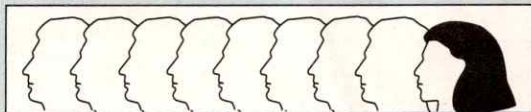


Women In



Moving Up Or Moving Out?

EMS

By Christine M. Zalar

Women today comprise approximately 58 percent of the nation's work force. The number of females in traditionally male-dominated professions has increased dramatically in the past 20 years. The ranks of female lawyers and judges have swelled from 7,500 to 180,000, female physicians from 15,672 to 108,200, and female engineers from 7,404 to 174,000.¹ But what about women in EMS?

According to the 1990 JEMS EMS salary survey, women represent approximately 13 percent of the EMS work force at the field supervisor level and below.² Table 1 lists the percentages of women in each of the 12 categories surveyed.³ The table also indicates the percentages of women in key leadership positions outside of the EMS organization, such as medical directors and state EMS directors. It is clear from the findings of the survey that women continue to be underrepresented in management positions, particularly those within the fire service.³

Less than 1 percent of firefighters are

women, according to Therese Floren of the organization Women in Fire Suppression in Cleveland. Women occupy only 3.4 percent of fire department supervisory positions, compared to a national mean of 9.9 percent in other EMS organizations.² Floren attributes this discrepancy to the lower seniority of women firefighters (she estimates the mean seniority to be two to three years), and expects these percentages to improve in the future. But, as it stands, fire service EMS is a tougher career path for women.

The prevailing myth is that nurses have the advantage for career growth in EMS. "The reality is that being a nurse can be a double obstacle," says Cassandra Mathew, RN, project manager at Physicians and Surgeons Ambulance in Ohio. "You are confronted with two battles: male vs. female and nurse vs. paramedic. Consider also that many of the men in EMS leadership positions came up from the streets during the time when the nurse/paramedic conflict was at its peak."

Which is not to say that women

have not enjoyed success in some EMS organizations. The problem is, when women do move to management positions, they are generally removed from field operations. For instance, there are not many female defensive driving instructors. Instead, office-type positions, such as quality assurance, training, human resource development and dispatching, are commonly held by women. Fifty-three percent of all dispatchers are women, by far the largest representation of women in any job category in prehospital care.² Typically, office-type positions involve less pay, less physical stress, more daytime hours and minimal (if any) supervisory status.

In light of these facts, the National Association of Emergency Medical Technicians (NAEMT) has appointed a task force to study the issues facing women in EMS. Surprisingly, preliminary information gleaned by the task force indicates the primary issue for women in the workplace is pregnancy, according to Susan Dorman, assistant administrator of EMS in Colorado. Less surprising was the identification

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of issues such as sexual harassment and discrimination.

Pregnancy is increasingly becoming an issue for women on the job. A December 1989 Census Bureau report found that, nationally, births were at a 25-year-high, with 50.9 percent of children born to working women.⁴ Furthermore, 54 percent of childless married women in their early 30s professed a desire to eventually have a child.⁴ The importance of these figures is that the majority of female EMS managers fit into this age group.

The initial findings of the NAEMT task force appear to center on when to notify the employer of the pregnancy, when to remove the individual from the front line, how to determine employer liability for pregnant employees in a potentially hazardous work environment, and what effect the pregnancy will have on the physical activity required in the delivery of pre-hospital care.

The pregnancy issue goes far beyond gestation and birth. It not only involves years of raising the child, but touches also on the economics of time

Although women have
made strides in EMS,
more have been
accepted in the field
than in the boardroom.

off from work, job security, putting a career on hold, and limited resources for affordable quality child care. These same concerns are prompting American businesses to seriously consider providing child care programs in order to retain employees, particularly working mothers.

In many cases, economic demands have created the need for the dual-income family, which presents unique challenges to the nuclear family. In EMS, the typical 24-hour shift may be a major eliminating factor for working

mothers. "The advent of flexible deployment and the staffing of ambulances in increments less than 12 hours has allowed many women an opportunity to stay in EMS and have a career and a family," said Steve Rice, chief executive officer of Courtesy Ambulance in San Bernardino, Calif. Rice's firm has actively assessed its female employees' needs, and developed programs to meet the employees' and the organization's objectives. This has led to an increasing proportion of females in the company in both field and management positions.

For the career-minded woman, advancement within an EMS organization may appear to be a daunting proposition. Yet, although male dominance in the profession cannot be ignored, it can be managed. Choosing an EMS organization that accepts female managers is an important consideration, although this may not be geographically feasible. Some women have elected to speed up the "evolutionary process" by starting up and or purchasing their own ambulance services, while others have become own-

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