Gender Disparity in Academic Gastroenterology in Türkiye: A Nationwide Bibliometric Analysis

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ABSTRACT

Background/Aims: *Gender disparities in academic medicine are well documented; however, no study has examined this within academic gastroenterology in Türkiye. The authors evaluated the gender distribution of academic gastroenterologists and examined relationships between gender, academic rank, research productivity, and leadership positions.*

Materials and Methods: *Academic gastroenterologists were identified using the Council of Higher Education database. Of 317 academic gastroenterologists, 305 with reliable Scopus profiles were included; 12 were excluded because of ambiguous or duplicate profiles. Productivity metrics (publication count, citation count, h-index, years of active research, and m-index) were obtained from Scopus. Leadership status was assessed using institutional websites for the full cohort of 317 gastroenterologists, with leadership status determinable for 309 individuals. The history of presidencies of the Turkish Society of Gastroenterology (TSG) was also reviewed.*

Results: *Among 305 gastroenterologists from 119 institutions across 47 cities, 77 (25.2%) were women and 228 (74.8%) were men. Female representation was lowest among professors (20.8%) compared with associate professors (32.5%) and assistant professors (33.3%) ($\chi^2 = 5.36$, $P = .069$). Leadership status was determined for 309 academics; among 55 department heads, only 10 (18.2%) were women ($P = .247$). Women had significantly fewer publications and citations, lower h-index, and fewer years of active research than men (all $P < .05$), whereas the m-index did not differ significantly by sex ($P = .066$). When stratified by academic rank, no significant sex differences were observed for any metric (all $P > .05$). Of 20 documented terms of presidency of the TSG, only 2 (10.0%) had been held by women.*

Conclusion: *Women are substantially underrepresented in academic gastroenterology in Türkiye, particularly at the professor rank and in leadership positions. The absence of a significant difference in m-index suggests that lower productivity among women may partly reflect differences in career duration rather than an intrinsic gap. Structural interventions targeting mentorship, promotion, and leadership opportunities are needed to reduce these disparities.*

Keywords: *Bibliometrics, faculty, gastroenterology, leadership, medical, sex factors, Türkiye*

INTRODUCTION

Gender inequality in academic medicine is a well-recognized global problem. In Türkiye, the proportion of female and male medical students has approached parity over the past decade; however, women remain underrepresented at senior academic ranks and in leadership positions across most medical specialties.[1,2] Gastroenterology reflects this broader pattern. Among gastroenterologists registered with the Turkish Society of Gastroenterology (TSG), only 200 of 942 were women.[3]

This underrepresentation is not unique to Türkiye. In the United States, female gastroenterologists earned 22% less than their male counterparts even after adjusting for practice type and working hours and were less likely to hold senior academic positions after 10 years of practice.[4] Female first authorship in major gastroenterology journals increased from 9.1% in 1992 to 29.3% in 2012; however, women remained disproportionately underrepresented among senior authors throughout this period.[5] A longitudinal analysis of authorship from 1971 to 2010 confirmed that female senior authorship remained at only 24% during the most recent period studied.[6] Among 29 gastroenterology and hepatology journals, women represented only 7.7% of editors-in-chief and 17.4% of editorial board members.[7]

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Procedural training disparities are also evident. In the United States, women accounted for only 12.8% of trainees matched to advanced endoscopy programs in 2018-2019.[8] A Canadian survey found that 38% of female gastroenterology trainees reported inadequate mentorship in advanced endoscopy compared with 4% of male trainees.[9] In the United Kingdom, women accounted for only 5% of independent endoscopic retrograde cholangiopancreatography (ERCP) practitioners, and 25% of female respondents reported being actively discouraged from pursuing ERCP training.[10]

The mechanisms underlying these disparities are well recognized. Lack of mentorship, work–life balance challenges, and family responsibilities have been consistently been identified as barriers.[3,11] Institutional and structural inequalities may further disrupt career continuity during reproductive years.[12] In addition, gender homophily in academic collaboration—the tendency to work with same-gender colleagues—may limit networking opportunities for women in settings where they are underrepresented.[13]

Data on this topic from Türkiye remain limited. This study addresses this gap by providing the first comprehensive cross-sectional analysis of gender distribution among academic gastroenterologists in Türkiye using data from the Council of Higher Education (YÖK) database and Scopus. The primary objectives were to characterize gender distribution across academic ranks, evaluate sex differences in research productivity before and after adjustment of career duration, and assess female representation in departmental and societal leadership.

