

Scenario

While trying to run a code, a female resident is frequently talked over and interrupted. She raises her voice and changes to a harsher tone and hears a bystander remark “wow, she’s really pushy”

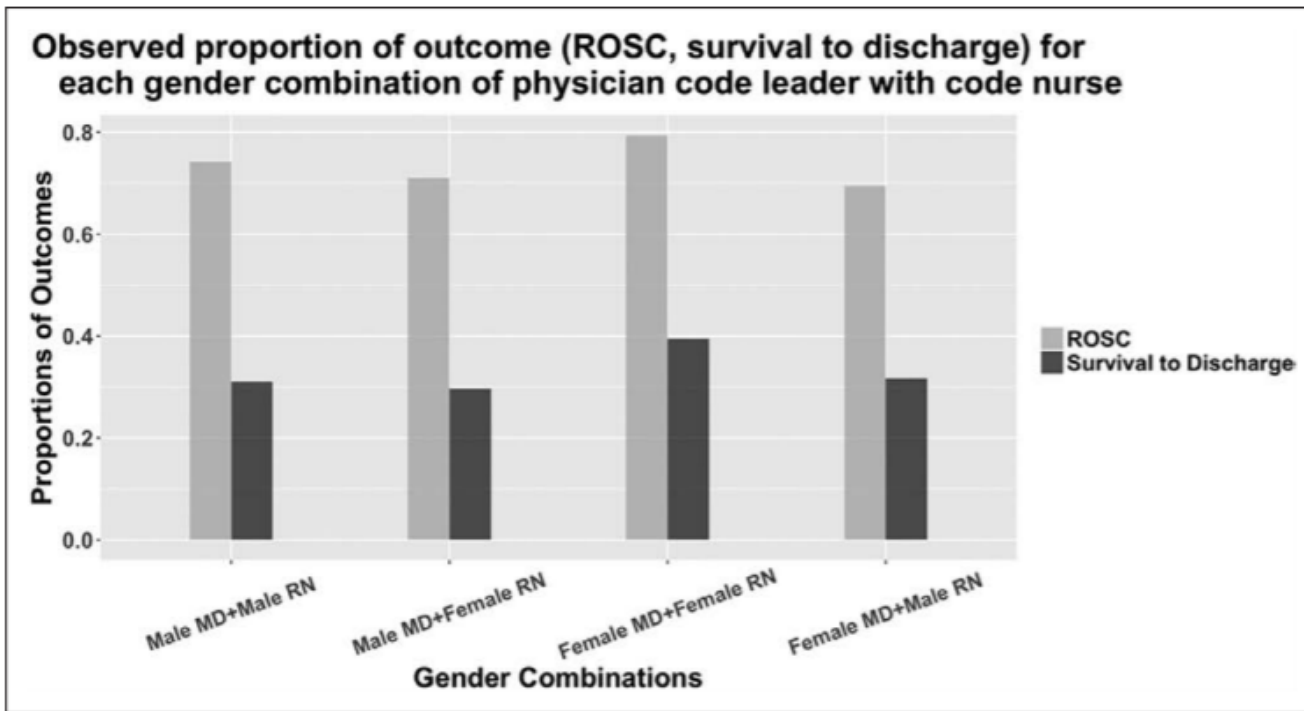


Figure 2. Observed proportions of outcome (return of spontaneous circulation [ROSC], survival to discharge) for each gender combination of physician (MD) code leader with code nurse (RN) (male code MD leader with male code RN, male MD code leader with female code RN, female MD code leader with female code RN, and female MD with a male code RN).

Gender Pairing of Code Leader and Nurse	OR for Return of Spontaneous Circulation (95% CI)	<i>p</i>	OR for Survival (95% CI)	<i>p</i>
Female MD and female nurse (<i>n</i> = 243)	1.62 (1.13–2.34)	< 0.01	1.68 (1.22–2.32)	0.002
Female MD and male nurse (<i>n</i> = 82)	1.01 (0.61–1.69)	0.96	1.25 (0.75–2.32)	0.39
Male MD and male nurse (<i>n</i> = 174)	1.15 (0.78–1.70)	0.48	1.07 (0.74–1.56)	0.72

OR = odds ratio.

