FACULTY OF ECONOMIC AND MANAGEMENT SCIENCES

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Women in Leadership in Public Healthcare: A case study of Women in Leadership in the Klipfontein Mitchells Plain Sub Structure

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A research assignment to be submitted in partial fulfilment of the requirements for the award of a Master of Development Studies at the Institute for Social Development, Faculty of Economic and Management Sciences, University of the Western Cape, South Africa.

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ABSTRACT:

Women have been progressing in the workforce over the last few decades in many countries. There has been an increase of women employed from many sectors of society in various fields in private and public sector environments. South Africa became a democratic country in 1994, giving rise to many new developments and opportunities that were previously not considered for a woman and, more specifically, a woman of color in the public sector. The International Labor Office (ILO) in 2008 drafted a report of statistics of women in employment worldwide. Figures in 2007 indicated that 1.2 billion women around the world are employed with an 18.4% increase since 1997. However, in Sub-Saharan Africa 67.9% of women are employed in agriculture and only 5.8% are employed in industry while 26.4% are employed in services (Nkomo and Ngami, 2009).

This study seeks to identify if there has been much improvement for women in this country and more specifically in the Western Cape. Due to the nature of this study the researcher chose to focus on one government department in the Western Cape, that being, The Department of Health and the main objectives the researcher has attempted to uncover is, has women's representation in employment grown in the Western Cape public sector? Have women in leadership progressed in the public health sector of the Western Cape?

The study took place in the Department of Health at the Klipfontein Mitchell's Plain Sub Structure facilities and the Mitchell's Pain District Hospital. The researcher used a qualitative method by using both primary and secondary data sources where primary data was telephonically collected through questionnaires and semi-structured interviews as well as email correspondence between the researcher and the participant. Secondary data sources used included academic literature, government legislation and research documents to inform the study and fully support the research objectives. The participants who partook in the study included 10 females working in the Klipfontein Mitchell's Plain Sub Structure. Their experiences and their area of expertise and work knowledge differs to ensure a broad approach was taken during the data collection process. The study concludes with positive responses and feedback from the various participants as well as outlining areas that require further support and commitment in achieving fair and equitable female leadership in the public service.

Key Words

Leadership, Women, Management, Women in Leadership, Managerial Level, Career Pathing, Public Health Sector, Equity and Gender Inequality.

DECLARATION

I declare that "Women in Leadership in Public Healthcare: A case study of Women in Leadership in the Klipfontein Mitchells Plain Sub Structure" is my own work, that it has not been submitted for any degree or examination in any university, and that all the sources that I have used or quoted have been indicated and acknowledged by complete references.

Fagmeeda Carelse-Johnson

Signature: F. Carelse-Johnson

Date:

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I would like to take this opportunity to thank everyone who played a role in assisting me with the completion of my studies, including my family, colleagues, and fellow UWC peers and staff.

This past two years have been tough as the world experienced a pandemic that we are all currently trying our best to recover from. Many lessons and experiences have been shared across the world and it has confirmed the importance of a solid, reliable health care system with competent and capable leadership.

It has been an honour and a privilege to work in the department of health and to have the opportunity to research my topic in my working environment. A special thanks goes to my colleagues and all the committed and hardworking people currently employed in the department of health in Klipfontein Mitchells Plain Sub Structure. I appreciated all your help and support during my study period.

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And to my family, my husband, and my children, for having patience with me during this entire process. Your unyielding encouragement has carried me through this process as this could not have been achieved without your support and reassurance.
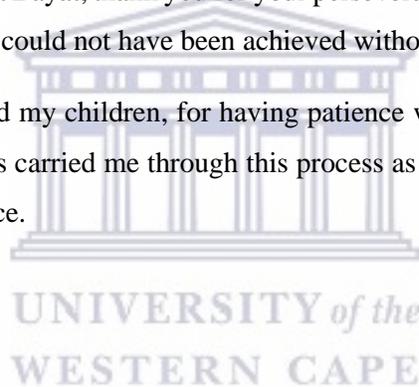
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LIST OF ABBREVIATIONS:

