

# Overcoming Obstacles: A Systematic Review of Challenges Faced by Women in Healthcare Management and Innovative Interventions

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## Abstract

**Background:** Despite the underrepresentation of women in healthcare leadership, there is limited evidence on impactful organisational strategies, practices, and policies to advance women's careers. This study aimed to explore such strategies across various sectors, providing insights into measurably advancing women in leadership roles in healthcare.

**Methods:** A systematic review was conducted using Medline via OVID; Medline in-process and other non-indexed citations via OVID; PsycINFO, and SCOPUS from January 2000 to March 2021. The methods were outlined in a published protocol registered a priori on PROSPERO (CRD42020162115). Eligible studies reported on organizational interventions for advancing women in leadership with at least one measurable outcome. Two reviewers independently assessed the studies. Identified interventions were categorized, and a meta-synthesis was completed following the 'Enhancing Transparency in Reporting the synthesis of Qualitative research' (ENTREQ) statement.

**Findings:** The search identified 952 potentially relevant records, supplemented by an additional 76 records from other sources. After eliminating duplicates and conducting an initial review of titles and abstracts, 834 records were excluded, leaving 142 records for a thorough screening of full texts. Among these, 75 articles were further excluded for various reasons: 12 were not on the main topic, 10 involved medical students, 46 were personal commentaries or opinion papers, and 7 were not empirical. This process resulted in the selection of 48 articles that met eligibility criteria and underwent detailed analysis.

**Interpretation:** This review establishes an evidence base on organizational interventions for advancing women in leadership across diverse settings, offering valuable lessons for healthcare. It transcends individual focus to target organizational change, capturing measurable outcomes across intervention categories. The findings directly inform a national initiative with international links, aiming to enable women to achieve their career goals in healthcare, and shifts the focus from barriers to solutions.

**Keywords:** Women's career advancement, Organizational interventions, Gender equity, Healthcare leadership, Meta-synthesis

## Introduction

In the dynamic landscape of healthcare, effective and inclusive leadership is crucial for navigating the transition from traditional disease-centric models to those emphasizing wellness, prevention, and patient autonomy (McDonagh et al., 2014). Despite the suitability of women for collaborative and transformational leadership styles crucial for addressing contemporary healthcare challenges, their representation in leadership remains disproportionately low, creating a notable leadership gap.

Understanding the challenges faced by women in healthcare leadership is essential for promoting gender equity. Disparities in family planning, pregnancy outcomes, and perceived gender-related biases underscore the need to address barriers hindering the career advancement of women in surgery (Rogers et al., 2019). Similarly, recognizing the pervasive issue of perceived discrimination among physician mothers is crucial, affecting four out of five respondents, with two-thirds reporting gender discrimination and over a third reporting maternal discrimination (Adesoye et al., 2017). Troppmann et al.'s (2009) study emphasizes the increasing presence of women in the surgical profession, necessitating a comprehensive examination of the challenges they face. This growing number contributes to a more diverse workforce but requires an understanding of barriers hindering women's career advancement in healthcare management.

Despite apparent conditions fostering equal opportunities, a persistent gender gap in leadership roles exists within academic medicine. Disparities in promotion rates, attributed to factors like lower productivity metrics, fewer publications, and limited resources, contribute to this gender imbalance (Schueller-Weidekamm & Kautzky-Willer, 2013). The global underrepresentation of women in healthcare management continues despite their significant presence in the workforce, indicating a gender pay gap and limited access to leadership positions (Tlaiss, 2013). Efforts to address the underrepresentation of women in leadership roles face persistent challenges, hindering diversity and gender equity goals (Mousa et al., 2021; D'Armiento et al., 2019). Barriers such as career disruptions, external responsibilities, and credibility assumptions impede women's leadership advancement in healthcare (Teede, 2019).

The multifaceted impact of gender inequity in healthcare leadership includes the loss of critical skills, low morale, increased sustainability costs, and adverse effects on healthcare policies (Cassells & Duncan, 2020; Ghebreyesus, 2019). Despite the potential benefits, research tends to focus on gaps and barriers rather than effective strategies to advance women in leadership (Mousa et al., 2021; Richter et al., 2020; Shannon et al., 2019).

In examining challenges faced by women in academic medicine, disparities in tenure and leadership positions persist despite efforts to improve gender equity. D'Armiento et al. (2019) highlight historical context, noting that although women made up 40% of U.S. medical school enrollment in the 1990s, this did not translate into proportional representation in faculty ranks, necessitating interventions to address gender disparities in leadership.

