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Disproportion of Women in General Surgery and Obstetrics-Gynecology Professions

Nidhi Patel

Abstract

An increasingly number of women have been enrolling in U.S. medical schools recently and the field of obstetrics-gynecology has become predominantly female, but the profession of general surgery still remains largely unequal between the two genders. There is an observable pattern of gender inequality in both of these specialties, which is a result of several different factors which affect all women regardless of their profession. I studied how the stark difference in the percentages of female surgeons versus the percentages of female obstetricians-gynecologists compared to men has been created due to the prescribed gender roles of women in society. I looked at articles in medical journals in the two individual specialties for articles dealing with the different factors, such as family, marriage, social trajectories, to existing stereotypes, that could influence a woman to choose a particular medical profession. I found that although more women have been enrolling in general surgery over the last couple of years, there is still a large difference in the number of women in general surgery and those in obstetrics-gynecology, due to certain factors which have not been publicly addressed. The decrease of women in general surgery has paralleled with an increase of women in obstetrics-gynecology in the same time span, due to the social factors that women are often forced to consider before entering a career field. Societal expectations about motherhood are often the main reason why women really venture into long, strenuous, and demanding careers like general surgery. However, there are other influences that women experience that deter them from general surgical training, such as the existing negative perceptions and stereotypes, gender-based discrimination, and the lack of motivation by same-sex mentors. Since there is a need to address the gender inequality in general surgery, actions need to be taken. Increasing the number of women in surgical faculty, providing flexibility with maternity leave, and adjusting rigorous residency curriculum are possible steps to help encourage women to pursue the career.

Introduction

The field of medicine has always remained a very male-dominated field until the last couple of decades. Medicine started to revolutionize as women have started to enter medical schools and different specialties at higher rates. However in the 21st century, women started to outnumber men in medical schools, creating a sense of equality amongst the two sexes in the profession. The field of obstetrics-gynecology dramatically increased its number of women and has become female-dominated career over a course of fifty years. Despite the positive growth of women in many areas of medicine, the field of general surgery remains very unequal between the two genders. The question that is of particular interest is how has the stark difference in the percentages of female surgeons versus the percentages of female obstetricians-gynecologists compared to men been created in relation to the societal pressures regarding the gender roles of women. The field of general surgery needs to receive more public attention to combat the gender inequality that still exists in the profession to this very day. As women are starting to fight against discrimination and stereotypes to enter careers that were once shut off to them before, the same positive trend has not emerged in general surgery. Women are still hesitant in entering general surgery due to a variety of factors, but mainly due to the lack of social progression. Without proper acknowledgement and improvements, general surgery will remain a very segregated profession between the two professions. By understanding the underlying reasons behind the low number of females in general surgery, proper actions can be taken to increase the enrollment of women to create a sense of equality. Although there has been an increase in the number of women entering general surgery residencies recently, there is still a stark difference in the percentages of female surgeons versus the percentages of female obstetricians-gynecologists compared to men, due to societal expectations about motherhood, negative perceptions about general surgery and discrimination against medical students.

TABLE 1
Number (%) of female and US LCME graduates entering obstetrics and gynecology, primary care, and surgery, 1997-2004
LCME, US Liaison Committee on Medical Education.

Specialty	1997	1998	1999	2000	2001	2002	2003	2004
Obstetrics/ gynecology								
Female	789 (67.5)	779 (69.0)	804 (72.0)	777 (74.1)	808 (74.3)	868 (77.9)	847 (75.5)	875 (76.6)
US LCME	1100 (94.1)	1,34 (91.6)	979 (87.6)	908 (86.6)	900 (82.7)	901 (80.9)	839 (74.8)	824 (72.2)
Primary care								
Female	6484 (45.0)	6477 (45.1)	6933 (46.7)	6386 (46.6)	6,75 (47.0)	6606 (47.8)	6836 (48.8)	6935 (49.8)
US LCME	9606 (66.6)	9774 (68.1)	9713 (65.4)	9041 (66.0)	8661 (63.9)	8507 (61.6)	8069 (57.6)	8102 (58.1)
Surgery								
Female	582 (19.6)	618 (19.8)	634 (19.8)	673 (21.9)	651(21.9)	654 (22.0)	712 (22.7)	783 (24.9)
US LCME	2509 (84.6)	2575 (82.6)	2542 (79.4)	2425 (78.7)	2,16 (78.0)	2285 (76.8)	2,64 (81.7)	2632 (83.6)

