

Research Article

Unveiling the Factors Behind Under-Representation of Women in Leadership Positions within Dental Academia

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Abstract

Introduction: Women play a vital role in the health sector of Punjab, Pakistan occupying 68% percent of total seats for undergraduate students in Pakistani dental colleges. However, this proportion decreases as one moves up in the organizational hierarchy with men dominating leadership positions in Pakistan. This has led to negligible women representation in dental academia.

Objectives: This study aimed to explore female dental academia leaders' perspectives on possible reasons behind the under-representation of women in leadership positions in the dental academia of Punjab, Pakistan.

Methods: A qualitative, phenomenological research design using semi-structured interviews and purposive sampling was conducted from March 2018 to February 2019. Eight out of 10 invited female dental academia leaders working in public sector dental colleges of Punjab participated in individual in-depth interviews. Data were organized in Atlas-ti and analyzed through thematic analysis.

Results: Thematic analysis led to the development of six themes: 1) Family responsibilities, 2) Work environment, 3) Gender bias, 4) Lack of Counseling, 5) Financial matters, and 6) Transport issues and long distance from the workplace. Sub-themes further elaborate on the findings and provide deep insight into the problem.

Conclusion: The problem of female underrepresentation in dental academia leadership is multifaceted. Reserving separate funds for women, arranging career counselling sessions, decreasing working hours during special circumstances, and changing attitudes towards women's role in households will help overcome the problem. The study opens a path for future research on the development of interventions or strategies to overcome the reasons.

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Introduction

Women play a vital role in the health sector all over the world. Global statistics indicate that

the proportion of women in the health and social care sector has grown to 70.3% over the years.^{1,2} In Pakistan, 68% of seats in undergraduate medical and dental colleges are quoted to be occupied by female students.³ These students are selected for dental colleges on an equal opportunity basis. For many years, the number of female students who got admission to dental colleges has always been greater than that of male students.⁴



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However, a matter of concern arises when this proportion decreases as one moves up in the organizational hierarchy with men dominating leadership positions worldwide.⁵ This situation is the same in the dental academia of Pakistan too where there is poor representation of female leadership. The ratio of females to males in higher leadership positions is somewhat reversed to only 10/212 registered dental faculty in four leading public dental colleges of Punjab alone.³ This suggests that women should be occupying more leading positions in institutions as compared to men, but the practical situation doesn't justify these statistics.⁶ In teaching positions such as Dean, Professor, Assistant Professor, Senior Registrar, and demonstrator, women usually fill the position of demonstrator.^{3,7}

The problem of female under-representation in the workplace could be multifaceted. Research done in Western countries found that there are many reasons behind the under-representation of women in leading positions including prevailing culture, organizational structure, and personal barriers.⁸⁻¹² Other reasons may be gender stereotypes, motherhood, gender bias, rigid duties, work environment, lack of self-confidence, and family pressure.¹ Much less is known about these barriers of female low representation in higher dental academia leadership and how the surviving females have experienced and counteracted the issues faced by them during their career advancement. This study aims to explore female dental academia leaders' perspectives on possible reasons behind the under-representation of women in leadership positions in the dental academia of Punjab, Pakistan.

Methods

This qualitative phenomenological study was done from March 2018 to February 2019. The research started after obtaining ethical approval from the institutional review board of the University of Lahore (letter no, MME/18/008 dated 3rd January 2018). A purposive sampling technique was employed to invite ten female leaders in dental academia (assistant professor, associate professor, or professors) of public sector dental institutes of Punjab, Pakistan. Eight out of 10 women leaders from 1) De Montmorency College of Dentistry, Lahore, 2) Dental Section, Punjab Medical College, Faisalabad, 3) Nishtar Institute of Dentistry Multan, and 4) Dental Section,

Army Medical College, Rawalpindi, agreed to participate in the study and underwent individual, semi-structured audio-recorded, telephonic interviews.

The interview questions have already been used in other international research on the same issue i.e., successful women leaders.¹³ The questions were slightly modified based on the literature review and considering the dynamics of the country. Participants were asked the following semi-structured interview questions:

1. What have you experienced as a woman on your path towards achieving a leading role in dental academia?
2. How often you felt that being a woman was – by itself – a challenge in your dental career? Please narrate a couple of situations, if possible.
3. Do you feel men have better chances in the promotion and leading positions? Can you state an example without names?
4. What are some of the biggest crisis situations or critical events you've had to handle while achieving this leading position?

Data saturation was achieved after the 6th interview however eight interviews were conducted to check for any new theme emerging. The audio recorded interviews were transcribed and sent to the participants for member checking. The collected data was organized in Atlas-ti software for thematic analysis, Codes were identified through an open coding process to generate categories and themes that seem of importance.

