Evidence for Diversity

An Interview with Dartmouth-Hitchcock’s Dr. Joanne M. Conroy

Joanne Mather Conroy, M.D., is the chief executive officer and president at Dartmouth-Hitchcock and Dartmouth-Hitchcock Health. Dr. Conroy came to Dartmouth-Hitchcock from a position as CEO of Lahey Hospital and Medical Center in Burlington, Massachusetts. Dr. Conroy is a founder of Women of Impact, a group of executive-level women from diverse sectors of the healthcare industry with a shared goal: to realign the healthcare system to meet the needs of all Americans, recognizing that the people who need care come from all walks of life. Group Practice Journal interviewed Dr. Conroy on diversity in health care and the challenges for women in the industry.

GPJ: We know women make up more than 50% of physicians in training and 78% of the entire healthcare workforce. Why do you think they are so underrepresented in the C-suite?

Dr. Conroy: Just like other industries, gender equality in health care remains elusive. While we’ve made progress by increasing the number of women who become physicians, filling leadership positions is still a challenge. According to the Association of American Medical Colleges (AAMC), fewer than 20% become department chairs, just 16% are deans of medical schools, and only 1% are surgery chairs. The barriers women face in health care are the same as in other industries: unconscious bias and lack of work-life balance are two major barriers. Both of those barriers are embedded in the culture of medicine. And many healthcare organizations have remained satisfied with the status quo.

GPJ: What do you see as the main challenges for women wanting to break the glass ceiling in health care?

Dr. Conroy: It certainly is not because of a gap in ambition. According to a McKinsey report from 2017, women in health care are just as interested in advancing, but are 25% less likely to be promoted. In fact, they ask for a promotion just as often, but men move up more without asking. Again, it goes back to the culture in health care that has been slow to change and a lack of support for women to get beyond the unconscious bias that often happens when leadership decisions are made and to help them fulfill these demanding roles while maintaining a balance with their personal/family responsibilities.

GPJ: What frustrates you the most when it comes to the issue of gender and its place in the healthcare ecosystem?

Dr. Conroy: Most of us in health care love data. And there is very clear data from multiple studies that show that the problem with gender inequity is big, and it is worse in health care. There are an equal number of studies that show that diversity in leadership leads to better financial performance and I would venture to say better overall performance. Yet, our culture in medicine has long turned a blind eye to this issue. So, I find it frustrating that the evidence is clear, but we are still slow to change in health care when it comes to supporting women leaders.

GPJ: You’ve made a deliberate point of diversifying the leadership teams under you, with regard to gender, cultural representation, and other perspectives. What impact has that diversification had on your organizations?

Dr. Conroy: It will take time to see the true impact of diversity at the leadership level, but the immediate outcome is having a wider variety of input, ideas, and perspectives. I have often said in some of our leadership team meetings that if we come out of a discussion in total agreement without some debate, we probably aren’t doing our job.

GPJ: What is the biggest piece of advice you give to women seeking to pursue their own leadership goals?
Dr. Conroy: There is a great quote from Gandhi: “Be the change you want to see in the world.” I think this advice rings true for women who aspire to rise through the ranks of leadership. Sometimes you have to pave your own way even if there isn’t clear support or a clear path provided for you. And don’t ever give up!

GPJ: You are a member of the Women of Impact for Health Care, a group of female executives representing all sectors of the healthcare industry. What has it meant for you to be a part of such an organization, and what has been the most rewarding accomplishment you’ve witnessed or been a part of during your time as a member?

Dr. Conroy: I founded WOI in 2013 because there seemed an opportunity to bring like-minded women together to fix what is broken in health care. What I did not expect was the enthusiastic response to my invitation to the three cohorts to join the nascent group and the productive networking that arose so quickly among the members. We have launched a gender equity collaborative with the Carol Emmott Foundation and have 35 institutions/companies enlisted to discuss how to advance women’s leadership in health care.

GPJ: You have shown throughout your career to have a significant investment in the education and development of health care’s future physicians and providers. What excites you the most about shaping these young professionals?

Dr. Conroy: That is why I’ve always stayed in academic medicine. Our core mission is to train future physicians. It is gratifying to see the younger generation not only succeed but also teach some of us a thing or two as well. Our Chief Nursing Officer has a millennial mentor—a young nurse—who is teaching her about her generation. We can all learn from those who are just starting their careers.