Spring Educators Conference Global Women Health Leaders: Unleashing their potential

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Intended learning outcomes



Raise awareness of the research and scale of the challenge around the gender leadership gap globally.



To understand barriers, including intersectionality and enablers which impact on women entering senior leadership positions.



Provide framework of potential early interventions to narrow the gender leadership gap and improve outcomes.



Global Women Health Leaders

Global Women Health Leaders - Scale of the challenge

Women make up >70% global health workforce

But hold only **25%** hold senior leadership roles in high income and less than **5%** in low and middle income countries

Less than 15% of senior academic roles

Need for change

Global health weakened by loss of female talent, ideas, knowledge.

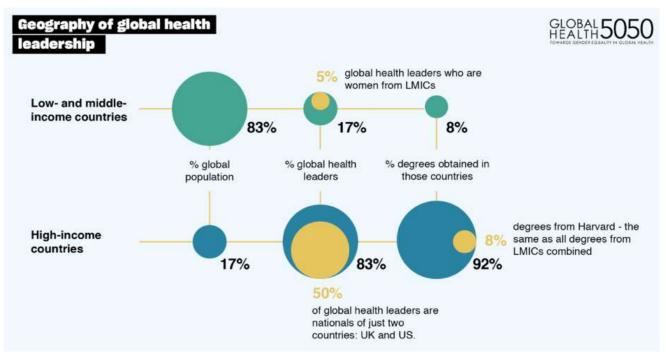
Women leaders often expand health agenda, strengthening health for all.

Gender disparity negatively impacts on health outcomes for women and children globally.

Gendered leadership gap in health is a barrier to reaching Sustainable Development Goals particularly in LMIC and Universal Health Coverage.



Geography of Global Leadership

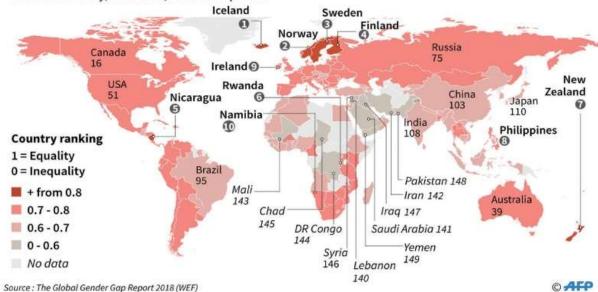




World Economic Forum - Gender Equality Index

Gender equality ranked

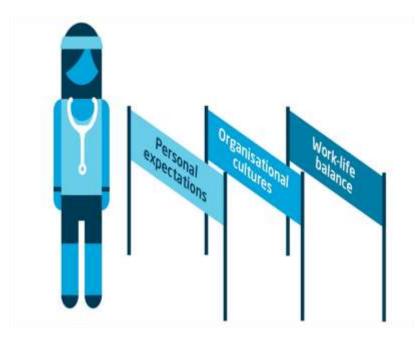
The World Economic Forum measured gender inequality in 149 countries with an index based on 4 criteria: economy, education, health and politics





Women in Leadership in the UK

- > Women in general make up 77% of the NHS workforce but only 37% hold board executive roles and only 13% hold senior academic positions
- > 55% medical students are females but only 32% of consultants are female, compared to 54% of trainee doctors and only 24% hold trust medical directors role





BAME Women in Leadership in the UK

- > Women from a Black Asian Minority Ethnic (BAME) background more significantly underrepresented in leadership roles in the UK.
- > 41% of white senior managers are women, but with only 30% of senior role holders of Asian/Asian British ethnicity being women.
- > Social, cultural, organisational and personal challenges have hindered the progress of BAME women .
- > Having gender balanced and ethnically diverse healthcare leaders will be more representative of the population they serve and help improve patient health outcomes.



Women in Leadership in the UK

> Having women at the top of organisations has been shown to change culture and improve organisational performance and patient centred care.

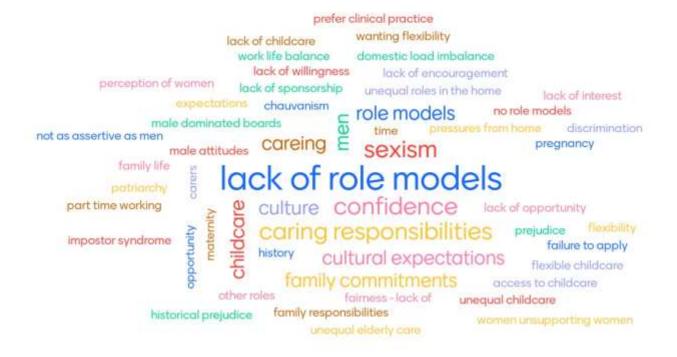


Having women at the top of organisations has been shown to change culture and improve organisational performance.