Results

Thirty codes were condensed to eleven subthemes and six themes. The research findings presented in this study are based on the qualitative analysis of the data obtained from the individual interviews. The data was analyzed for open coding. These codes then generated six main themes: 1) Family responsibilities, 2) Work environment, 3) Gender bias, 4) Lack of Counseling, 5) Financial matters, and 6) Transport issues and long distance from the workplace. Moreover, the themes were further divided into sub-themes for the sake of description. There were overlapping regions in the themes and most of them are linked with each other. Figure 1 shows the hierarchy of themes and subthemes identified in this study.

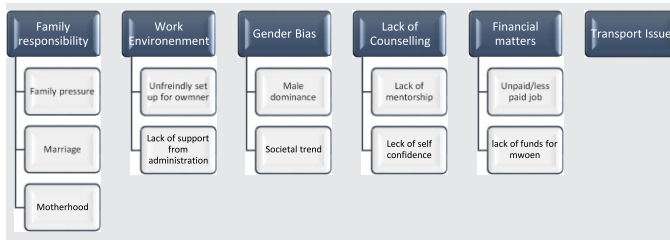


Figure 1: Themes and Subthemes identified in this study.

Theme # 1: Family Responsibilities

The participants shared many hindrances faced by a woman while achieving a leadership position in dental academia. According to them, family responsibilities were one of the main hindrances reported by all the participants. The theme is subdivided into the following subthemes:

Family pressure

In Pakistani society, most of the time, a woman is under family pressure. She has to do multiple domestic tasks and while pursuing the career, the will of family prevails most of the time. According to participant no. 1:

“Look, if your husband and your family tell you to leave the job or training then you have to leave, whatever degree you are doing, you have to leave.”

Also, another participant no. 07 added:

“Yes! Another thing during my exams was my mother’s illness and that was a real mental trauma, and if something happens in your family it becomes tough for you to balance, but it’s a hard time and if you stand firm and hard, you achieve the position”.

Marriage

The second important sub-theme was marriage. All participants were on the same boat that marriage is always preferred for women rather than going for a post-graduation. As said by participant no. 5:

“You know, parents prefer to get their daughters (doctors) married as compared to pursuing their career.”

This point was further emphasized by Participant No. 6:

“While I was unmarried there was no crisis. But, you have to just pass through difficulties after a marriage that is easy to say but very difficult to do...”

Motherhood

Motherhood was another big challenge mentioned by the leading women. As said by participant no. 08:

“While pursuing my professional career, my daughter was newly born....so that was the difficult part, I don’t know why people don’t bother about it, I wasn’t given the consideration that I travel a lot and I have a little baby”. She further added “I had my child after 6 years of my marriage, during this precious pregnancy I had to leave my exams...but I was determined and in the end, I cleared....in my whole story if we don’t reach the leading position...it’s due to personal reasons...”

The same sub-theme was also narrated by the Participant No. 3:

“Look! You also must handle your kids; while they are growing and grooming; their studies; upbringing; family interactions; and your parents. How you complete your responsibilities is the challenge, every day is a new challenge, you must handle and streamline the tasks by maintaining your dignity”

In addition, the participant no. 2 said:

“The most important.... It’s the children, When I did my post-graduation, I had two kids, in your anger and depression your kids suffer, you are failing again and again, and you are not giving proper time to your family, I think your family suffers a lot.”

Theme #2: Work environment

The work environment was the second important theme that was identified from the collected data. This theme was further divided into the following sub-themes:

Setup is not friendly to women's needs.

It was mentioned that the overall work environment does not address women’s needs. One of the participants said:

“Our setup is not friendly to women’s needs. I didn’t get post-graduation from abroad, but, few of my friends are studying on scholarships in foreign countries.... they have the policy when a female is suffering from family crisis she is supported, she is given relaxations... work hours are decreased....she is put on work at home... in that way, she is working but mental stress is decreased... so if we all devise such a policy or program for the women so that women feel stress-free...if your perso-

nality is so strong then nothing can refrain you.... ”

This stance was again endorsed by participant no.2.

“I want to say a thing, when you are a student you don’t realize, being female, the set-up of our society is such that it supports men, but as time passes you begin to realize that environment is not supporting you being female, man is preferred everywhere, people say that males are more competent and females will leave this profession after getting married, you have to put 1000 time more effort as compared to men, to have your say, you have to hear in every moment that males are to go ahead and you have to put a lot of effort to solve that myth, to prove that females are also the right choice ”

Lack of appreciation from colleagues and dental college administration

This was another sub-theme extracted from the personal views of the participants.

As said by participant 1

“My staff gave me a very tough time; it took me one year to adjust in the department. They didn’t give me any importance and looked down upon me. In administration, they used to say, she is a female, and she is sitting beside us in high meetings, there was a very cold response by the people, so I was very uncomfortable during official meetings ”.

