

ACT and Region Medical Women's Society Newsletter

Newsletter Number 39

<http://afmw.org.au/act>

August 2010

PRESIDENT'S MESSAGE: DR JULIE HEWITT

Message from the President



Our AGM is just around the corner! I know we are still only in August but the months are flying by and 23 October is now only 2 months away. It is time to reconsider the direction of our society and to consider nominating a new committee; most of our executive have done 3 straight years and it is time for "new blood". I would urge each of you to think about accepting a position and not feel you have to wait for someone to give you a shove. Jane Twin will make nomination forms available by email and, if you feel you can contribute I am certain we can find someone to nominate you.

Our AGM this year is to precede our national body, the AFMW's, AGM on Saturday 23 October and will be followed by a 3 course dinner at University House in the very elegant Scarth Room. This is to be our next and final function for the year and we aim to make this a relaxing and sociable event for our members.

ACT and Region Medical Women's Society
PO Box 178, CAMPBELL 2612

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DIARY 2010

**The AGM together with
AFMW AGM and Dinner**
• **Saturday 23rd October**

University House

So, you are asking, what has happened to our fundraising dinner? As the numbers attending our functions have been dwindling over recent years, we had to ask yourselves if the effort involved in organising it and the risk of making a loss was really worth it, especially as the AGM, with dinner, is going to be a grander event this year. As we sincerely wish to continue supporting our charities, we have come up with an alternative :

We are suggesting that we list our charities and that each member consider making a donation to whichever charity they choose.

This way we free up your social calendar, you get an extra evening relaxing at home, you still have another chance to socialise with colleagues at the AGM dinner and you support our charities. All you need to do is transfer your donation to the ACT MWS account with your name and let Ann Hosking know which charity you wish to support. If the donation is tax deductible, Ann will issue a receipt. Relevant details are listed below. We will keep reminding you over the next few months!

I encourage all of you to make a special effort to join us at the AGM and dinner, where you will also meet some of our interstate colleagues and our vibrant national president , Desiree Yip.

Julie Hewitt,
President, Medical Women's Society of the ACT and Region.

Editor's column

Contributors sought

Hello and welcome another edition of our (ir)regular Newsletter. This is a learning process but many of the delays are due to lack of material for publication. Book reviews, notices and information are all very welcome.

As Julie has mentioned we have struggled to attain viable numbers for attendance at functions this year. Thus we have decided not to have a formal Fund Raiser Dinner this year. Instead we invite you to contribute to one of our charities by donation.

The charities we have supported in the recent years are:

ZOPOM—The Mutare Orphanage in Zimbabwe

The Mercy ships (Fistula surgery)

The Fiji Project, run by our Medical Students

I have also included a nomination form for the Committee. We need a new Executive, please give your support.

Jane Twin
Secretary

SKI WEEKEND 6-8th AUGUST—perfect weather and immense fun

This annual highly successful event was held at Thredbo, staying at Candlelight lodge. Twelve enthusiastic skiers (including one “Cappuccino skier”) of all abilities got together for a fun filled three day break from cares and families. We couldn’t quite leave Medicine out of the conversations, but the glorious blue sky days and light wind made for a memorable weekend.



**MWS ACT and
Region Committee
2010**

President

Julie Hewitt

Vice President

Jennie Bromley

Treasurer

Ann Hosking

Secretary

Jane Twin

Committee

Simone Campbell

Marjorie Close

Susie Close

Kate Drummond

Liz Gallagher

Katie Lees

Sue Packer

Felicity Williams

GP Reps

Ruby Curtis

Jill Hutton

Student Reps

Yin Soon

Phoebe Moore

Corrine Lu

Olivia Millay

Aodhamair lenagh-

maguire

Young Doctors Reps

Moniza Kumar

Anita Hutchison



Australian Federation
of **Medical Women**
the voice of Australian medical women

*The voice of medical women advocating for,
and supporting, the health and welfare of our
local, national and international communities.*

Did you know that when you join the ACT and Region Medical Women's Society you become a member of the Australian Federation of Medical Women?

About AFMW

The AFMW offers our members, colleagues and the community access to the collective knowledge and experiences of medical women. The AFMW seeks to ensure equity and equality for women doctors, so as to achieve their potential throughout all stages of their professional and personal lives. AFMW also seeks to improve the health of all Australians, especially women and children.

In 1896 Australia's first medical women's society was formed by an inspiring group of ten Victorian female doctors, including Constance Stone. The AFMW was formed in 1927 and is a not for profit, politically neutral, non sectarian, non government organisation.

Today the AFMW offers an important network for female doctors in all regions of Australia. AFMW membership is automatic for doctors who are members of their affiliated state medical women's society; medical women can join AFMW directly where they have no active local State Society. Full membership is open to registered female medical practitioners of Australia. Associate membership includes non-registered female medical practitioners and medical students.

