Opportunities for women

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hroughout my career in dentistry I have occasionally been surprised to discover examples of discrimination against women dentists. The one that I still find hard to accept (although I know it happens) is the example of a female dentist applying for a position as associate or VDP. Initially she is told the position has been filled yet when a male colleague contacts the practice immediately afterwards he is offered an interview. Thus I wondered if the report 'Better Opportunities for Women Dentists' published on the 5th September this year would hold further surprises, and I was not disappointed.

The report was commissioned by the Department of Health in June 2000 because of workforce concerns for the future. Despite the increasing number of women entering dentistry (now just over 50%) only half of them currently work more than an average of 2 days a week. The Department was also concerned that most women work in the GDS as associates or in the CDS, and there is a wide-spread perception that women find it difficult to return to dentistry after taking a career break.

Dame Margaret Seward was appointed to undertake the review, which involved inviting submissions from 54 organisations, holding eight focus groups in different parts of England and sending a questionnaire to all women under 70 years on the Dentists Register with an address in England. The response was a respectable 55%. The findings confirmed that only 32% of women working in general practice are practice owners, many are concerned about providing 24 hour emergency cover because of personal safety and family commitments and the stress of NHS practice (and the remuneration system) is still a real problem for many women.

The report contains 24 recommendations; based around the subjects of working patterns, returning to dentistry, practice ownership and career advice. My first impression on reading these was the simplicity of most of them, and this is borne out by the Department of Health's response to the review which promises that many of the recommendations will be implemented immediately. For example the Department has promised £1 million of new money to expand initiatives in training for getting back to practice and also to appoint an advisor in each deanery.

Other recommendations to be considered in the future include looking into family-friendly policies more closely and the provision of capital funding for dental practice owners. As ever, the response from the Department is full of 'considerations' and 'reviews' but the £1 million new money is a refreshing indication of the seriousness with which this report is being taken.

Perhaps the recommendation that affects everyone the most (male and female) is that the NHS remuneration system needs serious consideration to help reduce the stress and intensity of GDS dentistry and encourage a more preventively-orientated approach. This subject is already under review following the Health Select Committee's Hearing last February, and 'Better Opportunities for Women Dentists' strengthens the need for serious and innovative thought in this area. Hopefully this time something really constructive will emerge.

It is all too easy to lack an appreciation of discrimination when you are not the one being discriminated against, and this report identifies the very real problems women have had in dentistry that have been ignored for far too long. In fact the overwhelming feeling when reading the report is one of surprise (for me at least) that many of these findings have not been sorted in the past. Perhaps it is no coincidence that of the 35 written submissions by individuals only two of them are from men.

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