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## Gender stereotypes: eroding leadership barriers for women



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The persistence of gender bias and stereotypes in organisations, and in society at large, is a key reason deterring women from achieving leadership roles. Counter-stereotype exemplars and influential male champions are critical to eroding leadership barriers for women, according to an article to appear in the *Journal of the American College of Radiology*.

The article author, Carolyn C. Meltzer, MD, Professor and Chair, Department of Radiology and Imaging Sciences at Emory University School of Medicine, narrates that in her career, she has been the “first woman” in many organisational leadership positions: first woman vice chair for research, first woman chair, first woman society president, among others.

“Our general societal notion of leaders is that they are assertive, confident, and ambitious, traits more commonly associated with masculine attributes,” the author points out. “In the military, as in radiology, the traditionally and long-standing masculine leadership hierarchy reinforces our bias of women leaders as incongruent with the role.”

Moreover, the intersectionality of gender and race amplifies stereotype bias for women of colour, resulting in feelings of isolation and marginalisation. External social and familial pressures, the author says, may further add to this tightrope walk that many women professionals experience.

Research has shown that exposure to counter-stereotype exemplars can be powerful in their ability to defuse gender stereotypes. One study (Dasgupta and Asjari) demonstrated in an academic setting that women exposed to female leaders were less likely to express automatic stereotypic beliefs and furthermore that this effect was mediated by the frequency of exposure to women leaders.

“As we see more women leaders arise in male-dominated fields like radiology, the impact of gender bias should be mitigated,” Dr. Meltzer writes. “Indeed, the more women in leadership positions, the more accepting we will be of a range of effective leadership behaviours among women.”

A concept that has received attention in recent years, the author notes, is whether women may be especially well suited for developing into transformational leaders. Today's modern organisational structures have more flattened hierarchies that value communal features, with less emphasis on highly authoritative style of leadership. And women tend towards a more democratic, collaborative leadership style, which is conducive to the transformational leader that is increasingly sought in this era of rapid change in healthcare environments, according to Dr. Meltzer.

Also, women who embrace leadership self-efficacy, personal mastery, and self-esteem are likely to be both more comfortable and more successful in their leader roles. The essence of self-efficacy, the author explains, is confidence in one's abilities fuelled by a strong identity and sense of purpose that is aligned with personal values.

“Self-efficacy reinforces the emergence of transformational leaders,” the author writes. “I strongly encourage women to develop their own leadership styles that are both authentic and well aligned with their values. This approach can positively alter our traditional perceptions of high-functioning organisations and shape them from within.”

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