Membership Entitlements:

- Leadership development, networking and mentoring opportunities
- The opportunity to become actively involved in key issues surrounding the health and wellbeing of women and children, in Australia and globally
- Automatic membership of the Medical Women's International Association, an organization with United Nations representation
- Attend educational and social events
- Join the AFMW leadership skills database
- Receive updates and e-newsletters from AFMW

To ensure you receive emails from AFMW please visit <http://afmw.org.au> and subscribe to the AFMW quarterly e-newsletter. While you are there, check out the new, improved AFMW website!

To find out more about Medical Women's International visit <http://mwia.net>.

**MEDICAL WOMEN'S SOCIETY OF THE ACT AND
REGION**

ANNUAL GENERAL MEETING

AND

DINNER

In conjunction with the AGM for the AFMW

Saturday 23rd October
The Scarth Room
University House
ANU, Acton, ACT

Schedule:

MWS ACT AGM - 5.30 pm
AFMW AGM - 6.30 pm
Dinner - 7.00 pm

Cost—TBA

PRELIMINARY NOTICE



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Red Hill ACT 2605
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Web: zopom.org

In the recent newsletter of the ZOPOM foundation(June 2010), Yvonne Wyer quoted **Edward Everett Hale:**

**I am only one, but I am one. I cannot do everything, but I can do something.
And I will not let what I cannot do interfere with what I can do.**

This is an extract from the newsletter:

Dear Friends,

On my visit last October to the orphanage, it was hot and purple, Jacaranda trees were adorned in purple flowers, bougainvillea creepers were ablaze with carpets of purple blooms and Mulberry trees were dripping with sweet, staining berries. Even the wild flowers were in defiant and magnificent display. Zimbabweans need this beauty more than ever now to soften the ugliness of what is going on around them.

This was my first visit back since 2006. Unfortunately nothing much has changed. The magnitude of suffering is beyond most Australians imagination. There were peripheral changes, the huge bags of money to buy a loaf of bread were no longer required as US dollars have become the official currency and Zim dollars are now used as wall paper and it was not unusual to 5 million Zim dollar notes blowing around in the gutters. There is now a big, new supermarket in Mutare and the shelves are groaning with supplies. However, one only sees the well dressed, obviously well-fed people doing any shopping. Entering the shop, one has to walk the gauntlet of hungry, dirty street kids, disabled beggars and grandmothers asking for a dime!

It was hard not to become discouraged and at times I felt like it is a nation that has lost its moral compass and all compassion.

One of the projects Paula runs is the 'Care Giver' project for old people that have been abandoned by their families. Paula employs neighbours to spend 4 hours a day with the Gogos to bathe, dress and clean their homes. They fetch water and firewood, do their washing and cook a meal. The care givers come to the orphanage once a month for food rations, soap, candles and medication. Volunteers visit the Gogos around once a month to make sure they are being well cared for.

On one of these visits, Paula and I found a Gogo whose care giver had been stealing her food, there was no clean water and she was wandering around in a confused state. She was dirty and in rags. When we spoke with Gogo she said her care giver had threatened her if she told us what was going on. We brought her back to the orphanage and the children now visit her in her hut on campus. Needless to say the care giver was fired but not before gaining the chief's permission to do so.

Another Gogo we visited reminded me that there are still many caring and compassionate people. This particular Gogo lives alone on an abandoned, wind-blown hillside. She is crippled and hobbles in great pain on two sticks. When I visited her she sat clapping and singing and begged me to share a cup of tea with her. She was well cared for spoke about how good her care giver was. She said she had been praying all day that she would get a visitor because she was feeling a lonely. I felt so incredibly humbled and shed a few tears that night



when I was on my own.

It was wonderful catching up with all our children. They have grown and matured. My very special little Trinity was shy to start off with, but now he is a 'big' school boy and quite a cheeky, mischievous little chap. There were many more new faces and a nursery full of babies that have been abandoned. It was so heart warming to see the older girls mothering these motherless little babies.

Thank you to so many people – I could not help but be reminded of all our generous donors in Australia. Walking through the bush I would see children in Canberra Grammar uniforms that were sent in the last container. Thank you Canberra Grammar!



And this really lifted my spirits – during my visit in 2006 I visited a family with two daughters who are intellectually and physically disabled. With the generosity of Hannah Munro at Concorde hospital, we were able to send 6 wheelchairs in the last container

With the generosity and compassion of 'Feed My Starving Children,' an NGO in the USA, Paula is able to keep up feeding programs at schools and the wider community. The stories these people shared with me as they waited for their only meal of the day once again made me realise how much we have to be grateful for in a wonderful country like Australia!

