

## Letter to Editor

# Gender Inequalities that Hinder the Professional Growth of Female Doctors and Trainees

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Madam, Gender inequality is defined as inequality regarding sex or gender in which one sex or gender is consistently preferred or emphasised above other. Gender disparity is thought to have existed for countless years, with women supposed to be providers at home while men anticipated as leaders with professions outside the home.<sup>1</sup>

Implicit biases have an adverse effect on women's careers in medicine and contribute to imposter syndrome, exhaustion, underrepresentation in leadership roles, income inequality, poorer advancement, and less favourable reviews. Gender bias in the promotion process or in the ladder for progression may be a factor for the slower development of women in academic medicine, with fewer women at each succeeding level of career promotion. Men, for example, earn more honours from professional medical associations, whereas women obtain less opportunities to talk at large conferences. According to a 2014 poll of 1066 physicians who received career advancement awards, 66% of women and about 10% of men reported personal gender bias.<sup>1</sup>

Gender prejudice also affects female doctors in prosperous nations like the USA, the UK, and Japan.

The repercussions of gender inequality are more concerning in nations that are developing, notably Pakistan, which is ranked 153rd out of 156 countries in the World Economic Forum's Genetic Gap Report 2021.<sup>2</sup> Owing to research, Pakistani female doctors encounter gender discrimination at work, which has a detrimental influence on their job performance and appears to be a barrier to them at leadership posts. The patriarchal attitude of the community, workplace harassment, and the shortage of basic healthcare facilities for mothers who work are just some of the issues that prompt women to quit their jobs. Even though females persist to work amid the discrimination, women must additionally undertake the responsibilities of a mother and housewife, which leads to a negative impact on their abilities as leaders and doctors.<sup>2</sup>

Only a minority of the 65% of female medical students in Pakistani medical institutions choose to pursue careers as practising physicians. Inappropriate language directed towards female employees, a lack of respect by the surgical team, difficulties in getting hired and promoted, and disparities in mentorship opportunities in the operating room (OR) all contribute to the demotivation of female medical professionals. Majority of the female surgeons acknowledge that their clinical experiences have harmed their career options, employment satisfaction, as well as access to positions of leadership. One concerning conclusion noted in one



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of the studies is that female surgeons are undervalued as leaders, with only one female professor employed by the surgical department despite the fact that 34.4% of the trainees were female.<sup>2</sup>

Women hold a variety of responsibilities and positions within health care organisations, hospitals, and educational environments, including doctors, nurses, midwives, and administrators. Female healthcare employees around the world continue to encounter numerous working problems, including family responsibilities, weak human resource policies, and gender inequities that impede their growth as professionals. Work-family harmony has been identified as a major hurdle to job progress in several nations.<sup>3</sup>

Women in health care encounter issues connected to bad employment circumstances, such as unequal compensation, unsatisfactory working conditions, and limited prospects for professional promotion, work-related stress, and negative laws that reinforce patriarchy. According to a systematic evaluation of gender disparities in surgical skill learning, gender differences were more significant among medical students.<sup>3</sup> Future surgical curriculum should also include customising individualised programmes that allow frequent mentoring and one-on-one training for female doctors.<sup>3</sup>

The problems that younger female doctors in medicine encounter do not go away with experience or age. In order for female medical professionals to move forward and improve the standard of healthcare offered to the population, workplaces should support them. In order to attract and assist more female doctors, concerns including managing work and family obligations, combating harassment and prejudice, and fostering positive workplace cultures must be addressed.<sup>4</sup>

Women make up a huge proportion of health professionals and the time has come where we should break these societal gender roles which have become a cultural norm and spread awareness that men and women have equal rights and responsibilities towards the medical field; so that a change in mentality can be brought about. Women should be equal stakeholders alongside men when it comes to making decisions related to healthcare professionals. They should be

given an equal opportunity to represent their fellow colleagues and help cater their problems.



**Figure 1:** Gender Inequality Hinders the Professional Growth of Female Doctors and Trainees

Most women have the added responsibility of maintaining their homes and families due to which they may fall behind their male colleagues. Providing adequate guidance and mentorship to make up for their loss will help bridge the imbalance of male and female expertise. Paid maternity/sick leaves along with a flexible schedule and a smooth transitory period is the need of time that will allow women to equalise their professional and personal lives.

Many women find it hard to commit to leadership roles due to lack of support and encouragement. By uplifting our fellow colleagues to pursue higher positions, more women will apply and hence reach their desired post. And most importantly, valuing women for their achievements will encourage other women to also pursue and climb up the social ladder in the field of medicine. The success of every woman is a huge win for society itself towards advancement and stability.

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