

Students from marginalized groups are less likely to seek surgical careers

August 22 2023, by Mallory Locklear



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Medical students from marginalized groups are less likely to have sustained or cultivated career paths in surgery, Yale researchers report in a new study. The findings, they say, have implications for the diversity

of the surgical workforce and patient care.

The research was published in the journal *Annals of Surgery*.

"A diverse workforce that reflects the population is important to [patient care](#) because patients tend to trust physicians they identify with," said Mytien Nguyen, an M.D.-Ph.D. student at Yale School of Medicine and lead author of the study. "And prior studies have shown that racial concordance between patient and physician leads to better patient outcomes."

However, diversity across gender and race has remained low in the surgical workforce, said Nguyen.

To better understand [medical students'](#) surgical career pursuits, the researchers assessed the career paths of 22,660 medical students who matriculated to U.S. schools in 2014 and 2015. They evaluated two paths: a sustained path where students entered medical school with an interest in surgery and began a surgical residency upon graduation, and a cultivated path in which students did not express an interest in surgery at matriculation but were placed into a surgical residency at graduation.

"We wanted to look at these two paths because maintaining interest in surgery and promoting interest in surgery might require different types of support," Nguyen explained.

Among students entering medical school with an interest in surgery, researchers found, female students were less likely than [male students](#) to place in a surgical residency. Further, Asian and Hispanic students and [low-income students](#) were less likely than their white and non-[low-income](#) peers, respectively, to enter surgical residency.

Female students were also less likely than males to have cultivated [career](#)

[paths](#) in surgery, as were Black and Hispanic students, compared with [white students](#).

"And students identifying with all three marginalized identities—female, ethnoracial groups underrepresented in medicine, and low-income—were the least likely to have sustained or cultivated paths in surgery," said Nguyen.

Previous research has found that medical students and surgical residents who are female, identify as a race or ethnicity underrepresented in medicine, or come from low-income backgrounds report that their experiences in surgical environments often do not foster a sense of belonging. Studies also show that mistreatment, financial barriers to training, and lack of role models can deter early-career physicians from surgical careers.

To increase diversity in surgical specialties, the researchers suggest medical schools do more outreach to high school students and undergraduates to promote early interest in surgery prior to [medical school](#). Additionally, universities should establish surgical mentorship programs as well as efforts that promote equitable career progression and address mistreatment and bias.

"Fostering belonging among students from marginalized backgrounds will be key to boosting diversity in surgery departments," said Dr. Paris Butler, associate professor and vice chair of diversity, equity, and inclusion in the Department of Surgery at Yale School of Medicine and co-senior author of the study. "Transforming the surgical learning environment and the culture of the surgical field is essential for building a diverse workforce and ensuring the best experiences and outcomes for our patients."

More information: Mytien Nguyen et al, Association of

Socioeconomic Status, Sex, Racial, and Ethnic Identity with Sustained and Cultivated Careers in Surgery, *Annals of Surgery* (2023). DOI: [10.1097/SLA.0000000000006029](https://doi.org/10.1097/SLA.0000000000006029)

Provided by Yale University

Citation: Students from marginalized groups are less likely to seek surgical careers (2023, August 22) retrieved 29 April 2024 from <https://phys.org/news/2023-08-students-marginalized-groups-surgical-careers.html>

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