



ORIGINAL RESEARCH PAPER

Radio-Diagnosis

GLASS CEILING EFFECT AMONG WOMEN IN LEADERSHIP POSITION IN HOSPITALS

KEY WORDS: Glass ceiling effect, women, leadership, hospitals

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ABSTRACT

The aim of the study was to explore the glass ceiling effect faced by women leaders in hospital. The study was conducted on a population from the state of Kerala and Delhi, whereby fifty- three participants filled out the screening questionnaire, out of which ten participants were screened out to be a part of the qualitative study using semi-structured interviews. The sample consisted of women in leadership position for at least more than a year. Certain areas were explored, which lead to a finding that the women in leadership positions face a plethora of issues at workplace revolving around aspects like overwork, challenges faced, relationships in workplace and employees, discrimination faced and the expertise in the field etc. The major aspect that was brought into focus was that women's gender denies them the best opportunities.

INTRODUCTION

In terms of humanity's collective experience and widely held views about leadership, rule of law, and gender, which have always favoured men and have been pervasive across time and cultures, women rulers have been the exception. For maximum effectiveness, organisations need excellent management and strong leadership. The need of the hour today is leaders who will question the current quo, paint a picture of the future, and motivate their team members to work toward the goals they have set. Subordinates help the leader achieve his or her goals. A leader is given power by virtue of his position. A leader achieves willing obedience by utilising one or more power bases such as expert power, referent power, reward, and coercive power.

Glass ceiling is a result of sexism, when women face discrimination or barriers to career advancement solely because of their "female" sexuality. The attitudes about duties performed by a particular gender are known as gender role attitudes or gender ideology. Their opportunities for advancement, compensation, and promotions are not comparable to the male counterparts. According to previous research conducted in Punjab, the age, education, position and income were found to make no difference in the perception of female staff members regarding predominance of glass ceiling where the results revealed that the glass ceiling still exists in modern Indian society (Sharma, S., & Sehrawat, P., 2014).

Gender stereotyping is the process of judging males and females based on their culturally prescribed roles and then categorising them, which limits the prospects of both males and females. Women appear unable to climb past the lowest rung of middle management, but could be seen that the "invisible glass ceiling" or the barriers to advancement are cultural rather than personal. It is wreaking the most havoc on women's career aspirations and opportunities. It could be seen that there were numerous comments made about the degradation of leadership positions as women entered it coupled with promotions being given to the male counterparts, though the women deserved it more. There is an unseen barrier there that can only be sensed. Despite having identical degrees, skills, and experience, it prohibits women from advancing up the corporate ladder because they are women. The previous studies indicated that there exists a significant glass ceiling effect and just two of the 257 companies in the sample's chief executive officers were women (Pai, K., & Vaidya, S., 2009).

Glass Ceiling Effect

Glass ceiling is a worldwide phenomenon, but its nature and severity differ across different sectors, industries, nations, and organisations. The majority of studies are focused on a

single industry or group of businesses.

India's economy is closed and collectivist. It has a varied range of cultural origins, driven by complex societal standards that define gender roles. In the Indian culture, women are treated unfairly in real life despite being respected for their superhuman abilities. In India, matriarchal and patriarchal families both coexist. Therefore, it is crucial to examine the glass barrier in the Indian context in order to have a deeper knowledge of the opportunities offered for working women as well as the challenges they face. This is because of India's diverse cultures and dynamic economy.

At different levels of the hierarchy, people comprehend and experience the glass ceiling differently. It is clear from the literature that many researches have used a sample of only "women employees" to attempt to comprehend the issue. In order to obtain data and knowledge, the current study solely includes women (in leadership position) as the sample because it acknowledges the significance of the hierarchy level and how it affects their growth in career.

Role Of Gender In Leadership Positions

Since a very long time, the gender ideology has remained mostly unchanged. Males' fields are job and while females are to look after home and do childcare, and for reasons that aren't clear. It is a general rule that men have greater authority than women in practically every area of life. But despite this, many nations have attempted to establish a democratic and economic concept of gender equality to both men and women in comparable areas, be it at work or at home. As a result of parental techniques or other influences like friends, school, or culture, we tend to construct schemas and organise information in our brains. For instance, when we hear the words, a politician in a male body quickly comes to mind, but when we say "maid," we imply a picture of a woman. Based on the period of time, ideologies can be categorised. The gender ideology has mostly not altered for a very long time. Greater workplace equality is something that women want. Women and gender inequalities have therefore become the most crucial issues to take into account in order to attain workplace equality. Previous research on Glass Ceiling Effect among Radiologic Technologists it was found that women believed that men received higher pay for doing the same job and outside of decisions regarding promotions, it appeared that gender bias is pervasive and that some illegal actions do occur in the occupational setup Belinsky, (S. B., & BLAGG, J. D., 2011).