TheKingsFund0



Global Women Leaders - Barriers

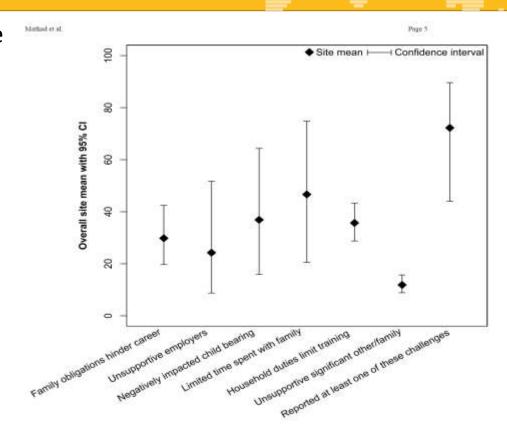




Barriers to Women's Advancement

- > Work life balance reported to be a challenge in 47% women
- Negatively affected childbearing decisions in 37%
- Gender discrimination included made to feel inferior 37% and discouragement from promotions
- > Unwelcome sexual advances in 29%
- > Mathad et al, Lancet 2019





Global Women Leaders - Enablers





Barriers and Enablers

Barriers

- Work life balance, gender discrimination, implicit bias, sexual harassment and assault
- Gender stereotypes, power imbalance and discrimination constrain women's leadership and seniority
- Compounded by the intersection with other identities such as race, religion or caste.

Enablers

- Implementing flexible working arrangements, providing mentorship programmes, and instituting formal polices on gender discrimination and harassment, and gender-specific leadership training
- Gender-specific leadership training to empower women and peer mentorship support groups provide a safe forum to discuss and address barriers.



Intersectionality

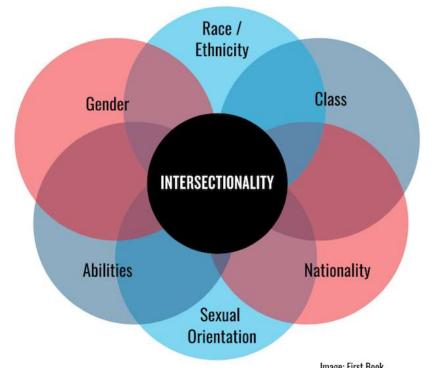




Image: First Book

RCP's work in Advancing Women in Leadership

RCP been addressing challenge of how to motivate and inspire women to aspire towards leadership roles as a key strategic goal.

Thematic analysis emphasised three key themes related to the advancement of women in medicine:

- (1) practical difficulties including childcare needs, lack of timely careers advice, and part-time working;
- (2) social barriers include maternal identity and cultural pressure with respect to a work and family balance
- (3) the importance of building resilience through role modelling, mentorship, and support from others



RCP's work in Advancing Women in Leadership

- > This led to the commissioning of the RCP's 'Lady Estelle Wolfson Emerging Women Leaders Programme', among the consultant and SAS workforce in 2017.
- > The emphasis of this programme is to build leadership *capability*, *capacity*, *credibility* within aspiring female leaders through mentoring and protected gender specific leadership development and networking opportunities.
- > RCP launched the 'Springboard to Leadership: supporting diversity' programme in 2020 which focuses on inclusion to inspire, support and develop leaders from diverse backgrounds.



Global Women Leaders proposal mapped to RCPs vision, mission and principles - 2021

Vision

• To provide the best health and healthcare for everyone

Minster

- Educating physicians and supporting them to fulfil their potential
 - Promoting diversity in members and fellows; promoting women in senior leadership positions
 - Narrowing the differential attainment gap and maximising potential by getting the best out of everyone.
- Influencing healthcare design and delivery
 - Promoting leadership and physician involvement; supporting, international members, fellows, advisors to position themselves for leadership with system design and delivery for patient-centred care.
- Improving health and care and leading on prevention

Principles

- Align with RCP's values of taking care, learning and being collaborative
- Listening to and working with our members, partners, patients and carers
- Ensuring RCP is an accessible, inclusive organisation that benefits from a diversity of experience & thinking
- Fostering local, national and international networks.

