

# The Victorian Medical Women's Society

Newsletter Volume 2, Issue 2

Founded 1896

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## President's Report



Here we are with our second newsletter for 2004! So far, 2004 has been a busy year. As you may be aware, our membership drive is now underway. We have sent out nearly 4000 letters to Victorian Medical Women encouraging them to join us and are waiting for replies! Please encourage your friends who are not members to join – and let us

know if they did not receive a recruitment pack.

In March we held a very successful networking party with nearly 60 participants. Thanks to the hard work of both Dr. Kate Duncan and Katie Mendra, there were even door-prizes provided as an incentive for going! We have several upcoming events – see the enclosed flyers.

We were saddened to lose two members: Dr. Lorna Sisley and Dr. Margaret Saunders. On behalf of you all, VMWS has provided a donation to each of their designated charities.

*Cont opp.*

## Upcoming Events



**June 1:** A Dinner In Space  
Café Noir, High Street Armadale  
Members Only

**July 14:** Lyceum Luncheon  
Lyceum Club, Melbourne

This year is also the year of the XXVI. MWIA INTERNATIONAL CONGRESS, to be held in Tokyo, Japan from July 28 – August 1. The theme is 'Medicine in a New Life Style - Education, Research and Practice' Please join us in Tokyo! For those who can't attend, we will have a report in a later newsletter.

The last but not least bit of news is that we are on the hunt for a new logo. We have commissioned Mr Lucas Licata to provide us with some designs which will be both symbolic as well as versatile, whether printed in colour or black and white. We hope to be able to announce a decision by the next newsletter – so please continue to watch this space....

*(Ed. Not least indeed! All of us at VMWS wish Des luck with her next big project. By the time this is with you, a little piece of Des should have been delivered. Best wishes to Mum and Bub).*

## VMWS Medical Student Essay Competition

### 'The Role Model and Mentor in Medicine'



Contact the Secretariat for Details



## Networking Meeting



Our first meeting for 2004 was a great success. About 60 people spent an evening mingling at AMA House on March 18 in our

### Networking Cocktail Party.

The night was intentionally informal, giving everyone the chance to catch up with old friends, and meet many of our new members.

As the focus of the night was on how established members can help foster the careers of younger members, there was a good mix from all levels of the profession. One of our registrar members had the gratifying experience of meeting many young women who wished to enter her subspecialty.



An unusual experience when the area is Surgery... We were able to link every interested prevocational woman with someone present who was working in their preferred field.



Katy Mendra and Kate Duncan, the organizers extraordinaire, did an incredible job in putting the evening together. Between them they arranged the door

prizes, the sponsors, the wine, food and all things in between. Thank you to both of them for their work.

A thank you must go to the Letten Financial Service Group, and to Medfin for their generous assistance for the event. Both companies recognize the increasing important of women as a force within the medical profession, and tailor their services accordingly.



## Student Affairs



The University of Melbourne  
Rural Clinical School - A  
Personal Perspective

Katy Mendra, Medical Student

In 2002, the University of Melbourne opened its Rural Clinical School in Shepparton, which will soon become the base hospital for 25% of students during their clinical training. Fifth year students also undertake a four-week term in Rural and Indigenous Medicine, which I enjoyed during September 2003. The block comprises lectures,

visits to Shepparton health services, two weeks living in a small rural community and three days at an Indigenous health centre - all in the setting of very nice accommodation, and plenty of free time to experience rural life!



I had a number of impressions of women in rural health. A significant proportion of academic staff at the School is female, including the clinical Dean, Professor Dawn de Wit, and a number of female country GPs who are part-time lecturers. These GPs portrayed that they are highly sought after by female patients, have a large load of psychological and gynaecological consultations (which can make it awkward when meeting patients at the supermarket), and the challenges of finding their own private and anonymous health services.

I spent a day with a female mental health worker in Finley, a 2000-person town in New South Wales,



who is the sole mental health worker for five towns! With a psychiatric nursing background, she was required to manage complex cases as telepsychiatry is only available once a month. I was amazed by her organization, innovation and adaptability. Once a week she has a case review meeting in a larger town (where most of the other workers are female), and I gathered that their regular café lunch was a vital source of professional and social support.

