



Bio: **Gloria Bachmann, MD** is the director of the Women's Health Institute at Robert Wood Johnson Medical School and Chief of the OB/GYN Service at Robert Wood Johnson University.¹ She also is Professor of Obstetrics, Gynecology and Reproductive Sciences at the University of Medicine and Dentistry of New Jersey-Robert Wood Johnson Medical School, and Associate Dean for Women's Health.²

After earning her BA from Rutgers and MMS from Rutgers Medical School (now Robert Wood Johnson Medical School) in 1972, she went to the University of Pennsylvania to complete her medical education.³

Along the way, Bachmann has also been winning numerous awards: The Best Scientific Paper presented at the Annual ACOG meeting in 1990, to plaques and certificates with titles like Lifetime Achievement, Best Teacher, Best Educator, and Community Service.⁴

An Interview with Gloria Bachmann

Conducted by Leadership Scholar Fariha Siddiqui, Class of 2012

Edited by Nicholas Salazer

Fariha Siddiqui: When and where did you grow up?

Gloria Bachmann: I grew up in Newark, New Jersey, which is a—obviously, a city. So I'm a city girl, and I was educated through the Newark school system. I then went to Rutgers University, and from there, went to Rutgers Medical School, then the University of Pennsylvania. Did residency in obstetrics and gynecology, at the University of Pennsylvania, and I just couldn't stay away from New Jersey. I had to come back to New Jersey where I've been practicing since finishing residency.

FS: What was your family life like?

GB: My family was very supportive. I had two brothers and I was the middle child and only girl. My father absolutely insisted that we were all treated exactly alike. So, despite the fact that I was the only girl, he never saw that as a reason for me not to do all the things that my brothers did. For instance, if they were doing gymnastics, I could do gymnastics, or if they were playing a musical instrument, I could play a musical instrument. So he was a very fair person, and I think he was ahead of his time. My mom was a secretary, and she was also very supportive. She was the operational person. My father was the visionary, and my mom was operations. Did you do your homework? Did you practice your violin? So, she was always the operations person, whereas my dad had a vision.

¹-<http://www.umdnj.edu/umcweb/marketing_and_communications/publications/umdnj_magazine/spring2005/features/17womensissues.htm>

².<http://www.nlm.nih.gov/locallegends/Biographies/Bachmann_Gloria.html>

³. See 2.

⁴. See 1.

FS: What was the culture like for women? What was the role of women in society when you were growing up?

GB: Obviously I'm a product of the nineteen sixties, and my father was so instrumental in my becoming a physician because he really was blind to male-female. And at that time, most families thought that it was really important for the boys in the family to go on, get a higher education. Whereas my dad really insisted on all of us going to college, that we pursued our dream, and that there really weren't any hurdles for men, for women, for anyone, but, just to have a dream and pursue it. So, in that respect, I was very fortunate to grow up in a family where my dad was actually my cheerleader as well as my mom. They're both cheerleaders.

FS: Did you have a role model?

GB: There were many role models, and I think that mentoring is a key and why I try to be a mentor and role model to so many students, both men and women. I really try to be a mentor to all the students, all the learners, that I'm able to touch. I believe it was from a professor at the University of Pennsylvania, and my early teachers in grammar school, they all had a role in my seeing women in leadership roles and being able to reach for those same goals. And there are also male mentors. [One doctor] was the gynecological attendee at the University of Pennsylvania, and he was one of my biggest supporters because he encouraged me to go into academic medicine, encouraged me to always move to the next level, and not only achieve it, but achieve it at a higher pace and at a higher level than what was expected.

FS: Was there a defining moment in your life when you decided that medicine was what you wanted to do?

GB: Well my mother insists that my defining moment was when I fell off of my bicycle and I gashed my forehead, and I was bleeding profusely. When she saw me coming in with a blood-drenched face, she screamed. That was my mom, she was operational, but she was also very hysterical, very artistic. So, she went looking for my dad, who was outside, and I went into the bathroom and I started putting pressure to the gash. Of course my dad brought me to the hospital, and they put the stitches in where they belonged. So, I got home and everyone said, Gloria's gonna be a future doctor! And then I started to look up all types of books on being a doctor and what it meant to be a doctor whenever I went back to get my stitches out or went to my family doctor. It became very engrained in me, and that may have been the defining moment. Even though I was very young, I was seven or eight, I still remember my mom saying to me when I got home, and there was a bandage on my forehead.

