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## WOMEN IN MEDICINE

In Conjunction with McGill Feminism in Medicine

# Women in Medicine: Dr. Theresa Tam

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Dr. Theresa Tam

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### ABSTRACT

Canada's Chief Public Health Officer, Dr. Theresa Tam (BMBS (UK), FRCPC) attended medical school in the United Kingdom before immigrating to Canada where she trained in pediatrics and specialized in infectious disease. She has maintained a '*pourquoi pas*' attitude throughout her career that has helped her realize her vocation in public health, gain experience in the healthcare field—both around the globe and on Canadian soil—and advance into prominent leadership positions. Today, as Canada's Chief Public Health Officer, known colloquially as Canada's Top Doctor, Dr. Tam has been thrust into the spotlight as a result of the COVID-19 pandemic. This article outlines her exciting career trajectory and explores the challenges she faces while informing Canadians of guidelines for staying healthy during the pandemic.



### KEYWORDS

public health, COVID-19, pandemic, gender equality, feminism

## Early life and career

Born in British Hong Kong, Dr. Theresa Tam emigrated with her parents at a young age to the United Kingdom (UK), where she attended a small all-girls boarding school. While she was passionate about the humanities, arts, and science alike, she had a particular affinity for biology. This was in part because Dr. Tam felt supported and inspired by her biology teacher, Mrs. Bradley, who she regards uniquely as "in her own rights and fame, an expert in ferns." Dr. Tam was one of the first students in her school's history to become a physician. "It was an unusual choice," she said, "but I thought [...] why not have a go?"

Interestingly, Dr. Tam was not always on track to be-

come a high-profile agent of public health; in fact, she initially hoped to become a general surgeon. As Dr. Tam explained, students in the UK medical school system at the time were required to complete a three-year undergraduate degree combined with research, followed by a two-year pre-residency internship in a specific field. (1) Dr. Tam chose to study biochemistry with a research focus on carcinogenesis. She then opted for general surgery and internal medicine for her internship. When her family moved to Alberta, Dr. Tam planned on applying for a surgery residency, however, she knew acceptance would be unlikely as a foreign medical graduate. Instead, she applied for a residency in pediatrics and considers herself fortunate to have been accepted to attend the University of Alberta. Following her residency, she completed a fellowship in pediatric infectious disease at the British Columbia Children's Hospital—a path that ultimately changed the course of her career.

## Vocational change

Prior to her fellowship, Dr. Tam had little exposure to public health. In the infectious disease program, her mentors, who were experts in vaccinology, exposed her to their work at The Vaccination Evaluation Center and the many clinical trials in which they were involved. This piqued her interest such that she recalls she “actually shifted from a more research and clinical interest into [...] public health.” She promptly joined the Canadian Field Epidemiology program, where one of the first outbreaks she tackled was a highly virulent strain of influenza. While she had a hand in treating many subsequent outbreaks around the globe, she retained a particular affinity for that disease. As Dr. Tam stated, “influenza really never left my career; it became my favourite virus, as it were.”

Owing to the strong expertise she had accumulated, Dr. Tam was able to accept a position at the Public Health Agency of Canada (PHAC). At the time, she was already working as an attending pediatric infectious disease specialist at the Children's Hospital of Eastern Ontario. The workload of two full-time jobs was heavy and unsustainable, and Dr. Tam knew “[she] just couldn't do

both.” She loved working at the bedside of patients in the Emergency Department and the Pediatric Intensive Care Unit, making it difficult to hang up her stethoscope and leave her clinical duties behind; nevertheless, she chose to pursue her vocation in public health. Within the PHAC, Dr. Tam continued to advance into leadership roles, becoming Deputy Chief Public Health Officer, Assistant Deputy Minister for Infectious Disease Prevention and Control (2), and in 2017, Chief Public Health Officer (CPHO), the position which she currently holds.

