

In the UK, minority ethnic doctors less likely to get specialty NHS training posts; some specialties show gender bias

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Most minority ethnic groups are less successful than their white British counterparts when applying to specialty training programs in the

National Health Service (NHS), Cambridge researchers have shown. Their analysis, published today in *BMJ Open*, also found that while female applicants are more successful overall, particular specialties tend to appeal to different genders.

Researchers from the University of Cambridge and Cambridge University Hospitals NHS Foundation Trust examined data from applicants to Specialty Training Posts through Health Education England for the recruitment cycle 2021-22 to look at potential disparities in the success of applicants according to gender, ethnicity and disability.

During this period, there were just under 12,500 successful applicants to Health Education England for training posts—a success rate of one in three (32.7%). Overall, females were more successful than males (37.0% versus 29.1%).

The researchers found clear evidence that certain specialties were more attractive to females or to males. Of note, surgical specialties and radiology had the highest proportion of male applicants (65.3% and 64.3% respectively), while obstetrics and gynecology and public health had the highest proportion of female applicants (72.4% and 67.2% respectively).

Senior author Professor Sharon Peacock, from the Department of Medicine at the University of Cambridge, said, "The success by female applicants in many specialties is a positive step towards gender balance, and perhaps reflects existing efforts to address disparities. But the skew in applications and subsequent recruitment by gender, particularly amongst surgical specialties, is concerning."

Gender disparities are known to have downstream effects. For example, a lack of female representation contributes towards a male-dominated culture, which can then result in fewer female role models to inspire and

encourage aspiring female [doctors](#).

The researchers say there are several reasons for these disparities. In surgical specialties, for example, a male-dominated workplace culture, bullying and harassment, few female role models, and career inflexibility have been suggested as factors that deter females from applying. Female surgeons have reported quality of life and fewer non-social hours as explanations of why women prefer other clinical specialties, in addition to the fear that working less than full-time or taking career breaks is perceived negatively.

Approximately half (50.2%) of the applicants were non-UK graduates. The overall success rate of UK graduates was 44.5%, compared with 22.8% for non-UK graduates.

When it came to minority ethnic groups, after adjusting for country of graduation, applicants from eleven out of fifteen groups (73.3%) were significantly less likely to be successful compared to white British. Those who fared worst were those of mixed white and Black African ethnicity, who were only half as likely (52%) to be successful as white British applicants.

Dr. Dinesh Aggarwal, the study's first author, also from the Department of Medicine, said, "The data suggests there's a need to review recruitment policies and processes from a diversity and inclusion perspective. But the issues extend beyond recruitment—doctors from minority [ethnic groups](#) can struggle to progress within the NHS and report disproportionately high levels of discrimination from colleagues.

"More than four in ten of the medical and dental workforce in NHS trusts and clinical commissioning groups in England are from a minority ethnic group, and ensuring that they are able to work within an inclusive environment, that allows them to thrive and progress, should be a

priority."

Although only a very small proportion of successful applicants (1.4%) declared a disability, they were more likely to be successful (38.6% compared with 32.8% of non-disabled applicants). However, there were no disabled applicants to 22.4% of the specialties, and for a further 36.2% of specialties, no disabled applicants were accepted.

Dr. Aggarwal added, "It's encouraging to see a high proportion of acceptances among individuals disclosing a disability. The NHS needs to ensure that application and recruitment processes are accessible and open to adjustments for all disabilities, eliminate any fear of discrimination, and provide assurance that all NHS workplaces will accommodate reasonable adjustments to ensure that disabled doctors can carry out their work. This will not only help to encourage more disabled applicants, but also allow disabled clinicians to feel more comfortable disclosing this information."

Professor Peacock added, "The NHS is the largest employer in the UK and it's vital that it nurtures diverse talent to benefit patient care. People from [diverse backgrounds](#) bring different lived experiences and perspectives, which in turn strengthens the pool of knowledge and skills within the NHS. A lack of workforce diversity can be detrimental to patient care, and research shows that inherent biases can influence how clinicians treat patients."

Dr. Aggarwal is a Ph.D. student at Churchill College. Professor Peacock is a Fellow at St John's College.

More information: Applications to medical and surgical specialist training in the UK National Health Service, 2021-22: a cross-sectional observational study to characterise the diversity of successful applicants, *BMJ Open* (2023). [DOI: 10.1136/bmjopen-2022-069846](https://doi.org/10.1136/bmjopen-2022-069846)

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