:36 PM
37	Sports	12/22/2015 6:49 PM
38	community	12/22/2015 6:46 PM
39	Academics	12/22/2015 6:40 PM
40	Academic	12/22/2015 6:33 PM
41	Academics and pediatrics	12/22/2015 6:14 PM
42	POCUS, EM education, QI	12/22/2015 6:13 PM
43	Ems	12/22/2015 6:11 PM
44	Academics, associate program director	12/22/2015 6:11 PM
45	Academics	12/22/2015 6:00 PM
46	International EM/public health	12/22/2015 6:00 PM
47	Academic	12/22/2015 6:00 PM
48	academic medicine (from a basic science background), some international experience	12/22/2015 5:56 PM
49	Community hospital	12/22/2015 5:41 PM
50	Academics and clinical research, leadership of women's groups	12/22/2015 5:40 PM
51	critical care fellowship, but only ED shifts	12/22/2015 4:59 PM
52	EMS	12/22/2015 4:58 PM
53	Community hospital	12/22/2015 4:54 PM
54	Community hospital; married to a NON-med spouse (great perspective); mom of three	12/22/2015 4:47 PM
55	academics	12/22/2015 4:43 PM
56	Difficult airway management, Simulation, graduate and continuing medical education	12/22/2015 4:43 PM
57	international, community hospital	12/22/2015 4:43 PM
58	community medicine, adult mostly	12/22/2015 4:42 PM
59	Prehospital medicine, academics	12/22/2015 4:21 PM

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60	Indian Health Service-working when feeling inconfident, imposter syndrome, docs who have worked as nurses, docs entering the medicine as older ( I was 39 when I finished med school)	12/22/2015 4:16 PM
61	Critical care medicine	12/22/2015 4:16 PM
62	Academics, Wilderness, Community	12/22/2015 4:08 PM
63	academics, giving lectures, bedside teaching	12/22/2015 4:07 PM
64	International	12/22/2015 4:05 PM
65	Academics, research design, grammar policing, international, etc.	12/22/2015 3:52 PM
66	community hospital	12/22/2015 3:44 PM
67	Academics and administration	12/22/2015 3:43 PM
68	Community hospital, state committees, EMS, teaching, international	12/22/2015 3:43 PM
69	toxicology	12/22/2015 3:39 PM
70	academics for 18 years, now in private practice	12/22/2015 3:38 PM
71	academics and community	12/22/2015 3:33 PM

## Q8 How would how would you like the Women in Emergency Medicine Committee to help you?

Answered: 66 Skipped: 80

#	RESPONSES	DATE
1	publish something on subtle bias that can be viewed by a wide ranging audience. workshops on how to be a better leader	12/28/2015 12:55 PM
2	Would love to see some kind of statement regarding need for maternity leave policies, it seems so basic that this should exist but many practices including my own lack them. Would also be interested in mentorship/guidance regarding speaking/lecturing and advancement up the academic ladder.	12/28/2015 9:06 AM
3	na	12/27/2015 9:40 PM
4	dont' know	12/27/2015 3:19 PM
5	Would like to know more about what you do first.	12/26/2015 7:58 PM
6	simple networking resource, currently empty nested and begun locum tenen travel medicine.	12/26/2015 6:19 PM
7	Connecting with other women, fostering discussion so I can see how others have dealt with the challenges I face	12/25/2015 10:32 PM
8	Role models, perspective on how to balance family life	12/25/2015 11:37 AM
9	I don't know	12/24/2015 6:33 PM
10	Community of mentorship and official forum to discuss issues	12/24/2015 10:39 AM
11	Share their knowledge/experience w/advice on what to look for/avoid/go for...	12/23/2015 4:38 PM
12	career advancement. Or other areas in EM to explore	12/23/2015 3:31 PM
13	Advocate. Have socials for women only at conferences.	12/23/2015 1:47 PM
14	be strong and take leadership positions	12/23/2015 12:11 PM
15	I'm at the end of my career so Please help the emerging med students and those starting their careers. I mentored a high school student ~ 10 years ago. She is now an attending in a democratic group and a member of AAEM! My advice then was that you will be respected by your confidence in knowing/doing procedures well, by your knowledge base and your bedside manner. Mentors are essential to emphasize that exuding insecurity will be detrimental for your patients and your coworkers.	12/23/2015 11:54 AM
16	None	12/23/2015 11:18 AM
17	Mentorship, camaraderie.	12/23/2015 10:20 AM
18	Provide possible options for women who do not want to commit to full time managerial positions	12/23/2015 8:43 AM
19	Acknowledge women's accomplishments - nominate women to serve as key note speaker, nominate them for leadership positions, etc.	12/23/2015 7:27 AM
20	Networking	12/23/2015 7:23 AM
21	find more "missionary" medicine opportunities	12/23/2015 7:14 AM
22	Advocate equal pay and promotion for females	12/23/2015 7:07 AM
23	Advocate for more work life balance	12/23/2015 6:19 AM
24	Spread the word. Make people, particularly those with academic positions, understand the impact that gender biases has on training residents and in the workforce.	12/23/2015 2:40 AM
25	N/a	12/23/2015 2:06 AM
26	Help me figure out how to get out of Emergency Medicine b	12/23/2015 12:19 AM