FS: Was this exactly where you imagined yourself going when you decided to become a doctor?

GB: When I imagined myself becoming a doctor I really relate back to the time when I was in the bicycle accident and had the head injury and needed the sutures. I've always been someone that really wanted to touch people. My mom said that I was helping people. That was my personality. So, going into medicine, you hear this all the time, but it's true, you really want to help people. I really wanted to cure them of pain, of disease. And then how I diverted into the path that I'm in, which is a lot of teaching and a lot of research is number one; research is the way to medicine ahead. That when I was training, every woman who had really bad pain in her pelvic organs needed to have an open incision on their abdomen to check it out. Now, it's a laparoscope, which is a pencil-like instrument that goes in through an umbilical incision. And that was research. So, that's how I got into research, and of course, touching others. So, helping people brings the whole specialty of medicine ahead, and then touching others, and being instrumental in nurturing the next future generation of clinicians. And when I say medicine, I truly include the entire team. I think it's just as important for young people to think about careers not only as a physician or a dentist, but also as a nurse, as a physician's assistant, everyone who touches a patient whether they're in a hospital or in the doctor's office or in the playing field when an injury occurs.

FS: Why did you go into sexual health? Why gynecology?

GB: One of the first areas, when I became a physician and looked into some of the research issues that had to be addressed, I found that there was a great void in was sexual expression, being able to talk about sexual health in the medical community. Because there was such a great void in that area, I realized that there had to be people like myself who were interested in research, that could pick up where other people had left off, where other scientists, other clinicians, had left off, and move the area ahead. And I've seen great strides made in the area of sexual health both for men and for women, and I'm very happy to have been one of the pioneers in that area.

FS: What made you realize there was a lack of research?

GB: As a young faculty member here, I was very involved in menopausal health. And of the major problems that occur when women go through their menopause, is that they lose estrogen, which then affects their sexual health. Because this was so prevalent in women who I was taking care of, that really was the spark that [made me] look at this. I had to move that area ahead. And there were many other attendees, many other clinicians, here at this medical school that were also interested in it. And so, what we did was we embarked on a study, and so we found some solutions to the problem, and really, it was the rooting of my further interest in sexual health for women.

FS: When you were growing up, did you ever see an underrepresentation of women in science? Did that ever affect you?

GB: I did see an underrepresentation of women in science because at that time, especially in the medical field. There were not a lot of women in my classes or in the hospital when I was on my floors, and I have seen that change. The face of medicine has changed over time, and everyone says as more women enter a field, more men enter the field, which is like nursing. For many years it was all females, and as the opposite sex comes in, they really do have to prove themselves. And I think that's when I saw the most over my years of practice, that when I was around men, I had to prove myself a little bit more capable of being a phenomenal doctor. And I think there's more equality in terms of things like the number of men and the number of women, that you don't see that as much. But, you do see it when you're in a specialty where there are a few men or there are a few women.

FS: Did you ever feel any personal discrimination because you were a woman?

GB: If there was personal discrimination when I was training, I think I was blind to it. And I only say that because when I was growing up, my father treated all so equally. Even if there was some negative influences that came into my family or came into my school, I think they were neutralized by my father's attitude that, Gloria, you could do anything that you want to do, even if you want to be a ballet dancer. You can do it! So, I was brought up with that concept, if you want to be a great scientist, you can do it. And so, I think I was probably [blinder] to some of the surrounding issues.

FS: You were a city girl, is that what drew you back to New Brunswick?

GB: I grew up in Newark, New Jersey, and I guess I belong on the Jersey Shore as a lifelong resident of New Jersey. What drew me back to New Jersey, was not only coming back to my home state, but also I finished my residency at the University of Pennsylvania, my dad was diagnosed with Parkinson's. And so he was such a major person in my life, and my own mentor, that I thought I really wanted to be close by to ensure that I was there for him in the same way he was there for me. So, that was another very much driving force for me to come back to New Jersey, as well as a great school here, so I'm very pleased to be back at the University of Medicine and Dentistry of New Jersey at the Robert Wood Johnson Medical School.

FS: Is there one particular accomplishment you feel most proud of?

