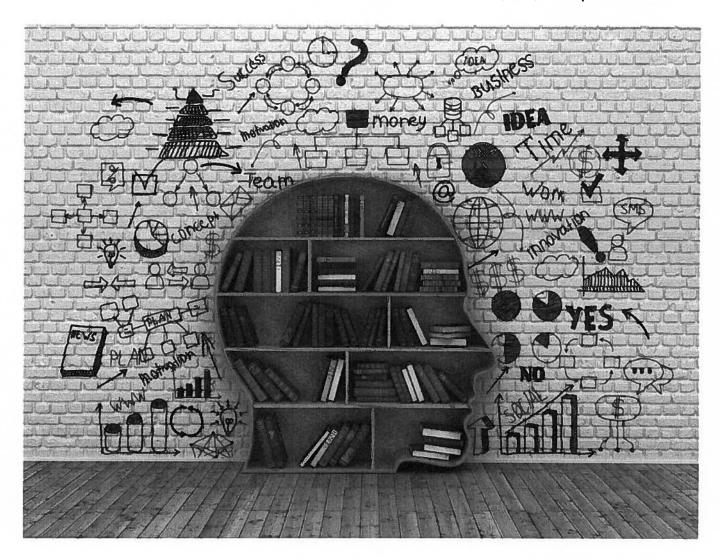
Using Leadership Alchemy to Leverage the Potential of Women in Medicine

Article by Helane Fronek, MD, FACP, FACPh, and Deborah Munhoz, MS, PCC | 10/02/2016



An accomplished physician who had operated her practice, hosted TV programs and planned medical meetings was asked to chair a committee in her medical specialty. "I don't think I have enough experience," she replied.

Like this physician, women leaders can make assumptions about their abilities, power and what it means to be a leader that cause them to limit their contributions. Because nearly 50 percent of medical students are women and because women

provide a unique perspective that encourages a more inclusive culture, enhances the effectiveness of organizations and improves the bottom line, it's imperative that health care organizations support women in developing leadership skills and accepting leadership positions.

The reality is that women hold only 16 percent of top-tier leadership positions. What's holding women back?

Limiting assumptions about leadership

We each have assumptions about what it takes to be a leader. Living in a culture of extroversion, the leaders we see are often charismatic and exude strength and decisiveness. If we don't have these characteristics, we assume we cannot be effective leaders.

The physician asked to lead the committee believed she had to know everything about its topic before she could become a leader. Other physicians are reluctant to volunteer for leadership positions because they feel they are too young, too old or a member of a minority group.

Know your strengths

Each of us has a unique life experience resulting in personal and character strengths that can be beneficial in leadership roles. We might have learned how to inspire and lead others through participation in childhood or collegiate organizations. People and project management skills might have come from prior work experience. An ability to create and effectively communicate a vision might have been honed through participation in civic organizations.

Difficult situations can also result in leadership strengths. Personal hardship often develops resilience. Overcoming learning disabilities requires tenacity and creativity. Personal loss nurtures compassion.

Others can be more aware of our strengths than we are. We often downplay our strengths and believe they aren't a big deal. Ask your friends, colleagues or patients what qualities of yours have been helpful to them — these may reflect strengths you aren't aware you have.

Transform your deficits into leadership strengths

Even characteristics we believe are deficits can actually provide strength in leadership roles. This is what we call "leadership alchemy."

Many of our women physician clients say they believe they are too introverted to be effective leaders, that they don't have the charisma and dynamism that will inspire people to follow them. Extroverts often dominate conversations. They frequently

crowd out others' opinions, leading to a loss of engagement and depriving the group of what might be the most creative and brilliant ideas. Introverts, by nature, encourage others to contribute so all ideas are brought to the table.

A frequent fear of women is that they don't know enough. Yet leadership requires a different skill set from actually doing the work. Therefore, the leader not only doesn't need to know everything about the subject, but also it's often better if she doesn't. If we think we know everything, we ask fewer questions and fail to think outside the box or challenge the status quo.

Some women believe their concern with the impact of their decisions on others will undermine their ability to make difficult choices. In fact, when the leader shows she understands the impact of her decisions on her team, she builds a culture of inclusion. Discussing this impact adds another, often important, perspective to the conversation.

A future with more women leaders

Medicine is undergoing tremendous change, causing many physicians to feel disempowered and negative. We believe that with change comes an opportunity for a new way of operating. As Marshall Goldsmith says, "What got you here, won't get you there." We need more physicians to step into leadership and bring diverse interests, experience and strengths. Encouraging women to challenge their limiting assumptions, know and effectively leverage their strengths, and even transform traits they believe are deficits into leadership strengths will help them contribute their considerable leadership abilities so we can create a new culture in medicine that reflects the best of all of us.

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