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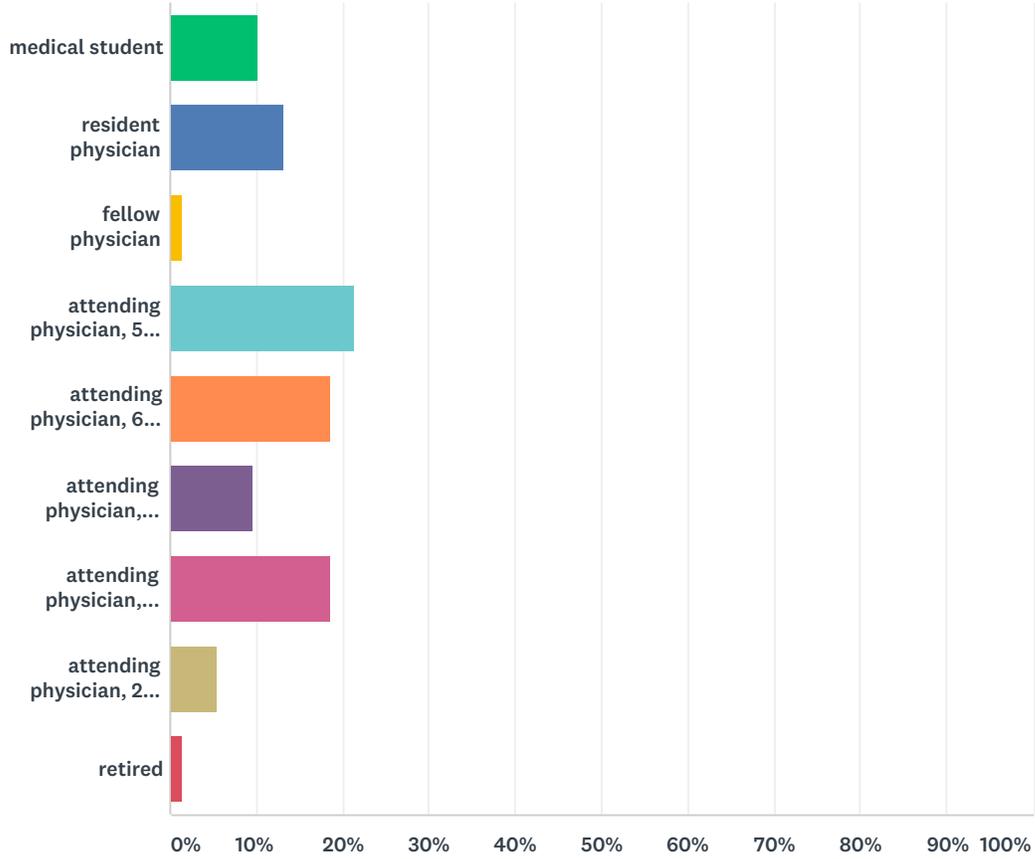
27	I think I'd like to see more women who are students being supported and educated about changing their own expectations and feedback and practice on dealing with scenarios. I know I am stubborn enough to stay true to my own course but I have see other classmates shrink away from our often entitled-acting male classmates of equal competency. I can always use a few more quick tricks up my sleeve so I can call attention to a situation, dissolve some of the stress about it, and move on. I like having quick phrases queued up for deployment in awkward situations	12/23/2015 12:08 AM
28	Peer support	12/22/2015 10:56 PM
29	Lobby for pregnancy friendly work restrictions (I have friends that have worked the overnight up to the day of their induction)	12/22/2015 10:38 PM
30	MORE EQUALITY. WOMEN IN AUTHORITATIVE ROLES ARE ALSO MET WITH SIGNIFICANT PUSH BACK FROM RNS	12/22/2015 10:34 PM
31	Ideas for how to get my patients to stop thinking I am a nurse, tech, etc and start calling me doctor. Ideas for how other women manage career advancement and work life balance. Support system	12/22/2015 9:51 PM
32	N/A	12/22/2015 7:55 PM
33	Help provide resources for nanny services that take into account our varying schedules and odd shift times. No other speciality requires physicians to work day shift one day, afternoon the next, swing the day after and then intermittently a night shift. It's nearly impossible to find a nanny who is flexible to meet that kind of schedule.	12/22/2015 7:48 PM
34	Partner with awaem	12/22/2015 7:36 PM
35	Support- career/life balance, being assertive, career advancement.	12/22/2015 7:26 PM
36	Mental support	12/22/2015 6:49 PM
37	Work towards making part time residency training options available and not taboo. Work towards supporting a culture where women are supported when lactating.	12/22/2015 6:48 PM
38	advancement and leadership training	12/22/2015 6:46 PM
39	Role models and resources	12/22/2015 6:40 PM
40	Connect me with other women interested in multi institutional academic or research endeavors. Help make connections to secure invitations for grand Rounds	12/22/2015 6:14 PM
41	Increase awareness on a national level to departments or group practices re: gender bias and ncourage more transparency	12/22/2015 6:13 PM
42	Continue to fight for equal pay and advocate for women speakers at the assembly and nominate women for appropriate awards	12/22/2015 6:11 PM
43	Provide speakers at meetings that can appeal to those wanting too learn of the challenges and then let mentors and mentees find each other	12/22/2015 6:00 PM
44	addressing issues in the work place against women regarding baises and push back from nursing staff	12/22/2015 5:41 PM
45	Please link to AAWEM and AAWEF so we can all work together. There is power in numbers and we should all support each other.	12/22/2015 5:40 PM
46	Encouragement to keep on going and education to all people who believe women can't be incredible, intelligent physicians	12/22/2015 4:58 PM
47	Continue to create solid avenues of equity in emergency medicine and its other associated subspecialties without making it look like we are "special needs" entities.	12/22/2015 4:58 PM
48	First of all, I feel that women physicians have been mistreated on a number of issues. These issues need to be identified, prioritized and addressed one at a time. I also feel that the NPDB is used unfairly against women.	12/22/2015 4:54 PM
49	resources/community	12/22/2015 4:43 PM
50	no need to help me	12/22/2015 4:42 PM
51	Not sure	12/22/2015 4:33 PM
52	As I transition from medical school to residency, I hope that the committee can help to create channels through which women can find mentorship and camaraderie.	12/22/2015 4:32 PM

