



## Female role models in medicine: a medical student's perspective

DIYA KAPILA<sup>1\*</sup>

<sup>1</sup>Gastroenterology and Hepatology, School of Medicine, Imperial College London, London, England

\*Corresponding author:

Diya Kapila,

39 Burton Road, Kingston-Upon-Thames, Surrey, KT2 5TG, School of Medicine, Imperial College London, London, SW7 2AZ, England

Tel: +98-780-4749687; Email: diya.kapila@gmail.com

Please cite this paper as:

Kapila D. Female role models in medicine: a medical student's perspective. J Adv Med Educ Prof. 2018;6(1):49-50.

Received: 2 August 2017 Accepted: 23 August 2017

### Dear Editor,

The importance of role models in medical education cannot be understated. They allow for professional development, aid in career motivation and inspire and educate through example. Unfortunately, I cannot admit knowing more than three female role models throughout my time at medical school, and now as a final year student, I am more disappointed than ever for this deficit.

My admiration and respect for doctors remains sky high, but from the age of 15, I remember being put off and discouraged from a career in medicine. My first work experience placement was met with disgruntled medical students and doctors warning me to 'steer clear' of this career choice. Notably, female doctors would state their reservations about whether they could adequately bring up a stable family together with the demands of this profession. This was an extremely frustrating resolution for me to see as a young, inspired medic- who passionately felt I would work hard to do both. I sought to find out more about the challenges for women in medicine.

There lies no dispute that having a stable family life and successful career is no easy feat for women. Yet, the mere choice between a family and/or career is far more intricate than it may seem; it is really a question exploring personal life priorities, resolute character traits and, most

importantly, equal gender opportunities and the necessity for greater support for women with families (1).

Gender equity and empowerment are inextricably linked to a woman's entitlement and contribution to the workplace. Evidently, the endless unpaid hours of bringing up a family need greater recognition- arguably a full time job in itself; some people still don't deem the demanding work of a mother as a career- illustrated by Catherine Deveny's Guardian article (2).

Women are often invited to defend their life choices, or fulfil gender expectations. Maybe, as women we need to alter our own insight into what it means to be a successful career woman and mother. What defines doing 'well' when describing family life, a subjective word for such a prevalent aspiration.

The deplorable deluge of negative headlines after the report from the Royal College of Physicians (2009) stating women will predominate the workforce in 2017 inflamed public perception with assertions including, "Women docs weaken medicine" (3). This was a shocking flavour of negativism for women in medicine- and added to both my curiosity and anger at the situation.

The apparent vulnerability of women is particularly evident amongst certain geographical populations; for example, in Iran, there are palpable traditional differences between genders, rendering unequal social rights, salaries and

employment opportunities (4), with further significance on health status. Article 158, of the Third Development plan, instigated a resolute initiative for increasing awareness and incorporation of women in society, which included the promotion of job opportunities for women (5). Furthermore, accessibility of advanced surgical training is highly limited, with Dr Sakineh Pari, born in 1902, being the first Iranian female surgeon (6). Despite the evolution of greater gender equality in Iranian medical employment, it is clear that we need further progress towards true equality.

I want to pose a note of reflection: why do these negative perceptions still exist even in 2017? We need to act now to ensure the women of the future have confidence that they can both cultivate a great family and career; it is possible, with the appropriate communication, support and flexibility that are essential to both motherhood and top career posts, especially within countries where gender inequalities are rife.

**Conflict of Interest:** None declared.

## References

1. Paul JS. Why do women still have to choose between careers and families? [Internet]. The Guardian; 2012 [cited 2016 Mar 2; updated 2017 Feb 6]. Available from: <https://www.theguardian.com/careers/women-choose-career-or-family>.
2. Deveny C. Sorry, but being a mother is not the most important job in the world [Internet]. The Guardian; 2013 [cited 2016 Mar 2; updated 2017 Feb 6]. Available from: <https://www.theguardian.com/commentisfree/2013/nov/18/sorry-but-being-a-mother-is-not-the-most-important-job-in-the-world>.
3. Khan M. Medicine- a women's world? [Internet]. BMJ career; 2012 [cited 2012 Jan 5; updated 2017 Feb 6]. Available from: <http://careers.bmj.com/careers/advice/view-article.html?id=20006082>.
4. Joulaei H, Maharlouei N, Lankarani KB, Razzaghi A, Akbari M. Narrative review of women's health in Iran: challenges and successes. *International Journal for Equity in Health*. 2016;15:25.
5. Janghorban R, Taghipour A, Roudsari RL, Abbasi M. Women's Empowerment in Iran: A Review Based on the Related Legislations. *Global Journal of Health Science*. 2014;6(4):226-35.
6. Zarrintan S, Aslanabadi S, Sakineh P. The first Iranian female surgeon. *Acta Med Hist Adriat*. 2015;13(2):41-4.