



Women Physicians in Wyoming Join Together



Wyoming Women in Medicine is a group for currently practicing female physicians in Wyoming. The group recently formed and is accepting new members. More information can be found on their Facebook page.

Wyoming Women in Medicine

WMS CONTRACTED CONTENT

When Lillian Heath Nelson packed her .32 caliber revolver and rode horseback 40 miles to see her patients—stitching up bullet holes and delivering babies—she blazed a trail across Wyoming history that has left a remarkable path for all other female physicians in Wyoming to follow.

Now, 126 years after she graduated from medical school and became the first woman doctor in Wyoming, women are still pioneering firsts as physicians. Though only 25 percent of the state's doctors are women even now, Wyoming has had its share of women leading the way.

Whether they are like Dr. Marion Smith of Torrington who served as the first female president of the Wyoming Medical Society or Dr. Betsy Spomer of Powell who is pioneering ways

for doctors to find a work-life balance that is successful for them, Wyoming's women physicians are doing great things for the state.

A new organization called Wyoming Women in Medicine (WWM) now seeks to offer an opportunity for women doctors to network with each other, advocate for female physicians and promote the medical field to young women.

Alexis Anderson, a medical student in her second year of training with WWAMI at the University of Wyoming is spearheading the group. When she first entered medical school she started investigating whether a group just for women doctors was available. She asked women who were already practicing medicine and they told her nothing like it currently existed. That prompted her to work toward organizing WWM.

"I thought it would be a really great way to give female providers a platform to talk to each other around the state and create a coalition of female physicians," Anderson said.

During her research, Anderson discovered that not only was the state low on providers, Wyoming is also especially low on female providers.

"We found that Wyoming has the lowest percentage of female providers to male providers in the United States," Anderson said. "The group could be a way to bring a little bit of light to that fact and to see why that is happening."

Wyoming Women in Medicine held their first meeting at the Wyoming Medical Society conference in Jackson, with both medical students and current providers in attendance.

"At this point, we're really just discovering what everybody wants from a group like this," Anderson said. "Our goal is to start reaching out more and contacting more female providers."

With the group still in its nascence, WWM members are working to decide what role the organization will play in Wyoming. Anderson said it could become a legislative advocacy group that works on behalf of women doctors. Alternatively, it could serve as a support group where female providers can get information and advice from one another, discussing things that affect their career.

Though she is early into her medical career herself, Anderson has anticipated factors that affect women physicians more than their male counterparts, and these are things that could be

discussed if WWM leans toward becoming that kind of group.

"I think women just have a few different things we need to think about when we become a physician," Anderson said. "How can you have a family or children one day? What does that look like when you go through residency? Men are parents as well, obviously, but women are the ones who physiologically carry the baby."

Another direction Anderson would like to see the group go is becoming an advocate for education and teaching young people about the medical field. She envisions WWM taking time to go into schools to tell young people—especially girls—about the possibility of becoming physicians and trying to get more Wyomingites excited about the prospect of going into medicine.

"Educating young people about what it is to be a physician in Wyoming, what the perks are and how it's achievable—it could be really cool for this organization to move into that kind of realm in the future," Anderson said. "I do think sometimes it can seem daunting to become a provider because you haven't seen someone do it before or you don't know how you can."

Dr. Yvette Haeberle, who is the clinical curriculum coordinator for first and second year medical students in WWAMI, is helping Anderson get the group up and running. She said WWAMI students have an annual ladies night out where practicing physicians come and speak to the female medical students to discuss the challenges women doctors face.

"This is something more formal for all the women across the state," Dr. Haeberle said of WWM. "As small of a state as we're



Wyoming Women in Medicine held their first meeting during the Wyoming Medical Society Conference in Jackson.



Women Physicians in Wyoming Join Together

in, it's nice to have networking."

She said those WWM members who met in Jackson came to the consensus that membership would be for practicing physicians and they would try to have quarterly meetings.

Anyone who identifies as female and would like to join WWM can do so by contacting the group through their Facebook page or by emailing them at wyowomeninmedicine@gmail.com.

Before Dr. Haeberle became the clinical curriculum coordinator, she worked as a family medicine doctor. She completed her residency in 1997 and then went on to work in private practice, as a hospitalist and then in emergency room care—so she knows the challenges her female students are facing as they enter the medical field.

"I feel like I can advocate more for the female students," Dr. Haeberle said. "This isn't a sprint—it's a marathon. Pace yourself and sign up for the long haul, but don't forget to live your life outside of medical school and residency."

She can also advise about what it means to be a doctor who is a woman.

