

Gender differences in senior management decision making in the New England Area Health Service

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Abstract

Data from a questionnaire administered to senior managers in the New England Area Health Service (NEAHS) was used to examine gender differences in decision-making processes. The study found that female managers were more likely to report that they included staff in decision-making processes. The small size of the population restricted the statistical analysis; more meaningful findings may result if the study were to be repeated using a larger population of senior managers.

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What is known about the topic?

Some studies have shown that Australian managers generally limit staff involvement in decision-making processes, which can negatively impact acceptance of the decision. There are gender differences in management style and decision making.

What does this paper add?

A survey of senior managers in a NSW health service found female managers reported the use of more inclusive decision-making methods as compared with their male counterparts.

What are the implications for practitioners?

Opportunities for enhanced decision making may result from increased awareness of existing tendencies in decision-making methods.

THE NEW ENGLAND AREA HEALTH SERVICE (NEAHS) is situated in North West New South Wales. The senior managers manage a diverse range of services, such as acute hospital, mental health, community health and public health services. The NEAHS, as all NSW health services, underwent a major restructure in 1997 in response to the introduction of the NSW Government's Economic Statement for Health (NSW Health 1997). This plan provided a blueprint for the management of the health system under the Carr Government and represented a major overhaul of the economics of health in New South Wales. This health economic reform was aimed at providing opportunities to decentralise decision making and ensure local needs were taken into

consideration in planning of health services. It was stressed that the reform agenda could only be achieved through creating a spirit of genuine partnership in the workplace with the doctors, nurses and other professionals who deliver health services and the workers and managers who support them in this task.

One of the spin-offs from the restructuring process was renewed interest in the assessment of the management competencies of NEAHS managers and the subsequent delivery of training and development (Hartley 1996). To assist in this process, this study focused on identifying gender differences in the decision-making processes of the senior managers in the NEAHS.

Literature review

An examination of current management literature suggested that diversity is crucial to the success of organisations. Rosner (1995) argued that firms using the diverse talents of women managers stand to gain competitive advantages over those

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that do not. Wajcman (1996) pointed out that in the past men were seen as possessing characteristics suited to management. However, with increasing numbers of women moving into management, a question has arisen as to whether women bring a different style of management into organisations.

A great deal of research has been conducted over the past decade on women in management, particularly in areas such as: women's careers; women and leadership; the barriers to success; and access to power. Still (1993) suggests that women managers have entered into a transitional phase. On the one hand, the barriers to equality have yet to be overcome; but, on the other hand, there are major opportunities emerging with new organisational trends. In the new managerial world of teamwork and strategic alliances the management skills that are valued are no longer the skills of supervising, controlling and directing, but rather the softer skills of networking, team building and ethical behaviour. Women, it is argued, are more attuned to the new styles of management and are well placed to benefit from the changes that are underway (Zbar 1994).

Masreliez-Stein (in Jones 1996) regards the difference in male and female management techniques to be a cultural issue. She describes the male culture as individualistic and competitive. On the other hand, the female culture is collectivist, in which culture the group is more important than the individual. It is not who does the job that is important; it is doing the job well.

Hofstede (1980) conducted one of the most thorough studies of national culture in the workplace, identifying four basic characteristics of national cultures:

- Power distance — a measure of the difference in power between a manager and a subordinate;
- Uncertainty avoidance — a measure of a manager's tolerance for ambiguity;
- Individualism–collectivism — a measure of the importance placed on individual self-interests, versus the collective value of groups; and
- Masculinity–femininity — a measure of the balance of emphasis placed on challenge and

achievement relative to that given to co-operation and interpersonal relations.

Hofstede (1980) found that Australian business culture was based on strong individualism, low power distance between managers and their subordinates, a fair tolerance for ambiguity, and an emphasis on challenge and achievement. Bottger and Yetton (1987) also concluded that Australian managers work in an environment of high individualism and low power distance. Lewis, Morkel and Hubbard (1993) drew together the results of Hofstede and Bottger and Yetton, suggesting Australian managers often find the group process of decision making emotionally difficult because subordinates are not afraid to challenge authority. Consequently, Australian managers tended to not involve subordinates in decision making when their power was low and the information available was high. The problem that emerges is that while the manager may be capable of developing an adequate solution to the problem, the group may not accept and effectively implement the decision, having been excluded from the decision-making process. Lewis, Morkel and Hubbard (1993, p. 381) concluded that: "The Achilles heel for the Australian manager may well be their reluctance to involve others in the decision making when their participation is essential to building the consensus and commitment needed for effective implementation."