Main Points

- *Women account for 25.2% of academic gastroenterologists in Türkiye, with representation lowest at the professor level (20.8%).*
- *Female academics had significantly fewer publications and fewer citations, lower h-index, and fewer years of active research than male peers; however, the m-index did not differ significantly, although statistical power for this comparison was limited. When stratified by academic rank, no significant gender differences were observed for any research productivity metric at any rank level. Women held only 18.2% of departmental leadership positions, and only 2 women had served as presidents of the Turkish Society of Gastroenterology across the 20 documented presidential terms since 1986.*
- *Targeted structural interventions—including mentorship programs, transparent promotion criteria, and active recruitment of women into leadership roles—are needed to address persistent gender disparities in academic gastroenterology in Türkiye.*

MATERIALS AND METHODS

Study Design and Data Source

This cross-sectional bibliometric study identified academic gastroenterologists through the YÖK database, which lists faculty members employed at accredited medical faculties and health sciences institutions across Türkiye. The database was searched using the term "gastroenterology" as the departmental classifications. Sex was classified as female or male based on publicly available YÖK Academic profiles, using given names and profile photographs rather than self-reported gender identity. All individuals holding an academic title in gastroenterology were included in the initial cohort.

Two independently defined cohorts were derived from the same source population identified through the YÖK database. The bibliometric cohort comprised academics with reliable Scopus profiles, whereas the leadership cohort was defined independently using institutional website data to determine departmental leadership status.

Academic Rank

Academic rank was classified according to the Turkish academic hierarchy into 3 categories: professor, associate professor, and assistant professor. Rank data were obtained directly from the YÖK database, which reflects the current official classification.

Research Productivity Metrics

Scopus (Elsevier) was used to obtain bibliometric data for each enrolled academic. The following metrics were recorded: total publications, total citations, h-index, first publication year, and most recent publication year. Years of active research were calculated as the interval between the first and most recent publication years. The m-index (m-quotient) was calculated by dividing the h-index by the years of active research and was used as a career-duration-adjusted measure of research productivity. All bibliometric data were collected between March and May 2026. To ensure standardization, all bibliometric analyses were performed using a single database. Academics with ambiguous, duplicate, or unreliable Scopus profiles were excluded from the bibliometric analysis.

Leadership Assessment

Departmental leadership was defined as holding the position of department head at the time of data collection and was verified using the official websites of affiliated institutions. Because leadership status was assessed independently of Scopus data, the leadership analysis was conducted in the full YÖK-derived cohort rather than being restricted to the bibliometric cohort. Academic gastroenterologists whose institutional webpages had not been updated within the preceding 6 months and whose current leadership status could therefore not be verified were excluded from the leadership analysis. Thus, the bibliometric and leadership cohorts were defined using independent criteria. The presidency history of the TSG was reviewed using official TSG records to assess female representation. Although the society was founded in 1959, formal records of its governing boards are available only from 1986 onward; therefore, the presidency analysis as limited to documented board terms from 1986 onward.

Ethics Approval, Informed Consent, and Artificial Intelligence Statement

This study used exclusively publicly available data obtained from the YÖK database, Scopus, and institutional websites. No patient data or identifiable personal information were collected. Therefore, ethics committee approval and informed consent were not required.

ChatGPT (OpenAI) was used solely for language editing and improvement of the manuscript. All scientific content was reviewed and verified by the authors, who take full responsibility for the final content. Figures were created using BioRender.