"Women have more household responsibilities and are maybe more torn between career and families," she said.

But that's not to say it's all negative, she noted. Dr. Haeberle brought up a study published online in December 2016 that reported on research done at Harvard's T.H. Chan School of Public Health. The report said elderly hospital patients treated by female physicians rather than males were less likely to die within 30 days of admission or to be readmitted within 30 days of discharge.

"On the positive side, there have been studies that show female physicians connect better with their patients or have more empathy," she said.

Dr. Haeberle said if she made an educated guess about why there are still fewer women than men doctors in Wyoming, she thinks it could be based partly on the difficulty of being a sole provider in a small community and trying to also have a family.

"Most of the Wyoming communities are fairly small," she said. "To go hang a shingle and be a self-employed physician in a small community in Wyoming as a primary care provider would be kind of a daunting task. It's probably not conducive to a family lifestyle. I'm guessing that may be a barrier."

She said that a factor for women doctors who are in a group practice is that they are likely to see more of the female patients.

"Practicing in a group you tend to get more of the complex patients—a lot more maternal medicine and women's medicine—which tends to be a little bit more challenging and time consuming," Dr. Haeberle said.

Many women physicians in Wyoming have experienced just what Dr. Haeberle is talking about. While they were earning

their spot on the list of firsts for female physicians, they were also facing the challenges that go along with being female in what is a male dominated career in this state.

Dr. Betsy Spomer's path leads to coaching

Like many doctors in rural communities, Dr. Betsy Spomer soon found herself with a booming practice when she arrived in town. She was the first female physician in Powell to deliver babies, and she was also the only female physician covering obstetrics for several years. The women of Powell were happy to have a female doctor care for them during childbirth and beyond.

"It really helped my practice because my practice was ultimately largely female," she said. "I think it gives you some credibility—especially once you've been pregnant and had kids. They know you get them and can relate. That seemed to be a real advantage."

She said being female can give a doctor an edge that is helpful in patient care, no matter whether the patient is a man or a woman.

"I'm of course biased, but I think women have a special way of connecting with patients—male or female," Dr. Spomer said. "I suspect it is the way we connect with people and our ability



Dr. Betsy Spomer is a Powell family practitioner who now works with physicians seeking to gain a better work-life balance.

to empathize with people. It really matters how we show up—it matters on a physiological level. People just do better when they are cared for in a compassionate way— and women have the edge.”

Needless to say, with a patient population that was mostly female, she soon found herself delivering babies on nights and weekends even when she wasn’t on call.

“If I was in town, I would do the delivery,” she said. “That took its toll. You can predict it’s going to happen when you’re not on call and in the middle of the night.”

Though she was pioneering as a female doctor in Powell, she never felt that she was treated differently from her male peers. There were some things she had to navigate through that her colleagues didn’t though.

She became the first physician in the practice who ever needed to take maternity leave.

“In fact, I had to write the maternity leave policy myself because they never had dealt with that,” she laughed. “It was great because I made it like I wanted it.”

Other situations, mostly dealing with household and child-rearing issues, looked different for her.

“I think being a working mom I had different needs and requests than my male counterparts—everything from working through pregnancies to child care issues and breastfeeding,” Dr. Spomer said. “Plus my husband worked full-time as well. Many of my male counterparts’ wives weren’t working or were working part-time.”

Over the course of her practice, she eventually stopped seeing male patients or going on nursing home rounds. The obstetrics work was what she loved, but also very time consuming and intensive.

“I basically was carving out my practice just to accommodate more OB,” she said. “There was a point when I stopped doing OB, and I was left with a skeleton of a practice I could have filled up.”

Instead, she took a hard look at what kind of life she wanted to be leading. She knew she wanted to have time to do things outside of her medical career.

“I decided to just give myself a breather,” she said. “I never went back on a regular basis.”

After she made her slow exit from practicing medicine full-time, she was able to take a clear look at the factors that led to her wanting to take a break.

“Now I’m on the outside, I can actually see clearly now what was going on,” Dr. Spomer said. “I was exhausted. I couldn’t even access my brain half the time if I wanted to.” It was then that she made a turn in her career path that helped her to trail-blaze in a different direction as a physician.

She became a life coach, using her own experiences as a doctor to help other physicians who are facing burn-out or exhaustion.

“I feel like now I am in a place rather than healing patients, I’m in the business of hopefully healing health care providers—one provider at a time,” she said.

Dr. Spomer was familiar with life coaching after having used one herself, so she knew the value of the work. Coaching had helped her to look at her own experience and ask herself some important questions.