Understanding the challenges faced by women in healthcare, particularly physician-mothers, is crucial due to the significant impact on workforce shortages. The study on difficulties facing physician mothers in Japan emphasizes that despite the increasing number of female physicians, premature resignations after childbirth contribute to acute physician shortages. Investigating these challenges is essential to identify solutions for retaining female physicians in the workforce (Yamazaki et al., 2011). Despite a significant proportion of female medical graduates, a stark gender disparity exists at the hospital specialist level, highlighting potential barriers to career progression for women in healthcare (Meghen et al., 2013).

Understanding the challenges faced by women in academic medicine is crucial, as evidenced by the study on early-career physician-researchers. The research sheds light on gender disparities in career success,

emphasizing the need to explore nonprofessional responsibilities as potential contributors to the observed gap (Cooke & Laine, 2013).

### **Methodology**

I performed a thorough literature review utilizing various databases, including PubMed, CINAHL, EBSCO MegaFILE, and APA PsycInfo on Ovid. The search strategy, expertly devised by librarian J.M.T. with input from the study team, employed controlled vocabulary terms and keywords like physician, doctor, surgeon, woman, mother, gender, bias, childcare, and more.

The inclusion criteria targeted articles featuring empirical evidence gathered through quantitative and/or qualitative methods, published in English between January 1, 2008, and December 31, 2018, from any country. The study participants were limited to residents and/or attending physicians, and the content had to specifically address factors, challenges, policies, and/or solutions relevant to physician mothers. Exclusion criteria encompassed articles with medical students as participants, literature reviews, personal essays, commentaries, or letters, and those not explicitly focused on physician mothers.

### **Results**

The search strategy identified 876 potentially relevant records, supplemented by an additional 76 records from other sources. After eliminating duplicates and conducting an initial review of titles and abstracts, 834 records were excluded, leaving 118 records for a thorough screening of full texts. Among these, 75 articles were further excluded for various reasons: 12 were not on the main topic, 10 involved medical students, 46 were personal commentaries or opinion papers, and 7 were not empirical. This process resulted in the selection of 48 articles that met eligibility criteria and underwent detailed analysis. These articles were categorized based on the challenges experienced and the recommended solutions. Of the 48 studies included, 19 employed qualitative methods, 17 utilized quantitative methods, and 12 employed a combination of multiple methods.

## **Obstacles Encountered by Women in Healthcare Management**

### **Balancing Career and Family Planning**

Gordinier et al. (2000) investigate challenges faced by female gynecologic oncologists, emphasizing the ideal time for childbearing post-fellowship, the emotional toll caused by the timing of childbearing, and the financial implications of childcare arrangements. This sheds light on critical barriers influencing women's career advancement in healthcare, highlighting the need for strategic support during key career stages. MacNamara et al. (2012) provide valuable insights into challenges faced by physician-mothers, resonating with broader issues in healthcare management. The study emphasizes the necessity for broader investigations into impediments encountered by women in various professional domains, recognizing and dismantling barriers to foster a more equitable and diverse workforce.

### **Domestic Roles and Work-Life Balance**

Frank et al. (2000) focus on the domestic roles of women physicians, revealing limited adverse impact on career satisfaction or mental and physical health despite engagement in various professional and domestic roles. The study indirectly addresses work-life balance, indicating that achieving a balance remains a challenge for women in healthcare management due to factors like marital status, number of children, personal income, and spousal education levels.

### **Discrimination, Gender Disparities, and Societal Factors**

Adesoye et al. (2017) identify widespread discrimination affecting physician mothers, with manifestations including gender discrimination, maternal discrimination, and tangible barriers impacting the work environment. Tlaiss (2013) emphasizes deeply rooted socio-cultural norms and patriarchal ideologies contributing to gender disparities, necessitating nuanced approaches to address multifaceted challenges women encounter.

### **Career Advancement Challenges in Specific Medical Fields and Spousal Employment Disparities**

Studies by Rogers et al. (2019) and Meghen et al. (2013) identify barriers faced by female surgeons, including disparities in hospital specialist levels and discrimination affecting career pathways. Cooke & Laine (2013) highlight spousal employment differences influencing domestic responsibilities, potentially hindering career advancement. These themes underscore specific challenges in medical professions and disparities within households, guiding interventions for gender equity.