This little chap walks miles each day to get a meal. They only have one dish between them and he waits patiently until his little brother has eaten.

The very good news is that Paula now has a Co-ordinator at the orphanage. Believe and his wife, Winnet, are doing a wonderful working along side Paula and taking care of the day-to-day running of the orphanage.

Where to from here?

To all of our generous donors, you have helped us keep these people alive. Now that Paula is getting food aid from the USA we can concentrate on using ZOPOM funds on longer term sustainable projects.

In August dear friends Don, Helen and I are going to the orphanage for 5 weeks. We are all getting quite excited about our proposed visit. I am particularly looking forward to this visit being very productive because I am bringing two fabulous workers with me and also now that Believe is managing the day-to-day running of the orphanage and doing a fabulous job, maybe it won't be so reactive and we can be more proactive getting a few projects done. This is also very important from both Global and ZOPOM's perspective, as we are keen to move away from welfare to more sustainable projects.

The three projects we would like to work on and which have Paula's blessings are:

We would like to build a kraal, fenced off somewhere on the property and buy a herd of goats. This would be great for the gogos with babies and in fact for our own children, not only the benefit of the milk, but also learning to care for and milk the goats.

The second project I would really like to do, is build an 'all pupose room'. In the morning it could be used to teach sewing to the ladies, making school uniforms and clothing etc (we hope to send treadle sewing machines in the container.) In the afternoon it could be used for home schooling for the children. All future containers from Aus will have school supplies. We are looking at employing an ex school principal to teach sewing to the ladies and after hours schooling for our children.

And lastly what is very dear to my heart would be to fence Marjory's vegetable garden.

The complete newsletter can be viewed at <http://www.zopom.org>

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The Medical Women's Society: a Support Group or Sexist Elitism?

This year the advertising of The Juggle, the MWS mentoring function for medical students, incited a gender bias debate on the ANU medical student forum. Some men saw the Medical Women's Society as sexist elitism. They stated that they wished to attend The Juggle. Whether this was grandstanding or a real desire, we were uncertain. However the debate generated much discussion amongst the committee members, lead by our student members. There was a valid argument that if The Juggle were held on Campus, we could not exclude the men.

What is the aim of The Juggle? Perhaps we could debate this? The discussion below is a précis of the numerous emails flying around earlier this year. The essential is that it is an issue which needs clarification and will be tabled at the AGM in October.

In recent weeks, I have come across some arguments in favour of the continuation of a support group for female medicos.

Firstly, the preliminary results of MABEL (Medicine in Australia: Balancing Employment and life) have been released. Female GPs earn 25% less than their male colleagues but have longer consultations. I think we knew this, but it is good to see it proven by valid research.

Secondly, I was involved in a conversation with a new female graduate who was having trouble getting a commitment on her hospital job placement because she wished to work part-time following the birth of her baby. Issues she still faced revolved around the lack of understanding (or tolerance) by the clinical administration of the issues of mothers with young children.

We recognize, however, that we need to be part of society in general and that in Australia there is a tenet of gender equality. In the words of one of the committee members we could "address this along the principles of gender equality philosophy, where gender equality refers to the equal valuing of the roles of men and women and where achieving gender equality requires men and women to work together in search of solutions, in ways that encourage mutual respect and trust.

"There are a number of ways of addressing inequality. One is to support and strengthen women, and this approach is one that AFMW and MWIA are based on. Another is the gender and development approach, where one seeks to understand the impact of change on both men and women, and this approach may not always address the specific needs of either men or women. Both approaches are valid and needed. The third of Millennium Goals for the Elimination of Poverty is about the promotion of gender equality (and the empowerment of women). The National Women's health policy has as one of its platforms, the implementation of gender equality, and the idea of evaluating all policy for its gender implications."

We must remember that there are also a few male colleagues wishing to participate more fully in the lives of their families, wanting to work fewer hours in order to share parenting. These men also will need to adjust their career goals and will also face discrimination. Maybe our struggles can help them.

How then can we resolve the gender debate initiated by the posting of The Juggle on the student noticeboard?

Perhaps we could choose one event where the men could be invited. It was thought that they might benefit from listening to the experienced of female clinicians.

Maybe this could be an event linked to White Ribbon Day, a day initiated by a group of Canadian men to advocate for the Elimination of Violence against Women. This day is usually in November. As such we could look at an event in 2011.

I have included the two postings as an illustration of the question. The committee debated the question for several weeks.

The first posting: (male medical student, anonymous)

"When does this become discriminatory (ie a female only society)?