Methods

Study design

The target population for the study was all senior managers in the NEAHS. A descriptive questionnaire was developed and pre-tested on four respondents. Section one of the questionnaire collected demographic information on the respondents, such as gender, age, and qualifications. The questions in section two were based on Hofstede's dimensions of 'power distance' and 'individualism–collectivism' (Hofstede 1980). Examples are displayed in Box 1.

Section three was based on Bottger and Yetton's (1987) research on choice of method in decision making, in particular, the extent to which manag-

ers include subordinates in the decision-making process. This section comprised a series of vignettes with respondents asked to nominate the decision-making process they would most likely

use from four standard responses. Examples are displayed in Box 2.

I Examples of questions in Section 2 of the questionnaire

2.1 It is necessary for a manager to assert his or her authority when working with staff

1	2	3	4	5
Strongly agree				Strongly disagree

2.5 Staff members who disagree with their manager's decision should be brought into line

1	2	3	4	5
Strongly agree				Strongly disagree

2.10 The success of the team is more important than individual success

1	2	3	4	5
Strongly agree				Strongly disagree

Data collection

After receiving ethics approval, the questionnaire was distributed at a senior management meeting in September 1998. A non-identifying addressed envelope was provided. A reminder message was sent by email and/or fax to all respondents one week after the questionnaire was distributed. Two weeks after the initial questionnaire was distributed, another questionnaire was sent by the internal mail to all 40 senior managers. After 5 weeks, 37 questionnaires had been returned, a response rate of 93%.

Data analysis

Of the 37 respondents, only two respondents failed to complete all questions. One respondent did not report gender and another failed to answer three of the questions on choice of decision making. For each calculation, only the respondents with complete responses were considered. While this does result in changes to the sample size for some tabulation, the difference

2 Examples of questions in section 3 of the questionnaire

Four common methods used by managers to make decisions are described below:

Method 1: Decisions are made promptly and communicated to staff clearly and firmly. It is expected that staff carry out decisions loyally and without raising difficulties. (Tell)

Method 2: Decisions are made promptly, but, before going ahead, the manager explains them fully to staff. The manager gives reasons for the decisions and answers whatever questions staff may have. (Sell)

Method 3: The manager usually consults with staff before reaching a decision, listens to advice, considers it, and then announces their decision. It is expected that staff work loyally to implement decisions whether or not it is in accordance with the advice they gave. (Consult)

Method 4: When there is an important decision to be made the manager places the problem in front of staff with the aim of reaching a consensus. If a consensus is reached, this decision is accepted. If consensus is impossible, the manager usually makes the decision themselves. (Join)

Instructions:

Please tick the box of the method you would usually use in the following situations.

3.1 Strategic planning is required to implement imposed target restrictions in spending to meet a reduced budget. How would you develop your plan to achieve spending cuts?

Method 1[]

Method 2[]

Method 3[]

Method 4[]

3.5 Which method would you use if you are faced with a problem which may significantly alter the way your team members normally fulfil their work duties?

Method 1[]

Method 2[]

Method 3[]

Method 4[]

was minimal. The analysis was restricted to outlining the frequency of results and cross tabulations of independent and dependent variables. The responses in section two were best represented by the median score as the appropriate measure of central tendency for ordinal data. The modal value was used for the responses to section 3, as the most frequently occurring response provided the most appropriate statistic. A χ^2 test was applied to test the significance of the observed associations between variables.

Results

Demographics

Age

Most respondents were aged 40 years or more, with no respondent under the age of 30 years. 25% ($n=9$) were aged between 30 and 40 and 75% ($n=27$) over 40 years, as outlined in Box 3.