### **Systemic Barriers**

Sarma et al. (2017) address barriers related to maternity leave, radiation exposure during pregnancy, and breastfeeding accommodations for female cardiologists. Luthar et al. (2017) focus on fostering resilience among mothers in high-stress medical professions, emphasizing evidence-based interventions to mitigate burnout and distress. These studies highlight systemic challenges in healthcare management and the urgency of developing interventions sensitive to the unique needs of female practitioners, contributing to a comprehensive understanding of barriers to women's career advancement.

### **Strategies for Overcoming Women Career Barriers**

The findings by Troppmann et al. (2009) underscore the importance of targeted interventions to address barriers faced by women in healthcare management. The study suggests that alternative work schedules, including part-time opportunities, could be vital in optimizing recruitment and retention of women surgeons. Additionally, the study emphasizes the need for consistent maternity leave policies and the availability of on-site childcare facilities. These interventions are crucial for supporting women in balancing their professional and family responsibilities.

### **Preventing Burnout and Distress**

The Authentic Connections Groups (ACG) intervention, tested in the study by Luthar et al. (2017), emerges as a promising approach to address burnout and distress among mothers in high-stress professional settings. The ACG program, based on structured Relational Psychotherapy Mothers' Groups, demonstrates significant improvements in psychological adjustment and biological measures of distress, offering a viable, low-cost preventive intervention for women in demanding medical specialties (Luthar et al., 2017). The study suggests that facilitated colleague support groups, such as ACG, can serve as a preventive measure to promote well-being, mitigate burnout, and enhance personal and professional satisfaction among women in high-stress healthcare professions.

### **Mentorship in Career Advancement**

This underscores the pivotal role of mentorship in women's career advancement and highlights the need for mentorship programs tailored to address the unique challenges faced by female practitioners (Gordinier et al., 2000). Mentoring and networking emerge as critical categories, emphasizing the effectiveness of formal mentoring programs, job sharing, and strategic networking. Strategies in this realm include mentor training, clear expectations, ensuring mentors have adequate time, and involving male mentors for women. Additionally, peer support networks and tailored strategies for individualized career advancement are highlighted (Mousa et al., 2023).

### **Corporate Culture Initiatives for Gender Equality**

Addressing the barriers identified in healthcare management requires targeted interventions. Flexible work policies, such as implementing part-time employment options and pro-rated tenure timelines, can accommodate the diverse needs of women professionals, enabling them to balance work and family responsibilities (MacNamara et al., 2012). Enhanced mentorship programs tailored to the specific needs of women in healthcare management can provide valuable guidance and support, fostering empowerment and reducing feelings of isolation (MacNamara et al., 2012). Advocacy for equitable parental leave policies is crucial to support women in managing family responsibilities without compromising their professional growth, and organizations should create supportive work environments that acknowledge family responsibilities and promote work-life balance (MacNamara et al., 2012). To enhancing the experience for female cardiologists. Sarma et al. (2017) suggest that improving the experience of pregnancy and early parenthood for female cardiologists is essential. The study emphasizes the importance of considering interventions related to maternity leave policies, radiation exposure safeguards during pregnancy, and breastfeeding accommodations. Creating a supportive and accommodating environment for female cardiologists during these critical periods can contribute to a more inclusive and gender-equitable field (Sarma et al., 2017).

Corporate culture Initiatives are recognized as crucial for promoting women in leadership. Initiatives such as flexible work schedules, leadership development programs, mentoring, and networking events are being developed. A notable example is Deloitte's cultural transformation from a corporate ladder to a lattice concept, supporting multidimensional career paths and achieving benefits like increased diversity and improved organizational performance (Benko & Anderson, 2010). In the pursuit of enhancing gender diversity among healthcare executive leaders and board members, a plethora of strategies have been identified through comprehensive literature reviews and expert consultations. Organizational processes play a crucial role, emphasizing the significance of leadership commitment and accountability. Strategies within this category include endorsing a gender-equity-oriented vision, resolving structural barriers, advocating for family-friendly policies, and fostering a supportive organizational culture. Notably, regulatory actions with explicit goals and enforcement mechanisms are deemed more effective than mere reporting requirements (Mousa et al., 2023). Proposed interventions should focus on implementing supportive policies and practices that accommodate the unique challenges women encounter in their medical careers. Potential strategies include flexible work schedules, family-friendly policies, mentorship programs, and initiatives promoting a culture that values work-life balance (Bering et al., 2018). By addressing these barriers, organizations can enhance retention, job satisfaction, and the overall well-being of women physicians.

