Women Leaders: Working to Make It Happen

An Interview with Mayo Clinic’s Sharon R. Gabrielson, M.H.A.

Sharon R. Gabrielson, M.H.A., is a healthcare executive with over 20 years of broad-based leadership experience in strategic and operational planning, practice, quality improvement, outcomes, safety, and service. She has held many positions within Mayo Clinic, her most recent being chair of Mayo Clinic Global Business Solutions, which extends Mayo Clinic knowledge and expertise by delivering an integrated portfolio of market-leading products and services to meet the needs of people across the health spectrum—and throughout their lives. She also is a member of AMGA’s Board of Directors and is very active in the Women in Leadership Council. Group Practice Journal recently asked her about women in health care and the challenges they face becoming leaders.

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GPJ: According to report by PwC (Price Waterhouse Coopers), the share of incoming women CEOs in the world’s 2,500 largest public companies dropped to 2.8% in 2015, the lowest level since 2011. Among healthcare companies, the rate was even lower at 1.6%. What are your thoughts on the challenges of breaking the glass ceiling for women in health care?

Gabrielson: Many believe that although it has been slow, there has been progress made in breaking the glass ceiling. This is a misperception. In reality, the percentage of chief executives of Fortune 500 companies who are women is at 6.0%. That number has dipped below 6.0% at times, but has NEVER passed 6.0% since the Fortune 500 list was first published in 1955. That’s not progress!

Earlier this year, The Rockefeller Foundation funded its second annual study as part of its 100x25 campaign to increase the number of women CEOs at Fortune 500 companies to 100 by 2025. That study identified that “hurdles to female leadership are often driven by company culture and the attitudes of men in the workplace (the ‘boys club’), which play a major role in the struggling number of women in top leadership positions.”

The healthcare C-suite is no different than non-healthcare C-suites. The challenges are the same, and if anything, there is greater disproportion, given the number of women in the healthcare field.

GPJ: We know women make up a huge portion of the healthcare workforce. Why do you think they are so under-represented in the C-suite?
Gabrielson: Some of it is a conscious bias, but I believe that much of it is unconscious bias, and therefore, without significant emphasis placed on overcoming the inequities, we are unlikely to see significant gains.

The New York Times recently published an article titled “Why Women Aren’t CEOs, According to Women Who Almost Were.” In that article, more than two dozen women who were candidates for the top CEO spot, but didn’t make it to the #1 position were interviewed. Their comments were, I think, highly indicative of the challenges women still face today. Men remain threatened by assertive women. Women are often seen as lacking vision. They are not typically self-promoters, are disproportionately criticized when they are in the spotlight, and are often penalized to a greater extent than men when they underperform or have a misstep. In some cases, women get discouraged and drop out along the way, which leads to the (wrong) assumption that it’s a pipeline issue.

GPJ: Why do you think it’s important for women to be groomed as leaders of healthcare organizations?

Gabrielson: Women bring different perspectives and approaches to business, resulting in a more inclusive workplace and often better performance for the company. Studies have shown that organizations with women in the C-suite are more profitable. For example, Harvard Business Review (Feb. 8, 2016) reported that companies going from having no women in corporate leadership (the CEO, the board, and other C-suite positions) to a 30% female share is associated with a one-percentage-point increase in net margin—which translates to a 15% increase in profitability for a typical firm. Women in the C-suite also correlate to better closure of pay gaps between men and women. There are also other benefits of adding women to the C-suite, such as increased diversity within top management, which helps to recruit, promote, and retain talent. When you look at all of the studies that have been done, a lack of gender diversity affects all components of the organization’s bottom line.

GPJ: What were some of the challenges you personally faced as you rose to a position of leadership?

Gabrielson: I have recognized many of the same challenges described above in the studies that have been conducted. This has been true both in the opportunity for advancement in the organizations I have worked for throughout my career, as well as in my ability to acquire board of directors’ seats. That being said, I have also had some amazing mentors, both male and female, who have inspired and encouraged me. I would not be in the position I am today without those individuals who taught me the importance of diversity in the leadership ranks. That’s why I have such a passion about mentoring and want to do what I can to help others.

GPJ: You’ve been a leader in developing the AMGA Women in Leadership Council, which focuses on expanding opportunities for women. Why do you feel it is important to have a program focused on this issue?

Gabrielson: One of the first things I noticed when I was appointed to the AMGA board was how few women were on the board or in leadership positions for AMGA, as well as in the CEO/CAO positions of our member organizations. We were talking about being a high-performing healthcare organization, yet I sensed we were lacking an essential foundational component to help us achieve that goal. I also saw an opportunity to provide our membership with a program that would help them with development of their female leader pipeline.

I approached Michelle Koury, who at the time was another female AMGA board member and asked her if the board had ever considered a women’s mentoring program. Her response was “not to my knowledge.” We had offline conversations with a few other board members and found they were supportive, then developed a proposal and took it to the board a few months later, and it was approved.

GPJ: What is the goal of the Council and its programs?

Gabrielson: To build a program that expands women’s ability to prepare them for leadership roles. The council provides a forum to build their network, increase exposure to other female and male leaders who are strong proponents of diversity and who lead by example, and provides them with tools to develop themselves as strong candidates for leadership roles.

GPJ: Tell us a little about the effort to develop a mentoring program?

Gabrielson: We started in 2016 by surveying AMGA members who identified the top three reasons for lack of advancement of women in leadership:

- 46% lack of executive sponsor
- 38% exclusion from informal networks
- 32% lack of women role models

These key insights from the member survey have guided a key strategic decision for the AMGA
Leadership Council: develop women leaders by providing opportunities to connect with other women leaders within AMGA.

We are taking a non-traditional approach to accelerate the development and advancement of women healthcare leaders through a more “modern” approach to mentoring by offering an online social platform. The purpose of the online platform is to connect members to share knowledge, skills, and experiences and to develop member communities around specific topics for development.

GPJ: Where would you like to see this program go in the long term?

Gabrielson: The council has discussed broadening the committee beyond females to include other diverse groups. We also recognize the importance of the role that males play in advancing diversity in the leadership ranks and so have discussed programs that include them as well. I personally would love to see the program’s success be a catalyst for our member organizations to utilize as a pipeline for their leadership ranks.

GPJ: What advice would you give to women who aspire to become effective leaders in healthcare organizations?

Gabrielson: Set goals for yourself and then seek out and utilize the resources to help you achieve your goals. Find mentors and build your network, and work that. Don’t wait for it to happen to you—you have to work to make it happen.

Hear more from Sharon Gabrielson at amga.org/thoughtleader. For more information on AMGA Leadership Councils, visit amga.org.