

Opinion article

Gender Diversity in Belgian Surgical Training

Sander Ovaere, Yanina Jansen on behalf of the Belgian Association of Surgical Trainees.

This opinion article is a preview of the results of the first National Survey on Surgical Education, which will be reported later this year.

BAST, the Belgian Association of Surgical Trainees, is proud that our trainees are an integral part of a health care system in which the highest level of care is provided. Our trainees are exposed to state-of-the-art procedures and are trained by some of the best in the field.

BAST recognizes and appreciates the efforts that are put in to provide this high level of training. With that said, it is BAST's obligation, as the official representative organ of surgical trainees, to be critical of this education program and to challenge our trainers and policy makers to raise the level.

In the beginning of 2017 the BAST conducted the first national survey on surgical education in Belgium. In an effort to gain insight on the challenges surgical training programs experience in other countries, sister organizations in neighboring countries were contacted to exchange experiences and knowledge. This led to an invitation for the BAST to join the official congress of the Association of Surgeons in Training (ASiT, United Kingdom) in Bournemouth (April 1-2, 2017). BAST representatives were invited to speak on 'Gender Diversity in Surgical Training: the Belgian Experience' and to join an international debate on surgical education.

This article is both a resume of the talk on gender diversity in the Belgian surgical trainee landscape given on April 2nd by S. Ovaere as well as a preview of the results from this first National Survey on Surgical Education. A total of 145 responses were collected, with 122 complete responses. On an estimated total of 320 trainees, this is almost 40% of Belgium's trainee corps. After having analyzed the results, 4 themes stand out. These are burn-out, job perspectives, gender diversity and the necessity of an independent visitation committee. This article focuses on gender diversity.

In 2005, only 11 percent of practicing surgeons were female (179 females out of 1561 females). Ten years later, in 2015, almost a fifth of our surgical corps was female (308 females out of 1.717 surgeons; 17.9%).^{1,2}

In 2015, however, there was an exact 50-50 distribution amongst male and female surgical trainees (160 female surgeons on 320 surgical trainees). When comparing these numbers to the United Kingdom, Belgium is slightly ahead in this evolution. Across the Northern sea, 1 in 10 practicing surgeons are female, and 1 in 3 trainees is female.

The BAST applauds this evolution. With the multiplying challenges surgery is facing, access to and development of the best talent become ever more important. Historically, talents have been lost by a power-oriented, male-dominated culture, where, if you're not at the table, you're on the menu.³

But increasing the number of women in surgery is not sufficient, as female trainees are still confronted with gender discrimination during training. In the BAST survey, trainees were asked to comment on the following statement: 'During my training I have witnessed gender discrimination either against me or against my colleagues'. From the 53 female responses, 70% agree or tend to agree. This contrasts with the 30% of male responses.

It goes without saying that these numbers must be nuanced and put into perspective. Gender discrimination comes in many forms ranging from inappropriate comments to true harassment. It is a subjective perception and, for research purposes, is difficult to quantify. In addition, due to the orientating character of the survey, a distinction cannot be made between the discriminator and who was discriminated against or what the circumstances were. But the significant difference between male and female trainees must raise awareness amongst trainers,

mentors and policy makers. In addition, similar numbers are found in other, western countries where comparable surveys have been conducted.⁴

In another gender-related question, we learn that one in three female trainees (18/53) are very concerned about the effect of the male-dominance on their chances on the job market. Whether this concern is valid or not, the perception that female surgeons have to fight harder for their place still exists, as it does in our surrounding countries.⁵

In a third and final question, trainees were asked to agree or disagree with the following: *The current gender inequality of the profession (more male than female surgeons) should be corrected. Statement: More females are needed in the surgical profession.* Sixty-eight percent of female trainees totally agree or tend to agree (16/54 and 21/54, respectively), compared to 21 percent of male trainees (4/70 and 11/70, respectively). A recurring commentary in the free comment box are the statements that can be covered by the single statement: *'We don't need more female surgeons, we need the right person for the right job'*. Needless to say that patients deserve the best qualified surgeons regardless of gender. But BAST truly believes that when these high-quality demands are fulfilled, an

equal gender distribution amongst practicing surgeons should be the net result, and not the discordant 18% female practicing surgeons Belgium experiences today.

BAST is convinced that our training culture is evolving from a male-dominated culture to a rather female-friendly work-environment. Although there are several limitations with this survey study, being its orienting character and many different subjects in addition to a mediocre response rate, these results do indicate that concerns still exist among female trainees in Belgium. These concerns must be recognized and need extra attention in the formation of our surgical training.

The Belgian Association of Surgical Trainees is the official independent body of general surgery trainees in Belgium. We reside in the Collegium Chirurgicum Belgicum as representatives for surgical trainees. Governed by an elected President and Board, the BAST is run by trainees, for trainees, to promote the highest standards in surgical training.

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