AA	Affirmative Action
ACA	American Counseling Association
ANC	African National Congress
BBBEE	Broad Based Black Economic Empowerment
BCE	Basic Conditions of Employment
BEE	Black Economic Empowerment
CEE	Commission for Employment Equity
CEO	Chief Executive Officer
DoW	Department of Women
DPSA	Department of Public Service and Administration
EE	Employment Equity
EEA	Employment Equity Act
EU	European Union
GCP	Gender Centered Perspective
GEMSA	Gender and Media Southern Africa
GFP	Gender Focal Point
GGGI	Global Gender Gap Index
GOS	Gender Organization System
IFC	International Finance Corporation
NDP	National Development Plan
OSP	Organization Structure Perspective
PEPUDA	Promotion of Equality and Prevention of Unfair Discrimination Act
PHC	Primary Health Care
PSA	Public Service Association
SA	South Africa
SMS	Senior Management Service
StatsSA	Statistics South Africa

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UK	United Kingdom
USA	United States of America
WEF	World Economic Forum
WNC	Women's National Coalition

CHAPTER ONE: INTRODUCTION

1. Introduction

This study examines the evolution of women in leadership in the public sector in South Africa with a specific focus on the health sector and the Klipfontein Mitchells Plain Sub Structure in the Western Cape. While the goal of the government and the public sector is to promote the advancement of women in all sectors of society, the progress and promotion of women tends to be a slow process. This is despite the fact that women in leadership positions, particularly in the health care section, potentially can lead to better welfare outcomes for lower-income households and society in general (International Finance Corporation, 2019).

This study will determine the impact of women in management positions in a public health facility in the Klipfontein Mitchells Plain Sub Structure, Western Cape and examine if there has been an increase in women in management positions in public health facilities over the past 10 years. It is critical to evaluate whether any changes have been made in the public health sector over the years and whether the various initiatives that have been implemented by both the public and private sector to increase female leadership has had an impact, especially on the public health sector. When more women take up leadership positions in this country, it will surely have a positive effect not only on the economy, but it will also encourage other females to follow suit and aspire towards managerial and leadership positions. The health care sector is exclusive in that most of the personnel consists of women. However, women are mostly employed in positions that restrict their professional advancement and entry to leadership, decision making and power. Women are mostly poorly represented in the senior leadership positions of the health industry. Their involvement in senior and leadership positions differs by country and by region and whether they are working in the private or public sector plays a significant role as well. Based on the World Economic Forum, only 35% of the leadership roles in the universal health care industry are performed by women (International Finance Corporation, 2019).

"Before 1994, women in South Africa were in the minority in the workplace and were not given equal opportunities with their male counterparts" (Mello and Phago, 2007). The fact that this study measures improved access to leadership positions and the potential shattering of the glass ceiling in public institutions is indicative of the progress that women have made post 1994, especially since the introduction of key legislation such as The Constitution of South Africa of 1996, The Employment Equity Act (EEA) 55 of 1998, The Basic Conditions of Employment Act 75 of 1997 and The Promotion of Equality and Prevention of Unfair Discrimination Act (PEPUDA) 4 of 2000.

A woman's development in her profession can be affected by many reasons. These can be individual factors that can be achieved by an individual, organizational factors that are possible in that organization, as well as societal and systemic factors, and all these play a role in that career path (Akpinar-Sposito, 2013). "Occupational segregation takes place when certain jobs are referred to as male or female jobs. This creates cultural attitudes and varies between jobs and in countries depending on which educational and academic systems these countries have in place" (Akpinar-Sposito, 2013).

"Women tend to face greater barriers and obstacles than their male counterparts and therefore must rely on strategies for their own growth and development" (Akpinar-Sposito, 2013). Discrimination against women in the workplace takes many forms. These include job exclusion, wage differences, sexual harassment, fewer opportunities for career progression, and the absence of development opportunities in their career. When a woman enters the working environment, additional education needs to be given, which includes sex and gender biases and the need to be aware of workplace inequalities (Akpinar-Sposito, 2013).

