

Small biases multiply into big career impacts for female surgeons

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A new Macquarie University study has found that female surgeons in Australia continue to suffer gender bias on almost every measure including pay, workload and workplace conditions.

The study attributes much of this disadvantage to small and subtle patterns of harmful behaviors that are difficult to detect or change.

The research, conducted by Dr. Katrina Hutchison from Macquarie's Department of Philosophy and published in the *Journal of Medical Ethics*, discovered that gender bias against female surgeons is so ingrained within the Australian medical profession that many women working in the field are unaware of the injustice of it or are quietly accepting it as part of the job.

Dr. Hutchison interviewed 46 female surgeon fellows and trainees from the Royal Australasian College of Surgeons across nine surgical specialties and at different career stages.

The study, the first of its kind, examines how implicit, subtle and unconscious biases impact

female surgeons' careers, rather than focusing on overt cases of discrimination or sexism. Dr. Hutchison identified four types of bias that have material impacts on how female surgeons are perceived and treated:

- Workplace conditions, including lack of flexibility, long work hours and changing places of work during training, which can disproportionately affect women, and a scarcity of female mentors and role models
- Challenges to credibility, such as patients assuming the female surgeon is a nurse or a junior, or their skills and knowledge being questioned
- Expectations that female surgeons will take on additional caring or peacemaking duties for distressed patients or spend longer and provide better communication with patients
- Objectification and sexualization by patients and colleagues

"The study shows that patterns of small, seemingly innocuous differences in the treatment of women surgeons can have an impact on their careers," says Dr. Hutchison.

"Even qualities that many women in the study regarded as valuable aspects of their style, like empathy and communication, sometimes have perverse consequences such as longer consultation times with patients which impacted their pay.

"The good news is that if small biases are significant, then so too are small efforts to counteract them. I hope the findings will inform new strategies. For example, supervisors of surgical training should think twice about possible subtle gender bias in the allocation of work to trainees, and ensure caring work is allocated equally."

More information: Katrina Hutchison. Four types of gender bias affecting women surgeons and their



cumulative impact, *Journal of Medical Ethics* (2020). DOI: 10.1136/medethics-2019-105552

Provided by Macquarie University

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