

## Maxillofacial Female Surgeons: Perspectives and Obstacles

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### Abstract

There are many challenges and many barriers to the maxillofacial profession for female surgeons, particularly the beginners of their career. The reported analysis data revealed that this is not concentrated in developing countries, but it is unexpectedly found in many developed and high-income countries. The continued progress of women in academic surgery depends on addressing such issues and trying to solve these challenging problems.



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Career; Female; Maxillofacial; Surgeons.

### Introduction

Oral maxillofacial surgery (OMFS) is an effective attracting specialty for many dentists, and there is a rise in the number of women practising OMFS as a specialty in many communities today than in the past. According to statistics taken from data from the Egyptian dental syndicate over the last 5 years, this may be attributed to an increase in female dental students relative to male dental students.<sup>1,2</sup>

In another study, investigators discovered that US medical students had less interest in general surgery, citing the increasing number of female students as a contributing factor.<sup>3,4</sup> Although the number of women in surgical disciplines has increased significantly over the last two decades, little research has been done about how a surgeon's gender influences his or


her choice of professions and practise models. There are also more women specialising in paediatric orthopaedics, which was traditionally dominated by male surgeons. It is essential to consider how gender affects the choice of practice and how this can impact potential staff.<sup>5</sup>

Meanwhile, the female maxillofacial surgeon in our society has faced many difficulties and challenges, and some people would describe her as a hero or a steel woman; she is a female who studies a difficult scope of surgery while also being a wife, pregnant, lactating, and responsible for her home and children, as well as other family responsibilities. Despite these obstacles, some female maxillofacial surgeons reach leadership positions and achieve success in their careers.<sup>4,6,7</sup>

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The author as one of one of the female maxillofacial want to investigate the factors which make a female choose this difficult work field and to know what could help and what defend the women to success in the field. In our conservative societies, the male perspective to the maxillofacial female surgeon need further investigation to determine if there is negative impression or impact towards their female colleagues in the field.<sup>5</sup>

Marti KC, *et al.*, attempted to determine whether the overall occupational satisfaction of men versus women oral and maxillofacial surgeons (OMS) across the US differed and concluded that future research would look at ways to enhance the employment and occupational satisfaction of women with the OMS residency.<sup>8</sup>

Seemann *et al*, 2016,<sup>9</sup> conducted a 48-item web-based survey and emailed it to women surgeons in academic centres across Canada addressing career development, career satisfaction, family planning, mentorship, and sexism. Many surgeons struggled to balance family life with their academic careers, according to their responses to the open-ended questions. In spite of this, respondents rated their career satisfaction very highly. They concluded that in academic surgery, there are continuing obstacles for women, including lack of gender equity, adequate mentorship, and accommodation for surgeons with families. And they came to the conclusion that addressing these problems is essential for continued advancement in academic surgery for women.

In 2002, Wendel TM, *et al*<sup>10</sup> asked: Are still there gender gaps in the choice of a career in surgery? and they concluded that while women were less interested in the lifestyle of their medical profession than men, both men and women had similar reasons for seeking a career in general surgery or another specialty.

Kolokythas *et al*, 2016<sup>11</sup> attempted to determine why women choose to pursue an academic career in oral and maxillofacial surgery (OMS) and concluded that involving female OMS surgeons with female residents and students, improving mentorship by academic OMS surgeons (both male and female), and increasing the number of female surgeons

who can serve as role models and that may help to increase the number of female OMS surgeons who are interested in an academic career.

In our culture, the sex-specific division of labour means that in occupational experiences, professions, wages, rank, control, and influence, men and women differ. This sex-specific division of labour is enabled by socialization processes and held strong. A variety of measures have been planned in the last couple of years to further advance the developmental capacity of both sexes. While progress has been made in recent decades in increasing the participation of women in the labour force and decreasing gender pay disparities, women still earn less than men, reach the top of their careers less often, work in part-time, and do more unpaid work.<sup>12</sup> According to other studies, women in academic surgery continue to face a number of obstacles, including a lack of gender equality, proper mentorship, and family housing for surgeons. Solving these issues is critical to women's academic surgery performance.<sup>13,14</sup>

As a maxillofacial surgeon, mentor role modelling is very important in the advancement of learning and the absence of mentor in the early maxillofacial career affects the professionalism of this specialty as this will affect the role modelling that helps a lot in the transition of expertise into the development zone in which the learners turn from novice state to the skilled state. Another aspect of this problem is that the mentor may have a positive and/or negative effect on the female maxillofacial learner, especially if he does not believe in the female maxillofacial learner.<sup>13</sup> The negative impact is very dangerous because inappropriate guidance that may interfere with the growth of the learner can be generated, so passionate role modelling is very important and this has a big impact on this specific discipline.

### Conclusion

For female surgeons, particularly beginners in their careers, there are many challenges and barriers to the maxillofacial profession. The empirical data published showed that this is not based on developing countries. The female progress in their academic field depends on how these issues are addressed and how these problems are solved.

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**Conflict of Interest**

The author has no conflicts of interest relevant to this article.

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