

Time's Up Healthcare— Calling PAs to action for gender equality

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Time's Up Healthcare (TUH) is an organization dedicated to ending discrimination, harassment, and abuse by creating more equitable and safer healthcare workplaces. On March 1, female leaders representing many sectors of the healthcare industry issued a united call for organizations and institutions to join the mission to end inequity in healthcare. Although gender equity is a central focus, TUH is committed to supporting all those who are vulnerable to bias, harassment, and discrimination, whether due to sex, gender identity, sexual orientation, race, ethnicity, country of origin, ability, or any other factor.

As a founding member of TUH and the primary PA involved with the organization, I felt a duty to represent a profession that is by no means immune to gender disparity. Research conducted by both the American Academy of PAs (AAPA) and the Physician Assistant Education Association (PAEA) has demonstrated that female PAs are compensated less in the clinical and academic settings—even after accounting for years of experience, hours worked, specialty, postgraduate clinical training, number of patients seen weekly, hours on call, and region.¹⁻³ A 2017 study by Smith and colleagues found that, “Although the (pay) gap decreased over the last several years, compared with earlier in the 2000s and throughout the 1990s, the median compensation in the PA profession for women is still only about 86% of that of men.”³ Furthermore, although men appear to negotiate salary more frequently than women, a large-scale study by Leibbrandt and List concluded that men were only more likely to attempt salary negotiations in situations when a salary offer was considered nonnegotiable.⁴ When it was clear that an



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employer was open to negotiation, women were just as likely to negotiate.⁴

Although gender disparity research specifically related to PA leadership is lacking, the larger healthcare industry has some notable disparities: only one in five departmental leaders at academic medical centers is a woman, only one in six medical school deans is a woman, and only one in eight healthcare CEOs is a woman.⁵⁻⁷ Even when the data are promising, such as the recent PAEA Faculty and Directors Report, which showed that 62% of PA program directors are female, disparities still exist.² The same data showed that female program directors earned, on average, 9.3% less than male program directors.³

Research also demonstrates an implicit bias against women in hiring, professional development, and promotion.⁸ Women often are passed up for employment opportunities and promotions because they “might become pregnant and take a leave” or are assumed “too busy raising their kids to take on this role.”⁷

Women in healthcare also experience significant levels of harassment. A 2018 report conducted by Medscape found that 11% of responding PAs had personally experienced sexual abuse, harassment, or misconduct, and an additional 14% stated they had witnessed a colleague experience sexual abuse, harassment, or misconduct.⁹ Of the respondents who experienced harassment, only 40% reported the incident and only 26% of those reports underwent further investigation.⁹ Of those who did not report the incident, more than half said they did not report because they feared accusations of “overreacting” or they felt that no action would be taken even if they

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had reported it.⁹ Healthcare institutions must create safer environments and foster a culture that demonstrates that harassment from employees, contractors, visitors, and patients will not be tolerated.

The topic of workforce inequality is undoubtedly complicated. Creating a healthcare culture that supports diversity and bridges the gaps that lead to gender disparity requires a unified effort across many fronts. Healthcare organizations should examine their leadership and administration for signs of exclusion and work toward empowering disenfranchised colleagues. Hospitals must create diverse committees to examine complaints of harassment and ensure that victims know that abuse will not be tolerated and will be addressed. Educational intuitions need to foster discussions and facilitate solutions to inequity from day 1 of healthcare training. PAs need to discuss these topics with their employers and advocate for PA involvement with committees and policy creation surrounding gender equity and workplace safety.

Individuals and institutions are encouraged to join us and voice their support by visiting the TUH website, www.timesuphealthcare.org. PA leadership and contribution are needed. TUH will be rolling out a variety of ways for individuals to get involved. Sign up at www.timesuphealthcare.org/sign_up to be notified about current initiatives, events, and opportunities for volunteering.

Together, we can work toward eliminating all disparities in the healthcare workforce. **JAAPA**

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