2016
Symposium Schweizer Spitzenmedizin

# What's happening now in Pediatrics? 

Prof. Klara Posfay Barbe Children's Hospital of Geneva University Hospitals \& Medical School of Geneva

## As a student



- Mostly male professors
- Don't really remember a professional female role model
- Marie Curie?
- Pediatrics: Dr Zsolt Koppányi
- Totally unaware of how careers are built
- Many comments from others on unrealistic project to have a career (as pediatrician, not even academic) \& a family


## In Pediatrics

- Felt natural to have a female department head
- She was the boss
- We could go and talk to her \& wanted to please her
- Perceived as: intuitive, stable, "woman/family friendly", didn't want "war", pragmatic, motherly-figure
- Mostly male senior doctors
- Mostly female residents
- My 3 female role-models


Susanne Suter

Ellen Wald



Claire-Anne Siegrist

## Female role models

- Hope
- Family-compatible
- Extremely organized
- Still women
- Highly respected as professionals \& leaders
- Could be tough and stand strong
- Could be kind and understanding
- Open to discuss / listen
- The sky is the limit



## After Prof. Suter in Geneva

- New department heads
- Prof. Siegrist 우 (med faculty): pushed women forward
- Prof. Belli $0^{7}$ (clinics): maybe less... aware?
- Still mostly female doctors becoming pediatricians: 163/220 = 74.1\% female doctors
- 2016: 250 candidates
- 40 interviewed = $87 \%$ women
- 14 doctors hired $=86 \%$ women $(12 / 14)$
- Still many pregnancies / year: organizational issues


## 2016, Doctors, Dept of Pediatrics, Geneva



## What's happening now in Pediatrics in Geneva?

- Youngergeneration taking over leading positions, several women
- Currently professors:
- 7 men, 8 women
- Decrease in offered/accepted part-time jobs
- But....more requests
- Career planning still working
- Male boss:
- Less easy to announce pregnancies
- Less easy to talk about personal issues
- Usually done first with female Attending


## Female \& male doctors, Gen. Ped., GVA



## Full-time / part-time work Dept. of Pediatrics, Geneva 2016



## Promotion of academia in Pediatrics

- CDC scientifique position
- New training tracks with clinical research followed by clinical training
- Clinical research rotation during training possible
- Several residents do a CAS in clinical research
- One resident doing an MD-PhD in clinical research
- Pre-assigned mentorship for all residents (Success?)


# Medical school of Geneva Screening for the «sleeping beauty», etc.. 

- Department heads identified female researchers who could potentially be promoted to professor rank
- "Café carrière"
- "Role-model meetings"
- Individual consultations "woman-to-woman"


SintartingDoc


## Results: Medical School of Geneva

- 2012: Total of $\mathbf{1 4 . 8 \%}$ women with a professor rank
- Summer 2014, it had $\mathbf{2 5 \%}$ of female professors
- Aim of this project is to have $\mathbf{3 3 \%}$ of female professors, ideally until 2016


## Proportion men / women - privat-docent lectures



## University of Geneva: proportion of gender according to rank, 2015



Women

Women = 62\% of students


Assistant professor

## Men


but... $22 \%$ of professors

Full professor


SPECIFIC TOPICS

## Dual careers

- Few examples in the hospital: some good, some less so Difficulties
- If ~same age: same timing in career « boost », difficult rotations, long hours, trips, etc.
- Other parent often not available for children
- Often not available for each other (e.g. on-call on alternate week-ends)
- Same training center or at least in same city
- Same timing of training abroad
- Funding for both
- Work mobility
- If one career works and the other less, strain on the couple
- People have fantasies about « pillow talk»


## Who takes care of the household?


$44 \%$ believed that the woman with part-time job is ideal 29\%: both part-time
19\% : house wife

## Taking care of children, 2013



Office Cantonal de la Statistique GE 2016

## Dual careers

## Advantages

- Understanding of our job and our job's pitfalls
- Understanding of the process of academic careers
- Helps a lot to think about job (strategies, priorities, information, experiences, sometimes double mentorship?, etc)


## Perceived differences from employer, patients, colleagues

Most agree that

- Male doctor's skills = female doctor's skills
- Salaries identical


## But...

- In University Hosp. GVA: 1/13 dept head = woman
- Funding for my husband and I(2001)
- In Pediatrics: 2/7 Division heads = women
- E.g. patients: Male student
- E.g. colleagues: with all male committee


## Funding bodies

- Marie Heim-Vögtlin (MHV) grant of the Swiss National Science Foundation
- SNF: Family: support for postdocs
- L'Oréal-UNESCO Fellowships and Awards for Women in Science
- Graduate Women International (Fellowships and Grants)
- Wellcome Trust: Career Re-entry Fellowships
- FASEB Excellence in Science Award
- American Association of University Women International Fellowship
- Nestlé Scholarship for Women


## Wishes \& requests in the future

Not possible to be a super woman: can't be a super good:

- Clinician
- Researcher
- Teacher
- Administrator
- Human resources expert

- Budget expert, etc.
- ...and mother and wife


## Needs: women in academics

## 1. Mentor 우 or $\sigma^{\top}$

## Advice

- Steps to follow for academic career
- Explain progression process / funding systems earlier
- Career planning
- Organization of training in site and out of site
- Goals of training and time abroad
- Organization of return from abroad
- Contact with other (research) groups
- Knowledge of grants


## What do we also need from mentors

- Feedback that isn't always aligned with their own experience or interest
- Altruistic empathy
- Sometimes, just a "bravo!, good job!"



## For clinicians

2. Time off clinical work (protected time)

- Subside Tremplin (UNIGE)
- AMBIZIONE (SNF)
- Marie-Heim Vögtlin (SNF)



## Other needs

- More part-time jobs (Clinical specialty?)
- More funding for women working part-time
- More funding for « older » women
- More funding for couples in academia
- More contacts with other research groups
- "Reinsertion" should be possible after longer stop
- In the community:
- Accessible childcare with extended times
- Shops open later, enrollment to after-school programs through internet, etc
- Understanding life-partner


## What do I tell my (female) mentees?

- It is possible to combine academia \& family, but it is not easy \& you will have to work hard
- Choose your life partner well
- Choose your mentor well and use him/her
- Make a deal for regular meetings
- Tell clearly what you need or don't understand
- Ask what you need to do and when
- Choose your specialty well if you plan to work part-time
- Reassess your career plan regularly: it is OK to change your mind



## Charlotte Verolet

2 years clinical research CAS in clinical research 1st year clinical pediatrics Obtained funding for project

5 published papers
Several in pipe-line
Doctorate in progress
Wants to have an academic career
Just got married


## Laure Pittet

2 years clinical research
CAS in clinical research
3 years clinical pediatrics Obtained funding for project

10 Publishedpapers
Several in pipe-line
Doctor in medicine
MD-PhD in progress
Will go to Lausanne \& Australia for Peds ID training


## Arnaud L’Huillier

2 years clinical research
CAS in clinical research
3 years clinical pediatrics Obtained funding for projects
Submitted SNF grant
21 published papers Several in pipe-line

Doctor in medicine In Toronto for fellowship + research

## What did I learn until now

- Still love my job intensely
- There is not one way to do a career in academia. Individual solutions must be found
- Having a woman boss can be a plus
- Benefited tremendously from women before me and will carry on the torch
- Had to realize that I can't do everything perfectly
- Experience of last 3 weeks



## THANK YOU!

Klara.PosfayBarbe@hcuge.ch

Hôpitaux
Universitaires
Genève

