

Women in Surgery

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Surgery has long been a male-dominated field despite the high number of women who graduate from medical school. This phenomenon has wracked the nerves of scholars for years, but progress has been slow. There is still a considerable under-representation of women among surgeons (1), especially in middle- and low-income (developing) countries.

Kenya is no exception, with a notably low number of practicing female surgeons. Efforts by the government to push for gender equality and create more opportunities for women in all fields have not gone unnoticed. Massive progress has been made over the years, and more women have been empowered to take up more professionally. However, navigating the professional arena has remained difficult for women as compared with their male counterparts.

In the surgical field, the low representation of women has further cemented existing barriers of entry into the career for aspiring female surgeons. Surgery as a profession independently experiences a shortage of staff generally in the country, which often results in longer working hours for the existing specialists. Most researchers have cited factors such as insufficient role models and insufficient institutional support, among others as some of the key factors that make it difficult to attract and retain women in surgery.

While reflecting on the concern because of the fewer number of female surgeons, Wallis et al. stated that “this is a gravely sad matter, considering the valuable attributes offered by female surgeons, including

improved surgical outcomes due to better physician-patient communication, and provision of more patient-centric care” (2). Moreover, there is evidence that some female patients actively choose female surgeons, meaning that diverse representation can better meet the needs of a diverse patient population (3).

Many people still fail to understand the importance of mentorship both in training and in clinical practice for female surgeons. Seeing senior female surgeons in practice, even without any inter-personal relationships, encourages younger generations of women in surgery. There are several initiatives to bridge the gender divide such as the Kenya Association of Women Surgeons, which is fostered by the Surgical Society of Kenya, and the Women in Surgery Africa initiative, which is supported by the College of Surgeons of East, Central and Southern Africa. These initiatives seek to create a safe space for female surgeons to share in their experiences, seek advice, and improve mentorship.

Drawing from the author’s experiences and those of other women in the corporate environment in the country, and the region at large, tremendous progress has been made to try and overcome traditional and societal norms that deem women as less competent. Existing stereotypes have long made it difficult to navigate the professional world, with women citing lower pay and even fewer promotions in comparison to male colleagues (4). The tide is slowly, but steadily, shifting to embrace equal opportunities for all genders,

and this is a huge milestone compared with several years back.

In addition, work–life balance is often a factor that affects all surgeons regardless of gender. However, it is especially hard for women when it comes to family and motherhood. In most instances, a person’s personal or professional life has to suffer at the expense of the other. Research also sheds light on the fact that because of the shortage in staffing in the surgical field, surgeons are subjected to prejudice when they get pregnant. Inadequate maternity leave (5) has been mentioned in multiple scholarly journals and articles as a significant problem in the surgical profession. Most female surgeons have to work through the physical discomforts of pregnancy. The majority report that having to choose between work and family pushed them to choose to leave the specialty (6).

Having sworn an oath, a surgeon can be on call for extended durations (sometimes up to 72 hours). Without a strong support system from one’s partner and family, it eventually takes a toll, and feelings of guilt start to creep in (7). At the end of the day, we are all humans and experience natural human emotions that draw us toward nurturing our families and relationships. It all trickles down to having a mentor to whom you can look up to and seek advice from on how to navigate and strike a balance between work and life.

Over the years, the number of female doctors has increased in leaps and bounds, but it is still worrying how few of them decide to take up surgery as a specialty. As surgeons, we are encouraged to make intentional strides to increase the number of female surgeons who train and practice in the country and the region at large. Similar to other specialties, the surgical field should create a conducive environment for male and female physicians alike. This should effectively create a ripple effect to grow the profession and improve representation for women in surgery.

Declaration of interests

The author declares no conflict of interest

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