Theme # 3: Gender bias

Seven out of eight participants identified that there exists a gender bias in dental colleges in Punjab, Pakistan. This theme was further divided into the following sub-themes:

Male dominance in dental academia

As said by Participant No. 1

“Yes, whatever that happened to me, in my first interview, the selection panel comprised of only males, they preferred a male just because I was a female, and they didn’t select me.”

Also confirmed by the participant no. 6

Not hundred percent....but I will say a man has more chance, men cooperate with one another....there is an edge for man but not so much ...it’s very obvious, you have to make good links with the superiors to get postgraduate degrees, because many times, postgraduate

degrees are awarded based on favoritism and links... so it becomes difficult for women to make links with your superiors to get postgraduate degrees ”.

Societal Trends

Another sub-theme was societal trends that were mentioned by five participants. Participant No. 2 said:

“When you are a student, you don’t realize, being female, the set-up of our society is such that it supports men, but as time passes you begin to realize that environment is not supporting you being women, a man is preferred everywhere people say that men are more competent, and women will leave this profession after getting married”.

This point was again endorsed by participant no. 6

“In this society, norms should be changed, women are assigned submissive and downgraded jobs...I guess women should get equal opportunities”

Theme # 4: Lack of Counseling

Lack of counselling was another theme that was generated from data analysis. As said by participant no. 3

“I have learned by sitting beside the senior faculty members, we have not been given the opportunity of mentorship, but we have always jumped into the war and learned from that”.

Also, participant no. 8 said:

“I think there should be counselling sessions...I think women lack counselling... half of the time we can’t see things transparent....so with that extra emotional support... counselling sessions can help.”

Lack of Confidence and Self-Awareness

This was an important subtheme as reported by participant no. 6

“So if every successful man has a woman behind, similarly, every successful woman has a family behind ...self-motivation and self-awareness are very important for women, the study gives you the knowledge, but, you get confidence from your family”.

Participant No. 7 also emphasized this.

Being a woman is challenging in this field, somewhat you are pushed back, but if you are strong and your family is behind you, you can’t be pushed to the wall”.

Lack of Mentorship

Five participants talked about mentorship and role modelling. Participant No. 2 said:

"Life partners and family members should think if that these women have come to this stage, they (life partner and family members) should not stop them, they should go ahead, all the things run parallel, it is a long journey, you have to be motivated, women herself should not lose, at the end, the result will be better sooner or later".

She added *"I think role modeling and mentorship work. My mother-in-law is my mentor and my role model, that's why I also want to become a role model in my professional life as well as in my family life."*

Theme # 5 Financial matters

The financial matter was another theme identified by the analysis of the data. This theme is divided into the following sub-themes:

Unpaid job

As said by participant no. 1

"For me, graduation was not a big issue ever. But, during my post-graduation, it was very difficult for me because I had one and a half years of unpaid job."

Lack of Funds for Women

This was another subtheme added by the participant no. 5

"....so financial crisis matters, parents prefer to get their women doctors married as compared to pursuing their career. There are no funds for women to continue their professional careers. My suggestion is, that there should be a fund that should be given to the female so that she didn't suffer from the financial crisis".

Theme # 6: Transport issue and long distance from the workplace

This was the last theme generated by the data as said by Participant 1

"And I had to travel a long distance and that was very difficult. I used to travel on public transport for two hours daily. I wished that I could have my car and being a woman, it was difficult to travel so much daily, but as I got paid, I bought my car immediately."

Again, that point was emphasized by participant no. 8

"When I was in my initial professional career, I had to travel one hour far from my house...my daughter was newly born....so that was the difficult part."

Discussion

Achievement of a leadership position in dental academia in Punjab, Pakistan is a big challenge for a woman. Women must face different types of hindrances in the process of achieving a leadership position in dental academia. According to the participants, every woman who passes the graduation has the competency to achieve a leadership position. However, during post-graduation and acquiring a leadership position, she has to face multiple challenges. Therefore, the way she handles and overcomes those hindrances has a great impact on the career of the women. The analysis showed that family responsibilities were the main theme that was raised by every participant. This finding is in accordance with the findings of the under-representation of women in the Australian health sector,⁸ where they have also mentioned parenthood or motherhood as an extra responsibility on women and she has to maintain balance and look after both responsibilities at a time and most often women prefer motherhood over career.