The working sector can also discriminate against working mothers and stereotype them as not committed enough or responsible enough to take on senior management positions due to their additional responsibility of raising a family. It is therefore assumed that women cannot be successful at their jobs while having other priorities as well (Akpinar-Sposito, 2013).

In the past women have been overlooked and sidelined and viewed as inadequate in comparison with men when it involved social and power relations, and this has triggered substantial social, cultural, and economic disparities. Females of all ages who are or have been in the previously disadvantaged groups are today still excessively affected by poverty and its fundamental consequences due to the legacy of apartheid (South African Human Rights Commission, 2013-2017).

1.1 Background

There are various aspects that impact the actual execution of gender equality in South Africa. "These include the digital divide, economic empowerment, gender relations, gender-based violence, poverty, women's entry to political power and women's movement in the workplace" (Bangani and Vyas-Doorgapersad, 2020).

Female representation in senior management positions has improved on a universal level over the past few decades (Osituyo, 2018). However, recent research indicates that there are limitations to women's progress to senior levels of leadership due to barriers in that organization (Osituyo, 2018). "Women in the public service in a senior level position are rare in South Africa and they are positioned in huge numbers at the lower management levels" (Osituyo, 2018).

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"In South Africa, gender equality is a constitutional human right which means women are given the same legal standing as men" (Bangani and Vyas-Doorgapersad, 2020).

While women are advancing in the public service sector, they constantly face obstacles and misfortunes on their journey of progress and development (Riccucci, 2009). Gender equality has had many opportunities in recent times; however, the sociological assessment of women's development and progression has had restricted evaluation (Schein, 2007). "Legislative and social discourse on gender equality issues has not been able to achieve total equality in terms of adequate female representation in organizational management structures" (Osituyo, 2018).

"Due to the prominence and the position of the South African public sector there appears to be value in research focusing on identifying the reason why women are active in large numbers but rarely reach senior managerial positions" (Osituyo, 2018). "Gender equality has remained a contested area in the South African public service, with women specifically being challenged when trying to achieve strategic leadership positions and equal representation in decision-making" (Bangani and Vyas-Doorgapersad, 2020).

1.2 Problem Statement, Research Questions and Objectives

Problem Statement

This study examines factors that may prevent females from moving into senior managerial or leadership positions in the Klipfontein Mitchells Plain Sub Structure.

Former studies confirm that women are gravely lagging behind men in taking on leadership roles in health care as they are affected by many obstacles. "A women's additional worth in the health care environment is recognized, however women leaders encounter social and cultural trials that define and weaken their professional capabilities" (Kalaitzi *et al.*, 2019).

"Women are underrepresented in management positions in the Western Cape and in South Africa. Recent statistics showed that women make up nearly 51.2% of the population (StatsSA, 2019), but the country's employment figures showed that women accounted for about 43.8% of the 16.5 million people employed in 2018" (StatsSA, 2019).

"On 31 March 2017, according to the Department of Public Service and Administration (DPSA) (2018), the public sector had 10 254 filled senior managerial positions. Of these, 41.3% were occupied by women and 58.7% were occupied by men. By the end of the 2016/2017 financial year, the public sector had 1 774 more male senior managers than female senior managers, which depicted the absence of employment equity in the public sector. Departments are unfortunately not meeting their equity targets" (Bangani and Vyas-Doorgapersad, 2020).

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Nhlapo (2019) advised "looking further than these targets and working towards changing the gender relations in the public service to advance all genders equally as members and recipients of the emerging South African democratic state, and to foster a deep-rooted reflexive intervention for this, particularly at senior management levels".

"In this country's public service sector, there are only eight national and 19 provincial government departments that have attained 50% of women in Senior Management Service (SMS)" (DPSA, 2018). "Thirty-two provincial departments and 22 national departments have between 40% and 49% women in SMS (DPSA, 2018). Forty-four provincial departments and 13 national departments have between 30% and 39% women in SMS (2018). At the time there were 19 provincial departments that had less than 30% representation of women in SMS" (DPSA, 2018).

