

## Future of Endocrinology – The Role of the Female Physician

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From traditional gender stereotypes, skewed education and career opportunities in the past, the world has evolved considerably and the South Asian region is no exception to that. Consequently, female physicians are increasing in numbers globally in keeping with the current medical undergraduate gender ratios [1]. Women now make up more than 50% of medical school graduates, up from 7% five decades ago [2]. Interestingly, gender differences in specialty preference have been identified where women are highly represented in certain specialties including endocrinology. Approximately 70% of contemporary endocrinology trainees and fellows are women [3]. In other words, female physicians will compose the majority of the future endocrinology workforce.

In numerous ways, the field of endocrinology is intertwined with women's health to the core. Female physicians entrenched in endocrinology have a vital role to play in bringing together all pertinent stakeholders towards refining and safeguarding access to equitable care for women. An assertive approach is desirable for advocating evidence-based policies for addressing gaps in women's endocrine health needs. Gestational diabetes, thyroid disease, and polycystic ovarian disease are just a handful of

conditions which warrant more consideration, including diversion of research funding and subject proficiency. Although some of these are exclusively female health issues, by no means, the solutions could be sought by female clinicians only. The foremost duty of the female endocrinologists would be to pave the way for proclaiming of due recognition for these issues, due to the mere fact that they may be more coherent to the female mind.

On the contrary, a predominantly female workforce poses its unique attributes, necessitating the cognizance of the seeming drawbacks and fortes ingrained in the female gender. An inclusive environment is an essential element of a healthy workplace where the talents are surfaced and showcased without any hindrance based on gender. In this context, 'Women in Endocrinology Initiatives' have gained momentum across varied backgrounds worldwide.

The South Asian Federation of Endocrine Societies (SAFES) has been proactive by founding its own "Women in Endocrinology along with Women's Health Initiative in South Asia", which is a stepping stone for a progressive future with a favourable mindset in general for females. In fact, the SAFES is

steering its way towards improving women's health in the region. Simultaneously, we are focusing on improving career scope of female endocrinologists with the aim of inspiring women in medical sciences. We are rather privileged to host its inaugural gathering in Colombo, Sri Lanka at the Annual Endocrine Congress, SLENDO 2023. We believe, as female physicians; we can set the stage for addressing of endocrine related issues of females with a rather personalized approach. We take pride in representing the female gender in the society in an unsurpassed manner, hence this creates a solid foundation on which we could be the voice for the voiceless. The societal recognition and authority as female endocrinologists, could be the motive in teaming up in unison, without gender bias for the betterment of care for the deprived in South Asia in general.

Work-life harmony is of utmost importance irrespective of gender. The female physicians' role in their own households with emphasis on childcare is undeniable. On average, female physicians were reported to have spent more time on household and childcare activities than their male counterparts [4,5]. A recent study stated 46% of female physicians in comparison to 17% of male physicians involved in more than 10 hours per week of domestic activities [6]. Notably, in comparison to 9% of male counterparts, 55% of female physicians were described as spending more than 30 hours per week in childcare [7]. Work around the clock can take a toll on female physicians. Paradoxically, female physicians have shown greater satisfaction with work-life balance by engaging in household chores despite the higher at-home workload [5]. Higher satisfaction was associated with having more control over the work schedule and having a workplace culture that is perceived as supportive. Thus, leaders in endocrinology should ensure a more supportive workplace environment and schedules. A finetuned interplay between work and demands of one's personal life is an entity which doesn't essentially illustrate gender bias, yet perceived as being more pertinent for the female physician [8].

Gender-based salary inequity demonstrated across occupations is a discontentment [9]. The reason behind the gender pay gap is mostly unexplained [10]. In certain parts of the world a rather sizable gender pay gap was identified among full-time endocrinologists depending on the type of practice, which has evoked displeasure [11]. Remarkably, the South Asian region is rather progressive in this regard as none to minimum gender pay gap is identified either in the state or the private sector.

As the number of fellows and trainees in

endocrinology is increasing, one must address the issues related to motherhood and its implications. The key years of establishing a sturdy academic career frequently coincide with the childbearing age of females. Surveys show that female physicians delay childbearing by seven years in comparison to the general population, and consequently, face increased rates of subfertility [12]. Disturbingly, female physicians are less likely to be parents than their male counterparts [6]. Professional women who do enter motherhood may face rather unfortunate biases in the workforce with regard to job opportunities, promotions, salary scales and years lost in seniority scales [13]. We strongly believe that these issues should be discussed and addressed appropriately. With the anticipated gender shift of the workforce, it's rather important to identify its potential impact on the specialty and the need for the provision of support and guidance to steer the younger colleagues in endocrinology towards success and fulfillment.

Undeniably, the female representation in endocrine-related academia is substantial. Female figures who have succeeded in their academic careers and reached the pinnacle of their fields is not too scarce a scenario. Yet, there are certain disparities in academic leadership roles and according to the literature, female faculty expressed less confidence in the ability of advancing their careers in comparison to their male counterparts [14]. They reported more negatively on feelings of inclusion, perceptions of gender equity and institutional support for work-life integration [15]. We need to address these issues, thereby bridging the gap towards female representation in leadership roles in academia. The female faculty members who have already accomplished higher ranks in their respective fields of expertise have a rather important role to play in this regard as mentors and advocates for the career advancement of junior faculty.

The projected transition of endocrinology to a "female predominant" specialty offers a diverse spectrum of enormous opportunities and great challenges. Having a proactive dialogue in this regard itself is praiseworthy. An optimistic outcome is likely as this matter of timely relevance is gaining momentum across all endocrine communities. However, as a specialty, if both males and females can face the challenges and realities harmoniously, we can ensure a successful trajectory for the generations of future endocrinologists and an equitable health related care for the patients whom we are committed to serve. We, the female endocrinologists are undeniably in a position to voice; there is no better time than this moment...

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