METHODOLOGY

The purpose of the qualitative phenomenological study was to learn more about how women in leadership positions were affected by the glass ceiling as they advanced in their careers

and to identify experiences they had related to it in the hospitals.

OBJECTIVES

1. To understand the glass ceiling effect among the women in leadership position working in hospitals.
2. To identify and explore the various challenges experienced by women in leadership positions.

The participants were selected from hospitals in Kerala and Delhi that represented the female leaders in healthcare sector. Hence, the sample size was 10 (N=10) achieved after screening 53 participants. Purposive sampling technique was used to select the participants. Female healthcare leaders like nursing home administrator, health information manager, senior nursing supervisors, senior doctors etc. who are married and are in a leadership position in Delhi at least for the past one year are included in the study.

A google form was sent out to the female healthcare staffs working as leaders in hospitals at least for the past one year. The form contained consent form along with a demographic sheet created on Google Form was sent for the participants to sign and fill. questions, which were taken up by participants. The answers given by the participants were interpreted, based on which, the eligible participants were taken into in-depth interview. The interviews were performed utilising a previously created questionnaire that was approved by experts. On obtaining the agreement to participate in the study by the participant, the researcher, decided the time, mode and location of the interview.

Once it was confirmed that the participant had comprehended all pertinent instructions regarding confidentiality, participation, and aims, only then was the interview conducted. To make sure the participants understood the premise, goals, audio recording, and participation, a signed, informed consent was taken. The locations of the interviews were chosen to be convenient for both the participant as well as the researcher. With the participant's consent, the interviews were audio recorded and then transcribed. The data, audio recordings of the interviews, and corresponding transcripts were kept in the data as meaningful chunks that were processed for better understanding.

The collected data was first transcribed and then read through to gain familiarity to the context. This was done with the intention to gain a better idea about the entire data set. Once familiarity was gained, the data was further clustered and coded, out of which themes were developed. The themes were then merged together with similar ones and recorded to understand the meaning that answered the research questions.

Analysis And Interpretation Of The Data

Table: Showing the organising and basic themes under the global theme of Glass ceiling effect experienced by women leaders in hospitals.

Global theme	Organizing theme	Basic theme
1. Overwork	1.1 Working overtime	1.1.1 Burnout
		1.1.2 Work-life balance
	1.2 Feminine nature	1.2.1 Perception
		1.2.2 Helping mentality
2. Expertise	2.1 Experience	2.1.1 Working years
		2.1.2 Competence
	2.2 Role of education	2.2.1 Importance of practical knowledge

		2.2.2 Role of degree
3. Discrimination	3.1 Equality	3.1.1 Equality in treatment
		3.1.2 Equality in opportunities
		3.1.3 Equality in roles assigned
	3.2 Struggles faced	3.2.1 Personal struggles
		3.2.2 Cultural struggles
		3.2.3 Professional struggles
4. Challenges	4.1 Communication	4.1.1 fear of judgement
		4.1.2 Lack of assertiveness
	4.2 Health issues	4.2.1 Due to overwork
		4.2.2 Due to motherhood
5.	5.1 Relations at workplace	5.1.1 Relation with subordinates
		5.1.2 Relation with patients
	5.2 Management	5.2.1 Working under management
		5.2.2 Attitude of policymakers

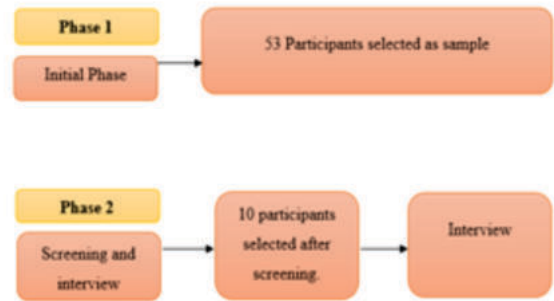


Figure: Depicting the different phases of the qualitative study on glass ceiling effect on women in leadership position.

