The Intersection of Gender, Academic Leadership & Professional Development

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BACKGROUND

Gender as a concept refers to the socio-cultural, political, and economical roles individuals take on and goes beyond biological sex; which refers to 'male' or 'female' characteristics determined at birth. In an academic healthcare setting, inclusivity of all genders is crucial in redressing inequalities that are present in leadership and continuing professional development (CPD), and by doing so will aid in reducing knowledge gaps and spreading awareness. However, women still undoubtedly face challenges and constraints in these fields that prevent them from furthering their academic career (Chuang, 2015).

The Intersection Of Gender, Academic Leadership And Continuing Professional Development (GALP) study aimed to better understand how gender impacts leaders in healthcare and/or health professions education and their engagement in developing their career; thus, providing better insight into how we can support women who learn as a life-long activity.

RESEARCH OBJECTIVES

1. How do leaders in health science engage and stay motivated in continuing professional development?

2. What is the motivation for leaders in academic health science centers to engage in upgrading their skills and knowledge?

3. How does engaging in formal opportunities for professional development impact the trajectory of an individual's career advancement?

4. What is the impact of gender on continuing professional development engagement and uptake in academic health sciences institutions?

METHODOLOGY

To investigate, we used a constructivist grounded theory approach to examine the impact of gender on the motivation behind leaders in academic health sciences, and how engaging in formal opportunities for professional development can impact the trajectory of an individual's career advancement. We first sent out a pre-screening demographic survey and invited eligible leaders in health sciences for one-on-one virtual interviews. The transcribed interviews were then analyzed for patterns through qualitative analysis. Reflexive ethnographic journaling (memos) was also used throughout the analysis to capture any developing insights about the data throughout the process. Our team of researchers met after every few transcripts to code the interviews in a line by line fashion, after which we examined the data via axial coding for themes and insights until reaching a consistency and maturity in results.

Stage	Purpose
Sensitizing Concepts	Identify key frameworks and theories that may inform the coding and conceptual work within the study
Codes	Identifying anchors that allow the key points of the data to be gathered
Concepts	Collections of *codes* of similar content that allows the data to be grouped
Categories	Broad groups of similar *concepts* that are used to generate a theory
Theory	A collection of *categories* that detail the subject of the research

Grounded Theory Framework by Charmaz (2014)