Statistical Analysis

Categorical variables are presented as counts and percentages. The chi-square test was used to compare sex distribution across academic ranks and to assess the association between gender and leadership position. The normality of bibliometric variables, including publication count, citation count, h-index, years of active research, and m-index, was assessed using the Shapiro–Wilk and Kolmogorov–Smirnov tests. Because none of the variables met the normality assumption, the Mann–Whitney *U*-test was used for between-group comparisons. Analyses were performed for the overall cohort and stratified by academic rank to minimize the effect of seniority on productivity metrics. The type I error rate (α) was set at 0.05. Statistical Package for the Social Sciences version 31.0 (IBM SPSS Corp.; Armonk, NY, USA) was used to analyze the data. A post hoc power analysis was conducted based on the observed effect sizes (*r*) obtained from the Mann–Whitney *U*-tests using G*Power, version 3.1 (Heinrich Heine University Düsseldorf; Düsseldorf, Germany). The statistical power ($1-\beta$) was calculated using a 2-sided significance level of $\alpha = 0.05$. No adjustment for multiple comparisons was applied. Bibliometric comparisons were prespecified and analyzed as distinct outcome measures rather than as post hoc pairwise contrasts, and the rank-stratified analyses were considered secondary exploratory analyses.

RESULTS

Study Population

A total of 317 academic gastroenterologists were initially identified through the YÖK database. Of these, 12 were excluded (2 women and 10 men; 10 professors, 1 associate professor, and 1 assistant professor) because a reliable Scopus profile could not be established. Six were excluded because their names were shared by 2 or more distinct individuals, often from different specialties (e.g., radiation oncology or basic sciences), resulting in the conflation of publications within a single Scopus profile. The remaining 6 were excluded because their publications were fragmented across multiple Scopus profiles owing to surname changes, variations in name order, or changes in affiliation, precluding reliable reconstruction of a complete publication record (Figure 1). The final cohort included 305 academics from 119 institutions across 47 cities, with the highest representation from Istanbul (n = 89), Ankara (n = 62), and Izmir (n = 23).

Gender Distribution by Academic Rank

Of the 305 academics, 77 (25.2%) were women and 228 (74.8%) were men. The proportion of women decreased progressively with increasing academic rank, from 33.3% among assistant professors to 20.8% among professors; however, this trend did not reach statistical significance ($P = .069$) (Figure 2).

Leadership Positions

Among the 317 academics initially identified in the YÖK database, leadership status was determinable for 309 (97.5%). Women held 10 of 55 department head positions (18.2%), compared with 68 of 254 non-head positions (26.8%). The association between gender and leadership position was not statistically significant ($\chi^2 = 1.34$, $P = .247$). Female academics were less likely than male academics to hold a department head position, although, this association was not statistically significant (OR = 0.61,

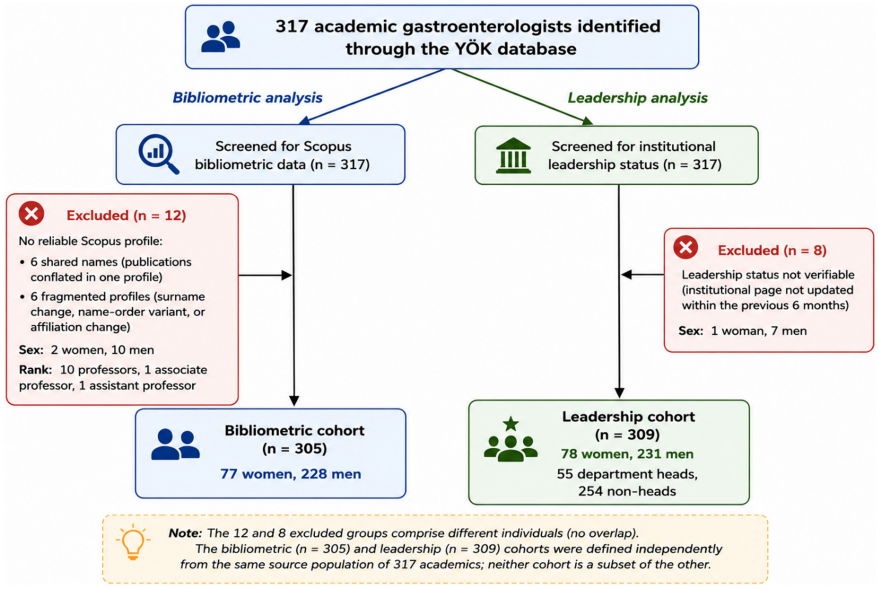

Figure 1. Study flow diagram.

