

Editorial

Unveiling the Obstacles Encountered by Women Doctors in the Pakistani Healthcare System and what are the Initiatives to Encourage the Women to Come Forward in Health Care System

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Abstract

Women continue to be underrepresented in healthcare research, leading to a lack of tailored treatments for women-specific conditions and the potential for misdiagnosis in gender-neutral conditions. Female doctors in Pakistan encounter numerous challenges including gender bias, limited career opportunities, and challenges in maintaining work-life balance, hindering their professional growth and advancement. Initiatives like the Women in Medicine program and advocacy efforts by organizations like the Pakistan Medical Association are crucial in fostering inclusivity and gender equality in the healthcare system. Indigenous research, guided by the 4 Rs framework, Employment opportunities for females should be enhanced, Women friendly workplaces, Laws and protection policies should be implemented and women should be encouraged to report any harassment, honours indigenous knowledge systems and addresses pertinent issues while creating a supportive work environment with flexible hours is vital for encouraging female doctors. Women should not take advantage of being women and should behave professionally. These initiatives are aimed at encouraging more women to participate in and thrive within the healthcare system in Pakistan.

Keywords: Female doctors, Obstacles encountered by women doctors in the Pakistani healthcare system Healthcare system, indigenous Research, Obstacles, Pakistan, Women doctors,

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Introduction

In a discussion of webinar Saima Chaudhry, Nazish Imran, Maryiam Zubair, Zohra Khanum & Asif Sukhera, highlighted that despite comprising 50% of the global population, women continue to be inadequately represented in healthcare research. This underrepresentation leads to a lack of tailored treatments for women-specific conditions. Due to the disparity in clinical study representation, conventional treatments may be less effective or present more severe side effects for women. Moreover, in cases of "gender-neutral" conditions like sleep apnoea or heart attacks, women risk being misdiagnosed as their symptoms may differ from the typical presentation in men.¹

Female doctors in the Pakistani healthcare system encounter numerous hurdles, including gender discrimination, restricted career progression prospects, unequal remuneration, and challenges in managing work-life

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balance. Cultural and societal expectations may further impede their professional development. It's crucial to confront these challenges and strive to establish a more inclusive and encouraging atmosphere for women in the medical field. These obstacles can hinder their professional growth and impact their career advancement. Pakistan's healthcare sector has a considerable number of medical institutions producing thousands of doctors annually. Despite a higher enrollment of women in medical schools, a significant percentage either do not join the workforce or discontinue their careers early. Balancing Work and Family Responsibilities Women healthcare workers face challenges in managing professional and family duties, including domestic chores, child-rearing, and long working hours. Societal and familial expectations lead to compromised patient care, lack of daycare facilities, neglected children, and strained family relationships, impacting women's physical and

mental health. Women encounter barriers in leadership opportunities, ineffective recruitment, improper job placement, insufficient remuneration, and maternity leave issues. Additionally, limited childcare facilities, family-friendly policies, and harassment in hospitals affect their professional experiences. Marriage and family restrictions, such as husband and in-laws' restrictions, also impede women doctors' practice in Pakistan. Barnett and Gareis highlighted the scarcity hypothesis, suggesting less family time and life satisfaction, and the enhancement hypothesis, emphasizing work-life balance and rewards for women physicians. The obstacles faced by women healthcare workers in Pakistan are multifaceted, encompassing challenges related to education, career entry, work-life balance, workplace dynamics, and socio-cultural factors, with significant implications for their professional and personal well-being.^{2,4}

Some of the common challenges faced by women doctors in Pakistan include

1. **Gender Bias:** Female doctors encounter gender discrimination, restricted career progression prospects, and unequal remuneration, impacting their overall professional growth and career advancement. Female doctors in the medical field often experience prejudice and unfair treatment within a predominantly male-dominated profession. They may confront stereotypes, unequal chances for career progression, and restricted entry to leadership positions. Gender biases are prevalent in clinical research, peer-reviewed publications, and research funding, contributing to a glaring imbalance. This bias gives rise to subtle but influential barriers rooted in cultural presumptions and organizational dynamics that inadvertently favour men and disadvantage women.²

2. **Work-Life Balance:** Women doctors often find it challenging to balance work responsibilities with family obligations due to the demanding nature of the healthcare profession, including long working hours and on-call duties. This struggle for work-life balance is exacerbated by the lack of female leadership role models, which can discourage aspiring women doctors from seeking credible sources of support and guidance. Additionally, women in the medical profession may encounter undervaluation of their behind-the-scenes contributions, limited access to professional networks and sponsors, and barriers to career advancement, all of which contribute to their disadvantage in the workplace. There are many workplace challenges like barriers in leadership opportunities, ineffective recruitment, improper job placement, insufficient remuneration, maternity leave issues, limited childcare facilities, family-friendly policies, and harassment in hospitals impact women's professional experiences.^{2,5}

