Gender-Related Factors in the Recruitment of Generalist Physicians to the Rural Northwest

**Issues**

Women in primary care specialties are less likely than men to practice in rural areas. Since rural areas rely mainly on primary care providers for their health care, the growing proportion of women in medicine threatens to exacerbate the ongoing shortage of rural physicians. Few studies describe recruitment strategies that attract female and male physicians to rural areas. This study examined differences in the factors female and male generalist physicians considered influential in their rural practice location choice and identified the practice arrangements that attracted female generalist physicians to rural areas.

**Study Design**

This cross-sectional study was based on a mailed survey of generalist physicians successfully recruited between 1992 and 1999 to towns of 10,000 or less in six states in the Pacific Northwest.

**Findings**

- Compared to men, recruited women were younger, less likely to be married, had fewer children, and worked fewer hours.
- Women were more likely than men to have been influenced in making their practice choice by issues related to spouse/personal partner, flexible scheduling, family leave, and availability of childcare.
- Women were more highly influenced by the interpersonal aspects of recruitment. Commonly reported themes reflected the respondents' desire for flexibility regarding family issues and the value they placed on honesty during recruitment.
- Men and women were equally likely to consider community factors, practice content, practice partner compatibility, and financial issues.
- The most common methods of obtaining information about practice opportunities were networking, professional experience, recruiters, and outreach.
- Most respondents claimed that the community provided no assistance to the spouse/partner.

**Policy Implications:** Rural communities and practices recruiting physicians should place high priority on practice scheduling, spouse/partner, and interpersonal issues in the recruitment process if they want to achieve a gender-balanced physician workforce. Efforts to encourage more women to select rural practices will fall short if practice models attractive to women are not offered and if recruitment packages do not accommodate the needs of women and their families.


WWAMI Rural Health Research Center
Department of Family Medicine
University of Washington
Box 354696
Seattle, WA 98195-4696
jhansen@fammed.washington.edu
Telephone 206-685-0402
Fax 206-616-4768
www.fammed.washington.edu/wwamirhrc

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