Letter to the Editor

Positive action is required to achieve the 2020.30 goal of gender equality in Japanese Medical Societies

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The Gender Equality Bureau established in the Japanese Cabinet Office in 2001 confirmed the goal of “2020.30”, i.e., 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, in 2010. However, Dr. Yasuko Tomizawa revealed the difficulties in the achievement of this goal in the most Japanese Medical Societies, from surgeon’s standpoint [1]. We physicians also fully agree with this affair. We, as the working group on women physicians, Fellow of the Japanese Society of Internal Medicine (FJSIM), also surveyed the percentages of women doctors in decision-making scenes in the Japanese Society of Internal Medicine and related societies in 2010 and 2012, and compared with the percentage of women members in 2011 reported in a previous report by Dr. Tomizawa et al [2] (Data of 2010 has been reported in Ref. 3). As Fig. 1 shows, ratios of female percentages in decision-making to the female percentages among all members in each society are not increasing in general in the Japanese Society of Internal Medicine (closed circles) and related societies (open circles), as well as in the Japan Surgical Society (closed squares). Although the expected ratio is “1” when gender equality is
achieved, majority of the societies showed “0” in the top decision making meetings (A). Among them, the societies that characteristically improved the ratios (but not yet around “1”) had settled the 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 considering the quota system in all committees, according to the Gender Equality Bureau. Now, such positive actions should also be considered in all Japanese Medical Societies that still keep the extraterritorial rights over the 2020.30 goal.
Conflict of interest statement:

Keiko Hiyama has no conflicts of interest to declare.

Makiko Ozaki has no conflicts of interest to declare.

Keiko Hayano has no conflicts of interest to declare.

Noriko Yamamoto has no conflicts of interest to declare.

Hiroshi Bando has no conflicts of interest to declare.

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References


Figure legends

**Fig. 1.** Women in decision-making in the Japanese Society of Internal Medicine (closed circles), its related societies (open circles), and Japan Surgical Society (closed squares). Values represent the ratios of female percentage of directors (A), councilors (B), or committee members (C) to the percentage of female members in each society. Large open circles on the baseline in “A” include 4 related societies with no female directors in both years, as well as the Japanese Society of Internal Medicine and the Japan Surgical Society.
(A) Ratio in each society
(%) of women in all members
(%) of women in decision making

2010 2012

2010 2012

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