## Career development

Dr. Tam credits her success partly to her peers who pushed her out of her comfort zone, while admitting that “it doesn't usually take too much convincing, and I [...] take on the next challenge.” In fact, Dr. Tam explained that she never aspired to any position, including her current one. “The bottom line is there was really no planning,” she explained, “given my career trajectory, I kind of feel like I was building up to this job.” The ease with which Dr. Tam accepts new challenges led her to the trenches of many global health initiatives, including Polio eradication in Bangladesh. (3) Dr. Tam proudly stated that she was “the first non-American team member of the Stop Transmission of Polio Program” of the Centers for Disease Control and Prevention. Leading up to her role as CPHO, she was at the forefront of the Canadian responses to multiple communicable disease outbreaks, including H1N1 and SARS, and acted as an international expert to the World Health Organization. (2) In 2006, while acting as the Director of the Immunization and Respiratory Infections Division and Co-Chair of the Pandemic Influenza Committee, she helped update the Canadian Pandemic Influenza Plan for the Health Sector. (4) This report was written after the SARS pandemic, which hit Toronto in 2003, and has been updated several times since, now including advice based on the H1N1 outbreak in 2009. (5)

In addition to protecting Canadians against disease outbreaks, Dr. Tam has made it her goal to champion the reduction of health disparities in key populations

in Canada. She has met Canadians face to face in order to better understand their plights, investigate disparity in public health outcomes, and gain a more intimate and informed perspective on the stigmatization and discrimination that exists within Canada. Dr. Tam's commitment to listening to the public, exemplified through her discussions with Indigenous communities and people suffering from addiction during the opioid crisis, has allowed her to make informed policy recommendations to people who have the power to take action and create change. She remarked that as CPHO, she has the "very direct and very frequent opportunity to discuss important public health issues with the decision-makers of the country and around the world." This places her in an ideal position to incite systemic change.

## Fighting for equity

Since she was appointed, Dr. Tam has been striving to make Canada's healthcare system more equitable and inclusive. "When I became the [CPHO]," she reflected, "my vision was to do whatever I can to champion a more inclusive society, a more inclusive health system, be a voice of inclusion. And so, health equity is very much run through horizontally in everything that I do [and] gender equity is a part of that whole picture." In fact, in her 2019 CPHO Report of the State of Public Health, titled 'Addressing Stigma: Towards a More Inclusive Health System,' (6) Dr. Tam outlined suggestions for improving gender equity within the healthcare system. She stated, "Just like any system, quite frankly, [there exists] gender stereotyping, inequities at certain levels of leadership, [and] harassment in different ways. [...] We have to admit to the fact that there is stigma and discrimination in the health system." Recognizing that medicine used to be quite male dominated, she explained that things are trending towards equality. Now, men are outnumbered by women in terms of both medical students and practicing physicians, and we are seeing more women in leadership roles. In fact, until very recently, the health of Canadians was managed at the federal level by three women: Dr. Tam as the CPHO, Patty Hajdu as the Minister of Health, and Tina Namies-

niowski as the President of the PHAC (who recently stepped down in late September, being replaced by Iain Stewart). (7, 8) When asked if she considers herself a feminist, Dr. Tam stated she envisions the future of feminism as "really creating the kind of society in the world where all people have the support or the chance to realize their full potential, which actually is the underlying objective of health equity."

## Pandemic response

While undoubtedly qualified to be CPHO during a viral pandemic, Dr. Tam does not take this role lightly. In her Report on the State of Public Health in Canada in 2019, (6) Dr. Tam referred to the post-social media world as "the age of misinformation and disinformation," which complicates her role of communicating public health decisions to the public. During the current pandemic, she states, "it's quite difficult actually to manage the communications, and people can slice and dice and put their own perspectives on what you just said, whether it's actually in line with your intent." To combat this, she has strived to maintain cohesion in the general advice given to the public despite any jurisdictional differences. Moreover, Dr. Tam has been criticized for her early response to the pandemic, in particular for underestimating the spread and impact that COVID-19 would have both nationally and internationally, and for cautioning the use of masks. She explained that her advice was evidence-based in the context of rapidly evolving information and a paucity of data early on. "It is challenging trying to communicate the fact that there are things that we know, things that we don't know, and the fact that we may have to change our public health advice at the time," Tam explained. She finds herself reflecting on the decision-making process and wondering, 'is this the best way to position something?', 'how can I do better in terms of getting consensus on a certain area?' While it may seem to the public like Dr. Tam is holding Canada's weight on her shoulders, she is not solely responsible for decisions made as part of the COVID response. "The decision-makers are our elected officials," she explained, "the people who have the actual public health authority

to act are at a different level of government.” So, while Dr. Tam is “an advisor, [...] a champion, a leader, [and] a convener,” she does not have the final say in COVID-related decisions.

