

Identifying a gender leadership and management gap in EU academic health centres

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Background

Women's participation in medicine and the need for gender equality in healthcare are increasingly recognised, yet little attention is paid to leadership and management positions in large publicly-funded academic health centres. This study aims to explore and compare the representation of women in leadership and management in European academic health centres.

Methods

An explorative comparative design is used, taking the case of four large European centres: Charité – Universitätsmedizin Berlin (Germany), Karolinska Institutet (Sweden), Medizinische Universität Wien (Austria), and Oxford Academic Health Science Centre (United Kingdom). Material includes public statistics, website information, unpublished data from HR Departments, and an interactive workshop of the authors.

Results

The percentage of female medical students and doctors in all four countries is now more balanced, but women remain significantly under-represented among senior doctors and full professors. All four centres have made progress in closing the gender leadership gap on boards and other top-level decision-making bodies. While country-specific differences related to the welfare state models remain relevant, there are similar trends: gender inequality is stronger within academic enterprises than within hospital enterprises, and stronger in middle-management than at the top level. These novel findings reveal fissures in the 'glass ceiling' effects at top-level management, while the barriers for women shift to middle-level management and remain strong in academic positions.

Conclusions

Setting gender balance objectives exclusively for top-level decision-making bodies may not effectively promote a wider goal of gender equality. Academic health centres should pay greater attention to gender equality as an issue of organisational performance and good leadership at all levels of management, with particular attention to academic enterprises and newly created management structures.

Key messages:

- Comprehensive gender monitoring systems are needed which include management positions.
- Closing a gender leadership gap supports more effective use of health human resources.