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53	Advice and Legal support	12/22/2015 4:27 PM
54	Providing a voice to advocate for women in EM. The more people that stand up for things like appropriate maternity leave, equal pay, etc, the harder it will be for the specialty to ignore	12/22/2015 4:15 PM
55	Proof reading!	12/22/2015 4:08 PM
56	I would like you to fight through the "boys club" which is basically AAEM. It is an incestual group of men who award one another, invite one another to lecture, name awards after one another and it is ridiculous. It is my least favorite organization but one with which I feel obligated to be a member.	12/22/2015 4:07 PM
57	Prove that they have equal footing within AAEM as the male members do, and can adequately represent my needs.	12/22/2015 4:05 PM
58	Crack through the male bias that "it's all ok"	12/22/2015 4:00 PM
59	I think I 'm done for now, perhaps in a year or two I will come back to organised medicine	12/22/2015 3:52 PM
60	Push for consistency in hiring, compensation and promotion in EM.	12/22/2015 3:43 PM
61	I feel I probably have more to offer than to receive since I have been practicing 32 years.	12/22/2015 3:43 PM
62	Provide good mentors and support	12/22/2015 3:42 PM
63	not sure	12/22/2015 3:38 PM
64	Have women who are great performers show other women how to separate home from work	12/22/2015 3:37 PM
65	help balance work/life	12/22/2015 3:33 PM
66	Loan repayment opportunities, mentorship opportunities, service opportunities	12/22/2015 3:31 PM