GB: I think the greatest accomplishment is the mentoring that I have provided to so many students who continue to call me, or who I feel close with in terms of they share all their major accomplishments with me. For instance, one of my MD-PhD students, who is now at Johns Hopkins, is someone that I still keep in touch with. She graduated from here about seven years ago, she did an OB/GYN residency, then she did an internal fetal medicine fellowship, and now she's at Johns Hopkins starting her own lab. And those are the accomplishments. And if I put

them all in one basket, I have to go back to the mentoring to see students who were medical students when they started or even college students or high school students. I can touch them through their professional growth, and I'm still very much involved in [her] professional career, and it brings me great satisfaction to watch her blossoming into an OB/GYN through both a researcher and a clinician.

FS: Could you tell me a little about the Girl Scouts and what that means for you in terms of women's leadership?

GB: Girl scouts are extremely important, and again, what does it mean to me? It means mentoring. Girl Scouts not only have goals that they have to reach and community involvement and betterment of themselves, and their club scouts group, but also they have very strong mentors. And if I had to give you one key word that I feel moves education, moves academia, moves research, moves the world ahead, [it] is mentoring. And in many instances, our first role models, our first mentors, are our parents. And then early on, our teachers, our community leaders, our religious leaders, they're all our mentors. And every adult I think owes it to the next generation and the next, next generation to be role models and mentors for them.

FS: What specifically do you think is important about Women's Leadership, about empowering young girls at an early age?

GB: Women's leadership is extremely important, and I think there are a few reasons for that, and the first is that I think women do have a lot to offer. I believe that we see things, many times, very differently from each other, as well as from males. So that, for the perfect team, you really need people from many different walks of life leading that team. I think that's the major issue that's evolved, especially in medicine. Especially since much of the leadership in medicine was that the doctor would provide all of the leadership for every patient, so that when the doctor rounded on her or his patient was that the doctor would make the final decision. And what we found, and I think this is true with every walk of life, is that you need a team. And there will be a team leader, has to be sensitive to other thoughts, to other ways of looking at issues that come up. And so that now, even with rounds, the medical students, the nursing students, the nurses, the fellows, the attendees from other disciplines, all make up how we're going to move ahead and take care of someone with an ovarian cyst or a pelvic inflammatory disease or a high-risk pregnancy. So, with women's leadership, they do bring tools, they bring ways of thinking that are extremely important to move whatever specialty it is ahead.

I think all of us are going to have, especially with women's leadership, is looking at the negatives and not giving up. If you don't get into a particular school, or you don't get the graduate position that you want, it's ok. But, another aspect to disappointment is that you also have to be open to what your strongest tools are for you. Go back a little bit, say, Ok, I'm at this point. Get a little advice from others and see if this is really right for [you]. And after soul-searching and talking to the coach and other people I realized [what] wasn't the best choice for me. So, I think that's also

important in terms of leadership, knowing what your best tools are and taking life and taking it seriously from others and knowing what you can do.

FS: You've meant so much, and obviously you've accomplished so much and touched so many people. So when you wake up in the morning, what is it that makes you who you are?

GB: I think I'm a cheerleader. When I get up in the morning, I'm thinking about all the exciting things I'm going to do. Like when I got up today, I was so anxious to meet you, and I was just excited. Your email was amazing to me; it just made me feel like this was just such an amazing day. And it is. And I think it's probably my being a cheerleader and looking at the day with a very positive outlook, which I think, makes everything brighter.

FS: Is this where you see yourself staying for the next twenty or thirty years?

GB: I'm very, very happy with what I'm doing. Will I stay here for the next twenty or thirty years? That would be marvelous, but, as I said, if I can mentor and if I can really share my tools with others, you can do it in any place. You don't have to do it in one particular spot or one particular country, or one particular state. But, I am very much a part of the university, and I'd be honored to stay here for the next twenty or thirty years.

FS: Can you offer me a piece of advice as I graduate college?

GB: I offer, to every woman who's graduating from college, my piece of advice is [to] be enthusiastic with whatever you do. Don't always say, well, I could've done A, or I could've done B, or I could've gone into veterinary medicine, why did I go into dentistry? Why, why, why, why why? But rather, if you go into dentistry, you should be a cheerleader for dentistry. If you go into electrical engineering, you should be a cheerleader for electrical engineering. And the other thing I believe that still works is that everything you do is like putting money in the bank, like securing something. It is a part of you and you grow from it. If you take all this French and say, Ugh! Why did I take all this French? Why didn't I take more organic chemistry or more physics? That's all part of you. You never know when you're going to use it again, so it just broadens you as a person. So, those would be the two pieces of advice that I think are most important. Be a cheerleader for everything that you decide in life, and everything that you do is a part of you in life and enhances you as a person.