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COMMENTARY

Impediment to Leadership Opportunities for Female Doctors – Gender Disparity in Pakistani Healthcare System –SHORT REPORT

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Abstract: Gender disparity, that is the unequal attitude and treatment of people due to their gender, is found in many fields including the medical profession. Not only it is present in developed countries but is also a major concern in developing countries like Pakistan. According to data, Pakistani female doctors face gender discrimination that negatively impacts their workplace performance and has proven to be a hindrance to them taking up leadership roles. The patriarchal mindset of society, workplace harassment, and lack of basic facilities in the hospital for working mothers are just a few of the factors that compel women to leave their careers. Even if they continue to work, women have to perform the duties of a mother and homemaker along with their jobs, and that negatively impacts their skills as doctors and as leaders. Efforts need to be taken to encounter all the problems that are negatively affecting leadership roles of female doctors such as providing equal opportunities, arranging awareness campaigns about creating a workplace environment that is favorable to all genders, and creating policies that will help working mothers by forming daycare centers and giving paid maternity leaves. This will help in alleviating the gender disparity in the healthcare system and will increase the chances of female doctors proving themselves good doctors and leaders.

Keywords: gender inequality, authoritative position, healthcare system

Gender disparity is defined as the unsuitable or unequal attitude and manner towards a specific gender that affects their working proficiencies.[1] Even as the world is opting to a more unorthodox approach towards gender roles, gender discrimination can still be seen in different professions and fields especially in healthcare. Most of the women in the hospital workforce are either nurses or midwives and are rarely seen in e authoritative positions. Even in leadership roles, women still have to deal with gender bias.[2] Female doctors of developed countries like Japan, the UK and the USA also face gender bias.[3,4] When compared with developed countries, the effects of gender disparity are more worrisome in developing countries particularly Pakistan, which in the World Economy Forum's Genetic Gap Report 2021 has been placed on 153rd position out of 156 on the gender parity index.[5] Gender disparity in the health care system of Pakistan is frequently encountered by female doctors during their careers. Recent research conducted in a tertiary care hospital in Pakistan acknowledged the problem of gender bias faced by their female surgical residents during their careers. These included instances of inappropriate language being used against female staff, lack of respect from the surgical team, barriers to hiring and promotion, and differences in mentorship in Operating Room (OR) opportunities. Most of the female surgeons accept that these experiences have negatively impacted their career choices, job satisfaction, and access to leadership positions. An alarming finding highlighted by this research is that female surgeons are played down as leaders as only one female professor was working in the surgical department even though 34.4% of the residents were female.[6]

Even though 65% of all the medical students enrolled in Pakistani medical schools are women, only a few of them continue their careers as practicing doctors.[1] This distressing reality can be partially explained by conservative gender roles assigned to both men and women especially after marriage which they are expected, if not obliged to perform.

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Women are considered homemakers and responsible for all household activities and men are regarded as the sole breadwinners of the family. In Pakistan, being a career-oriented woman is discouraged and such women are usually not facilitated by society. This conservative and patriarchal mindset is also prevalent in the healthcare setup as even the best residency programs in the country do not offer the basic facilities like daycare centers, paid maternity leaves, leniency throughout pregnancy, and in initial years of motherhood to working mothers. As a result, this societal pressure and workplace toxicity make it difficult for the women to balance their home and work-life together, and most of them end up leaving their careers to satisfy the societal definition of "perfect housewife". For those women who choose to continue their careers, these orthodox roles affect their working efficiency resulting in their professional and vocational skills being less developed than their male counterparts.[7] Furthermore, this has an impact on their chances to be accepted as a leader or getting promoted in the future. Ineffective recruitment and progression policies, lack of professional development and networking and fewer research opportunities, workplace harassment, inequalities in salaries, limited same-sex mentors and female role models for female medical students and residents are just some of the additional factors which have a pernicious effect on female doctors career choices and their representation in leadership positions.[8]

Increasing female representation in leadership positions is one of the initial steps in alleviating gender disparity in the healthcare system as this will not only make the workplace environment healthier for other female doctors but these female leaders will also become role models for younger female medical students. This will encourage female doctors to pursue competitive medical fields like surgery and will encourage them to become more career-oriented. In a nutshell, a large-scale evidence-based survey is essential to recognize and find the problem faced by female doctors in pursuing their careers and in attaining leadership roles so that each problem can be properly addressed. Flexible human resource policies should be introduced in the hospitals especially for working mothers to tackle their work-life balance issues. National and institution level organizations should connect female medical students with female mentors and role models who will, not only, be a source of inspiration for them but will also open more networking opportunities for them. Moreover, awareness programs are needed to promote guidelines for a workplace environment that is more inclusive for female doctors and surgeons and offers equal leadership opportunities to them.

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Disclosure

The authors report no conflicts of interest in this work.

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