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## Wonderful Medical Women

### Professor Judy Savige



Prof. Savige graduated in Medicine from the University of Melbourne and undertook physician training at the RMH. Developing an interest in Nephrology, she has worked at the Austin Repatriation

Medical Centre for some time, recently being promoted to Professor of Medicine at the Northern Hospital. In addition to her clinical duties, Prof Savige heads a research laboratory working on inherited kidney disease and molecular changes in leukemia, and is Chair of the Victorian State Committee of the RACP which supervises the physician trainee lectures and continuing education workshops. **Her philosophy is that if you teach a medical student, HMO or physician well, you are actually contributing to better patient care.** Her many qualifications include a PhD from the University of London, a Master of Science from Brunel University, as well as an FRCP, FRACP and FRCPA.

Prof Savige has highlighted the prominence of **strong female role models** in her life in the development of her "I can do that" attitude. Her mother returned to work and further study while Judy was still young, with strong support from her husband (including relocating the family to enable her employment). Support from Judy's partner, family and friends now enables her to complete her many roles (she does also enjoy working hard...).

In talking to us, Professor Savige emphasized the importance of **approaching your career strategically**, identifying the necessary skills and experience that will get you where you want to be. She also emphasized the importance of women supporting women in their life choices, and role of mentoring in this (as well as the ability to recognise beneficial advice from unexpected quarters).

Prof Savige feels that the world will be a fairer place to live if women have a greater role in its leadership. She also hopes that we as humans will learn to be less selfish and have less impact on the planet's environment.

## Upcoming Events

[www.wire.org.au/wire/events](http://www.wire.org.au/wire/events)

### Set your body free: body image therapy

The School of Psychological Science at La Trobe University offers a group therapy program for women with body dissatisfaction and related eating behaviours. Young women (aged 18 - 30 yrs) are invited to join a free 8-week group program. The program will run until at least June 2005. For more information, contact Dr Emma Gollings on (03) 9479 2949 or email: [e.gollings@latrobe.edu.au](mailto:e.gollings@latrobe.edu.au).

### Women's eye on peace: an exhibition

Women - you are invited to submit your personal photographs for consideration for an exhibition to be held in September 2004 (photos due by July 20).

WIRE is looking for photographs of peace rallies and events from around Australia or the world taken by Victorian women since the

September 11 attacks. The photographs selected will be included in an exhibition to raise funds for the international Women's Development Agency's (IWDA) support for women working for peace in Afghanistan and Iraq.

You don't need to be a professional photographer: they want to see what you saw, what matters to you, which messages and images resonate in your mind's eye (and camera!).



**Medical Careers Expo 2004**  
**Sunday, June 19<sup>th</sup>**

**Skyline Room, Melbourne Park**

A chance for prevocational doctors to discuss career options with representatives from each college, the AMA, medical indemnity groups and us! *Volunteers to staff out booth very welcome!*



**National**  
**Conference**

**12-13 June**

**Sydney Mechanic's School of Arts, 180 Pitt Street Sydney**  
[www.wel.org.au](http://www.wel.org.au) for details



## Stop Press: Thousands March on Washington Defending Women's Reproductive Rights

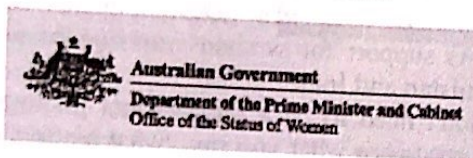


Approximately one million people protested against the erosion of women's reproductive rights in Washington DC on April 25 in the 'March for Women's Lives'. They pointed to the introduction of legislation limiting access to the morning after pill, and bills sponsored that could be used to interpret abortion as a federal crime. In addition, President Bush has banned government funding for international bodies that use alternative funding to provide or advise in favour of abortions.

Our own Health Minister, Tony Abbott, has recently publicly stated that he "has difficulty as a Christian understanding [our government's] support and funding for [Australian abortions]".