“you just aren’t sure if people’s feelings are going to get hurt or if they’re going to be mad about it.”- Female PGY3

“Anyone who tells you that being a white male with a deep voice and who’s a little bit taller is not an advantage to being perceived positively, or perceived as in control, would be lying, in really any situation not just a code”- Male PGY2

- Meier A, et al. Female Physician Leadership During Cardiopulmonary Resuscitation Is Associated With Improved Patient Outcomes. Crit Care Med. 2019 Jan
- Kolehmainen C et al. Afraid of being "witchy with a 'b'": a qualitative study of how gender influences residents' experiences leading cardiopulmonary resuscitation. Acad Med. 2014

Gender Schemas

Defining Gender Schemas

Society's ideas about the roles of men and women

Nurturing

Warm

Communal

Expressive



Strong

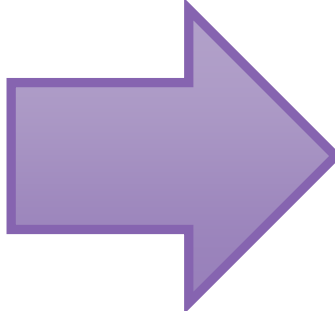
Decisive

Authoritative

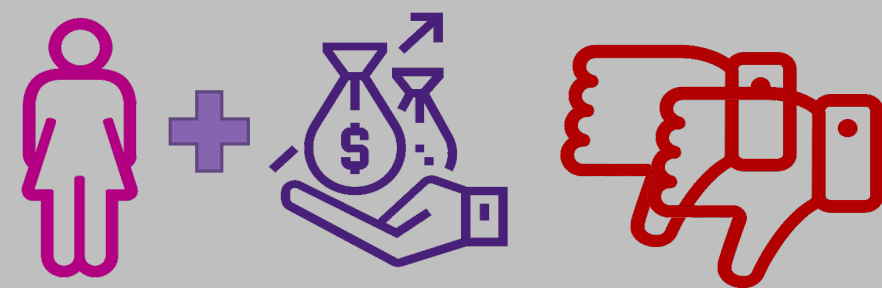
Competitive



Advantages & Disadvantages



Consequences of defying Schemas



Consequences of defying Schemas

Competent:
decisive assertive



Communal:
nurturing, warm



Table 2
Simultaneous Regression Coefficients Predicting Hiring Decision From Social Skills and Competence Ratings for Each Applicant Type

Rating	Agentic applicants			Communal applicants		
	Male	Female	Gender difference	Male	Female	Gender difference
Competence	.44 _x *	.17 _x *	2.05*	.52 _x **	.71 _x **	2.10*
Social skills	.26 _x **	.46 _y **	1.50	.27 _y **	.05 _y	1.95

Note. Regression coefficients are standardized betas. Means not sharing subscripts within columns indicate a significant difference in the contribution of the two predictors, based on Hotelling's *t* tests ($p < .05$). Gender differences refer to applicant gender; tests of applicant gender differences were independent and are based on *z*.
* $p < .05$. ** $p < .01$.

Critiquing the data



Generalizability

- Medical population?
- Current



Attribution

- Bias vs performance
- Degree



Core Differences

- Genetic, epigenetic
- Acknowledge

Operationalizing



Be Reflective: examine your own reactions



Engineer Systems: objective/uniform criteria



Creative Strategies: change the context

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Discussion Points

- What should the resident say to the person?
- What could a bystander say to this person?
- What happens when the person making the remark is a patient—eg the patient requesting to speak to the real doctor?

Case Study

A patient who comes in hypotensive and unconscious following a motor vehicle crash undergoes an emergent splenectomy. Post-op, he asks to talk to 'the guy who saved my life'. When the female attending comes to the room, the patient asks to talk to the real surgeon

Discussion Points

- How should the attending respond to this?
- What are potential implications if the patient doesn't recognize the women providers as physicians? For patients? For the providers?

Case Study

A heavily muscled man becomes tearful every time tape is removed during a dressing change. The wound care nurse rolls her eyes and tells the team she thinks he's being a big baby.

Discussion Points

- How may gender schemas play in to this perception? What are the implications for patient care?
- How do you redirect a provider who is not necessarily part of your hierarchy
- What do you do if you find yourself having a similar reaction

Case Study

A patient complains to the male medical student that he is upset because he 'hasn't seen a doctor in 5 days.' The female chief resident has rounded on him multiple times

Discussion Points

- How should the student respond? What if a patient is talking to the male student instead of the female chief?
- Do identification badges help this?
- What are the ramifications in terms of patient following care recommendations?

Survey

Please complete the following brief survey to assess your learning from today's session and provide feedback on your experience.

1. Open camera app on your phone
2. Point your phone at the QR code to scan it
3. Tap the pop-up banner/link and fill the brief survey

Thank you!!

