During my freshman year at medical school, a woman urologist joined the faculty at my institution. Having already chosen my career path, I was delighted to finally have access to a lady who had succeeded in the field. She died before I ever had a chance to meet her.

She had left an abusive relationship and relocated to our institution to start a new life. One evening her ex-husband showed up at the door of her office in the urology department and fatally shot her before turning the gun on himself.

The female students in my class were stunned. How could this have happened to a tough, smart woman who married an intelligent, ambitious man? But, while sharing our disillusionment in the hospital coffee shop, almost all of us ultimately acknowledged our own experiences with men that were bright, charming, and exciting — until we realized that they were a little too exciting. A few years later, Connell Cowan, Ph.D., published Smart Women, Foolish Choices, which generally insulted our intelligence, but acknowledged the intoxicating appeal of “dangerous liaisons” and their potential for negative outcomes.

What happens when smart women find themselves in abusive relationships? It does not mean they are less intelligent or have deep psychological problems. It is a myth that domestic violence primarily occurs to women in the lower socio-economic class and usually involves substance abuse or horrible childhoods. The myth is supported by biased statistics on abuse, which are derived from women seeking public assistance and safety in shelters. When a woman has financial resources, she is more apt to stay with friends or use her credit card for a hotel when fleeing an unsafe situation.

Victims that are intelligent and educated women who are successful in their careers, responsible in motherhood, and active in community events, have unique issues dissuading them from getting out of abusive relationships. High-profile women are often the most intent on hiding the abuse, fearing public humiliation and destroying the widespread notion that she can “do it all” and that she has a perfect life. It is very difficult for a person who has never failed anything in her life to admit this “failure.” In addition to their own standing in the community, many upper-class victims are hesitant to discredit their abuser’s reputation. Intelligent, hard-working, ambitious women tend to choose partners with similar attributes. Despite the abuse, a woman in a powerful couple may take pride in her abuser’s accomplishments and be resistant to any action that would discredit the status of her spouse as a pillar of society outside of their home.

While many upper-class women abandoning an abusive relationship do not face the prospects of poverty and even homelessness that plague those of lower socioeconomic status, this is not always true. The abuser may be very successful in controlling the couple’s finances by placing real estate, retirement savings, and investments in his name alone. As a result, the victim may fear simply going from one form of poor quality of life with the abuser to another poor quality of life with no savings, credit rating, or collateral.

There are also motivations for staying in a relationship that transcend education and socioeconomic status. A victim may stay because of promises of change. She wants the violence to end, not the relationship. The abuser will often show remorse following a battering incident, bringing her flowers and showering her with attention. Unfortunately, this phase of the battering cycle does not last. Abuse only ends if the victim leaves or is killed by her abuser.

Another motivation for staying in a relationship shared by many victims with children is the desire to maintain a façade of a happy home with the hope of raising well-balanced, successful offspring despite the abuse behind the bedroom door. Children are much more perceptive than we give them credit for, and children growing up in abusive homes are more likely to be abused or be abusers as adults.

However, none of the excuses for staying in an abusive relationship are good enough to risk one’s life. Abuse escalates in severity and, too many times, ends with murder.

This article was not written with a particular individual in mind. But if you thought I was talking about you as you read, hire a good psychiatrist and a good lawyer and develop a sound plan for getting out of the relationship safely and securely. And remember, the women of SWIU are behind you and available to do whatever we can to help you whenever you need us.

Martha K. Terris, MD

President’s Message
Martha K. Terris, MD
Leading By Example? Harvard’s Tenure Track Favors Men

When a premier Ivy League institution such as Harvard’s School of Arts and Sciences denies tenured positions to women, it sets a bad example for the rest of academia. Over the past four years, since current President, Lawrence B. Summers, assumed his post, the proportion of women professors attaining tenure has steadily dropped. Last year, only four of 32 tenured spots were offered to women. This is a dramatic change from the 2000-2001 academic year, when 36% of open positions were bestowed upon women faculty, the highest in Harvard’s history. This precipitous decline in recognizing women educators has prompted 26 professors to write a letter of protest to President Summers. He will be meeting with the group in the near future.

The reasons for the drop in tenured women are not entirely clear. President Summers suggests that the academic departments are not cultivating and nominating their women members, while others blame Summers for not making the mentoring of women faculty a priority, for concentrating new hires in disciplines with fewer women, and for seeking out up-and-coming faculty who are in an age group in which women pause to have their families. Currently, 18% of Harvard’s senior faculty and 34% of the junior faculty are women. These proportions are similar to those of peer institutions.

ABU Update

As indicated in the last issue of the Newsletter, we did not receive a complete list of those who successfully passed the ABU Recertification Exam this year. Thanks to Carleen T. Bensen who rectified the omission of her name from the list. Congratulations Carleen!