95% CI: 0.29-1.27). Of the 20 board-term presidencies documented since 1986, only 2 have been held by women.

Because leadership status was obtained independently from institutional websites rather than Scopus profiles, leadership analyses were conducted separately from the bibliometric analyses and included all 317 academics initially identified in the YÖK database. Leadership status could not be verified for 8 academics, none of whom were among the 12 excluded from the bibliometric analysis. Thus, the bibliometric and the leadership cohorts were defined independently and comprised 305 and 309 academics, respectively.

Research Productivity

Overall, female academics had significantly fewer median publications, fewer citations, a lower h-index, and fewer years of active research than male academics. The m-index did not differ significantly between the 2 groups (P = .066) (Table 1). A post-hoc power analysis based on the observed effect sizes showed that the analysis of publication counts had adequate statistical power (85.9%).

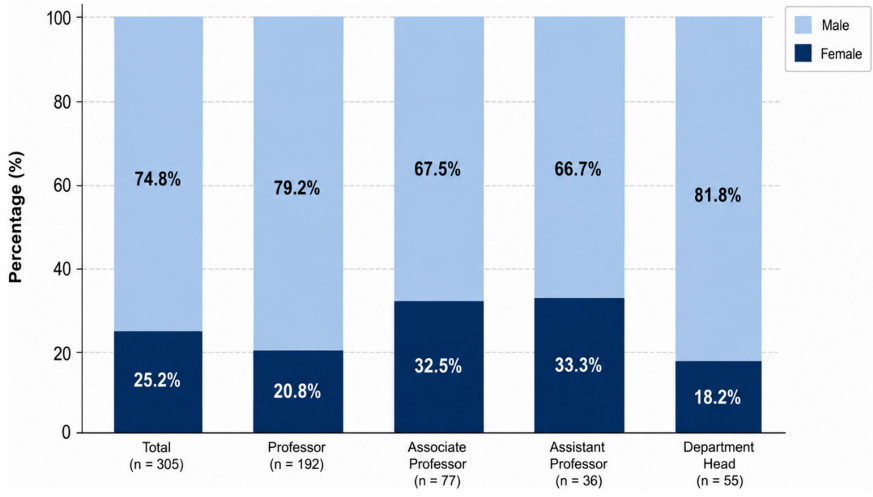

Figure 2. Gender distribution by academic rank and departmental leadership position. The chi-square test was used for all comparisons. Gender distribution across academic ranks: P = .069; department head position: P = .247.

Table 1. Overall Research Productivity Metrics by Gender

Variable	Female (n = 77)	Male (n = 228)	*P*
Publications	31.0 (28.0)	38.5 (38.0)	.002
Citations	294.0 (453.0)	434.0 (738.0)	.007
h-Index	9.0 (7.0)	11.0 (9.0)	.007
Years of active research	19.0 (11.0)	20.0 (13.0)	.042
m-Index	0.5 (0.2)	0.6 (0.3)	.066

The Mann–Whitney *U*-test was used for all comparisons. Values are presented as median (interquartile range). $P < .05$ indicates statistical significance.

However, the statistical power was lower for the Scopus h-index (77.0%), Scopus citations (77.0%), years of active research (52.9%), and, in particular, the m-index (45.2%). The relatively low power for the m-index indicates that a small gender difference could not be reliably excluded.

Rank-Stratified Analysis

When stratified by academic rank, no statistically significant sex differences were observed for any productivity metric among professors, associate professors, or assistant professors (Table 2). No statistically significant differences were detected when men and women were analyzed separately according to academic rank subgroups, possibly because of the limited sample size, particularly within the female subgroups.

DISCUSSION

This study provides the first comprehensive, nationwide bibliometric analysis of sex distribution and research productivity in academic gastroenterology in Türkiye. Three principal findings emerged. First, women accounted for only 25.2% of academic gastroenterologists, with the lowest representation at the professor level (20.8%). Second, female academics had significantly fewer overall publication and citation counts, lower h-index values, and fewer years of active research than male peers; however, these differences were no longer statistically significant after stratification by academic rank. Third, women held only 18.2% of departmental leadership positions, and only 2 of the 20 board-term presidencies documented since 1986 had been held by women.

