

Gender gaps in surgical specialties may take decades to close

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Women compose half of the entering classes of medical students, yet they are underrepresented in many of the largest surgical specialties.

While some efforts are underway to recruit more women into surgical specialties, little information has been available on the rate at which the gender gap is closing. A new study led by investigators from Brigham and Women's Hospital analyzed national data available through the National Graduate Medical Education Census to determine how rates of women in surgical specialties have changed over the last 11 years and use that to project how they might change in the future. In *JAMA Surgery*, the team reports that, among the largest resident specialties in the U.S., little progress has been made, with most of the largest residencies demonstrating a less than 1 percent increase in women trainees per year. For many specialties, including neurosurgery and orthopedic surgery, it will take decades to reach equal female representation if progress continues at the current pace.

"This paper shows that not all fields are created equal," said co-senior author Erika Rangel, MD, MS, a surgeon and researcher in the Division of Trauma, Burn and Surgical Critical Care. "Some fields are reaching parity or have surpassed it, but many are lagging behind."

The research team analyzed publicly available, deidentified, aggregate data from 2007 to 2018 and looked across 20 specialties with the most residents. Of the 20 programs, [women](#) were underrepresented in 13. Specialties with the lowest representation included otolaryngology, [plastic surgery](#), urology, orthopedic [surgery](#) and neurosurgery. The researchers then estimated how long it would take to reach gender parity at the current rate of change. They found that for orthopedic surgery, for instance, it would require more than 100 years for female residents to be equitably represented in the specialty.

"Using the rate of change that we saw in those specialties, we did further analyses to create projections to see how long it would take the specialties with the least representation to reach levels of female representation seen among all residents overall and then that of the U.S.

population," said corresponding author Christopher L. Bennett, MD, MA, a former [resident](#) in the Brigham and Women's/Massachusetts General Hospital Harvard Affiliated Emergency Medicine Residency.

The authors describe several strategies that could help to improve female student recruitment to specialties. These include recognizing and rewarding mentorship; early outreach to medical students; and implicit bias training.

"At the current pace, gender parity among many surgical specialties is still decades away," the authors write. "These data call for concerted efforts to increase the pipeline for female surgical residents."

More information: Christopher L. Bennett et al, The Gender Gap in Surgical Residencies, *JAMA Surgery* (2020). [DOI: 10.1001/jamasurg.2020.2171](#)

Provided by Brigham and Women's Hospital

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