

# We Can Do It!



## **LEADERS** **WOMEN IN HEALTHCARE**

By A/Prof Chow Wan Cheng

I came from a traditional Chinese family and my father sent me to a Catholic Chinese girls' school, hoping that the school would inculcate Chinese culture and traditional values in me. I was consciously aware of *san cong si de* ("three subordinations and four virtues"), which a model traditional Chinese woman was expected to abide by. I regret that I failed to acquire the skill of chess playing, one of the four arts (*qin qi shu hua*, or "music, chess, calligraphy and painting") that any well-brought up Chinese woman should acquire. While my father took good care in bringing up all four of his daughters, there was no doubt in our minds that our father was *the* authoritative and decision-making person at home.

However, what my father had not anticipated were the major changes in mindset and roles of women that took place in communist China during the second half of the 20th century. Also, while my convent school had its rules and traditions, it was also there, in the midst of all the sacrificial nuns and teachers (who were all women, except one), that I saw the conviction, courage and commitment of many women who went about their daily chores with limited resources, contributing to society and humanity, in what they believed in.

So I broke my own rules as soon as I made them. Wanting to adhere to what I believed was the only right thing to do, I thought that I should "know my place" when I finally stepped into junior college and later, medical school and hospitals, where I started interacting and working with many male schoolmates and then, colleagues. But the urge to do my best and what is right has always prevailed. There is always a little voice that nudges me to speak up or step up when things just do not feel right. Many of the good values that I learned in school, which are not women-specific, are equally applicable to me as they are to anyone else.

It may have been that I was simply lucky, or that I lacked specific aspirations, but I do not feel that I have ever had to try harder than others to prove myself at work, nor have I ever been barred from doing any job that I wished to do because I am a woman. My mentor, Prof Ng Han Seong, was as traditional a Chinese man as my father. However, he gave all the guidance and opportunities that I needed in the earlier half of my career. When SMA requested that I write this article on women in Medicine (the second time that they have asked me to do so!), I started to think about and research on the topic of women leadership, specifically in healthcare. As I ploughed through the literature, I could see that this issue does indeed require some attention and concern.

### **Women leaders in healthcare**

An iconic image of Rosie the Riveter flexing her biceps (used to represent American women working in factories during World War II), accompanied by the headline "We Did It!", appeared on the cover of a January 2010 issue of the *Economist*.<sup>1</sup> However, as one reads through the articles published in that issue, one senses more problems

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and concerns than the triumph of the female gender. For example, women made up 50% of the American workforce and 57% of the American college degree holders, with similar trends in other nations in the Organisation for Economic Co-operation and Development. It was also reported that only 4.2% of the Fortune 500 and Fortune 1000 chief executive officers (CEOs) were females. Females tended to do better in the healthcare sector; nevertheless, a similar trend indicating the lack of females in healthcare leadership positions was noted. It was found that females made up the bulk of the workforce in the healthcare industry, but the majority were in the rank and file, and middle management.

The Rock Report III, released in January last year, revealed that 73% of managers and 4% of CEOs of healthcare company were females.<sup>2</sup> A separate report found 78% of the healthcare industry labour force, 70% of medical/health services managers, 19% of hospital CEOs, 14% of board directors of healthcare companies and 0% of CEOs of Fortune 500 healthcare companies were females.<sup>3</sup> In 2012, the Association of American Medical Colleges reported that there was a lesser proportion of women holding full-time higher ranking faculty appointments in medical schools and tenured leadership positions in academic Medicine and science.<sup>4</sup> It was also found that the odds for females to be promoted to senior management in healthcare industries was 52% lower than their male counterparts, after controlling for age, experience, education and training.<sup>5</sup>

This is, however, not the cause for the awakening of some feminist pursuit. Rather, there should be concern for the suboptimal utilisation of human resources at a time of shortage, particularly in the healthcare sector of our country. It is also interesting to note that, in this day and age, there is actually a lack of discriminatory intent towards females by the majority of men and women at the workplace, but many sources in the literature have reported a subtle "second generation" form of workplace gender bias<sup>6</sup> that is associated with the role congruity theory.<sup>7</sup> Many people stereotype ideal gender roles and have preconceived notions of the characteristics of a leader, so they feel that

there is an incompatibility between the roles of females and positions of leadership. A recent study in the UK reported that 35% of the interviewees thought that men make better surgeons, while 5% thought the same of women.<sup>8</sup> In addition, many other studies have shown that both men and women prefer male leaders.<sup>9</sup> Thus, we see the influence of stereotyping, albeit subconsciously, on the advancement of women's careers.

It is true that women leaders may exhibit their roles differently from their male counterparts. However, it has been also recognised in recent years that there can be more than one form of leadership, and one style may suit a particular circumstance or situation better than another. Among others, it was found that women leaders tend to be team building, more persuasive, and more inclusive.<sup>10</sup> They were also thought to be more risk-taking and exhibit a more transformational rather than transactional type of leadership.<sup>9</sup> However, I fear that even stating the above is already stereotyping. In my opinion, whether more women become CEOs or not, is probably less important than the fact that every woman should be given an equal chance to do her best in contributing to society and the community, as well as the opportunity to fulfil her aspirations. After all, there is a leader in everyone, and leadership can be exhibited in every level of our jobs and in every microcosm. Apart from being given a chance at work or to lead, possessing self-confidence and self-belief is the beginning of realising everyone's potentials to the fullest, which we are in dire need of.

### Recognising the challenges many women face

However, it will not be realistic to talk about fulfilling women's potentials without recognising the challenges that many women face: the dilemma of delayed motherhood versus career progression; the disproportionately bigger role that married women tend to play at home; the bigger apportionment of guilt, sometimes self-imposed, if the children do not do well in school; and the loss of momentum on returning to the workplace after temporarily leaving work for family.

For any organisation aiming to scale new heights and remain relevant in today's society, finding the best team, comprising both men and women of various talents and abilities, that can represent the views of and understand the needs of its entire workforce is a major challenge. Personally, I do not believe in setting quotas for a certain gender or a certain community in the workplace or any organisation. It does not bring pride to the beneficiaries, nor does it ensure fairness in the system. Nonetheless, administrative measures and policies at organisational and national levels, that encourage able women to optimise their abilities, are crucial to engage an important aspect of our human resources. There is obviously no easy solution to this issue, and the governments of many developed countries, including Germany and Sweden, are struggling with it as well.

I cannot consider myself successful in many ways, but I owe whatever little I do well in to my enlightened and nurturing parents, teachers and mentors that I have had throughout my life. While we should empower all women, especially after our progressive predecessors have fought hard for the right to education for women, there is a need to put in place a system to ensure our future generations – both boys and girls – will grow up in a wholesome and nurturing environment, to ensure the sustainability of our society. This requires efforts from all of us, but first and foremost, it requires women to see themselves and to be seen by others as able and ready – not only to do their jobs, but also to find solutions to make the doing of these jobs possible. **SMA**

### References

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