“How could I have trained to do this and love it so much and feel like I needed to leave it?” she wondered. “It’s been a really interesting journey, and I’m at a place now where I am really recognizing how we physicians seem to be trained to think in such a way that doesn’t serve us well. We have this way of just putting it all on the line, thinking if we do it really, really well, everything will be great, but not recognizing the significance of self-care.”

She points to eating right, getting enough sleep, exercising, having a spiritual life and focusing on mental well-being as things that are important aspects of self care.

“All of those things are so important, and we’re not trained well at all in the importance of that,” Dr. Spomer said. “Now I am almost obsessed about the need for physicians to have that kind of training and wellness. It’s not just about being happy. It translates to quality patient care and correlates with fulfillment and joy in the work.”

After noting that more than half of physicians report feeling burned out, she said she believes the health-care field is currently broken in many ways. Her goal is to get physicians to a place where they can find fulfillment in their work, by helping them figure out what works for them and knowing how to be a bigger and better voice for themselves.

“I really feel strongly that providers are key to figuring it out,” Dr. Spomer said. “I don’t believe we are at an impasse in health care—we just need to learn to be different as providers.”

For female providers in particular, especially those who are navigating some of the same issues she faced, Dr. Spomer has suggestions for ways to increase the percentage of women providers in the state. She believes women physicians might find more job satisfaction if they had a better opportunity to embrace or accommodate their unique female needs.

Everything from medical facilities offering child care on site for providers to letting a doctor practice-share their panel of patients with another physician are ways Dr. Spomer thinks the industry can attract more women.

“I want to encourage female physicians to use their voice and trust it,” she said. “It’s new territory. We have to be a little bit



Women Physicians in Wyoming Join Together

brave too. It's not an easy conversation to have in a room full of nearing-retirement male physicians."

Now Dr. Spomer is living life more on her own terms and is happier for it. In addition to her life coaching business, which is called Soul Honey Coaching, she also fills in periodically as a physician in Powell and also does consulting with the hospital where she is offering a physician resilience program.

"I am no longer practicing on a regular basis, but people still call me Dr. Spomer," she said. "My kids see me modeling this life where I am able to achieve and be who I was designed to be—their mom, a wife, a community member and a physician—and I do it my way."

Dr. Marion Smith first female president of WMS

If Dr. Marion Smith had let naysayers stand in her way or deter her on her way to becoming a doctor, she might not have gone on to become the first female president of the Wyoming Medical Society.

She remembers a discouraging conversation she had with an older male doctor when she learned she had been accepted to Creighton Medical School in Omaha. Prior to the conversation, she grew up in Buffalo, always knowing she wanted to do something in science.

"The human body's workings were just fascinating to me," Dr. Smith said. She had earned a zoology degree from the University of Wyoming and started thinking about medical school at the end of her time in Laramie. She was excited to learn she had been accepted into Creighton.

Back home in Buffalo, she was telling a visiting specialist her exciting news.

"I had known him forever," Dr. Smith said. "When I told him that I had been accepted to medical school he said, 'Well, that's too bad because you will be taking a spot from a man, and you're just going to have babies and not practice.'" Dr. Smith remembers feeling shocked by his statement.

"It certainly wasn't called for," she said.

Well, she did go on to become a doctor, and she did indeed have babies—four sons, in fact—and she didn't give up her practice. After she finished her family practice residency at St. Joseph's in Omaha, she began practicing in Torrington in 1985 and is still going strong.

"Of course it's challenging," Dr. Smith said. "My husband and family are very supportive. Everybody helped me. I couldn't have done it without help of course."

Being a doctor was challenging in itself, but being a woman added some challenges as well.

"I think the home-work balance is more challenging as a



Dr. Marion Smith was the first female president of the Wyoming Medical Society, and she encourages other women doctors to take an active role in the society.

woman," Dr. Smith said. "We are just more concerned about birthday cards and things have to be right, and the laundry has to be done. The home things weigh more."

But Dr. Smith says that is a positive thing.

"I think the fact that we are more sensitive to those kinds of feelings make our performance better as well," she said. "It makes us sensitive to what other people are feeling."

Early on in her career, Dr. Smith was very active in the Wyoming Medical Society. She became the first female president the society ever had.

"That was a very male dominated field and I feel it still is," she said. "I would encourage women to be more active in the medical society. We need more numbers there to have political influence. I think that's where decisions are made and influences are exerted."

Dr. Smith said she is absolutely glad when she sees young women coming up through the ranks to become physicians, and she only has one piece of advice for them.

"Just make sure you're doing what makes you happy," Dr. Smith said. 