Ladies, it seems we haven't yet won this fight. Please let Tony know what you think of his ethical dilemma by writing to him: The Hon Tony Abbott, Minister for Health, c/o Parliament House, Canberra ACT 2600. Email: [Tony.Abbott.MP@aph.gov.au](mailto:Tony.Abbott.MP@aph.gov.au), Ph: (02) 6277 7220, Fax: (02) 6273 4146

### An Update from the Office of the Status of Women



The Office of the Status of Women is active for women in Australia and across the world. Since October 2003, OSW has been led by Senator Kay Patterson, and information about their services and a calendar of events is available at <http://www.women.gov.au>

OSW recently profiled Australian women in small business. It is interesting to consider how female medical practices fit into the current societal picture where female small business operators under 30 yrs are the fastest growing segment in small business; 50% of female small business operators have school level education only (compared to 36% men); 42% female small business operators work full time (compared to 85% men); 70% of predominantly female operated businesses have no employees (59% male operated businesses) and 25% have one to four employees; and 62% of predominantly female businesses have a computer and 51% have Internet access.

2004 is the 20<sup>th</sup> anniversary of the federal Sex Discrimination Act. The Act has played a significant role in raising awareness of issues - some of which are particularly relevant to medical trainees - such as sex discrimination, paid maternity leave, pay equity, and,

The Act has contributed to landmark court cases involving workplace anti-discrimination, discrimination against women based on their family responsibilities, and ensuring the rights of all women to access IVF and other reproductive technologies. This act was particularly relevant in arguing against the College of Psychiatry in recent years when they attempted to introduce training policy that would indirectly discriminate against women trainees.

International Women's Day recently provided Senator Patterson with a platform to announce several new government initiatives. They will provide \$95,000 in sponsorship for a national sexual assault conference to be held in Melbourne in September, in addition to current funding of anti-domestic violence programs. Another new initiative includes a new program aimed at building the leadership capacity of indigenous australians, through scholarships for their emerging leaders. They have produced a DVD on women in science showcasing career options for women and girls. Senator Patterson highlighted gains for women in education over the last decade. Over this time, there has been a 30% increase in the number of female students commencing undergraduate courses and a 46% increase in those entering postgraduate courses.

*(Ed. Please note that the above has been taken from the OWS website. For a contrasting view on our Federal Government's women's policy initiatives, read Anne Summers, "The End of Equality (Random House 2003))*





## From the UN/ILO



**"More women are entering the global labour force than ever before, but job equality, poverty reduction remain elusive"**

[www.ilo.org/public/english/employment/strat/global.htm](http://www.ilo.org/public/english/employment/strat/global.htm)

"Women are entering the global labour force in record numbers, but they still face higher unemployment rates and lower wages and represent 60 per cent of the world's

550 million working poor, says a new report by the International Labour Office (ILO) prepared for International Women's Day.

At the same time, a separate updated analysis of trends in the efforts of women to break through the glass ceiling says the rate of success in crashing through the invisible, symbolic barrier to top managerial jobs remains

"slow, uneven and sometimes discouraging".

"These two reports provide a stark picture of the status of women in the world of work today", says ILO Director-General Juan Somavia. "Women must have an equal chance of reaching the top of the jobs ladder. And, unless progress is made in taking women out of poverty by creating productive and decent employment, the Millennium Development Goals of halving poverty by 2015 will remain out of reach in most regions of the world."

More women work today than ever before. Still, the explosive growth in the female workforce hasn't been accompanied by true socio-economic empowerment for women.

Female unemployment in 2003 was slightly higher than male unemployment for the world as a whole (6.4%:6.1%), leaving 77.8million women who were willing to work but unemployed. In addition, 60% of the world's working poor are women. Adding these together means that at least 400 million decent jobs would be needed to provide unemployed and working poor women with a way out of poverty. The report also found that

women typically earn less than men, even in those professions considered 'female'.

"Creating enough decent jobs for women is only possible if policy makers place employment at the centre of social and economic policies and recognize that women face more substantial challenges in the workplace than men", Mr. Somavia says. "Raising incomes and opportunities for women lifts whole families out of poverty and is drives economic and social progress."