Meet the RCP's charitable purpose including benefitting the English public within the main themes:

- Education and training
- Supporting the international workforce
- wider link between UK Health and Global Health



Global

RCP Global Women Leaders Programme

- > Aims to narrow the gender leadership gap globally
- > Mapped to RCP's broader strategic aims including its charitable objectives
- > Based on developing individual & organisational leadership; mentoring support
- Promoting system change to enable and empower women to advance into senior leadership positions
- > Global stories webinar across 4 continents on International Women's Day 2021
- > Focus groups in Pakistan May-June 2021 with key stakeholders and trainees
- Presented parallel session at DEMEC Dec 2021; AMEE Aug 2022
- Programme launched International Women's Day 8th March 2022
- > Funding secured; started pilot in Pakistan 2022; now rolling out to other regions



International Women's Day – 8th March 2021



Global women leaders addressing the challenge to advance women's leadership in medicine

Monday 8 March | 13.00–14.00



Chair: Dr Mumtaz Patel, RCP Global vice president Speakers: Dr Dzifa Dey (Ghana), Dr Zainab Samad (Pakistan), Dr Sima Sharara (Lebanon), Dr Iffat Zafar Aga (Pakistan)





1st Focus Group Pakistan – Stakeholders – 12/4/21

Currently 60:40 split F:M at medical school; goes down 40% in training and then less than 20% in senior leadership and academic positions; worse in rural areas

Individual capability of female doctors less of an issue; more cultural barriers – need huge shift in culture; both organisational and social

Needs organisational buy in with key metrics for organisational change (more seats on boards, academic positions, panels, EDI committee; flexible working acceptance)

Role modelling, mentoring with longer term programmes locally and externally



2nd Focus Group – Student/trainees 12/6/21

Issues around perception of capability and credibility of females – women are more emotional; people would prefer stoicism; having a family seen as a red flag; women's work, opinion and contributions are not valued/ appreciated; bias/discrimination; societal/culture and organisational issues

Need to instill important skills early leadership skills, negotiation, assertiveness, recognizing fighting imposter syndrome; identity issues.

Need for inclusive organisational change and support – accept women as equals and "not just as part of a diversity quota"; women should be members on HR boards; greater visibility of women leaders; clear policies on harassment/ bullying; deal with issues sensitively and privacy; flexible working policies; day care facilities; acceptance..

Peer support groups, role modelling, mentoring are key; gender specific leadership skills; building resilience; perseverance; addressing imposter syndrome; prioritization of values when faced with opposition; deflecting unconstructive criticism; need to normalize compassionate leadership...



Key concepts of credibility in leadership



Credibility is the foundation of leadership. ...

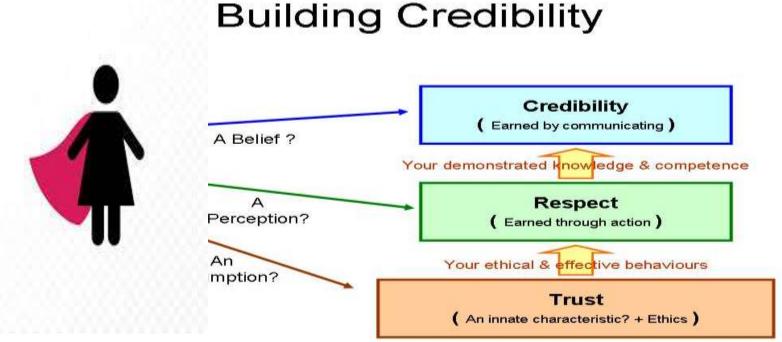


If you want people to follow you, they must believe that:

your words can be trusted,
you have the knowledge and skill necessary to lead
you are personally excited and enthusiastic about
the future direction in which you are headed.



Enabling and enhancing credibility



Empathy unclogs the filter



5Cs of Global Women Leadership

The 5 'C's for Women's Leadership in Global Health







Importance of System Change





RCP Global Women Leaders - Phased plan

Phase 1

- Identify and develop champions and senior doctors to facilitate system change, both men and women
- To provide mentoring/coaching development to champions that will support participants on programme
- Design and deliver sessions in leadership, emotional intelligence, resilience, values, quality improvement and develop a leadership development plan

Phase 2

- Support champions to be able to cascade training and ongoing support locally for programme participants
- Networking opportunities with like-minded peers, creating an ongoing system of support.