(The then) Deputy PM Julia Gillard has been campaigning for women to be allowed membership at exclusive Melbourne men's only clubs, and has asked Governor-General Quentin Bryce to join her in applying for membership. These respected and high achieving women are attempting to break down societal gender barriers instead of erecting new ones in the name of feminism.

Female medical students now outnumber the male students at the ANU. Is there really a need for a society reserved for females that provides advice on how to achieve in the medical workforce? Is medicine the right place for gender-exclusive clubs?

I can only imagine the outrage that would accompany a bona fide men's only club providing advice on how to succeed as a male doctor."

This was soon followed by a posting by the same male student:

To partially answer my own question:

Women now comprise half the graduating doctors in Australia and are much less likely than older men to have the full-time family support that a wife previously provided. Systematic attention is needed to understand how women's lives interact with the requirements of post-graduate training programmes and hospital working environments. Women require flexibility in work and training programmes to accommodate the complexity of their working and family lives.

<http://www.med.monash.edu.au/gendermed/workforce.html>

Also, 'One Man's Word on Women Doctors' by Jim Wilkinson

A popular book suggests women are from another planet... they are certainly different from us chaps. Failure to understand that women are different can even kill a female patient - did you know that injudicious salt -poor intravenous fluids are much more likely to cause cerebral oedema, convulsions and death in menstrual age women than adult males? The difference appears to be related to the effects of female sex hormone on sodium pump mechanisms in brain cells. We males in the profession live with a tradition founded by blokes - kudos, prestige, status (even if under constant attack), an ethos that can put work and career above all else, generally good incomes etc. The down side can be broken marriages and estranged, rebellious kids who really needed a dad, not a medical workaholic. Women doctors have to cope in this man-made environment but, unless they are single, have to be homemakers and mothers too. There may not be enough hours in the day to do all this. Yet few males seem interested in understanding a woman's perspective on work and career. In 1996 I attended the World Meeting of Anaesthetists in Sydney, a huge affair with 10,000 delegates. There was a seminar on "Gender Issues" . Interested, I attended. It was certainly a treat being in the same room as about 500 intelligent , attractive women. The lady chairperson rose to welcome the audience, making special mention of the men who were present - all two of us, the other being the famous pioneer Swedish anaesthetist, Torsten Gordh (of Gordh needle fame). Where, I pondered, were all the Directors of Departments or Training, half of whose charges these days are likely to be female? Maybe asleep inducing talk on muscle relaxant infusions was a safer course than being seen at a sissy seminar for the girls. They should have been hearing how the ladies tried to cope with competing demands of work, specialist training, spouse, children and household.

A "stand out" at the Gender Issues session and the Conference generally was a lady Professor from Nigeria. Tellingly she said, "I'm a Professor of Anaesthesia and my husband is Professor of Medicine. We drive to the same hospital in the one car, both do our day's work, then drive home together. Whereupon he relaxes on the couch and puts his feet up while I start cooking the family dinner." (Her husband had the presence of mind to stay in and not attend this seminar!).

Career women seem to have one thing in common with the male obstetricians who care for them - all are chronically sleep deprived and exhausted and all good reason. Without meaning any disrespect, this may be why our obstetricians and many women doctors (not all) have been relatively weak in fighting assaults on the profession by governments - they are simply just too tired. Survival and sleep are their greater concerns.

We live close to a busy suburban rail station. For years I've watched the commuters, from Sydney's northwest mortgage belt, park the car at an early hour, dash for the train, then reappear at dusk for the drive home. The all look tired and stressed but the women have not only the briefcase to bear -there's the hastily bought food shopping for the hungry family waiting at home. No arm chair and slippers await these women.

[Jim Wilkinson is a retired Sydney anaesthetist. He has enjoyed 30 years of wedded bliss and has four adult children, three of them daughters. He assists the NSW Medical Board with supervising impaired doctors) <http://www.mwia.net/> (NOTE THE REFERENCE!)

Food for thought. Come to the AGM and voice your opinion!

COCKTAIL PARTY 2010



Some of our Med Students

and thanks
to Susie and
Christina
from our
sponsors,
Capital
Pathology

Medical Women's Society of ACT and Region

Nomination for committee

Positions for nomination and election:

President
Vice-President
Treasurer
Membership Secretary
Minutes Secretary
General Secretary
Representatives from urban general practice, rural general practice, specialists, hospitals and students from ANUMS.
General representatives

Nomination form for 2010/11 Medical Women's Society of ACT and Region

I, would like to nominate for the
position of on the Committee of the MWS ACT for 2005.

Signed:..... contact phone number.....
Email.....

Proposed by:

Seconded by.....

Please print off this page and either:

Email to Jane Twin at jane.mwsact@gmail.com

Or

Fax to Jane Twin at 02 6281 0024

Or

Post to 3 Schlich St, Yarralumla, ACT 2600