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## Sue's News Jan 2019

Hello everyone,

Hope you had a relaxing holiday season. How was your New Year's Eve? We lived it up as usual with fizz, CNN and were in bed at 10.30 pm with three Labradors, a Havanese and at least one Elephant. More like a small herd of elephants in the room if you get my drift? (If you are understandably lost there is a clue on page 6!)

The problem with a New Year is perhaps not the stress of Resolutions and their inevitable breakage, but that irresistible urge to review the year. Which rapidly becomes a review of the decade(s) and then your entire life, right? No? OK then, a review of MY entire life!

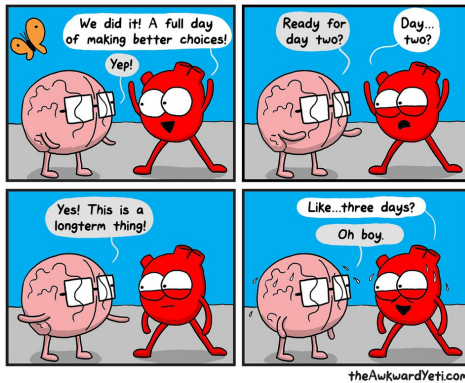
Buried beneath the cold darkness of a Northern winter, exhausted by the holidays and frustrated by the annual attempt to "Skype England" LOL ...it's inevitable that the road not taken becomes the only road that led to happiness and enviable expertise in technology.

Here are two extracts from **Notes to a Nervous Planet by Matt Haig.**

Don't compare your actual self to a hypothetical self. Don't drown in a sea of what if's. Don't clutter your mind by imagining other versions of you, in parallel universes, where you make different decisions. The internet age encourages choice and comparison, but don't do this to yourself.



To enjoy life ....  
we might have to start to think of  
how to enjoy the world within our boundaries.  
To live on a human scale.  
To focus on the few things we can do,  
rather than the millions of things we can't.  
**To not crave parallel lives.**



## Priorities, Boundaries and other Radical Choices for 2019!

### How to make Guilt irrelevant & get your priorities straight. DR Marjorie Stiegler MD

First, try this experiment. Each morning, before you start working, determine and write down a time and an action that will define the end of your work day.

Complete post is on her website [HERE](#)

### Physician Wellness doesn't mean more Yoga. DR Amy Barnhorst MD, Psychology Today

Allow yourself to suck at things.

Pick the top few things that are really important to you, do them well, and feel good about that."

Yup, that's exactly what she wrote - "Allow yourself to SUCK AT THINGS!"

Full article [HERE](#)

I accidentally used the wrong template for this letter, but decided to allow myself to S.A.It  
Apologies if it opens strangely.

### We don't need self care we need boundaries. Dr Pooja Lakshmin MD OP- Med [HERE](#)

We've been told over and over again that we don't matter, and when we do, we're certainly worth less than men.

For women in medicine, setting limits and asserting boundaries is about saying this is what works for me, and this is what doesn't.

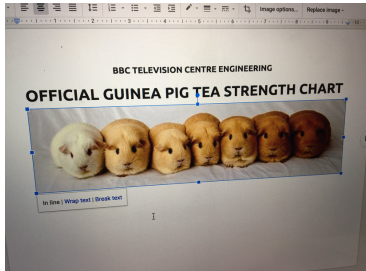
**Make no mistake; setting boundaries is an assertion of power.**

**It's having the audacity to say, I exist and I matter.**

Dr P. Lakshmin MD

## Stages of tea

1. Rapid-tiny-sip hot
2. Optimum temp
3. "Down it" lukewarm
4. Just-too-late cold
5. Accidental yesterday's tea horror sip



Never trust a man who,  
when left alone in a room with a tea  
cozy, doesn't try it on.

Billy Connolly

Writing this always requires gallons of tea. Usually Very Nasty Stage 3 or 4. And FYI no guinea pigs assist!

A nice cup of tea of more appropriate Stage and Strength might be a good idea before scrolling on to [Sue's Views](#).

This is where I will explore more "controversial" topics that impact well being within our health care community. Opinions expressed are of course my own.

So feel free to try on your tea cozy, pour yourself some tea and let's see how this experiment goes!

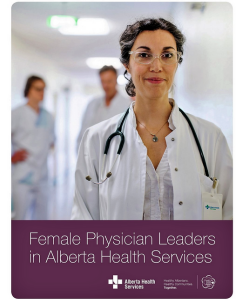


Olivia Redpath @HWarlow

# Sue's Views

You may have missed the report on "**Female Physician Leaders in Alberta Health Services**" released 20 Dec 2018. It is on the AHS website [HERE](#) under Reports and Plans.

The paragraph excerpted below interests me because it reflects the real life, day to day experience of many/most of my female physician colleagues, whether or not we would describe ourselves as "leaders."



## Assertiveness

"The challenges of being an assertive female physician was a common theme throughout the review. The general consensus was that female physicians who are assertive are often labelled as aggressive, difficult to get along with and disruptive. This was felt to be especially true in multidisciplinary teams with nursing colleagues. Being labelled as aggressive can cause significant challenges for female physicians especially in team environments, and can potentially impact career opportunities and advancement. It was also felt that women are held to different standards than men regarding being assertive and taking charge."

These are issues for women within and outside of medicine. Here is **Chimamanda Ngozi Adichie** speaking on Storytelling in 2018.

