

# The Extent of Feminization of Medical Education in Bangladesh



# Possible ways to overcome

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# Medical School Dropout Rate

# Medical school dropout rates

Internationally:

the dropout rate increased from 1.7% in 2020 to 11.06% in 2021

In Bangladesh:

a study in Mymensingh Medical College from 2006-2007 found a dropout rate of 4.78% and admission cancellation rate of 5.15% among undergraduate medical students

# Why the dropouts



# Gender-specific career differences among doctors

- Female doctor's career choice is more influenced by social and familial factors
- Prefers part-time or short-term job contract
- Belated starting as well as delayed completion of postgraduate courses
- Female doctors with children are more disadvantaged than the males, even than the females without children

# Contd.

- Higher rate of residency interruption and termination
- Relative sparsity of female **role models**
- \* Lower assumption of **leading positions**
- Life plan is more influenced by anticipated **parenthood** than the male counterparts
- Family factors often determine the field of specialization

# What to do and How



# Practical Facts

- ▶ In recent years more females entered medical graduation courses than in previous years but fewer have succeeded in advancing to higher academic rank
- ▶ A higher number of females got general licenses but at the consultants and specialist level more males have been registered



# Points to address

- ▶ Rural deployment
- ▶ Work- home balance
- ▶ Choice of specialization
- ▶ Getting into a leadership role
- ▶ Scarcity in pre and para-clinical faculties

# Possible solutions



# Rural deployment.

- Governmental policy to ensure **social security** in the rural areas
- Improving **residential facilities** for the female doctors
- To pay attention to developing more work opportunities for the **spouses**
- Upgrading the **educational frameworks** for their children

# Contd.

- Selection of posting places to a place with better **transport facilities**
- Allocate the lady doctors close to or at their **home district**
- Posting of more than one female doctor at a time in the same center to avoid **professional isolation**

# Work-home balance

- Social awareness for reducing the rate of **marriage** before completing MBBS
- Minimizing social and familial expectations for the **primary responsibilities** of home
- Helping and cooperative attitude of the **spouse**
- Upgrading the social attitude of preferring the building up of the **career of the male partner**

# Contd.

- Administrative initiatives for **posting places** of both partners nearby or in the same place
- Making the hospital environment more **female doctor- friendly**
- Establishment of **Daycare centers** wherever a lady doctor is placed

# Choice of specialization

- Inspiring the female candidates by allocating a certain percentage of acceptance
- Motivating them towards **need-based** career choice
- More acceptance of female candidates in **certain subjects** like – colorectal surgery, breast surgery, urogynecology, aesthetics, dermatology, psychiatry, etc

# Contd.

- Changing the **pushing attitude** of the family for choosing the subject
- Making the training more **flexible** for the females, regarding work hours, duty shifts, and training institutes
- Selection of **guides or mentors** to be more female-friendly and less conservative

# Attainment of leadership

- Emphasizing **faculty development programs** in diverse situations to improve women's position or career
- Developing projects and professionals in the context of **selection, appointment, and training programs** specific to females
- Enhancing the effectiveness of **search committees** to attract women candidates

# Contd.

- Regular monitoring their **representation in the senior ranks**
- Assisting the female faculties with efficient **supporting staff** and work environment
- Specific training programs to develop **competencies** like assertiveness, competitiveness, decisiveness, independence, and severity

# Scarcity of pre and para-clinical faculties

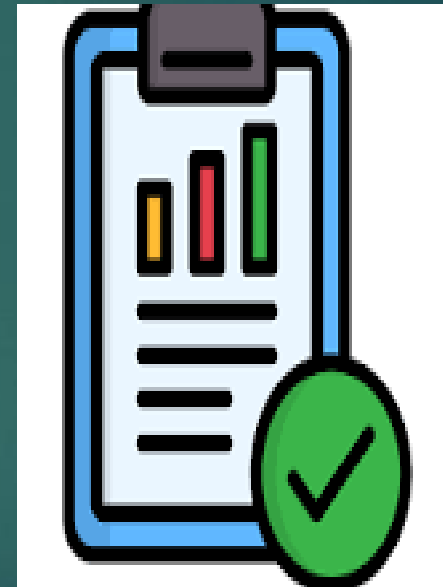
- Patronizing the **personal choices** of the female doctors to enroll in these subjects, ignoring the social and family pressure
- Making the **acceptance more** favorable of female candidates
- Allocation of **maximum incentive** for these disciplines

# Contd.

- Inspiring female doctors by offering more **advantageous** posting places, smoother promotions, and higher salary
- Opening up opportunities to hold **administrative roles** in the institutions to play additional roles
- Inspiring the teachers of basic subjects to get engaged in diverse activities in the arena of **Medical Education**

# Expected outcome

- ▶ Reduction of **Attrition or Drop- Outs**
- ▶ **Narrowing the gaps** and system loss between qualified doctors and active human resources in the health system
- ▶ Establishment of a **Need and Priority based** health workforce



# Some newer Thoughts

- ▶ Allocation of seats for medical admission tests in a ratio like **50:50** for Male and Female
- ▶ Giving **incentives** like posting places in the urban areas, easier promotions, as well as permission for general practice, to those faculties of **pre and para-clinical subjects**
- ▶ Raising the **age of retirement** for both clinical and non-clinical experts

# Take home messages

1. Increased numbers of female physicians, outnumbering the males is a fact
2. Pro-active measures are needed to increase the pool of female specialists
3. Proper planning for the production of physician workforce according to the needs and priorities of the health services

# Contd.

4. Special attention should be given to pre and para-clinical subjects to cater to the needs of newly established medical, nursing and paramedic institutions
5. Further research to find out the extent and effects of feminization of medical education would be more impactful

**“Social Determinants of Health In Undergraduate Curriculum”**

a] Concepts of It In a Community

b] Role of Medical Institutes In Addressing It

c] Ways To Achieve The Goal

**By**

**Department of Microbiology**

**Department of Neurology**

**Department of Ophthalmology**

**Date : 5<sup>th</sup> May , 2025**

**Time : 08.00 am**

**Venue : Medical Education Unit**

**( 3<sup>rd</sup> Floor, College building, DMC)**

**All respected Faculties are cordially invited**

**Medical Education unit**

**Dhaka Medical College**



**Thank you**

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