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From a place of hope by Nagina Khan

Posted on [March 8, 2022](#) by [aoifemolloy](#)

I am absolutely delighted to write this blog for International Women's Day 2022. As a woman in medical education and medical research, my own journey has been embedded in the NHS and academic departments which work to inform health and policy globally.

I want to start by highlighting a quote by Secretary-General of the United Nations, António Guterres because for me and most of you reading this, I hope it reflects the necessity and the serious requirement for a gender-neutral and inclusive workplace.

"Gender parity at the United Nations is an urgent need – and a personal priority. It is a moral duty and an operational necessity."

The meaningful inclusion of women in decision-making increases effectiveness and productivity, brings new perspectives and solutions to the table, unlocks greater resources and strengthens efforts across all the three pillars of our work."

First and foremost, I am writing this blog from a place of hope, and I am positive about any changes that are taking place, I see it everywhere and everyday, globally. I see women in healthcare, I hear from women in medicine, I work in ways to empower women in medical education and research. I am not only proud of these women but also look up to them. I believe women leaders are a norm and should have equal power and equal opportunities within institutions. I also feel very lucky to be able to do my job, and not only because it is to foster and support other women that I work with, but it is also because I too bring diversity by being present and having an equal voice and for having made footprints for others like myself.

Upon my own personal reflection, I know the above sentence to be important practically, as it has been equally important to me to see the footprints of other distinguished women in medical departments. They have been present on panels of my selection in the institutions that I had been appointed. When I reflect, to past interviews, everyone has been excellent no matter the gender, yet I do feel that had there not been female representation on those panels maybe 'I would have not been heard in an equal way' – As when you are a part of highly competitive environments you want to feel not only confident in your effort, appointment, or rejection but you want to feel like anyone else would have felt – in that 'the process was fair to you.' For example, when I landed the MRC Training Fellowship – a prestigious award in the UK, for me personally, it was a huge moment in my career, it had a lasting impact on me

for many reasons, although one specific reason still stands out to me – it was the fact that on the day there was a female on that panel. The opportunity to engage with a visible female agency, a role model, someone who had been there and done it at the time was influential beyond words and solidified my own commitment and sense of fairness in the system and yes similarly, we can all ‘pay it forward.’

It is not all doom and gloom, in the last few years there has been much progress in promoting women in society and the workplace. It now feels more common to see women visibly occupy the very senior positions in the sciences. The second Pharmaceutical Market Europe’s special feature listed and celebrated 25 Women Leaders in UK Healthcare.¹ However, in academic medicine women continue to be underrepresented in leadership positions.² Farkas et al., in their systematic review have shown a lack of women in leadership to have negative implications for both patient care and educational outcomes.² Realistically, there remain many systemic and often visible barriers for women in healthcare and medicine.

Inclusive environments are where ‘women and men feel equal.’ This should be on the forefront of the agenda in all institutions, regulatory bodies, and disciplines of medicine and healthcare. This is recognised in the global indicator framework for Sustainable Development Goals, which was developed by the Inter-Agency and Expert Group on SDG Indicators (IAEG-SDGs) and agreed upon at the 48th session of the United Nations Statistical Commission held in March 2017.³ In which, goal 16 relates to promoting peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels.³ More importantly goal 5 specifically and directly points to achieving gender equality and empower all women and girls (Table. 1).³

Goal 5. Achieve gender equality and empower all women and girls³

Goal

5.1 End all forms of discrimination against all women and girls everywhere.

Indicator

5.1.1 Whether or not legal frameworks are in place to promote, enforce and monitor equality and non-discrimination on the basis of sex.