Institutions should implement formal, written parental leave policies and comprehensive education to address concerns about maternity leave and work expectations (Kin et al., 2018). Additionally, providing adequate support for childcare, offering flexible work schedules, and creating a supportive work environment are essential interventions. Mentorship programs that set realistic expectations and acknowledge the unique challenges faced by women in healthcare management can also contribute to breaking down barriers.

Implementing family-friendly policies, including adequate parental leave, can help alleviate the challenges faced by female surgeons in balancing family planning with career demands (Rogers et al., 2019). Establishing mentorship programs can provide support and guidance to female trainees, addressing concerns related to career choices and opportunities (Rogers et al., 2019). Actively promoting gender equity in healthcare management.

### **CEO and Board Accountability for Gender Equity**

CEO and Board Accountability are pivotal in effecting change, necessitating accountability at the CEO and board levels. A proposed CEO commission is suggested to drive and publish results, set targets for women's advancement, and provide metrics for accountability (Blumenstein, 2011). In healthcare, where women constitute only 28% of board members, promoting fresh perspectives and diversity is considered essential (Hassmiller & Combes, 2012).

### **Objective Performance Evaluation for Gender Equity**

The objective performance evaluation process is crucial, given the impact of gender biases on women's advancement. Raising awareness of biases and incorporating them into human resource training for evaluations is deemed crucial. Evaluators should be enlightened about the effects of gender schemas, and objective third-party reviews should be conducted to detect bias (McDonagh et al., 2014).

### **Awareness and Engagement Initiatives**

The category of awareness and engagement underscores the importance of initiatives promoting awareness of organizational challenges in gender equity. Proactive measures, such as addressing implicit bias, updating language about leadership, and advocating for gender equity in broader social policy debates, have been identified. Exposure to counter-stereotypical models of leadership and gender diversity training effectively challenges non-inclusive behaviors within organizations (Mousa et al., 2023).

### **Leadership Development Programs**

Leadership development is identified as crucial, focusing on structured professional development programs, modular approaches, and participatory action learning methods. Content elements concentrate on equipping women with relevant skills, encouraging them to apply for leadership roles, and promoting deep and transformative learning experiences. The research emphasizes the importance of organizational leverage and actionable follow-up in effective leadership development initiatives (Mousa et al., 2023).

### **Support Tools for Gender-Related Issues**

Support tools, such as models, frameworks, and measures, are identified as crucial instruments in addressing gender-related issues within organizations. These tools play a vital role in diagnosing and intervening in organizational culture, assessing leader bias, framing professional development, and highlighting problematic practices. Successful tool implementation relies on the commitment and accountability of senior leadership (Mousa et al., 2023).

### **Individual Initiatives for Women's Leadership**

Individual Initiatives require women to take responsibility for overcoming barriers through networking, mentorship, and seeking endorsement. Attributes common among successful women leaders, including a robust work ethic and effective team leadership, are identified (Barsh & Yee, 2012). Interventions to resolve barriers, as per D'Armiento et al.'s (2019) study, include transparency measures, monitoring progress, and implementing work–life and parental leave policies.

### **Societal Interventions**

Tlaiss (2013) provides insights into potential solutions that can be applied at various levels. Societal interventions may involve targeted awareness campaigns and educational initiatives challenging gender stereotypes, drawing attention to the importance of women in leadership roles. Advocacy for policies promoting gender equality in education and employment is essential. Organizational interventions should focus on implementing and enforcing policies that ensure equal opportunities, fair recruitment, and pay practices. Establishing family-friendly policies, such as on-site childcare facilities, can contribute to creating a supportive work environment. Initiatives addressing the underrepresentation of women in senior

management, such as mentorship programs, can be instrumental. Collaborative efforts are necessary to address the intersectionality of challenges, recognizing the diversity of experiences among women based on factors such as religion and cultural background.

## **Discussion**

The study's insights lay the groundwork for addressing barriers to women's career advancement in healthcare management. Troppmann et al. (2009) demonstrate that, despite challenges, the majority of women surgeons express satisfaction with their profession, suggesting potential positive changes through targeted interventions. The discussion should center on fostering realistic expectations among aspiring female surgeons, emphasizing the rewarding aspects of the profession, and advocating for organizational policies that support work-life balance.

