

## JOURNAL REPORTS: LEADERSHIP

# A Lot of Women Work in Health Care. But Not at the Top. Why Is That?

The leadership funnel starts contracting very early, and continues to narrow

*By Lauren Weber*

Oct. 15, 2019 12:04 am ET

Every year for the past four years, Harvard Medical School's three-day workshop on career advancement and leadership skills for women in health care has sold out. More than 700 women will attend next month in Boston.

For women in health, the ambition is there. The numbers are not.

The health-care services industry has the highest share of women working in entry-level roles, according to new data from LeanIn.Org and McKinsey & Co. At the lowest rungs of the corporate ladder, women make up 75% of employees in a sample of 22 companies, which includes hospital systems and other direct-care providers.

Yet at the highest levels of those companies, the ratios essentially reverse. Women make up only 33% of C-suite leaders, while men, at 25% of entry-level workers in the field, comprise 67% of the industry's top leaders.

## The great divide

The dearth of women in top health management "is not because they don't want the positions, it's not because they don't work hard enough, it's not because they're not qualified for the positions," says Julie Silver, a physician and director of Harvard's leadership course and a professor at the medical school. "It's not because there's a lack of a pipeline of talented women who could be promoted. Those are all critical thinking errors when they're used as explanations."

The leadership funnel starts contracting in the very first step to manager and gets ever narrower. McKinsey's data for entry-level personnel includes front-line employees such as nurses and home health aides, as well as recently graduated physicians. The biggest drop for women in leadership occurs at the senior manager/director level.

Women of color fare worse than white women, starting out at 23% of the entry-level workforce and rising to just 6% of C-suite roles. For white women, representation shrinks from 52% at the bottom of the ladder to 29% at the top.

Health skews heavily female in lower-ranking jobs in part because direct-care activities like bathing, dressing and feeding are tasks that women have historically done within their families, without compensation, says Janette Dill, a professor of health policy and management at the University of Minnesota. This caregiving work is undervalued in the market for paid labor, leading to low pay and further discouraging men who can earn far more in jobs like construction that require a similar level of education, she says.

Though many health-care jobs are considered low-skill and low-value, they are among the nation's fastest-growing occupations as the population ages. The number of home-health-aide jobs will jump 37% by 2028, and demand for medical assistants and physical-therapist aides will rise 23%, according to the Bureau of Labor Statistics. In 2018, those jobs offered median annual pay of \$24,200 to \$33,610.

At the very early stages of health careers, opportunities for mobility decline, in part because of strict credential requirements for jobs in clinical care and patient management.

"If you think about sectors like retail or fast food, there's more space for people to move into management without needing additional education," Dr. Dill says. In health care, many management roles require, for example, a bachelor's degree or a master's in health administration—a real barrier for women who want to rise, she says, since access to education is often contingent on having money for tuition, child care and transportation, all challenges for women starting in low-wage jobs. Without the extra credentials, the highest level many women can attain is supervising front-line workers, and they never make it into senior manager or director jobs.

At the same time, statistics indicate that there is a "glass escalator" for men in health care, Dr. Dill says. "When men go into female-dominated occupations, they earn higher wages than women, they find more opportunities, and they're fast-tracked into management positions," she says.

Companies have a stake in changing the status quo, McKinsey experts said in a report earlier this year about women in the health-care sector. Women make the majority of health-care decisions and are a majority of patients. Services and products should be responsive to their needs, and that requires women's voices in management, research and marketing, the experts say.

To make a dent in the numbers and offer more opportunities, companies are experimenting with education benefits that pay upfront tuition costs, formal mentoring and sponsorship programs, and networking opportunities designed for women.