In our world a man is **confident** but a woman is **arrogant**.  
In our world a man is **uncompromising** but a woman is a **ball breaker**.  
A man is **assertive**, a woman is **aggressive**.  
A man is a **leader**, a woman is **controlling**.  
A man is **authoritative**, a woman is **annoying**.



Full 25 min speech [HERE](#)

In our world ..  
is at 10 min mark.

# Sue's Views



Physician wellness includes feeling angry and using that feeling as motivation to make medicine and the world a better place. It also means not getting caught up in the anger.

Kathy Stepien MD

## SUE'S VIEWS

will explore the broad topic of gender bias in medicine throughout the year. I believe that naming, awareness and education leads to thoughtful discussion and change. The environment documented by AHS must change locally, nationally and beyond. I really hope that each of us consider our own responsibility in this regardless of how we self identify.

### A Call to Healthcare Leaders:

#### Ending Gender Workforce Disparities is an Ethical Imperative

Julie K Silver MD Harvard Medical School [HERE](#)

#### A lexicon for gender bias in academia and medicine BMJ 13 Dec 2018

Esther Choo MD, Robert DeMayo MD, Glaucomflecken. Extract below and Podcast [HERE](#)

"Many of the experiences of women in the workforce are so patterned and commonplace they have spawned an emerging vocabulary, which includes terms like **mansplaining** explaining something in a condescending/patronising way, typically to a woman **manel** a panel of speakers populated entirely by men **himpathy** the inappropriate and disproportionate sympathy powerful men often enjoy in cases of sexual assault, intimate partner violence, homicide and other misogynistic behavior."



I welcome your personal accounts, stories, thoughts relevant to this discussion. I hope to liaise with The Federation of Medical Women of Canada, Dr Mamta Gautam and others who are interested in collecting and sharing this information. Confidentiality assured.

Email me at [susanjeanreid@gmail.com](mailto:susanjeanreid@gmail.com)  
Or Direct Message me on Twitter [@susanjeanreid](https://twitter.com/susanjeanreid)

I was told - and I have to admit it's true - that I am inappropriately biased towards canines rather than felines in this newsletter. So, in the spirit of acknowledging conscious and unconscious bias - here's to change in 2019. Just remember - be careful what you wish for!



"It's always 'Sit,' 'Stay,' 'Heel'—never 'Think,' 'Innovate,'  
'Be yourself.'"



"No, this is the elephant."



ONE YEAR  
AGO TODAY  
YOU WERE  
WORRIED ABOUT  
LOTS OF STUFF  
THAT YOU NOW  
CAN'T REMEMBER  
NOTES TO STRANGERS

## NUTRITION FACT:

If you drink a gallon of water per day, you won't have time for other people's drama because you'll be too busy peeing  
Stay hydrated my friends.





no-reply  
to me  
Dec 12, 2018 [View details](#)



## New CPSA Personal Mail

The College has sent you mail in the Physician Portal. It may be **time sensitive and/or require your response.**

Please read your mail:

1. Go to the Physician Portal
2. Log in using your CPSA Registration number and password
3. Click on "DOCUMENTS" to access your mail
4. \*Print and/or save documents to your own secured device. The system will automatically remove documents on their expiry date.

\*As documents may contain sensitive and confidential information, ensure they are managed, handled and stored appropriately.

**This inbox is NOT monitored for incoming messages.**  
Questions regarding accessing the Physician Portal-contact [memberinquiries@cpsa.ab.ca](mailto:memberinquiries@cpsa.ab.ca).

## Just Asking!

If you saw this in your Inbox your immediate gut response would be? Or was?

#1, #2 or #3

1. **Awww** - a friendly personal message from the College. How nice. Let's take a look.
2. **Hmm.** Did I forget to renew? Better check.
3. **OMG** It's A College Complaint. They send it by email now? A COLLEGE Complaint. What did I do? It must be **A COLLEGE COMPLAINT** I'm too scared to look at it..... I can't look now.. I must .. I'm going to throw up .. I have to read it but I can't .. I can't...

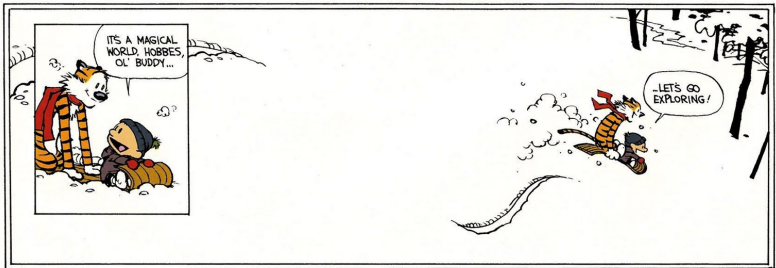


My survey of 3 anesthesiologists, a surgeon and an obstetrician all answered #3 complete with similar emotional responses.

I called the CPSA to let them know how this impacted us, and they listened.

You could email them too.  
[memberinquiries@cpsa.ab.ca](mailto:memberinquiries@cpsa.ab.ca)

## Just Saying!



One of my subscribers wrote "I hope the newsletter warms more than just *my* heart." His email warmed my own heart and made my week.

I hope Sue's News stimulates discussion, warms hearts and makes you laugh in 2019. Most of all I hope it supports all of us who believe in a kinder, more inclusive and caring community of human beings in medicine.

**My wish for you is that you continue.**

**Continue to be who and how you are,  
to astonish a mean world with your acts of kindness.**

**Continue to allow humor to lighten the burden of your  
tender heart.**

Maya Angelou



All good things for 2019  
and much love, Sue

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