NEAHS as an organisation shows a similar age pattern. It is expected that the target population would be skewed towards older individuals, as management positions are generally held by those who have work experience and are progressing with their careers. There was no apparent gender difference in the age distribution of the respondents.

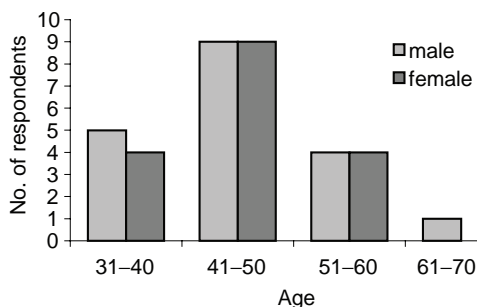
Qualifications

As expected, the respondents were generally highly qualified. Most ($n=21$) had a postgraduate qualification, with 37.8% reporting a postgraduate diploma or certificate ($n=14$), 13.5% reporting a masters degree ($n=5$), and 5.4% reporting a doctorate ($n=2$). The qualifications of male and female managers were similar, except that males were the only respondents to have attained PhD qualifications.

Length of time in present position

Most respondents (59.4%; $n=20$) had been in their positions for less than 2 years. The organisation has restructured over the past 5 years, the last time being within the previous 12 months. Consequently, the results would be skewed towards respondents in positions for short periods. While there were no significant gender dif-

3 Age of respondents



4 Decision-making method by gender

Method	1 (Tell)	2 (Sell)	3 (Consult)	4 (Join)
% male	5.56	61.11	27.78	5.56
% female	11.11	22.22	66.67	0

ferences, it was apparent that female respondents were more likely to have been in their position for less than 12 months, and there were no female respondents that indicated tenure of 10 or more years.

In presenting the analysis of results it was necessary to collapse the responses to the independent variables. Except for gender, the independent variables were collapsed into two categories to enable meaningful analysis of the dependent variables. Age was contracted to 'age 40 or below' and '41 and over'; qualifications were divided into 'degree or lower' and 'postgraduate'; and time in present position was reduced to 'up to 2 years' and 'more than 2 years'.

Power distance

The first six questions in section two sought to measure the difference in power between a manager and a subordinate. Respondent's responses were tabulated to give a power distance score. The analysis revealed no statistically significant results on the power distance score.

Individualism v collectivism (IC)

Five questions in section two sought to measure the importance placed on individual self interests versus the collective value of groups in decision

making by managers. Respondent's responses were tabulated to give an IC score. The analysis revealed no statistically significant results on the IC score.

Method of decision making

The responses to section three sought to distinguish between those who took a non-inclusive approach to decision making and those who took an inclusive approach, the difference being that those who are non-inclusive take a more directive approach to decision making and tend to consult infrequently, if at all, with staff. Those managers who take an inclusive approach tend to encourage staff to actively participate in the decision-making process.

Box 4 outlines the decision-making method by gender. Female respondents were significantly more likely to report use of inclusive methods ($\chi^2=6.149$; $n=32$, $df=1$, $P=0.01$).

Discussion

The only statistically significant difference found in this study was in the decision-making processes undertaken by the senior managers. Female managers reported greater use of inclusive methods than their male counterparts. That is, female managers were more likely to report that they included staff in the decision-making process.

The major limitation of this study was that the effect of situational variables on the choice of decision-making method was not adequately addressed. Because of the relatively small number of senior managers in the organisation, detailed information could not be collected to address these variables without identifying the respondents.

Implications

At the time the study was conducted there was interest within the NEAHS to assess management competencies with the aim of delivering necessary training and development (Hartley 1996). Lewis, Morkel and Hubbard (1993) stated that the selection of a decision-making approach by a manager is not dictated by culture and is not immutable. They suggested that management effectiveness can be enhanced by education, and that much of what

is required from our managers is in fact learned. The findings of this study were reported to the participating senior managers and used to facilitate discussion of future training and development programs.

To extend this study, it would be interesting to elicit information about the management style from the managers' subordinates and compare this with the information given by the managers themselves. The small size of the population in this study was problematic with respect to the accuracy and sophistication of the statistical analysis. More meaningful findings may result if this study was repeated using a larger population of senior managers, such as all senior health service managers in NSW.

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