The woman is expected to fulfil multiple family commitments irrespective of the professional dental academic life. Most of the time, the decisions for the women about their professional dental life are made by the family instead of the women, this sub-theme is also mentioned in different research done in other departments of Pakistan.^{11,14,15} It becomes very tough for a woman to reach the leading position in dental academia if her family especially her husband doesn't stand by her. Besides, the parents of the women graduates prefer their daughter to get married rather than pursue her professional career. Similarly, motherhood also poses a challenge for women striving for a leadership position in dental academia and it is very important to maintain a balance between the family and professional life.¹⁶

Besides, the organizational work environment is also a big hindrance that women have to overcome. The existing organizational system has been mentioned not to be friendly to women's needs in our study. This is supported by the fact that men and women have different physical and mental needs, and it is very important to

consider the needs of both genders in the system separately and develop plans and policies according to those needs.^{14,17,18} However, the needs of the women have not been considered in the system e.g., the women need mental peace during their pregnancy, sometimes restricted movement, travelling, etc. Furthermore, long working hours and the requirement of physical presence at odd hours also discourage women. A much more flexible working schedule for females can help alleviate this problem. Similarly, a study done to investigate the work environment of public sectors of Pakistan concluded that women who want to advance in their careers have to face difficulties in balancing family and professional life. They must contribute more to the upbringing of their children and keeping peace in maternal life.¹⁹ Therefore, women need special amenities like transportation, day-care centres, flexible working hours, and less stereotypical attitudes for their professional growth that are missing on practical grounds in most organizations.¹⁴ Therefore, there is a need for different working conditions and incentives for men and women.

Gender bias is another theme that exists in dental colleges in Punjab, Pakistan as reported by the participants. Our study portrays that a woman is not appreciated by the college staff and dental college administration even if she feels uncomfortable during an official meeting due to the minority among so many males. Gender bias exists in underdeveloped countries of the world and the extent of this bias can be related to many factors especially the economics of that country.²⁰ As a result, gender inequality exists in health, education, and career development in developing countries of South Asia.²¹ Gender inequality exists in Pakistan with its intensity varying from region to region, social status of a person, education level of a person, and culture.²² Males are always preferred because most of the people occupying leadership positions in dental academia are males. Also, women are assigned passive responsibilities.

They are not provided with equal authority over the resources, gender bias exists in the Australian health sector too and it is partial towards men due to the perceived capabilities of men.⁸ Similarly, lack of counselling is another big hindrance in the path of women. There is a deficiency of counselling for upgrading self-confidence and self-awareness in women of dental academia. Furthermore, the concept of mentorship is also lacking in dental academia. Another hindrance

emphasized by the participants was the financial matters. The women are discouraged by unpaid training or jobs, however, this problem is common for male members too.²³ There was a suggestion to allocate special funds and scholarships for women. A new problem emerged in this research that transport issues are also discouraging women to go and achieve leading positions. Travelling for women from distant places to the workplace on public transport is a big hindrance and sometimes women give up and choose the easier option of working near their homes. However, the transport issue is a subtle issue pointing towards a much larger paradigm of the fixed cultural mindset in Pakistan where females are only 'groomed' for family, without much regard to the development of their capacity to survive independently in society.

Women face several hindrances while achieving a leadership position in dental academia and these challenges are the reasons for women's under-representation in dental academic leadership positions. This under-representation is reducing the sense of job ownership among the women of the dental academia which may lead to the reduced operational efficiency of the department. Women are losing interest in achieving leadership positions because the system and the work environment do not address women's needs. There was a need to explore these hurdles. Creating awareness among female health professionals can help them anticipate these challenges and prepare well to face them in their careers if needed. Additionally, it is the responsibility of the administration to provide thorough support and equal opportunities to female academia. Even acknowledgement and support from male colleagues can help smoothen the career pathways of women. In addition, policymakers should consider women's needs while planning and policymaking for dental colleges. Reserving funds, arranging career counselling sessions, decreasing working hours during special circumstances, and changing attitudes towards women will be helpful.^{8,9,13,14,22,24,25}

This study was limited by the involvement of public sector female leaders in dental academia only. Further studies can probe into any differences in public versus private sector female leadership. As this study has identified major barriers to female leadership in dental academia, they can also be studied in reference to other health professions. Further, these problems can be further studied to strategize further steps in supporting female dentists who want to advance their careers.

Conclusion

Female under-representation in dental academic leadership positions is due to multiple hindrances that women are facing. This study identified six themes such as family responsibilities, work environment, gender bias, lack of counselling, financial matters, and transport issues as major hindrances. Considering women's needs while planning and policymaking for dental colleges, reserving funds, arranging career counselling sessions, decreasing working hours during special circumstances, and changing attitudes towards women will help reduce the under-representation of women in dental academic leading roles.

Ethical Approval: The Institutional review board approved the study vide letter No. MME/ 18/ 1/ 008.

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Authors' Contribution:

MAK: Conceptualized, designed, collected and analyzed data and did initial manuscript writing.

NKN: Analyzed data and did final manuscript writing and review.

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