Shortliffe Cited as Urologic Pioneer

If you plan to travel to the greater D.C. area between now and April 2, 2005, please include a visit to the National Library of Medicine’s current exhibit Changing the Face of Medicine: Celebrating America’s Women Physicians, a tribute to the women who, through stubborn persistence, native intelligence, and exemplary dedication, not only made significant contributions to the field of medicine, but paved the way for those that followed them into medical careers. It has been a century and a half since Elizabeth Blackwell graduated from Geneva Medical College (upstate NY) in 1849, an accident of fate set in motion by her male classmates who lobbied for her admission, apparently as a joke. Well, the joke was on them, as she successfully completed her training. Finding work after qualification as a physician, however, was difficult, and Blackwell and others like her established women’s hospitals and other facilities catering to the care of women and children. Hence, the traditional involvement of women physicians in female and pediatric specialties dates back to this era.

The phrase “on the shoulders of giants” is used to express the concept of building a legacy of excellence in a given field. This is certainly applicable to current women in medicine who can be justifiably proud of their accomplished predecessors. So it is that our own Linda Shortliffe, MD, celebrated as a pioneer in urology, is lauded in the exhibit along with the likes of the pediatric cardiologist Helen Tausig and pediatrician Virginia Apgar. In the tradition of Elizabeth Blackwell, Linda’s contributions have advanced the care of both women and children. Her seminal publications on urinary tract infection in adult and pediatric populations and her work in cryptorchidism and other important pediatric urologic topics have long distinguished her as a urologic “giant”. Further, as one of only two current women department chairs in the U.S. (the other is Pamela Ellsworth at UMass in Wooster) and as a member of the American Board of Urology, Linda has managed to break through the glass ceiling and gain entrance to the upper echelon of urologic leadership, proving that she has earned the respect of her male peers. In her role as a chair, she is mentoring a whole generation of urologists, male and female alike, and her achievements set the standard for women just establishing careers in urology.

For further information on the exhibit, visit: www.nlm.nih.gov/changingthefaceofmedicine/◆

SWIU would like to thank the following corporate supporters for their continued generosity and commitment to SWIU:

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Job Opportunity

Six person urology group in Aurora, Colorado is currently seeking a female urologist. Our practice has a large volume of female patients and our area has many female primary care physicians and gynecologists who have encouraged us to add a woman to our group. In addition to an excellent salary and benefit package, we offer a four-day work week and a fair buy-in at two years. Please contact Paula Marquez at 303-695-6106.

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Dr. Christina Hill: In Memoriam

SWIU is deeply saddened to report that one of our members, Dr. Christina Hill, died June 4, 2004 after a courageous battle with lymphoma.

A graduate of the University of Toronto, Dr. Hill completed specialty training in urology and obtained her FRCS(C) in 1976. In so doing, she became the first female urologist in Canada, setting up practice in Ottawa. Her surgical practice was centered at the Salvation Army Grace General Hospital, where she became chief of staff until that hospital was closed in 1998. She was the interim CEO at the newly created Ottawa Hospital. Her illness forced her to retire from practice late last year.

Dr. Hill sat on Council of the College of Physicians and Surgeons of Ontario for the past five years and was co-chair of the College’s Discipline Committee. Dr. Barry Adams, the College president, said Dr. Hill's presence will be much missed at the College. “She brought clear thought, good discussion and a strong sense of fairness to all that she undertook,” he said.

The Academy of Medicine Ottawa (AMO) played host to more than 140 participants during the 5th Annual AMO Charity Golf Tournament, held June 23 at the Meadows Golf & Country Club. Proceeds from this year’s event - a total of $10,000 - have been used to help establish a medical student bursary in memory of Dr. Hill. Dr. Hill was an active member of the Academy, and served on the AMO Executive Board from 1984 to 2003. The first “Dr. Christina Hill Medical Student Bursary” will be awarded in 2005 to a financially needy student from the Ottawa area who will be attending one of the province’s medical schools.

SWIU conveys our deepest sympathies to her husband, Jim Wallace, and all of her many friends and family.

SWIU Acquires AUA Link

Since its incorporation, the Society for Women in Urology has been recognized as an affiliated society of the AUA. However, until recently, our website was not linked to that of the AUA. With the establishment of a new link, SWIU has now been further legitimized as an organization. This acknowledgement of our relationship to the AUA enhances our visibility to the AUA membership and is indicative of the support provided by the AUA leadership.
Call for SWIU News Contributions

If you have an idea for a column, wish to contribute to the newsletter, or have comments about the newsletter, please contact Dr. Nina Davis. We are particularly interested in information regarding job prospects, as well as individual achievements, both personal and professional.

Nina Davis, M.D., Editor, SWIU News
Society of Women in Urology
1111 N. Plaza Drive, Suite 550, Schaumburg, IL 60173
Phone: (847)517-7225 Fax: (847)517-7229
E-mail: swiu@wjweiser.com Website: www.swiu.org