## **Making up lost time**

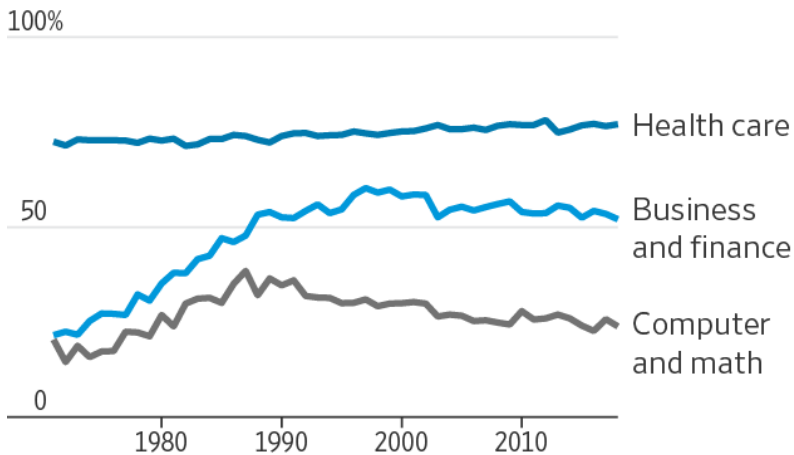
---

## WHAT 'WOMEN'S WORK' LOOKS LIKE NOW

---

Women make up about half of the U.S. workforce today, but many jobs remain largely segregated along gender lines. Explore the fields in which women have made the most inroads, and the least.

### Share of women in each occupation field



Source: Labor Department



Ms. Shiffman says the CareCentrix Women's Network helped her forge new connections that enabled her advancement after time out of the workforce. PHOTO: MONICA JORGE FOR THE WALL STREET JOURNAL

Jennifer Shiffman completed her bachelor's degree in nursing in 1997 and worked in clinical settings for several years before leaving paid work to raise her two children. She went back to work in 2013 at CareCentrix Inc., a company based in Hartford, Conn., that coordinates home-based care for patients coming out of hospitals and nursing facilities. Ms. Shiffman, 45, started out reviewing patients' requests for services. A supervisor noticed that her skills were underused and encouraged Ms. Shiffman to work on special projects and eventually apply for a supervisory role. After a series of promotions, she is now a senior account manager.

She credits the company's Women's Network, which she helped found in 2017, with helping her own trajectory. The group has organized speed-networking events with female executives as well as sit-down conversations with the chief executive, John Driscoll. CareCentrix, which has 2,300 employees, runs counter to the corporate trend; women account for 68% of all managers and 60% of the management committee, which is all senior vice presidents and above.

"If I'd stayed the course and never stopped working, I would've progressed, I would've made connections and proved myself on projects," Ms. Shiffman says, but the women's group helped her make up lost time. Without the network, "it would've taken me much longer to get that face time, and face time is critical."

Dr. Silver notes that there are two ways to approach gender-equity issues in health care. One is the "fix the women" box, with statements that "women should" be more ambitious, work harder, not take time off to care for young children. Alternatively, leaders can recognize and address structural obstacles for women. As an example, she pointed to the dearth of women editors of academic medical journals, a key role that acts as a gatekeeper to publication, research money, promotions and prestige.

"We've moved beyond 'fixing the women' into understanding that there are structural, systemic and implicit bias issues that require a different approach," she says.

*Ms. Weber is a Wall Street Journal reporter in New York. Email [lauren.weber@wsj.com](mailto:lauren.weber@wsj.com).*

---

SHARE YOUR THOUGHTS

---

*What can companies do to create a better pipeline for advancement of women in the health care space? Join the conversation below.*

---

---

## WOMEN IN THE WORKPLACE

---

This article is part of a Wall Street Journal special report on women, men and work based on a study by LeanIn.Org and McKinsey & Co.

- Complete coverage
  - The First Step Up the Ladder Is the Steepest
  - Sheryl Sandberg: The Gender Gap Is Bad for Business
  - Family-Friendly Policies vs. Practice
  - A Text Network of Advisers
  - She Took a Two-Year Break. Now She's CEO.
  - For Women in the Military, Opportunity and Obstacles
  - McKinsey Leaders on Solving Early-Career Disparities
  - Women Balk at Doing Office Housework
  - Read the full study and methodology from LeanIn.Org and McKinsey & Co.
- 

- 
- **College Rankings**
  - **College Rankings Highlights**
  - **Energy**
  - **Funds/ETFs**
  - **Health Care**
  - **Leadership**
  - **Retirement**
  - **Small Business**
  - **Technology**
  - **Wealth Management**