"Untapped available talent of women in health weakens the contribution they could make to effective leadership for health systems development. Better understanding of women leaders can help comprehend how to unlock this talent by recognizing the obstacles, acknowledging enablers, and using effective methods to become effective health leaders" (Javadi, *et al.*, 2016).

There are various studies on women in senior managerial and leadership positions across the globe, but very few speak to women in the public sector environment, especially in a country such as South Africa which deals with conflicts in the public health sector context.

Research Questions

With regard to the research problem, recognized previously, the main aim of this research is to offer answers to the following research questions:

- Is there a relationship between gender-role perceptions and women's career progress in the Klipfontein Mitchells Plain Sub Structure?
- Has there been an increase in women in management positions over the past 10 years in the Western Cape Health Department, specifically the Klipfontein Mitchells Plain Sub Structure?
- Are women managers faced with more challenges in the workplace than their male counterparts in this Sub Structure?

Objectives

With regard to the research problem identified above, the main purpose of the research is to provide answers to the follow general research objectives:

- To investigate and unpack the gender equity profile in the Department of Health and more specifically the Klipfontein Mitchells Plain Sub Structure.

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- To examine the current employment equity statistics to determine whether there has been an increase in women in leadership in the Sub Structure and if so, why?
- To determine the various challenges faced by females currently working in the Sub Structure that hinder their upward mobility.
- To determine which barriers continue to stand in the way of women's upward mobility and try to formulate recommendations moving forward.

1.3 Rationale and Significance of the Study

In the last 30 years, studies on women leaders and managers have grown exponentially in the field of organization studies (Ely and Padavic, 2007). However, the scholars writing on women in leadership and management have been predominately from the west, largely the United States and Europe. "Research on women leaders and managers in other parts of the world are minimal by comparison and African women leaders and managers have been mostly unseen in this assembled body of knowledge" (Nkomo and Ngami, 2009).

"Accordingly, in the developed world the gender breach has lessened since 1980 and remained moderately unchanging over the past 15 years. By 2017, women earned 82% of what men earned" (Allen, 2018). Globally, the role of women in corporate management was highly heightened in the last two decades and women have been employed intensively in senior and middle management positions worldwide. However, in developing countries top-level managerial positions are specifically confined to men based on the observation that managerial seats are commonly seen justifiable to be occupied by men rather than women (Ahmed, Uddin, Ashikuzzaman and Khan, 2016).

"In South Africa, according to the Department of Public Service and Administration (DPSA) (2018), male supremacy increases with salary levels so much so that the difference in male representation in Senior Management Service (SMS) between salary levels 13 and 16 is 15.98%". "Even more alarming is salary level 16 (Director-General) where the percentage difference is 47.56%, which means that there are 78 more male Directors-General than females" (Bangani and Vyas-Doorgapersad, 2020).

"In the rank beneath senior management, the proportion of women is much lower compared to men for all senior management income levels (DPSA, 2018). Salary level 13 has 42.20% female vs. 57.80% male, salary level 14 has 40.81% female vs. 59.19% male, salary level 15 has 37.76% female vs. 62.24% male and salary level 16 has 26.22% female vs. 73.78% male" (Bangani and Vyas-Doorgapersad, 2020).

"It is clear from the above that men outnumber women at SMS level across all race groups" (Bangani and Vyas-Doorgapersad, 2020).

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When trying to determine why the disparity in pay and position persists, there are various aspects involved, including the corporate culture. "Corporate culture and societal norms are both crucial aspects which need to be considered with regard to women in leadership and moving forward it is important to evaluate how women may unintentionally contribute to these tenacious workplace inequalities and ultimately what can be done about it" (Allen, 2018).

"Scholars should therefore not disregard unpacking the practices and involvement of African women who are appointed in leadership and management roles in African organizations, as well as the barriers to their success" (Nkomo and Ngami, 2009). This study seeks to shed light on the plight of African women.

