

What does the feminization of family medicine mean?

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With more women in family medicine in Canada, what does this mean for the specialty and the profession, for patients and for society, asks a Salon opinion piece in *CMAJ* (*Canadian Medical Association Journal*).

Female [family physicians](#) (FPs) now outnumber males, with 50.6% of the profession now female; this trend will continue as older, mainly male, physicians retire. These changing demographics will have implications for the way medicine is practised and for patients. Female FPs practise differently than men, working fewer hours (47 v. 52), seeing fewer patients but with longer visits, and providing more preventive care, counselling and psychotherapy.

However, there is evidence that younger male physicians work fewer hours than their older counterparts, as there is only a 2-hour gap in weekly working hours between male and female FPs in Quebec.

"We raise more questions than answers about the predominance of women within [family medicine](#)," write Drs. Anne Biringer and June Carroll, FPs affiliated with the Mount Sinai Hospital and the University of Toronto. "Given current trends, this imbalance will increase. ...it is important to understand its implications and to study the effects on patient care and the profession."

The authors suggest that workforce planning is important to adjust to these changes to meet patient needs for care from FPs.

"As these [practice patterns](#) become dominant, they may enable all FPs—both men and women—to adopt workloads that foster healthy balance and meaningful involvement with family and community," the authors conclude.

More information: www.cmaj.ca/lookup/doi/10.1503/cmaj.120771

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