Speaking up: Does gender balance of speakers at the RCOphth Annual Congress reflect its aims?

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AIMS:

- To evaluate the representation of women in Ophthalmology at the Royal College of Ophthalmology Annual Congress, by stratifying speakers and session chairs by gender, subdivided by subspecialty, to be able to explore if this has implications for the College's aims to promote inclusion and encourage diversity

BACKGROUND:

In its role of as the voice of UK Ophthalmology, the RCOphth has a clear set of values encouraging equity and diversity, to ensure the College is representative of its membership and the wider general public.

As the flagship event organized by the RCOphth, the Congress acts as a way to prove its commitment to goals of diversity and inclusivity:

> **"Our Values**
> **Inclusion**
> - actively welcoming a diversity of experiences and perspectives
> - everyone being respected and encouraged to participate regardless of their background or role"[1]

There is known to be an underrepresentation of female doctors in Ophthalmology compared to the wider medical community, as reported in the 2021 Differential Attainment Report.[1] Of the RCOphth membership, 33.8% are female compared to 51.9% of all GMC registered doctors.

The female representation in Ophthalmology is growing, but does not yet match the general population. In 2021, 47% of Ophthalmology trainees were female, a larger proportion than the Consultant cohort, of whom 30% were female.

It is therefore important to recognise if the outward-facing image of the College, shown by the gender divide in speakers at the Congress, propagates this inequality.

METHODS:

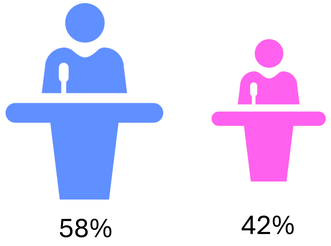
Using the 2023 RCOphth Congress programme of talks, as well as the digital forum of recorded sessions, a list of session chairs and invited speakers was identified.

The genders of the speakers and session chairs was determined by their publicly available web-based profiles.

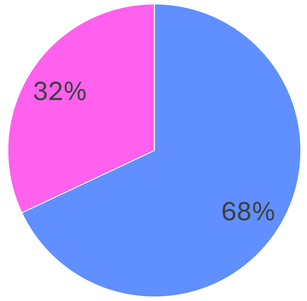
These speakers were categorised into subspecialties by session topic. Due to low numbers, some themes were excluded, such as Oncology and Education. Medical retina and vitreoretinal speakers were grouped together, due to their crossover on the retina subspecialty day programme.

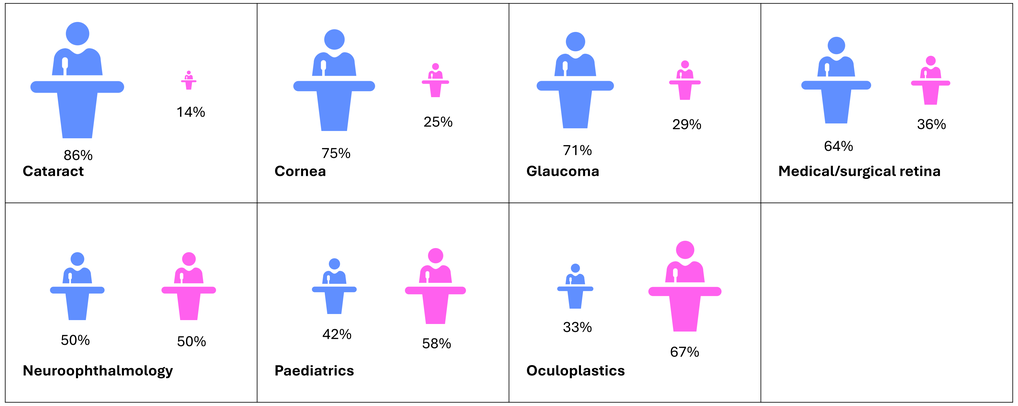
RESULTS:

Proportion of **speakers** of each gender, male and female:



Proportion of **session chairs** of each gender, male and female:





References:
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DISCUSSION:

Of the 321 invited speakers, 58% (n = 186) identified as male and 42% (n =135) as female. When looking at the chairs of each session (n = 76), the gender divide was greater, with 68% (n = 52) of sessions chairs being male and 32% (n = 24) female. This reflects the disparity in membership of the wider RCOphth. Congress is attended not only by Ophthalmologists, but also by prospective OST applicants. It has been recognised that diverse specialties attract diverse applicants, with female applicants giving more importance to diversity of programs then their male counterparts.[2]

Underrepresentation of women in leadership roles in Ophthalmology could also be a factor limiting the aspirations of junior female surgeons. Currently, the RCOphth Council is male dominated, with a gender divide of 61.8% male to 38.2% female. Lack of female role models in leadership roles could be a potential factor when considering why female Ophthalmologists are underrepresented as speakers.

Mentoring has also been identified as a driver in professional advancement, and it has been suggested that a paucity of mentors in academia may limit attainment. This is evidenced by the makeup of the editors of the Eye journal: 73.3% male, 26.7% female. Obviously, mentors do not need to be of the same gender to have a constructive relationship, but effective mentors are able to provide modelling and navigation through career trajectories and therefore having a mentor with similar experiences is benficial.[3,4]

There was variation in female representation between subspecialties: in Cataract sessions, 14% of speakers were female, compared to 67% in Oculoplastics. This provides an interesting route for further investigation, as to whether the Congress speakers are a fair representation of the gender makeup of these subspecialties. Surveys of the memberships of US subspecialty societies demonstrate that Paediatrics and Neuro ophthalmology do have a higher proportion of female members than other subspecialties, and an exploration of why this is the case may identify reasons for gender disparities.[5]

CONCLUSIONS:

In order to demonstrate the values and aspirations of the RCOphth, the Congress should strive to foster representation, by ensuring the make-up of the chairs and speakers reflects a desire to promote gender equality in the ophthalmic workplace.