The rationale of this study is to evaluate and recognize the effect of women in leadership in the public sector with an emphasis on women in leadership in the public health sector in the Western Cape and specific focus will be on the Klipfontein Mitchells Plain Sub Structure.

This study intends to reveal whether women are being disadvantaged in the public health sector when attempting to move into managerial positions and when trying to move into higher levels in the organization.

1.4 Overview of the Study

Leadership is widely regarded as imperative in the establishment of a health system, and it plays a critical role in ensuring a reactive and strong health system. Management and leadership are often brought together and referred to as one concept, however in this study the concept of leadership is a separate phenomenon and forms part of a vital list of proficiencies required for managers working in the health system (Shung-King *et al*., 2018).

Leadership in health care is frequently reflected as a highly intensive, separate component of the wider management area (Pihlainen *et al*., 2016) and even though there is a lack of training, doctors are often called to take on leadership as well as management positions in health care. Actions to nurture and promote leaders and managers in the health care sector have been inadequate. Whaley and Gillis (2018) stated that this is generally due to the programs in place to develop leaders in the sector not being suitable to meet the needs and challenges that are faced in the health care sector (Mukwakungu, Mabasa and Mbohwa, 2018).

"Health systems are known as multifaceted adaptive systems, involving co-dependent administrations and establishments which are diverse in form and structure. These complex adaptive systems form and are formed by the actions of individuals and teams located in them. Due to the integral position of the health sector in society, this co-dependence extends further in the health system and all working in it, which are influencing and being influenced by broader societal factors" (Shung-King *et al.*, 2018).

"The gendered nature of health systems, with their various health occupations strongly dominated by either males or females, is one of the influences that forms leadership. Gender is largely disregarded in the overall and health-specific literature, even though there are global cries for gender parity with legislative leaders" (Shung-King *et al.*, 2018).

Women leaders come across societal and cultural challenges that outline and weaken their career potential. This emerges across several professions including health care. Limited consideration has been given to the broad dynamics among gender, health care leadership and societal culture (Kalaitzi *et al.*, 2019).

There is a critical need to focus on leadership and management development in the African continent, and due to the skills shortage in many African countries, Africa faces challenges to the sustainable socio-economic development mandate that all leadership talent be developed and employed to lead organizations and institutions on the continent to prosperity (Jackson, 2004).

Studies have shown that many health practitioners have the leadership capabilities to perform the job, but lack the confidence to carry leadership roles, and this ultimately affects the administrative performance of health care (Gilson, Elloker, Olckers and Lehmann, 2014). Research conducted in the past found that many health practitioners only acknowledged the current management team to undertake leadership development programs (Whaley and Gillis, 2018).

Females lead the marketplace when it comes to health care. Females are responsible for 80% of procuring and accessing decisions that affect their health and those of their loved ones. The main priority of health care clients is to ensure they receive timely and quality care for themselves and their loved ones. Better-quality health results and excellence in client care and service delivery all directly influence client protection and patient referrals. "Having more persons in leadership attuned to the clients' needs, experiences, and perspectives can translate into increased innovation and improved business opportunities". Health care institutions can thus profit by unpacking and identifying their personnel dynamics and taking full advantage of their possibilities for growing women's positions in senior leadership and management (International Finance Corporation, 2019).

1.5 Thesis Outline

This thesis will consist of five chapters. Chapter one serves as the introduction of the study; it gives a background to the research as well as the rationale and significance of the study.

Chapter two provides a detailed review of existing literature on women in leadership roles globally as well as in the South African public service. It will look at various theories written on the topic and related issues.

Chapter three discusses the research design and methodologies, describing the various tools and techniques that were utilized while conducting this case study.

Chapter four identifies the key findings and recommendations from the data analysis processes that were undertaken in completing this case study as well as the key results and conclusions that will be acknowledged.

And lastly chapter five will give a summary of the previous chapters and will conclude this study with a set of recommendations and the conclusion.