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- Cascade system to allow first cohorts to train following cohorts; train the trainer training and support
- If further training needs are identified, these sessions can be designed and delivered into the existing programme structure.

Phase 3

• Evaluate and develop a transferable model based on feedback



Programme launched in Pakistan on International Women's Day 8th March 2022

Global Women Leaders Programme in Pakistan

- > Early discussions with clinicians and stakeholders early 2021
- Focus groups conducted May-June 2021
- Programme launched on IWD in March 2022 in collaboration with Pakistan Society of Internal Medicine & University of Health Sciences
- Champions recruitment and virtual workshops Oct-Nov 2022
- > Individual participants recruitment and f2f workshops April-May 2023
- > Champions networking event 4th May 2023
- > Research themes and workstreams developed by champions
- > Mentoring for individual participants and network building
- > Champions working with stakeholders to drive system/ policy change

Global Women Leaders Programme in Jordan

- > Build on success of the First Jordanian Women's conference Oct 2021 and Pan Arab Women conference in Oct 2022
- > Support of key stakeholders and work in collaboration
- > HRH Patronage Princess Dina ambassador for programme
- > WHO Lead support for capacity building
- > Dr Maisam Akroush and her amazing team for support
- > Develop champions regionally and country wide
- > Support/enable female leaders to drive system/ organisational change
- > Tailored programme to context; cascade model for delivery
- > Ongoing evaluation of impact and success...



Programme launch on IWD 8th March 2023

Focus groups with key stakeholders and trainees/students May 2023

Global Women Leaders Programme – next steps

- > Continue delivery of programme in Pakistan and Jordan
- > Build in train the trainer model to enhance sustainability
- Work with key stakeholders and champions to drive policy and and system change
- > Work collaboratively with organisations WHO, British Council, FCDO
- Current discussions with WHO senior leadership team launch programme in Eastern Europe/ Balkans
- > Plan to launch programme in Iraq in Dec 2023
- > Ongoing evaluation of impact and success...



Quality Impact and Evaluation

Quality Impact	Description of measure	Target Outcomes
Providing women with leadership skills to empower them to apply for senior leadership positions. This will help maximise female talent,	Mentoring and coaching, MBTI for female physicians Feedback following the completion of the pilot	Leadership competency self- assessment before and after the pilot; reflection post pilot. It is expected that all team members will engage with the participants and maintain a leadership development plan.
reduce the gender leadership gap, create a more diverse workforce which ultimately benefits patients and improves health outcomes.	Monitor the number of quality improvement ideas generated. Monitor the mentor-mentee relationship.	Develop a QIP during the programme. Confidence levels in leaderships skills and abilities will increase with mentoring, with women actively seeking leadership
With leadership development women will be encouraged and empowered to position themselves with influencing healthcare design, delivery and quality improvement for better patient centred care.	Promote positive role modelling. Self-rated confidence levels on personal skills, organisational leadership, conditions pre- and post-pilot.	opportunities within the workplace. It will also encourage team working and build relations with staff who may not directly work together.



Global

Planned Framework to reduce the gender leadership gap

Individual

Focus on:

Identity

Lived experience

Emotion, complexity and power dynamics

Tailored to local needs, cultural and social context

Mentoring and coaching

Positive role modelling

Organisational

Understand organisational structures

How to be effective leader within different structures

Team working and roles

Collaborative enquiry, ethics, equity

Quality improvement initiatives to drive organisational change

Developing local champions, networks and supporting each other

Enable system change

Buy in from leaders of organisations and key stakeholders

Work within organisations and across organisations

Integrate changes into policy and process change

Evaluate and demonstrate effectiveness of model

To drive cultural shift and enable system change



Summary - RCP Global Women Leaders Programme

- > Addresses important gender equality issues
- > Mapped to RCP's broader strategic aims
- > Based on developing individual and organisational leadership
- > Promoting system change to enable and empower women to advance into senior leadership positions
- Will help towards preserving female talent, ideas and knowledge and the reducing gender leadership gap
- > This will help improve health outcomes for women and children globally and achieve the Sustainable Development Goals particularly in LMIC and Universal Health Coverage.



Thank you for listening

If you would like more info:

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Would value your feedback and support

And any questions