The 25.2% female representation observed in this study closely parallels the 21% reported among TSG-registered

Table 2. Research Productivity Metrics Stratified by Academic Rank

Variable	Female	Male	*P*
Professor (female: n = 40, male: n = 152)			
Publications	41.0 (35.0)	48.0 (41.0)	.070
Citations	567.5 (677.0)	727.0 (962.0)	.244
h-Index	12.5 (7.0)	14.0 (8.0)	.172
Years of active research	22.0 (9.0)	24.0 (10.0)	.733
m-Index	0.6 (0.2)	0.6 (0.3)	.072
Associate professor (female: n =25, male: n = 52)			
Publications	21.0 (21.0)	27.0 (17.0)	.105
Citations	153.0 (196.0)	201.0 (178.0)	.349
h-Index	7.0 (3.0)	7.0 (3.0)	.479
Years of active research	14.0 (7.0)	15.0 (9.0)	.426
m-Index	0.5 (0.1)	0.5 (0.3)	.853
Assistant professor (female: n = 12, male: n = 24)			
Publications	10.5 (25.0)	12.5 (9.0)	.631
Citations	48.5 (129.0)	51.0 (88.0)	.679
h-Index	4.0 (6.0)	3.5 (3.0)	.728
Years of active research	10.0 (10.0)	9.0 (8.0)	.631
m-Index	0.3 (0.6)	0.4 (0.2)	.585

The Mann–Whitney *U*-test was used for all comparisons. Values are presented as median (interquartile range). No statistically significant sex differences were observed at any rank level (all $P > .05$).

gastroenterologists by Akkan Çetinkaya et al[3] and is notably lower than the 38% reported in academic radiology by Özer.[2] This difference may reflect the greater procedural intensity of gastroenterology. Kuzuca and Arda[1] reported that the proportion of female specialists ranged from 1% to 33% across 28 Turkish specialties, with the lowest rates observed in procedure-based fields. These findings suggest that the gender gap in gastroenterology may reflect a broader structural pattern affecting interventional disciplines.

Although women were least represented at the professor level (20.8%), the association between sex and academic rank was not statistically significant ($P = .069$). Therefore, this numerical trend should be interpreted with caution. The observed rank gradient may be consistent with the "leaky pipeline" concept described in previous studies.[12,14] However, these findings do not provide statistical evidence to support this interpretation, and a Type II error due to limited statistical power cannot be excluded. Nevertheless, the "leaky pipeline" phenomenon has been documented across multiple countries and medical specialties.[4,6] In the Turkish academic system, advancement to senior academic ranks requires sustained research productivity over many years, often during periods of increased family and caregiving responsibilities. Limited childcare support, the lack of part-time academic positions, and traditional gender expectations may further exacerbate these barriers.[3,15,16]

One of the most important findings of this study was that, although women had lower overall publication and citation counts and lower h-index values, these differences were no longer statistically significant after stratification by academic rank. A similar pattern was reported by Özer[2] in academic radiology and has also been observed in other bibliometric analyses of academic medicine.[4,6,7,14] In addition, no statistically significant difference was observed in m-index values, which account for career duration. However, this finding should be interpreted with caution because the post-hoc power analysis indicated limited statistical power (45.2%) for the m-index comparison; therefore, a small sex difference in career-adjusted productivity cannot be excluded. Taken together, these findings suggest that differences in academic rank and career duration may partly account for the observed overall differences in research productivity. Furthermore, no statistically significant sex differences were observed in research productivity metrics within any academic rank. These findings highlight the importance of supporting long-term academic retention and career advancement among women in gastroenterology.