CHAPTER TWO: THEORETICAL AND CONCEPTUAL LITERATURE

2.1. Introduction

This chapter will review literature relevant to the study. It will investigate and analyze various research studies conducted on women in leadership roles with particular interest in women in leadership in the South African public health care sector.

Democracy has brought about many positive changes in South Africa, especially for the previously disadvantaged groups in the country. Numerous laws and policies have been implemented since the inception of democracy and much of this legislation speaks to the advancement of women in South Africa. The intention of this study is to determine whether there has been an increase of women in leadership roles in the public health care sector and in the Klipfontein Mitchells Plain Sub Structure specifically. This study will identify the legislation and consider the implementation of it and will attempt to determine various challenges experienced and possible recommendations to these challenges. It will evaluate various theories and empirical studies on the subject from scholars around the world.

This chapter will review current theoretical literature on the effect of women in leadership in the public sector. It opens with a background on women in the past in leadership followed by a discussion of various theories of leadership to provide a historic setting, emphasizing how the different theories progressed and how the transformation of women leadership took place.

The evaluation of previous literature on this topic will also assist this research by determining what has been put in place to address the disadvantages and inequalities experienced by women in the past. By evaluating these theories, it ensures opportunities for reviewing and analyzing them and to determine the effectiveness of what has been put in place to remedy the injustices and discrimination towards women in the past.

This process described above will be used to rationalize and enhance facts on promoting women in leadership and decision-making positions at various high levels in the public sector. In this chapter the theoretical framework will focus on strategic and upper-echelon theories (also known as the management theory), concepts of leadership, leadership styles, leadership, and identity and lastly, women in leadership and in the public sector.

2.2 Literature Review

"Women have made significant developments in joining and moving up in the managerial ranks of organizations, but worldwide men maintain dominance in leadership and executive roles" (Eagly and Carli 2007; Schein 2007).

Women have progressively shifted toward more gender equality at home and in the workplace. Differences in gender roles and routines have emerged with men now undertaking more domestic duties and childcare at home. Societal directions on custom and gender roles have become more adaptable and fairness in a marriage is now more common. Women are now given the opportunity to steer life in and outside the home with more ease and without restrictions. However, women are still understated in leadership roles and show an irregularity in high leadership positions compared to men (Chin, 2011).

This chapter will explore various factors regarding women in leadership. It will be separated into three segments; the first segment will relate to national legislation pertaining to the importance of women's growth and advancement in the public sector; the second will look at various theories that have emerged over time regarding the difference in male and female leadership and will look at what it means to be a leader and the various aspects associated with leadership; and the last section will look at women's growth in the public sector with specific attention to women in leadership in the public health sector.

This review of literature aims to unpack the blockages and obstacles women are faced with in their career pathing, and to identify research gaps which this study attempts to fill.

2.3 National Legislation Pertaining to Women

"The Constitution of the Republic of South Africa, adopted in 1996, is the highest commandment of the country" (Constitution of SA, 1996). The power and authority of the Constitution defines its requirements involving any matter, but for this purpose the focus is on the development of women.

"The provisions of the constitution state that neither the state nor any other person can disadvantage women by excluding them from managerial and promotional positions in the South African Public Service" (Constitution of SA, 1996). "The Constitution promotes fair discrimination which promotes equal opportunity for the development of women and any other previously underprivileged groupings" (Constitution of SA, 1996).

Section 9(2) of the Constitution should be the starting position in the South African public service to guarantee the constitutional directive succeeds in the employment of female applicants to executive positions (Mello and Phago, 2007).

The Employment Equity Act (EEA), (Act 55 of 1998), intends to support the purpose of the Constitution by encouraging equity. This Act was established to unpack the disparities of the apartheid era and to ensure that women are given equal opportunities to managerial and leadership positions in the public service. This legislation therefore proposes the implementation of affirmative action. In section 15(2) of this Act, legislation pertaining to affirmative action aims to eradicate employment challenges and unfair discrimination against women as well as other disadvantaged groups (www.gov.za).

