

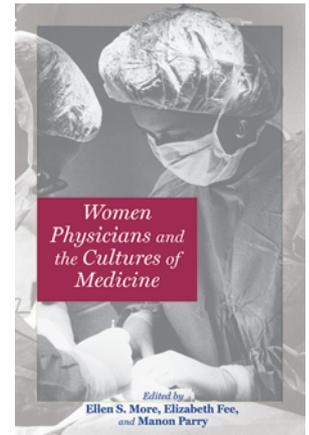


Women physicians and the cultures of medicine

Edited by Ellen S. More, Elizabeth Fee, and Manon Parry
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Reviewed by Barbara F. Atkinson

Kansas University Medical Center, Kansas City, Kansas, USA;
Foundation for the History of Women in Medicine, Pottstown, Pennsylvania, USA.
E-mail: batkinson@kumc.edu



When Elizabeth Blackwell, daughter of an Ohio sugar refiner, decided she wanted to become a doctor, she applied to 29 medical schools across the country. All rejected her because she was a woman. She was finally admitted to Geneva Medical College (now Hobart College) in New York, where it was rumored that her admission had been meant as something of a joke. In 1849, Blackwell, ranked first in her class, became the first woman to graduate from medical school in the United States.

Today, more than 150 years later, nearly half of medical school students nationwide are female, and the influx of women physicians over the last quarter-century has changed both the face and character of medicine.

Women physicians and the cultures of medicine, edited by Ellen S. More, Elizabeth Fee, and Manon Parry, comprises 12 essays, all but one written by women, that examine the wide-ranging experiences of women physicians in the United States, shedding light on their accomplishments and struggles from the mid-19th century to the present.

The first section, "Performing gender, being a woman physician," focuses on the overwhelming challenges faced by the first generations of women physicians entering the male-dominated field of medicine. Many spent a substantial part of their careers trying to convince others that there were no biological or intellectual barriers that should prevent women from practicing medicine. Mary Putnam Jacobi conducted a substantial amount of clinical research in the late 19th century that she hoped would prove that biological functions such as menstruation and childbearing were not obstacles for women wanting to enter traditionally male-domi-

nated professions. Marie Zakrzewska, one of the most accomplished medical practitioners and educators of the 19th century, insisted that men and women did not differ anatomically or psychologically in any significant way (although she modified her position late in her career.)

The middle section of the book deals with the personal challenges women physicians faced as they tried to make inroads into the traditional model of health-care professionalism. Although more women were entering the field of medicine in the early to mid-20th century, they still faced a masculine and often hostile culture. An insightful essay by Sandra Morgen links the growing acceptance of women physicians in the 1960s and 1970s with the women's health movement, which encouraged women to take more control over their bodies and health care.

My favorite piece, "Feminists fight the culture of exclusion in medical education," by Naomi Rogers, chronicles the generation of activist women who attended medical school in the 1970s and 1980s. They demanded, and eventually received, more respect from their professors and fellow students. As I graduated from medical school in 1974 and was a student, resident, and then faculty member at four different medical schools during this time, I share many of the kinds of experiences discussed, including being told: that I should "stay home and take care of my children" (many times by many people); "we don't need women in medical school because there aren't enough ladies' rooms"; and "we can't have a woman on our board because then we wouldn't be able to smoke cigars, drink brandy, and tell jokes after dinner." In response I became

determined, even early in my career, to do what I could to help other women advance in medicine.

The final section, "Expanding the boundaries," is the most problematic in the book. It is composed of a brief group of essays dealing with everything from the growing number of women practicing homeopathic medicine to the evolution of health services for college students. While individually these essays are not without interest, they seemed to be thrown together simply because there was nowhere else in the book to put them. That said, Virginia Metaxas's exploration of American medical women who carved out careers serving populations in crisis overseas recounts the stories of Esther Pohl Lovejoy and Ruth Parmelee, who provided medical aid to the war-torn nations of Greece and Turkey in the early 20th century, and is one of the most fascinating pieces in the book.

The book's conclusion analyzes the modern state of affairs for women physicians in the United States and their prospects for the future. This section draws heavily from the Women Physicians' Health Study conducted in 1993 and 1994. The study found that while women practicing medicine today have overall found great career satisfaction, inequality still persists, particularly among African American and Hispanic women physicians.

While *Women physicians and the cultures of medicine* doesn't provide a major new perspective on the narrative of women in American medicine, it is a more than satisfactory introduction to that colorful history. This lively collection of essays will no doubt be enlightening to the current generation of medical students, historians, and scholars.