The low representation of women in departmental leadership positions and the TSG presidency is consistent with findings from the international gastroenterology literature. Leung et al[7] reported that women accounted for only 7.7% of editors-in-chief and 17.4% of editorial board members across major gastroenterology journals. Similarly, Advani et al[15] found that nearly half of female internal medicine residents perceived a "glass ceiling" affecting fellowship and career advancement in gastroenterology. Limited visibility of women in senior academic and leadership positions may reduce access to mentorship opportunities and discourage younger women from pursuing long-term academic careers in gastroenterology.[6,9,12] This cycle may further contribute to the persistent underrepresentation of women in leadership roles.

Gender homophily within academic networks may further contribute to these disparities. Holman and Morandin demonstrated that researchers across the life sciences collaborate with same-gender colleagues more frequently than expected by chance.[13] In academic environments in which men predominate at senior levels, such patterns may limit mentorship, collaboration, and networking opportunities for women, contributing to their lower representation at higher academic ranks.

Several interventions have been proposed to address these disparities, including structured mentorship programs, transparent promotion criteria, parental leave policies, and greater representation of women in leadership and guideline committees.[6,14,15] The recent establishment of the TSG Women in Gastroenterology committee and the election of women as society presidents are encouraging developments. However, sustained progress will likely require broader institutional support and long-term structural changes. Increasing the representation of women on editorial boards, conference committees, and guideline panels may also help enhance visibility and expand leadership opportunities in academic gastroenterology.[7,17]

Several limitations should be acknowledged. First, this was a cross-sectional analysis; longitudinal studies are needed to better assess long-term academic career progression. Second, the bibliometric analysis was based solely on the Scopus database, which may not capture all Turkish-language publications and could therefore underestimate overall academic productivity. Third, the relatively small

sample sizes in the assistant and associate professor subgroups may have limited the statistical power to detect true differences. Therefore, the absence of statistically significant differences in the stratified analyses should be interpreted with caution and not as evidence of equivalence. Fourth, several outcomes were compared without adjustment for multiplicity; therefore, findings with borderline significance, such as years of active research ($P = .042$), warrant cautious interpretation. Finally, the study evaluated academic gastroenterology as a whole and did not separately analyze subspecialties such as hepatology, inflammatory bowel disease, or advanced endoscopy, in which sex distributions and academic career patterns may differ.

Despite these limitations, the study has several important strengths. To the authors' knowledge, this is the first nationwide bibliometric analysis to evaluate sex disparities in academic gastroenterology in Türkiye. The study included academics from a large number of institutions across multiple cities and combined objective bibliometric metrics with assessments of academic rank and leadership representation. In addition, rank-stratified analyses and use of the m-index provided a more nuanced assessment of academic productivity beyond overall publication counts.

CONCLUSION

Women remain substantially underrepresented in academic gastroenterology in Türkiye, particularly at senior academic ranks and in leadership positions. Although female academics had lower overall publication and citation counts and lower h-index values, these differences were no longer statistically significant after stratification by academic rank, suggesting that differences in career progression and long-term retention may contribute more to overall disparities than differences in productivity within the same academic rank. Improving mentorship, leadership representation, and long-term academic support for women may help reduce persistent sex disparities in academic gastroenterology.

Data Availability Statement: The data that support the findings of this study are available on request from the corresponding author.

Artificial Intelligence Usage Statement: This study used ChatGPT to improve language and edit grammar during the preparation of the manuscript. Figures were created using BioRender. However, all content of the study was reviewed and edited by the authors following the use of AI/LLM tools.

Ethics Committee Approval: Ethics committee approval was not required because this study exclusively used publicly available data and did not involve human participants or identifiable personal data.

Informed Consent: Informed consent was not required because the study did not involve human participants or identifiable personal data.

Peer-review: Externally peer-reviewed.

Author Contributions: Concept – G.B., S.L.H.; Design – G.B., S.L.H.; Supervision – S.L.H.; Resources – G.B.; Materials – G.B.; Data Collection and/or Processing – G.B.; Analysis and/or Interpretation – G.B., H.U., S.L.H.; Literature Search – G.B.; Writing – G.B.; Critical Review – S.L.H., Ç.K.

Declaration of Interests: Stephan L. Haas is an International Associate Editor at the Turkish Journal of Gastroenterology, however, his involvement in the peer review process was solely as an author. Other authors have no conflicts of interest to declare.

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