

Positive action is required to achieve the 2020.30 goal of gender equality in Japanese medical societies

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In 2010, the Gender Equality Bureau, which was established by the Japanese Cabinet Office in 2001, confirmed the goal of “2020.30”, i.e., to increase the percentage of women in leadership positions to at least 30 % by the year 2020 in a wide range of fields, such as academia and

politics. However, Dr. Tomizawa [1] revealed the difficulties associated with achieving this goal in most Japanese medical societies, from a surgeon’s standpoint. As physicians, we also agree with this point of view. We, as the Working Group for Women Physicians, Fellows’ Committee, the Japanese Society of Internal Medicine, also surveyed the percentages of women doctors in decision-making position in the Japanese Society of Internal Medicine and related societies in 2010 and 2012, and compared them with the percentages of women members in 2011 reported in a previous report by Dr. Tomizawa et al. [2] (the data from 2010 have been reported in Ref. [3]). As shown in Fig. 1, the ratios of women in decision-making positions to the total percentages of women among all members in each society have not been increasing in general in the Japanese Society of Internal Medicine (closed circles) and related societies (open circles), or in the Japan Surgical Society (closed squares). Although the expected ratio is “1” when gender equality is achieved, the majority of the societies showed “0” for the top decision-making positions (A). Among them, the societies that characteristically improved the ratios (but not yet approaching a ratio of “1”) had developed a quota system for women and/or promoted gender equality measures, indicating the necessity of positive actions.

The Japan Medical Association is also promoting the 2020.30 movement and considering a quota system for all committees, according to the Gender Equality Bureau. Now, such positive actions should also be considered for all Japanese medical societies that still keep the extraterritorial rights over the 2020.30 goal.

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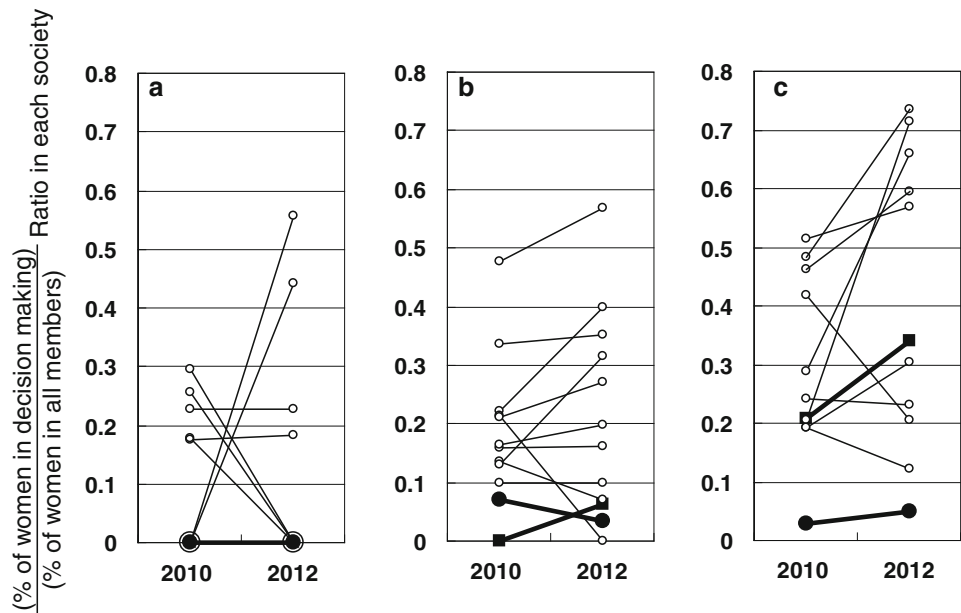
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Fig. 1 Women in decision-making positions in the Japanese Society of Internal Medicine (*closed circles*), its related societies (*open circles*), and in the Japan Surgical Society (*closed squares*). Values represent the ratios of women directors (**a**), councilors (**b**) or committee members (**c**) to the total percentage of women who are members in each society. The *large open circles* on the baseline in **a** include four related societies with no women in director positions in either of the years, as well as the Japanese Society of Internal Medicine and the Japan Surgical Society



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