

Breaking through the glass ceiling in the operating room

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While interviewing for postgraduate residency positions soon after giving birth to her third child, Dr. Sharona Ross recalls, she was very hesitant to bring up her infant and two small children at home. She thought it would hurt her chances for a career in surgery.

A decade later, when the University of South Florida surgeon interviews aspiring surgeons about their career plans, she enthusiastically talks about her family - her husband their four children, ages 4, 9, 13 and 15 -- hoping they will feel comfortable broaching the topic. She wants the young women she mentors to know that, with planning and support, they can successfully juggle a rewarding career in [surgery](#) with family and motherhood.

"Multi-tasking is a definite strength many women bring to the table," said Dr. Ross, assistant professor of surgery and director of surgical endoscopy at USF Health.

More than 50 percent of medical students are now women, yet only 6 percent consider careers in surgery. Even fewer end up in surgical residencies, opting instead for specialties like pediatrics, obstetrics and gynecology, dermatology or internal medicine. Barriers cited as deterrents to entering surgery include lack of role models, perceptions about an "old boy's club" culture and sexual discrimination, and a work environment unfriendly to family life.

Concerned about improving the odds for attracting more women to

surgery, Dr. Ross launched the USF Women in Surgery initiative from her home in September. Later this month, Feb. 27, USF and Tampa General Hospital will sponsor a national symposium for women who are or hope to become surgeons. Experts from across the country will gather at the Don CeSar Hotel in St. Petersburg Beach, FL, to discuss the issues and challenges confronting women as they seek to advance in a changing, but still male-dominated, field and to share successes and advice for breaking the glass ceiling in surgery.

Dr. Ross recruited one of her mentors Dr. Julie Freischlag, the William Steward Halsted professor and chair of surgery at Johns Hopkins School of Medicine, as the keynote speaker. Told by one dean who interviewed her for his departmental chair of surgery "that he just couldn't give that surgery job to a woman," Dr. Freischlag didn't take no for an answer. The award-winning surgeon-in-chief at Hopkins with seven years tenure, she is one of only three women chairs of academic surgery programs in the country and one of six ever. She will share some gender-specific findings of a recent survey on burnout and career satisfaction among American surgeons commissioned by the American College of Surgeons.

Depending upon the subspecialty, 30 to 50 percent of applicants to surgical residency programs are now women, said Dr. Freischlag, a vascular surgeon, but the perception of the operating room as a macho domain persists. "The environment must be made more amenable to women," she said. "We (leaders in surgery and academic medicine) need to push back against the attitude that surgeons are the jocks - the NASCAR drivers and football players - of the hospital, and women don't belong in such a rough-and-tumble sport."

Dr. Freischlag and Dr. Ross advocate proactively recruiting and retaining women surgeons by being receptive to their desire for more flexible work schedules to accommodate family needs and providing opportunities for them to lead and enrich their careers.

It's not only a good thing to do, it's crucial to prevent an eventual shortage of surgeons as demand for the specialty grows, Dr. Freischlag said. "Half the medical students are women, so if residencies only accept men, there won't be enough doctors to become surgeons for the next generation of patients."

Dr. Ross encourages women to network and seek out mentors to help guide them through the tough years of surgical training. Men can be effective mentors for women, she said, particularly "men with daughters." Dr. Ross found her mentor in Dr. Alexander Rosemurgy, professor of surgery and medicine at USF Health and surgical director of the Digestive Disorders Center at Tampa General. The two are now partners in a practice that focuses on minimally-invasive surgeries of the upper GI tract and disorders of the liver, pancreas and gallbladder.

Climbing the professional ladder in a field where women are still the minority, Dr. Ross has the drive, discipline, talent and passion to succeed. She publishes frequently. She helped pioneer the advanced minimally-invasive procedure, known as laparoendoscopic single-site surgery, in her specialty. She is invited to consult with manufacturers to help refine the equipment and technology needed to take minimally-invasive surgeries to the next level.

She is also quick to tell you that she married the right person; Jack, her husband of 20 years, is supportive of a nontraditional wife who doesn't "cook, clean or do laundry." They planned pregnancies around Dr. Ross' undergraduate and medical school studies, hospital shifts and years of surgical residency. Her mother came from Israel, where Dr. Ross was born and raised, to help with the children. "That family support is extremely important," she said.

Dr. Ross and Dr. Freischlag are optimistic about the future of women in surgery. The new generation of young physicians pushing for improved

work-life balance - limits on workload, more flexible schedules, family-friendly policies -- may help steer more women to careers in surgery, they say.

Dr. Freischlag hopes to look back in 20 years and see about a third of surgery departments headed by women and more women [surgeons](#) represented among tenured faculty. "Over time, as more women in the medical education pipeline enter surgical programs and stay, they will feel more comfortable assuming leadership roles," she said. "If women really want to change the rules and advance, they have to be in charge to do it."

Being a surgeon will never be easy, but Dr. Ross wants women considering the field to know how rewarding it can be. "Holding someone's hand while you are taking them to the operating room and then fixing them so they can lead a better life - it connects you to patients on a very different, deep level," she said. "Sometimes when I'm operating I could pinch myself, because I can't believe they actually pay me to do something I love so much."

Provided by University of South Florida Health

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