Despite this sharing of responsibility, Dr. Tam admits the COVID response has taken its toll on her and on others in public health. As her role in this crisis has become more demanding, she has relied upon a network of family, friends, and colleagues. Her parents have remained healthy and supportive throughout the pandemic, and her nieces and nephews have continued to inspire her as they always have. “I am [...] Auntie Theresa to many,” she said proudly. Dr. Tam recognizes the importance of balance in her life and as such, she tries to make time for her hobbies: she enjoys running and fancies herself “somewhat of an ornithologist.” In light of the second wave being well under way, maintaining a sense of normalcy remains as important as ever.

We have come to know Dr. Tam as a result of her role as CPHO during the coronavirus pandemic, but she had been quietly advocating for improved public health long before COVID hit. Although she found her vocation relatively late in her career during her fellowship, she has no regrets, only aspirations. “I really want to finish my career seeing polio actually eradicated,” she said. When asked to offer advice to those interested in a career in public health, Dr. Tam offered the following insight: “it is very exciting if you like complexity, if you like a job where the population is your patient. Even though you can’t see instantaneous outcomes, it’s all worth it in the end. [...] The future is prevention, and there needs to be a massive investment in public health, of which the people who work in public health is the biggest investment.” Dr. Tam ended the interview by saying “go with the flow; don’t sweat it too much,” which is advice that seems to have served her well throughout her career and will surely continue to do so.

## REFERENCES

1. University of Nottingham Medical School: History [Internet]. Nottingham: The University of Nottingham; [Date unknown] [cited 2020 Oct 5]. Available from: <https://www.nottingham.ac.uk/manuscriptsandspecialcollections/>

- collectionsindepth/university/university-collection/university-of-nottingham-medical-school.aspx.

2. Dr Theresa Tam, BMBS (UK), FRCPC [Internet]. Geneva: World Health Organization; [Date unknown] [updated 2020; cited 2020 Oct 5]. Available from: [https://www.who.int/about/who\\_reform/emergency-capacities/oversight-committee/theresa-tam/en/](https://www.who.int/about/who_reform/emergency-capacities/oversight-committee/theresa-tam/en/).

3. Global Immunization: STOP [Internet]. Atlanta: Centers for Disease Control and Prevention; [Date unknown] [updated 2020 Apr 24; cited 2020 Oct 5]. [Available from: <https://www.cdc.gov/globalhealth/immunization/stop/index.htm>.

4. Tam, T., Grimsrud, K. The Canadian Pandemic Influenza Plan for the Health Sector [Internet]. Toronto: Longwoods Publishing Corporation; 2006 [cited 2020 Oct 5]. Available from: [https://www.longwoods.com/articles/images/Canada\\_Pandemic\\_Influenza.pdf](https://www.longwoods.com/articles/images/Canada_Pandemic_Influenza.pdf)

5. Canadian Pandemic Influenza Preparedness: Planning Guidance for the Health Sector [Internet]. Ottawa: Government of Canada; 2018 [cited 2020 Oct 5]. Available from: <https://www.canada.ca/en/public-health/services/flu-influenza/canadian-pandemic-influenza-preparedness-planning-guidance-health-sector/table-of-contents.htmlpre>.

6. Tam, T. Addressing Stigma: Towards a More Inclusive Health System [Internet]. Ottawa: Government of Canada; 2019 [cited 2020 Oct 5]. Available from: <https://www.canada.ca/en/public-health/corporate/publications/chief-public-health-officer-reports-state-public-health-canada/addressing-stigma-toward-more-inclusive-health-system.html>.

7. Public Health Agency of Canada [Internet]. Ottawa: Government of Canada; 2020 [updated 2020 Mar 7; cited 2020 Aug 20]. Available from: <https://www.canada.ca/en/public-health.html>.

8. President of the Public Health Agency of Canada: President Iain Stewart’s biography [Internet]. Ottawa: Government of Canada; 2020 [updated 2020 Sept 28; cited 2020 Oct 5]. Available from: <https://www.canada.ca/en/public-health/corporate/organizational-structure/president.html>.