"The Employment Equity Act as well as the Public Service Act, (Act 103 of 1994) speaks to preferential treatment of women and other disadvantaged groups and it is therefore vital to consider when employing qualified women in management positions in the public service" (www.gov.za).

"The White Paper on Human Resource Management, 1997 focuses on two important issues namely, recruitment which should allow people of all races an opportunity to apply for posts, especially women. It also speaks to diversity management in the workplace to ensure male employees understand and appreciate gender equality and the important role women make in the working environment" (Mello and Phago, 2007).

The White Paper on Affirmative Action in the Public Service, 1998 specifically focuses on employment in the public service and it promotes affirmative action for women and other disadvantaged groups (www.gov.za).

Lastly, "the White Paper on the Transformation of the Public Service, 1995 states that within four years of execution of the affirmative action program at least 30% of leadership positions in the public service should be filled by women" (www.gov.za).

South Africa has a young democratic system that is at present still contending with the disparities of the past, which not only related to color or race but also to gender and several more inequalities. Prior to 1994, women in South Africa were not offered the same prospects as their male counterparts, which could have enabled them to determine their own managerial abilities and expertise, particularly with regard to management positions in the public sector. Therefore, these laws were designed to put in place and address the challenges facing the previously disadvantaged women in South Africa. It is therefore important to evaluate the progress made since these Acts were passed to determine if such objectives have been achieved (Mello and Phago, 2007).

The Promotion of Equality and Prevention of Unfair Discrimination Act (PEPUDA) (Act 4 of 2000) emphasizes section 9 of the Constitution by providing for the following: the fair fulfillment of all rights and freedom by each individual; the promotion of equality; values of non-racialism and non-sexism as outlined in section 1 of the Constitution; the prevention of unfair discrimination and protection of human dignity as

stipulated in sections 9 and 10 of the Constitution; and lastly the prohibition of hatred, based on race, ethnicity, gender or religion, that constitutes incitement to cause harm as anticipated in section 16(2)(c) of the Constitution. PEPUDA ensures there is an outline that eradicates unfair discrimination and the promotion of equality beyond employment matters. The promotion of gender equality is a priority in this Act. The Act also ensures the education of the public on matters to do with inequality, unfair discrimination, hate speech and harassment and it provides remedies to victims of unfair discrimination (Department of Women, Strategic Plan, 2015-2020).

2.4 Theoretical Framework

This section will explore various theories written on the differences between male and female leadership and what barriers exist for females, which prevent them from progressing into a leadership role.

2.4.1 Strategic Choice Theory

Strategic choice theorists maintain that leading senior managers make decisions that affect an institution's results and performance (Child, 1972; Dean & Sharfman, 1996; Hambrick & Mason, 1984; Hrebiniak & Joyce, 1985). "The strategic choice perspective is ingrained in action theory, where institutional structures and responses are designed by the people in authority (Astley & Van de Ven, 1983:61). This perspective emphasizes the people in authority to describe organizational processes". Effective strategic choice necessitates the practice of control, and those institutional performers hold the decision to perform on their own. "Consequently, Chief Executive Officers (CEOs) are presumed to have considerable flexibility in shaping their institutions" (Finkelstein & Hambrick, 1996:61).

Miles and Snow (1978) acknowledge three features or structures of the strategic choice perspective, namely, that this perspective interprets managerial or strategic choice as the key connection among an institution and the environment; it focuses on managements' capability to produce, acquire, and manage the institution's environment; and last of all it incorporates the various ways that institutions respond to environmental situations. "Supporters of strategic choice theory discard the concept of environmental circumstances defining institutional adaptation and highlight the part of leaders in defining how organizations respond to institutional pressures" (Bourgeois, 1984:61).