CONCLUSION

The aim of the research was to understand the glass ceiling effect among the women in leadership positions in hospitals. The study explored the various factors that contributes to the glass ceiling effect. Out of 53 participants, 10 participants were screened out as sample for the study. The consent from each participant was taken to fill the screening questionnaire as well as the interview. The data collected was recorded, transcribed and then thematically analysed manually after coding.

A universal phenomenon known as the "glass ceiling" manifests itself in various degrees across nations. No industry or economy can avoid the glass ceiling; it can only be concealed. The existence of the glass ceiling is influenced by a number of variables, including a person's family and education, which have altered their worldview. Some of the industrialised countries are a fantastic example of how education has significantly contributed to bringing women close to parity with men. Policies and other regulations may be used to manage the glass ceiling and improve company

culture. The majority of women in India either accept the glass ceiling as an inherent part of the system or refrain from speaking out out of fear of being scorned or stigmatised by society. On the other hand, some women in executive positions who face the glass ceiling do not know it is called that because they see it as just another form of discrimination that exists everywhere. Therefore, raising awareness is more crucial in India, and empowerment should come after. The entire public must be made aware of the advantages of women's empowerment for the family, community, and economy in order to inspire them to provide their daughters with high-quality education, just as they do for their sons. Public awareness of government programmes and initiatives that enable parents to enrol their girls in reputable institutions or provide them with career training is necessary. To sum up, working women are advantageous to the family and the country; their independence signifies the strength of the nation; their elevation to a pedestal signifies an accomplishment; and their parity with people of the opposite gender signifies a national triumph.

Women cannot advance to the level of men in the workplace despite having comparable education, experience, knowledge, and skills; this phenomenon is known as the "glass ceiling." The majority of the time, women's gender denies them the best opportunities. There are several factors, including culture, stereotypes, attitude, parenthood, multiple responsibilities, and cultural standards, that contribute to why women do not advance to the upper levels in workplace. Corporate energy and the unending needs of living are two distinct wheels that spin in opposite ways. The person has to be mentally strong and strong willed irrespective of all the obstacles that stand in their way to assist it travel smoothly but in various directions. These wheels occasionally come together to generate friction or occasionally being in sync with each other. Women experience greater difficulty juggling these wheels when they attempt to manage work and home. Long-term management of the friction and tension these wheels generate is challenging. They frequently drift off the track and tend to lose control.

At the first glance, the mental imbalance appears manageable, but if left untreated, may require professional support. The majority of mental health disorders are linked. For instance, imbalance causes stress, and stress that has been increased causes anxiety disorders, phobias, sadness, aggressiveness, or other chronic stress disorders. These exacerbate the confidence and focus problems and further skew the perception. These traumatic events have the potential to rewire the brain connections incorrectly, which poses a medical risk as well. As a result, the course of treatment will incorporate both medical and psychological tools to help the patient regain balance. Glass ceiling is a problem in organisations that can be resolved through collective action or managed on an individual level. Despite significant advancements in science, technology, and creativity, women continue to face barriers that have existed since the dawn of humanity. There have been numerous programmes and frameworks supporting women's empowerment to put them on par with men, but the change has been relatively gradual. The current study has examined how women in leadership positions in hospitals have experienced the glass ceiling in order to better understand the various facets of this phenomenon.

Limitations

Exclusively samples from Kerala and Delhi were used in the study, hence the findings are only applicable to the Indian context. India is a country with many different linguistic traditions, but the current study only took into account the sample who spoke the English language. The major sample came from South India, even though the drawn population came from two different regions of India. Leaders from both public and private hospitals make up the sample, which

reflects India's heterogeneous economy. The hierarchy, structure, connections, public presence, sub-sectors, and organisation, however, are of diverse natures and environments, which may result in variations in how people perceive their experiences with glass ceilings.

Implications

According to the study, glass ceiling are a typical occurrence for working women in India. Some of these women are aware of it and speak out about it, while others are unaware it and accept it as a fact of life, by not voicing it out. High levels of occupational stress are caused by experiences with the glass ceiling. Stress is the strain that causes an emotional imbalance. Glass ceiling conditions create an environment where a woman may not receive possibilities while exerting herself to the fullest. Due to the tension and severe stress the line of work. This phenomenon is greatly influenced by family and societal culture as well as religious beliefs. For instance, India, which has a collectivistic society, frequently follows the unwritten laws of that community. A person with this perspective would accept prejudice and act in a manner that is accepted in society rather than voicing inaccurate cultural belief systems.

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