### The glass ceiling - still intact

"Recent global statistics show that women continue to increase their share of managerial positions, but the rate of progress is slow, uneven and sometimes discouraging".

Women's share of professional jobs increased worldwide by just 0.7 per cent between 2000-02. And with women's share of managerial positions ranges from 20-40%, the data show that women are markedly under-represented in management compared to their overall share of employment. In politics, the proportion of women representatives in national parliaments remains low, increasing from 13 per cent to 15.2 per cent between 1999 and 2003.

Women's overall share of professional jobs was largest in those countries with long-standing policies supporting working mothers, and low in those with opposing societal views of women's labour force participation and women prioritising family responsibilities.

The report indicates, "in female-dominated sectors where there are more women managers, a disproportionate number of men rise to the more senior positions and in those professions normally reserved for men, women managers are few and far between". One exception was the high incidence of women holding top jobs in legal systems in some countries. For example, in early 2003, out of the 18 judges elected to the International Criminal Court (ICC), 10 were women.

Yet the news isn't all bad. The study says some employers are beginning to shift attitudes and businesses now understand that family-friendly policies, improved access to training, and stronger mentoring systems encourage female staff retention and can improve productivity. And governments and unions are advocating the reform of employment and welfare legislation to ensure that mothers can maintain seniority, benefits, and earning potential.





## Obituary: Dr Lorna Verdun Sisley

14.03.1916 – 27.01.2004

(sourced from AMA VicDoc March 2004, and the RACS website)

Dr Lorna Sisley was indeed a pioneer within surgery as the first Victorian woman to be admitted to fellowship of the Royal Australasian College of Surgeons in 1962 and the second Australian woman to gain that recognition.



Dr Sisley grew up in Wangaratta, attending the local high school and later Methodist Ladies College. She initially enrolled in Science at the University of Melbourne, but was later allowed to

transfer to her preferred degree - medicine.

In achieving these milestones, she has previously highlighted the important roles several women played in enabling this move: inspiration from a second-year medicine student called Gladys Saunders, advocacy to the university faculty by her aunt and support from her mother in convincing her reluctant father to comply.

Her early training was at St Vincent's Hospital and at the University of Melbourne, with her skills being further developed through extensive overseas experience. Dr Sisley eventually joined the Queen Victoria Memorial Hospital as a general surgeon. Achieving many firsts as a woman in many areas of the craft, she developed a specialized interest in breast surgery, helping to found the Queen Victoria Medical Centre Breast Clinic (now the Monash Breast Clinic). This will soon be renamed in her honour.

Lorna was awarded an OBE and a Centenary Medal. Her bust features at the Queen Victoria hospital, and a wing of Wangaratta Hospital is named after her.

*(Student Affairs, Cont. from p2)*

The most striking incident occurred during my Aboriginal placement, where I met perhaps the only Aboriginal female nursing graduate in Victoria. I asked her how patients responded to being treated by someone from their own culture and was expecting a positive reply. However, she commented that most Aboriginals did not to be treated by her because they assumed her skills would be sub-standard, or that she would not be thorough. It was a small but powerful insight into the complexities of Aboriginal culture, and the challenges for indigenous health.

*(Ed. The Rural Clinical School is one of four Clinical Schools of the University of Melbourne. The Rural Clinical School is based in rural Victoria in Shepparton, with branches in Ballarat and Wangaratta, and access to many smaller hospitals in surrounding areas. Its first intake was 12 students in 2002, expanding to an intake of 48 (25% of the HECS student intake) in July 2004 for a minimum of three semesters. Teaching methods are similar to those in metropolitan centres, with additional support from GP's, community health workers and video-conferencing. Accommodation is provided in 'share houses' for students, and financial assistance is available if needed. Social support has been developed through the 'Moovin' Health' club, and the Rural Clinical School Students' Society (RCSSS). For more information please contact: Belinda Russell, Rural Clinical School Ph: (03) 58234550, Email: [bdealv@unimelb.edu.au](mailto:bdealv@unimelb.edu.au)*

### Contact Us!

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