	5.2.1 Proportion of ever-partnered women and girls aged 15 years and older subjected to physical, sexual or psychological violence by a current or former intimate partner in the previous 12 months, by form of violence and by age.
5.2 Eliminate all forms of violence against all women and girls in the public and private spheres, including trafficking and sexual and other types of exploitation.	5.2.2 Proportion of women and girls aged 15 years and older subjected to sexual violence by persons other than an intimate partner in the previous 12 months, by age and place of occurrence.
5.3 Eliminate all harmful practices, such as child, early and forced marriage and female genital mutilation.	5.3.1 Proportion of women aged 20–24 years who were married or in a union before age 15 and before age 18.
	5.3.2 Proportion of girls and women aged 15–49 years who have undergone female genital mutilation/cutting, by age.
5.4 Recognize and value unpaid care and domestic work through the provision of public services, infrastructure and social protection policies and the promotion of shared responsibility within the household and the family as nationally appropriate.	5.4.1 Proportion of time spent on unpaid domestic and care work, by sex, age and location.

- 5.5 Ensure women's full and effective participation and equal opportunities for leadership at all levels of decision making in political, economic, and public life.
- 5.5.1 Proportion of seats held by women in (a) national parliaments and (b) local governments.
- 5.5.2 Proportion of women in managerial positions.
- 5.6 Ensure universal access to sexual and reproductive health and reproductive rights as agreed in accordance with the Programme of Action of the International Conference on Population and Development and the Beijing Platform for Action and the outcome documents of their review conferences.
- 5.6.1 Proportion of women aged 15–49 years who make their own informed decisions regarding sexual relations, contraceptive use and reproductive health care.
- 5.6.2 Number of countries with laws and regulations that guarantee full and equal access to women and men aged 15 years and older to sexual and reproductive health care, information, and education.
- 5.a Undertake reforms to give women equal rights to economic resources, as well as access to ownership and control over land and other forms of property, financial services, inheritance, and natural resources, in accordance with national laws.
- 5.a.1 (a) Proportion of total agricultural population with ownership or secure rights over agricultural land, by sex; and
(b) share of women among owners or rights-bearers of agricultural land, by type of tenure.
- 5.a.2 Proportion of countries where the legal framework (including customary law) guarantees women's equal rights to land ownership and/or control.

5.b Enhance the use of enabling technology, in particular information and communications technology, to promote the empowerment of women

5.b.1 Proportion of individuals who own a mobile telephone, by sex

5.c Adopt and strengthen sound policies and enforceable legislation for the promotion of gender equality and the empowerment of all women and girls at all levels

5.c.1 Proportion of countries with systems to track and make public allocations for gender equality and women's empowerment

During my own career, I know that I have looked up to both men and women as leaders and both have had a hand in mentoring and supporting me diligently and they still do today. The respect of my colleagues from every level of seniority ensures me nearly every day that this is true and a correct way towards inclusive cultures and towards diversity. Yet, gender differences are used by the mass media to captivate the public by amplifying gender differences. John Gray's (1992) *Men Are From Mars, Women Are From Venus*, is often brought up as it discussed psychological differences between women and men. However, Epstein,⁴ Hyde,⁵ Hyde & Plant,⁶ Kimball,⁷ have presented us with the gender similarities hypothesis. Gender similarities hypothesis has been supported by a review of 46 meta-analyses.

Suggesting that gender differences can differ significantly at different ages and can be contingent on the context in which measurement occurs. Also relevant still is this piece of evidence, which suggests that overstated allegations of gender differences involve considerable costs in areas such as the workplace and relationships.^{8 (581)}

The hypothesis argues that males and females are similar on most, but not all psychological variables. If so, then it must be our mutual business to make sure that we are aware of the disadvantage that female colleagues may be impacted by and adhere to principles of equality so that science, medicine and healthcare does not work against any one person but instead for them.⁹ Similarly, if we want to move forward and become inclusive and equal then I know and believe that I too am a role model for both men and women and bring that same level of understanding for others in science, medicine and healthcare. More women should mentor men in healthcare, science, and medicine because women mentoring men, would lead to greater empathy, allyship, and a commitment to see each other as individuals and to work together for collective successes. In general, we should view healthcare as one ecosystem, where every male and female agency works together to break

down organisational barriers for women and arrives at the point, to totally believe that it is in fact the 'best way forward' for patients, long term productivity and continual culture change in our institutions.

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