

Sports medicine must up its game to break cycle of gender bias, urge doctors

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Sports and exercise medicine must up its game to break the cycle of gender bias in the specialty, urge an international group of doctors in an editorial in the open access journal *BMJ Open Sport & Exercise Medicine*.



The dearth of women in all roles—from participants through to clinicians and researchers—is hindering the progress and scientific advancement of the specialty and helping to "normalize" gender inequity for <u>future generations</u>, say the authors from across the Americas, Africa, Australasia and Europe.

They cite a slew of evidence spelling out the lack of gender parity in the specialty.

Women make up less than 25% of senior authors on <u>scientific research</u> and <u>leadership roles</u> on editorial boards in sports sciences. And they account for less than 20% of team doctors in both collegiate and <u>professional sports</u>, the authors point out.

All-male conference panels and keynote speakers in sports and exercise medicine are still common, while female sports medicine doctors experience disrespect and <u>sexual harassment</u>, have their judgment questioned more often than their <u>male counterparts</u>, and have higher rates of death by suicide, they add.

There continue to be major knowledge gaps in key research areas, such as women's sport performance, their cardiovascular and musculoskeletal health, and the impact of the reproductive cycle.

In a bid to address the gender imbalance in sports and exercise medicine practice and research, the authors recommend a series of strategies and actions for professional bodies and academic institutions in the specialty.

These include:

• Building a culture of awareness, excellence, and inclusivity through education, training, and open discussion; family friendly policies; mentoring and <u>professional development</u> opportunities



- Promoting female inclusion in sport medicine, by, among other things, holding leaders to account for driving <u>business practices</u> and clinics that improve diversity, including in hiring and promotion practices
- Bolstering women's inclusion and participation in research, publications, and conferences, by considering diversity at all stages of research and publication, including among peer reviewers; and by increasing the representation of women and gender diverse people as speakers and attendees
- Recognizing that greater diversity benefits both clinicians and patients, by bringing different qualities, skills, and experience to the table
- Boosting the use of enabling technology to empower women
- Distributing work equally
- Implementing anonymous reporting platforms for microaggressions, bullying, harassment, discrimination and retaliation, and providing expert commentary to prevent perpetuation of these behaviors

"It is important that we acknowledge the underrepresentation, and work to break the cycle of gender bias through role models. The lack of female role models in sports and exercise medicine can perpetuate the cycle of gender bias," write the authors.

"Breaking this cycle is essential to ensure that future generations do not perceive gender bias as normal and continue to pass it down to new practitioners joining the field."

In so doing, "We believe that we can ensure that the brightest minds from all backgrounds can contribute to the advancement of science and enhance not only the <u>sports</u> medicine community but also society at large," they conclude.



More information: Under-representation of women is alive and well in sport and exercise medicine: what it looks like and what we can do about it, *BMJ Open Sport & Exercise Medicine* (2023). DOI: 10.1136/bmjsem-2023-001606

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