Societal Expectations about Motherhood

- One overarching concept that explains why this large gap of women in the two professions exists is the societal expectations that women are expected to fulfill regarding motherhood.
- Viola et al. (2010) found that the lifestyle choices that women often have to consider before pursuing a career in surgical medicine plays a large role on their decisions, and that the female surgeons in all specialties were five times less likely to be parents compared to men
- Factors like maternal leave and child rearing are more impactful on women than men. In fact from a study it was found that many practicing female general surgeons suggested having a shared or part-time practice and improved parental leave to try to increase the number of women in the specialty, which demonstrates that the societal roles that women have to uphold as mothers often causes problems with their professional life.
- Riska assigned a more specific theory to why there is a gender difference in the two career fields: the sex-role theory, which states that men and women align their professional lives with the roles that they hold in society.
- In addition to the decisions that female medical students must make about their life as a surgeon, they also strongly considered lifestyle issues when deciding on a career in obstetrics-gynecology, which depicts the overall necessity for women to consider the societal roles that they are supposed to uphold before they embark on any career path.

Negative Perceptions about General Surgery

- There is a large difference between the perceptions held by female medical students and surgeons. In fact female students were shown through a survey to believe that general surgery was not compatible with a happy marriage, rewarding family life or the ability to raise children, but the results from the practicing surgeons indicated that they disagreed with all three statements and most (80%) female surgeons stated that they were pleased with their career choice.
- The low percentages of women in surgical careers are due to the lack of successful, female surgical paradigmatic trajectories, which are shaped by the experiences of members in the community. Career decisions are linked to how people see, hear, and experience personally about that particular profession.
- Also there is a misconception that most women prefer female obstetrician and gynecologists, while in fact most actually have no preference at all, which discourages men from entering the profession leading to the increase of women over time.