GROUNDED THEORY
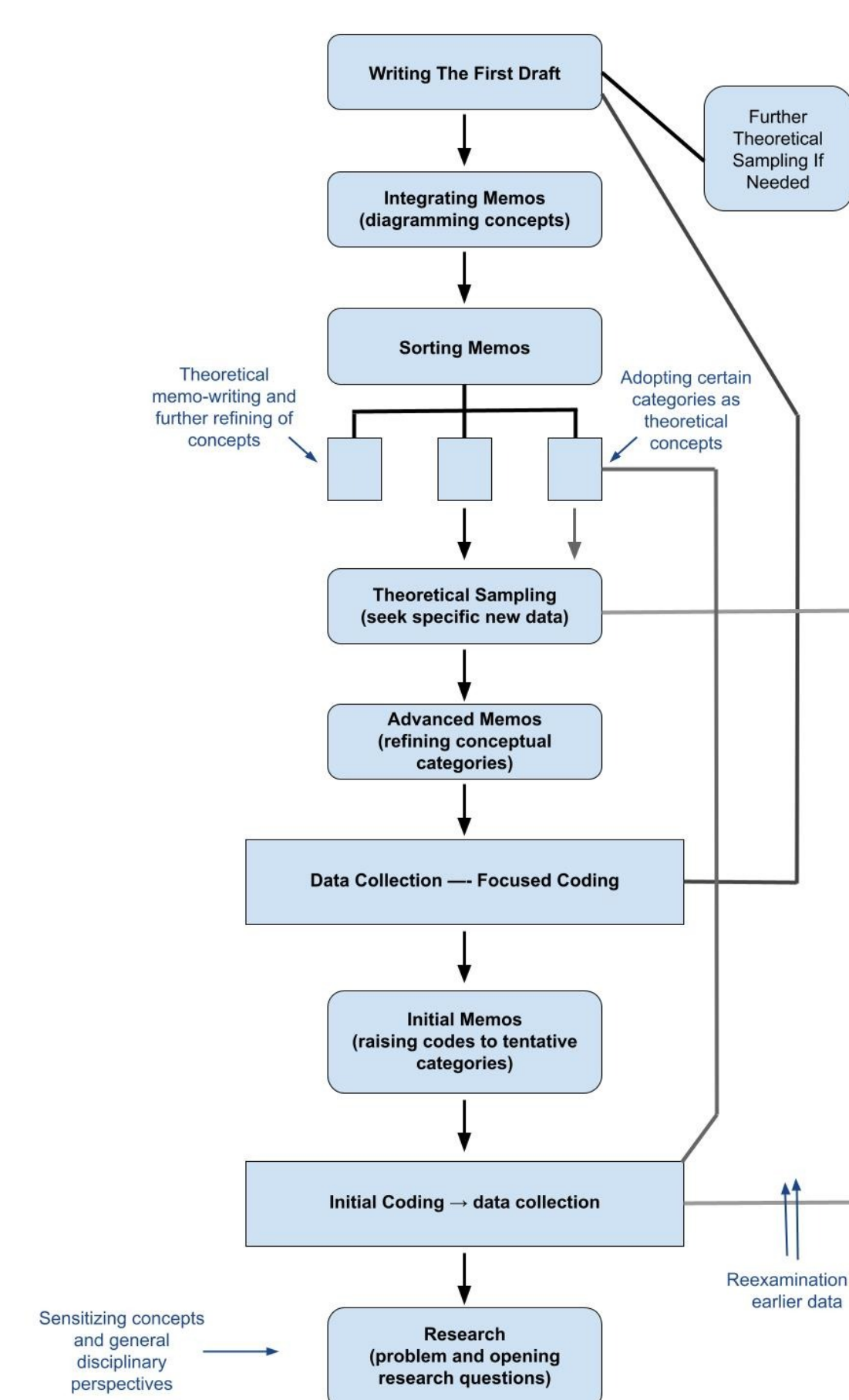
RESULTS

The interview recruitment process resulted in n=20 qualitative interviews. The findings gathered which were most insightful can be separated into three common themes:

- Lack of Female Mentorship
- Importance of Support Systems
- Family and Time Constraints

RESULTS - COMMON THEMES

LACK OF FEMALE MENTORSHIP

"So, living through adversity, leadership fundamentals, coaching and mentoring. And so, I am doing all of those so that I can pass that on to the postdoctoral fellows so they will also become great leaders." **- (P2, Female)**

"We don't think about mentoring the next person. And that is a real problem especially when we are thinking about making leadership roles more accessible and more representative. People don't see themselves in the roles and, they don't feel prepared and then they don't want to take them on." **- (P6, Female)**

FAMILY AND TIME CONSTRAINTS

"I was actually involved in doing some end of life care at that point for a family member. And I couldn't take that on my plate doing extra training on top of starting a new role." **- (P5, Female)**

"I think some challenges come in as you go higher and higher because you know there is more at stake... there are typically fewer women and other equity deserving groups at higher levels. And so, you start to feel more and more isolated." **- (P6, Female)**

IMPORTANCE OF SUPPORT SYSTEMS

"...academia in general [feels] very bureaucratic, hierarchical. The whole process of appointment... I think puts an archaic and undo focus on individual achievement and accomplishment in a way that feels competitive, inefficient... my own preference would be to see a more flexible collaborative nonhierarchical, non-bureaucratic process... with more of a focus on collaboration and team." **- (P18, Female)**

"I think of myself as quite privileged or maybe lucky to actually have a lot of good support with the people that I work with." **- (P3, Female)**

DISCUSSION

LACK OF FEMALE MENTORSHIP

Mentors are individuals who provide guidance for career development and psychosocial support. However, they are typically males of higher status within an organization, making it more difficult for women to identify with mentors and creates barriers in fostering mentoring relationships (O'Brien et al., 2010). As such, female employees unfortunately lack access to information networks, face negative stereotypes, and experience discrimination. This stark contrast amplifies the need for more female mentors to guide future employees of the same gender and alleviate the fear of leading.

FAMILY AND TIME CONSTRAINTS

Family and time constraints may form barriers for women in healthcare or continuing professional development especially after childbirth, where they will typically take on more traditional gender-roles and attitudes in this period of transitioning into parenthood (Chuang, 2015). This burden of family responsibility and household management commonly results in the loss of motivation to participate in CPD. Globally, women of different professions, not just in healthcare, have expressed the difficulty to balance family life and career.

IMPORTANCE OF SUPPORT SYSTEMS

Gender bias in the work environment and classroom is often caused by lack of emotional and institutional support. Training programs should provide women sufficient social contact with mentors, peers, and other support systems to be able to self-discover and develop career-wise (Chuang, 2015). Implementing more female-directed social support systems into leadership and continuing professional development will positively affect women's decisions and ability to partake in such activities.

CONCLUSION

With the level of gender diversity in the field of academic health sciences steadily rising, it is more important now than ever before to work towards closing the gender gap within the professional world. Our study's findings provide important insight on how the gender gap influences health care leaders' motivation in their roles and continuing professional development; thus, the results of our study can also be used to start national and global discourse amongst leaders and professionals in academic health sciences. As for female representation in mentorship, methods such as introducing female role models; having open discussions, and creating interdisciplinary teams of stakeholders in CPD activities will aid in facilitating female mentorship (O'Brien et al., 2010). Moving forward, conducting further research on the intersection between gender, academic leadership, and professional development within the healthcare world will also be critical in providing the tools needed to finally close the long-standing gender gap in the world of health sciences.

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