3. **Limited Career Opportunities:** Female doctors in Pakistan encounter hurdles in advancing their careers, with restricted access to specialized training, research prospects, and mentorship programs. These constraints impede their professional growth and potential. Additionally, women doctors in Pakistan face disparities in career opportunities, such as fewer leadership roles, limited specialized training access, and insufficient mentorship and networking opportunities. These factors hinder their professional advancement and limit their potential for higher positions in the healthcare system. It is crucial to champion equitable opportunities and endorse initiatives that foster gender parity in the medical profession.¹⁻⁷

4. **Lack of knowledge of Indigenous research:** The term "indigenous research" pertains to investigations carried out by and for indigenous communities, drawing on their knowledge, customs, and viewpoints. In developing regions, indigenous research plays a crucial role in addressing health concerns that are tailored to local requirements and resources. Health challenges in developing nations differ from those in developed countries due to factors like restricted healthcare access, diverse cultural beliefs, and environmental circumstances. Through indigenous research, communities are empowered to address these challenges by harnessing their distinctive perspectives and traditional methods.¹

5. **Knowledge of Demography of healthcare Landscape:** Balancing work and family responsibilities poses significant challenges for women in healthcare, including managing domestic chores, child-rearing, and coping with long working hours. The healthcare landscape in our current demographic necessitates attention to numerous interconnected issues such as women's empowerment, work environment, career challenges, family pressures, leadership, menstrual hygiene, menopausal challenges, and more. Conducting workshops and webinars featuring experts like Dr. Sadia Malick from Riyadh and prominent women leaders from Western countries is essential. Additionally, establishing groups focused on providing support in areas such as women's social and psychological well-being, professional counseling, maternal health, and the challenges within the nursing profession is crucial in addressing these pressing concerns.¹⁻⁷

6. **Education and Career Entry:** Despite a higher enrollment of women in medical schools, a significant percentage either do not join the workforce or discontinue their careers early, presenting a barrier to their professional development.²

7. **Impact on Physical and Mental Health:** Societal and familial expectations lead to compromised patient care, lack of daycare facilities, neglected children, and strained family relationships, affecting women's

physical and mental well-being.³

8.** Socio-Cultural and Marital Restrictions.** Marriage and family restrictions, such as those imposed by husbands and in-laws, further impede the practice of women doctors in Pakistan. The scarcity hypothesis points to less family time and life satisfaction, while the enhancement hypothesis emphasizes work-life balance and rewards for women physicians.³⁻⁷

What are the initiatives to encourage the women to come forward in health care system?

Several efforts are underway to enhance gender parity in Pakistan's healthcare system. For instance, the Women in Medicine initiative offers mentorship and assistance to female doctors, aiding them in navigating the associated challenges. Moreover, organizations like the Pakistan Medical Association are dedicated to advancing gender equality and advocating for uniform opportunities for women in the medical domain. These endeavours play a pivotal role in fostering a more inclusive and fair healthcare system. Indigenous research is guided by the 4 Rs framework - Respect, Relevance, Reciprocity, and Responsibility - which ensures that it honours indigenous knowledge systems, tackles pertinent issues, nurtures mutual relationships, and upholds ethical standards.

Creating a supportive and healthy work environment with flexible working hours is crucial for encouraging female doctors and fostering their confidence. Such considerations are vital to help women sustain their jobs, particularly when workplace challenges may otherwise compel them to quit, despite having supportive family structures in place.

Conclusion

The challenges faced by female doctors in the Pakistani healthcare system are multidimensional, encompassing

gender-related, career, family, and socio-cultural issues, with significant implications for their professional and personal well-being. It is crucial to address these challenges and work towards establishing a more inclusive and supportive environment for women in the medical field.

References

1. Bukhari MH. Unveiling the obstacles encountered by women doctors in the Pakistani healthcare system: URL: <https://youtu.be/R8I4-FBssKs>. Retrieved 22.4. 2024.
2. ALobaid AM, Gosling CM, Khasawneh E, McKenna L, Williams B. Challenges Faced by Female Healthcare Professionals in the Workforce: A Scoping Review. *J Multidiscip Healthc*. 2020;13(8):681-91.
3. Raza A, Jauhar J, Abdul Rahim NF, Memon U, Matloob S. Unveiling the obstacles encountered by women doctors in the Pakistani healthcare system: A qualitative investigation. *PLoS ONE*. 2023;18(10): e0288527.
4. Zaheer A. The Lost Doctors. *Pak J Med Sci*. 2022; 38(8): 2053-5.
5. Malik MA, Inam H, Martins RS, Janjua MBN, Zahid N, Khan S, Sattar AK, Khan S, Haider AH, Enam SA. Workplace mistreatment and mental health in female surgeons in Pakistan. *BJS Open*. 2021;5(3):zrab041. doi:
6. Yang HC. What Should Be Taught and What Is Taught: Integrating Gender into Medical and Health Professions Education for Medical and Nursing Students. *Int J Environ Res Public Health*. 2020;17(18):6555.
7. Morgan S, Plaisant O, Lignier B, Moxham BJ. Sexism and anatomy, as discerned in textbooks and as perceived by medical students at Cardiff University and University of Paris Descartes. *J Anat*. 2014;224(3):352-65.