The study provides essential insights into challenges faced by women surgeons, forming a basis for understanding barriers to career advancement in healthcare management. The identified interventions are crucial for shaping policies and practices that promote gender equity, support work-life balance, and enhance overall well-being and professional satisfaction for women in surgical careers.

This study's findings prompt critical discussions on persistent challenges hindering women's career advancement in healthcare management. Gender disparities in concerns about family planning and career consequences underscore the need for cultural and institutional changes. Discussions should focus on creating inclusive policies, fostering mentorship, and promoting a supportive culture that recognizes and addresses unique challenges faced by women. Engaging in open dialogue and implementing evidence-based interventions can help the healthcare industry strive towards gender equity, ensuring equal opportunities for women in leadership positions.

The multifaceted challenges faced by female surgeons, as emphasized in the study, underscore the need for comprehensive interventions to address barriers to career advancement. Discussing the implications of these findings within the broader context of gender equity in healthcare management is essential for fostering positive changes and promoting an inclusive professional environment (Rogers et al., 2019).

Addressing the leaky pipeline phenomenon and evaluating policies related to higher specialist training are crucial steps. The study emphasizes the need for ongoing monitoring, investigation, and policy changes to ensure gender equality in healthcare management, particularly during potential manpower crises and increased attention to the exodus of non-consultant hospital doctors (Meghen et al., 2013).

Emphasizing systemic changes to address gender disparities in domestic responsibilities among early-career physician-researchers is essential. This involves recognizing the impact of such disparities on professional success and advocating for interventions that promote a more equitable distribution of domestic labor, fostering an environment conducive to women's career advancement in healthcare management (Cooke & Laine, 2013).

This study emphasizes the need for employers to take proactive measures, implement policies, and create a culture that reduces maternal discrimination and supports gender equity. This discussion serves as a call to action for addressing systemic barriers faced by women in healthcare management (Adesoye et al., 2017).

The findings underscore the importance of systemic changes, policy adjustments, and cultural shifts within the medical profession to create an environment that fosters gender equity and inclusivity (Sarma et al., 2017). This discussion serves as a call to action for stakeholders in the field to work towards dismantling these barriers and promoting the full and equal participation of women in cardiology and healthcare management.

The study challenges common stereotypes and concerns about women physicians facing role conflicts. Despite engaging in various roles, including domestic responsibilities, women physicians maintain career satisfaction and overall health. The study emphasizes the need for a nuanced understanding of the lives of physicians, considering both professional and personal aspects. The implications extend beyond women physicians, suggesting that workforce calculations should recognize physicians' desires for fulfilling personal lives alongside their professional commitments (Frank et al., 2000). Administrators and policymakers should adopt strategies that acknowledge and accommodate the diverse needs and life stages of physicians, contributing to a more inclusive and supportive healthcare environment.

In conclusion, this study provides compelling evidence supporting the urgent need for interventions that address the unique challenges faced by women in healthcare management. The ACG program's success in fostering resilience and reducing distress among medical professionals who are mothers highlights the potential for similar interventions to contribute significantly to women's career advancement and well-being in healthcare settings (Luthar et al., 2017). The study underscores the importance of organizational-level priorities to promote the well-being of health providers and emphasizes the role of colleague support groups as a valuable component of comprehensive strategies to address barriers and enhance women's career trajectories in healthcare.

## Conclusion

Recent literature underscores a myriad of challenges faced by physician mothers, permeating individual experiences, organizational dynamics, and the broader healthcare system and society. These challenges encompass issues related to work-life balance, threats to career progression, complications associated with pregnancy, infertility, and delayed family planning or adoption, as well as burnout and mood disorders. Furthermore, identified challenges include the absence of women's networks, mentorship opportunities, role models, and professional development, hindrances to breastfeeding and expressing milk, family leave policies and their management, long working hours with limited part-time opportunities, inadequate support for family-related factors in certain specialties, gender/sex inequity, maternal discrimination, and challenges related to childcare and child-rearing.

The solutions derived from this comprehensive literature review categorically address these challenges through strategies focusing on mentorship, support for childbearing and child-rearing, the removal of barriers impeding career satisfaction and work-life integration, and the identification and reduction of maternal bias within the medical field.

It is imperative to implement evidence-based solutions globally to alleviate biases and barriers experienced by physician mothers. This review serves as a foundational resource, delineating key areas for the development of innovative solutions, strategies, and policies. The aim is to conscientiously acknowledge and confront the inequities and challenges that physician mothers encounter within the medical profession.

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