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Challenges Faced By Women In Management As A Doctor

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Abstract

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Introduction

For ages, women have been forced to occupy a secondary place in relation to men in many ways. There has been considerable ambiguity in the role of women in the present society. Although, education, movements, socio-political scientific and technological advancements, and globalization have changed the attitude of people towards women to a certain extent, there remain some lacunae, which need to be addressed. Support of family members and society is needed to redefine the status of women in getting empowerment. In the modern society, women empowerment must begin with women's active participation in all fields that are dominated by men, as women are a significant part of not only the population but also have an instrumental role in contributing to every sphere of life.

Today women are a part of every profession and have contributed immensely in the development of almost all domains of the society. Despite such advancements contributed by women, there is still a gender bias in all walks of life, and medical field is not an exceptional one.

Women doctors and academicians suffer discrimination at different stages of the career. Implicit, or "unconscious" bias against women in medicine is prevalent, affecting their hiring, promotions, development, and wellbeing. Studies have demonstrated that women are less likely to be hired and/or promoted because of their gender.

India produces around 20,000 medical graduates annually from about 300 medical colleges. As per the data from one of the leading medical institutions of the country, women at the All-India Institute of Medical Sciences (AIIMS), New Delhi, comprised 20 and 22 % in undergraduate and postgraduate medical courses, respectively, during 2002-06. They occupy 25 % of the total number of faculty positions. 36% of these are in senior faculty positions compared to 64 % in junior faculty positions (1). 8 % also hold the post of departmental chairs. While women are proportionately overrepresented in branches such as pediatrics, psychiatry, dermatology, medical genetics, and pathology, they are usually under-represented in surgical branches except for obstetrics and gynecology, with only 5% of surgical faculty positions being occupied by women. There are hardly any women in the disciplines of forensic medicine, hospital administration, orthopedics, neurosurgery, gastro-intestinal nephrology, surgery, gastroenterology, oncology, oncosurgery, and nuclear medicine. When choosing a specialty, women, far more than men, consider the balancing of family, parental, and occupational roles, that might account for existing disparities in branch preference among female doctors. Women physicians commonly report stress and conflict due to multiple roles, and thus, are more likely to alter their job responsibilities or make a career change to benefit their families.

Furthermore, one of the significant challenges that

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women doctors have to face in their day-to-day practice is the differential perception of patients as well as their attendants towards them.

Western data has shown that women were significantly less likely than males to be recognized as physicians by the patients.

These biased assumptions prevent women from being offered leadership positions. Reasons for gender disparities in the field of medicine are manifold. For example, women do not achieve promotions or advancement to leadership positions at the same rate as their male peers. Highly qualified women do not independent grants, publications, attain and leadership position very often. Evidence shows that women in academic medicine experience greater challenges finding mentors and sponsors than men, and that this gap likely contributes to career disparities. Women are offered lower pay and less institutional research funding when they join a faculty, and they continue to earn considerably less than men-even among those at the same level and with comparable productivity. Women physicians in community practice also tend to have lesser earning than men, even after accounting for specialization (2). Workplace discrimination against women physicians is common, as women have reported not only receiving lower pay, but also being not being provided opportunities representation at and academic and professional conferences and meetings.

Women physicians face peculiar concerns because of their multiple roles; these have been studied systematically in the West. Despite their increasing numbers, unlike their male colleagues, they have not advanced in their careers. Although, the situation in India has not been studied formally to any great extent, the trends are more or less similar.

Postgraduation, senior residency and initial years as faculty, account for the crucial career-intensive years in professional life which coincide with the equally crucial period in personal life when new roles and relationships are being acquired and adjusted to. This may sometimes, force the women physicians to alter their job responsibilities or make a career change to benefit their families and children, with the most common adjustment being a reduction in working hours (3).

It has been reported in a survey of practicing doctors from a state in the US that women doctors earn on an average 14% less than their male counterparts. It is usually assumed that women, because of family obligations, work fewer hours, are less productive and have a limited publication record, and this leads to gender inequity in their promotion and a hindrance in their career advancement as evident by various studies. This clearly demonstrated that although the proportion of women in medical schools has increased over the past few years, but neither in hospital medicine nor general practice have women reached even 40% of the medical workforce.

Thus, it is time to reconsider some of the entrenched values and attitudes against women that remain a source of implicit discrimination and every effort should be made to throw out old fashioned practices and attitudes that inhibit the contribution they can make both in the early and later stages of their careers. Women doctors have much to offer as doctors and this can be accomplished by creating a supportive environment in academics as well as allowing them to maintain a healthy work-life balance so that they can provide more humanistic and holistic care.

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