Discrimination Against Medical Students

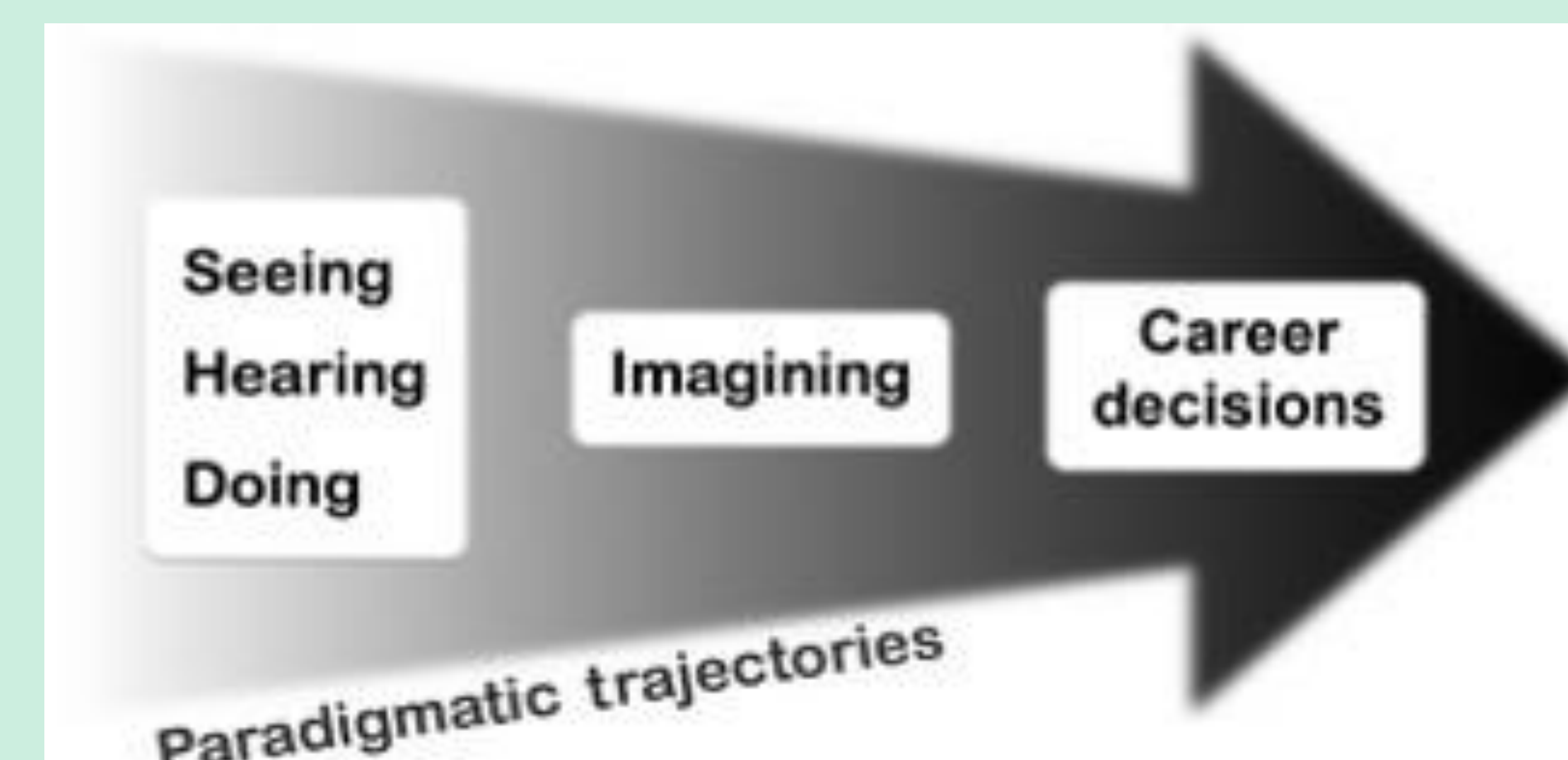
- Many females are not given opportunities to participate with senior surgeons and faculty during their rotations, while almost all men are.
- Park et al. found, from their study, that 25% of all female students compared to 3% of all male students stated that they encountered some type of gender-based discrimination in their GS (general surgery) rotation.
- Schnuth et al. observed through their surveys that male students were more likely to be discouraged from obstetrics-gynecology by other medical students and even patients much more than female students, due to the belief of incompatibility.
- A large number of practicing female OG physicians discouraged males from entering the field, which significantly lowered their clerkship satisfaction.

Lack of Same-Sex Mentors

- Hill and Vaughan state that the gender of the role models is very important in the effect on the students, and since women make up the minority of senior surgical positions in clinical environments, the female medical students may have troubles finding someone to support their career plan.
- Since there is a lack of female surgeons, the students see that gender plays a role in success, which can result in feelings of discomfort and isolation and can lead to disinterest in general surgery.
- Women that decided to pursue GS are more likely to have met a same-sex mentor and consider the income and time commitments of GS practice to be reasonable.
- Gariti et al. claimed that the students that ended up choosing to go into OG (obstetrics-gynecology) residency stated that the faculty and residents in the OG department and their positive experience and performance in the clerkship played significant roles in their decisions.

Conclusion

The gender inequality that exists in these two professions is a concern that needs to receive immediate attention. Since there is a clear need to address the disproportion of women in general surgery, change needs to be enacted in order to encourage women to pursue the career. Possible methods to increase interest might include introducing more female speakers into medical schools to give female students opportunities to see concrete examples of paradigmatic trajectories and increasing the number of women in surgical faculty to provide same-sex mentors to students. Also medical schools should adopt stricter policies regarding gender-based discrimination. In addition to the policies, universities should also consider changing their residency curriculum and schedule to decrease the number of hours that residents are required to have each week, including reducing the number of on-call nights. In order to attract more women and accommodate their needs, more maternal leave, on-site child care, and optional research years should be provided. All of these suggestions will only be effective if medical institutions become more proactive in ensuring that the brightest and most deserving medical students are given the opportunity to become general surgeons.



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