

**Missouri State Medical Association
House of Delegates**

Resolution #3
(A-20)

Introduced by: Women Physicians Section

Subject: Gender Equity in Healthcare

Referred to: Reference Committee A

1 Whereas, studies have demonstrated that compensation between male and female
2 physicians can differ by 18-36% and, among cohorts of equal training and experience, women
3 hold less advanced academic positions and this gap widens over a woman’s career
4 trajectory^{1,2}; and

5 Whereas, reports have documented gaps in medical societies’ efforts to tackle workforce and
6 patient health disparities and have called on them to more critically assess their efforts through
7 metrics, outcomes and reporting methodology that is consistent with that used in evidence-based
8 medicine ^{4,5}; and

9 Whereas, the American College of Physicians has published a position paper titled “Achieving Gender
10 Equity in Physician Compensation and Career Advancement,” clarifying the organization’s positions and
11 recommendations regarding gender equity in medicine including an emphasis on equitable
12 compensation, promotion of transparency and assessment of compensation, adoption of universal
13 access to family leave, training about implicit bias, encouragement of women in leadership positions,
14 support for further research on pay and career advancement inequities, and opposition to gender
15 discrimination⁶; and

16 Whereas, the American College of Surgeons has issued guidelines for policy surrounding pay equity that
17 includes the promotion of transparency, training on implicit bias as it pertains to compensation
18 determination, and encouraging third-party oversight of compensation models, metrics, and total
19 compensation for all employed physicians⁷; and

20 Whereas, the American Medical Association (AMA) has adopted comprehensive policy surrounding
21 gender equity in medicine and has encouraged state and specialty societies to adopt the “AMA Principles
22 for Advancing Gender Equity in Medicine”^{8,9}; and

23 Whereas, workforce disparities for women physicians may negatively impact patients’ ability to receive
24 services and the quality of the services provided¹⁰; and

25 Whereas, MSMA does not have comparable policies to the AMA, ACP, ACS, and other organized
26 medicine groups on these important topics; therefore be it

27

28 RESOLVED, that our Missouri State Medical Association support gender equity throughout all aspects of
29 medical practice and at every level of physician training including, but not limited, to treatment,

30 performance evaluation, career promotion, publication, research funding, financial compensation, and
31 representation among healthcare leadership, and be it further
32
33 RESOLVED, that our Missouri State Medical Association encourage hospitals, academic institutions, and
34 other healthcare organizations in Missouri to a) use objective, gender-neutral criteria in pay structures
35 and processes of promotion, and b) adopt institutional transparency of compensation and regular
36 gender-based pay audits.

Fiscal Note:

Current Policy: