

Business and Professional Women-health & International Management

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Introduction

Professional women are often experts: Experts in a profession and experts at work. A business woman is a woman who works in and for a business. The international management of health requires competences, knowledge, experiences, networks, and a very broad understanding of how business and marketing functions in the health field operate. It additionally means profound understanding of business processes and procedures in the field, as well as an ability to transfer results and data into international settings, correlations and relations.

There are many internationally agreed norms and standards relating to women's leadership and participation [1].

Nevertheless, to date only approximately 5 per cent or less of CEOs of the largest global corporations and of S&P 500 Companies are women [2,3]. These data and others call for a greater role for national and international professional business networks and for organizations by and for women. These organizations can for example assist their members and member companies with putting in place policies and measures to recruit and retain professional and business women [2].

On the other hand women should perceive themselves as leaders or as potential leaders. This requires self- confidence, self- empowerment in specific contexts and individual capabilities [4-6].

Objectives

Presenting

1. examples of international health management sectors for female CEOs,
2. facts and data related to the underrepresentation of woman in health & international management,
3. examples of international business organizations for woman.

The 2010 World Economic Forum's [7] Gender Gap report documented that, on average, less than 5 per cent of CEOs were women in the largest companies in all OECD countries. Another survey reported that 5.6 per cent of CEOs in publicly-listed companies in China were women [2]. Regrettably, to date no significant changes in per cent have been documented for the largest companies [3]. Nevertheless current data about seats on boards of the largest publicly-listed companies show an overall increase for the OECD countries analysed [8], and CIHI published higher rates for women in leadership positions [9, p.9]. But data and facts such that female representation at higher corporate levels reaches only 10.9% in Australia and 10.3% in Canada [10] and that merely 24% of directors at global health centers across 50 US medical schools are women, acutely highlight that problems of gender equity can occur in leadership and health leadership around the world [11].

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Specific networks and institutions such as for example the UN Women Department, the European Commission's work on Gender Equality, The World Bank: Gender and Development, the International Finance Corporation (IFC) Women in Business Program and the World Economic Forum: Global Agenda Council on Gender Parity can be a driving force for the rights and empowerment of women and subsequently for more leadership positions in the health sector [12].

Objective no. 1

In February 2019, names of the top 25 women in US health care were published. These are female executives from very different sectors of the health care industry [13]. The women work for example at clinics, hospitals, foundations, associations, pharmaceutical companies, and for departments. This enumeration shows the broad span of sectors.

In May 2019 an article was published focusing on further international sectors and international health management sectors featuring three female chairpersons/leaders in the economic field [14].

For the first time three women, Gita Gopinath (International Monetary Fund (IMF)), Pinolopi Goldberg (World Bank Group), and Laurance Boone (Organization for Economic Co-operation and Development- OECD) participated on a panel of an IMF meeting. All three organizations these women represent work with global data, plans, strategies for health; for example in supporting countries to achieve high-performing health systems by measuring health outcomes and health systems (OECD), and in helping countries with health spending policies (IMF) while including gender and economics as key factors [15].

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Objective no. 2

Integration and high rates of gender diversity at CEO positions can impact business growth prospects very positively [16-18]. Surprisingly, to date women are more than under-represented. Furthermore they are often prevented from reaching their full professional potential in industry and health management/leadership, as well as in international health management. A whole range of reasons, such as cultural stereotypes [18] are documented in great detail, but additional influences have profound impacts too, for example:

1. Missing trust: Lack of trust in female executives in male-dominated workplaces [19,20].
2. Missing support: From the local to the international level, women's leadership and political participation are compromised, women are often constrained from achieving the highest leadership positions [21].
3. Missing flexibility: Difficulties and tensions in managing career and family responsibilities [22]. Beside many other aspects, more flexibility is advocated for woman in the global health context [23].

These aspects and others can lead to longer career paths: On average, it takes women three to five years longer than men to reach CEO positions and functions [19,20].

Objective no. 3

Business membership organizations for women set out to further and to develop the potentials of women and are differently structured. Often members have to pay annual membership fees to become a member and to receive the benefits of the organizations.

For example

1. International Women in Business (IWIB): the young organization is a volunteer non-profit, membership-based, business-oriented women's organization. The aims of IWIB are to bring together aspiring professionals, established executives, and entrepreneurs in various fields and at all levels to share valuable benefits and opportunities [24].

or

2. BPW International: founded in 1930, this is an international network of business and professional women with affiliates in over 100 countries on five continents. Its members include women leaders, entrepreneurs, business owners, executives, professionals and young business and professional women. BPW tries to develop the professional, business and leadership potential of women through skill building, networking advocacy and mentoring around the world [25].

Conclusion

There are many internationally agreed norms and standards relating to women's leadership and political participation [1].

There remains a strong need to reduce social, economic or political power inequalities between women and men, to ensure that women can benefit the same as men, and as chairpersons in the broad health sector. Problems of gender equity can occur in leadership and health leadership around the world.

Therefore the development or strengthening of gender equality or anti-discrimination policies, of legislation or institutions in business and organizations in the international health sector are urgently required [26].

Organizations such as business membership organizations may be very useful, but it is indispensable to promote awareness and recognition of the importance of women's participation [1].

Over and above this, for leadership functions in the international management of health, further efforts, such as empowering women with knowledge through education and theoretical and/or practical training, skills and self-confidence [12,6] are required. These efforts should be sustainably embedded in society, at the community, local, national and international levels, and integrated into norms and standards, as well as implemented in networks and collaborations.

At an individual level women should perceive themselves as leaders or as potential leaders. This calls for self-trainings, self-empowerment in specific settings or context situations and individual capabilities and capacities [4-6].

Competing Interests

The author declare no competing interests.

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