## Gender inequity in medicine and medical leadership

To the Editor: Last month, the *Medical Journal of Australia* called for manuscript submissions on the topic of "Women in medicine and medical leadership in Australia — is there gender equity?" We answer with a resounding no. Indeed, we believe the question itself perpetuates gender disparity by suggesting that the answer is up for debate.

There is overwhelming evidence to demonstrate that gender equity in medicine and medical leadership in Australia has not been achieved. Women have had gender parity in Australian medical schools for decades; however, they represent only 28% of medical deans and 12.5% of hospital chief executive officers. In February 2019, The Lancet dedicated an entire issue on advancing women in science, medicine and global health.<sup>2</sup> The MJA has also reported on capacity, capability and credibility barriers for women in health leadership.<sup>3</sup> These disparities are even greater for Aboriginal and Torres Strait Islander women, women of colour and women with disabilities.

There is an urgent need to shift our focus from asking whether gender inequity exists to implementing and evaluating sustainable strategies to change the status quo. This year, the Australian Medical Association of Victoria changed its constitution to include a 40% gender quota for its board.<sup>4</sup> The Royal Australasian College of Surgeons has established a business plan with tangible indicators to promote leadership and flexible training for its female surgeons.5 Both the Women in Tropical Health Catalyse Program<sup>6</sup> in Australia and Wāhine Connect (www.wahineconnect. nz) in New Zealand offer mentoring for women in medicine and medical leadership.

We need to bolster current strategies aimed at improving the number of women in medical leadership. Moreover, we need to keep our workplaces, colleges, committees, professional associations and academic journals accountable for the role they play in the persistent gender inequities in medicine and medical leadership in Australia.

We invite the MJA to follow The Lancet's example and dedicate an entire issue

to strategies that advance women in medicine and medical leadership. We implore it not to ask "is there gender equity?" when the answer to this question is patently clear. The answer is no.

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Editor-in-Chief's note: The *MJA* welcomes views on this important topic and wishes to encourage evidence-based submissions. Suitable submissions will be published in ongoing issues of the Journal.

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## Letters

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