## Q9 Where are you in your medical career?

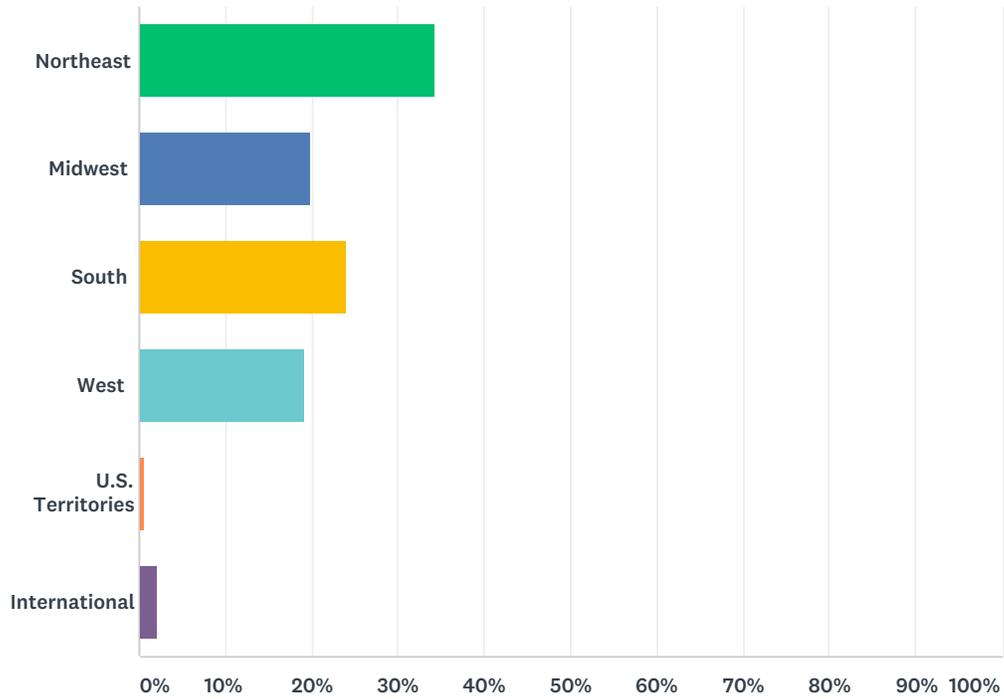
Answered: 145 Skipped: 1



ANSWER CHOICES	RESPONSES	
medical student	10.34%	15
resident physician	13.10%	19
fellow physician	1.38%	2
attending physician, 5 or less years post-training	21.38%	31
attending physician, 6-10 years post-training	18.62%	27
attending physician, 11-15 years post-training	9.66%	14
attending physician, 16-25 years post-training	18.62%	27
attending physician, 26 or more years post-training	5.52%	8
retired	1.38%	2
<b>TOTAL</b>		<b>145</b>

## Q10 In what region of the country do live?

Answered: 146 Skipped: 0



ANSWER CHOICES	RESPONSES	
Northeast	34.25%	50
Midwest	19.86%	29
South	23.97%	35
West	19.18%	28
U.S. Territories	0.68%	1
International	2.05%	3
<b>TOTAL</b>		<b>146</b>