"Strategic choice theory was first applied in the areas of politics and international relations where it was applied as an expressive means for decision making and for unpacking unwanted opinions" (Lake & Powell, 1999). This theory highlighted the crucial purpose of specific decisions while affirming that there is not one unanimously appropriate rule as the structure of the organizational environment is too complicated (Miles et al., 1978; Zimmermann, 2011). Strategic choice theory argues that ensuring that the correct choice is made is dependent on certain environmental aspects, such as suppliers, and on the strategic type of the

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organization, but most significantly on the judgement of the central combination to lead purchasing objectives and actions. "Nonetheless, as interdependencies and cooperation can improve performance strategic choice theory recommends to delicately stabilize the dependency of suppliers with the required rate of return" (Rohof, 2013). Notwithstanding the backing that strategic choice theory has achieved over the last decades there is still doubts about it, that has been created by more deterministic management science (Rohof, 2013). Eddy, S.W.N.G. (2008:61) maintains that "even though institutional authorities may pressurize institutions to implement employment equity, institutional leaders and people in authority apply strategic choice in the way they react to these demands".

This theory or perspective focuses on the capabilities of top management and leadership in the institution to make decisions and exercise control in the working environment. It does not include gender as part of its attention, which may be a positive feature as this theory's objective is on ensuring productivity is achieved. It only emphasizes the importance of a leader in an institution as the person who is there to set an example and provide strategic direction for all employees to follow.

2.4.2 Gender Organization System (GOS)

This perspective is a systems-oriented approach, that identifies the concurrent collaboration between the individual, the institution, and the civilization. "The gender organization system combines the suggestions and opinions of both gender-centered and organization structure perspectives" (Fagenson, 1993; 1990). "This perspective proposes that the restricted progress of women in institutions is not due to their gender (the gender-centered perspective) or to the organization structure (organization structure perspective), however both equally play a role in affecting and shaping women's conduct in the workplace" (Akpinar-Sposito, 2013).

This system suggests that people, institutions, and societal structures change at various stages in reaction to environmental differences and as a result women in various parts of the world have not advanced into executive roles at the same time (Parker & Fagenson, 1994). "The gender organization system (GOS) context provides an all-inclusive method to examine the concerns affecting women's leadership development" (Jabeen, 2001). And the gender organization system (GOS) approach happens to be the most valued theoretical framework for women in management and leadership research (Omar & Davidson, 2001). The ultimate declaration of a few theories is that culture remains unchanged and immovable. However, civilizations have acknowledged changes in morals relating to the role of women and the idea of gender equality (Yukongdi & Benson, 2005).

This theory is based on the combination of people and the structures currently in place in the institution, and it argues that both the institution and its leadership play an equal role in either the progress or constraint

of women in the institution. It explains the importance of environmental factors as well as the culture and ethos in the institution. It argues that if these factors are not addressed and remain unchanged women who attempt to progress will remain constrained.

2.4.3 Upper-Echelon Theory

"The upper-echelon theory anticipated that an institution replicates its managerial team, and the CEOs features be utilized in a way in which institutional results can be predetermined" (Hambrick & Mason, 1984). Demographic information provides several diverse advantages, such as firstly, demographic variables are easily observed, inconspicuous, and easy to measure (Harrison, Price, & Bell, 1998; Milliken & Martins, 1996; Wiersema & Bantel, 1992). Secondly the efficiency of the demographic method which has been utilized in several research studies based on the connection among management features and institutional results (Wiersema & Bantel, 1992). And thirdly, some contextual features of *a priori* interest, which do not have close psychological counterparts (Finkelstein & Hambrick, 1996).

It is for this reason that the use of demographic information seems to be a rational option and is coherent with earlier studies in strategic leadership. These variables include:

2.4.3.1 Age

Age is anticipated to connect with boldness relating to diversity (George & Yancey, 2004). "Younger managers are more likely to hold positive attitudes toward diversity because of their socialization and acculturation in an era that is more open-minded of diversity than older generations" (Sawyer, Strauss & Yan, 2005; Schwartz, 1992:63). The scholars of today who will develop into the future leaders are raised in a civilization that progressively appreciates fairness between all people and this is taught in both educational institutions and the media (Oppenheimer & Wiesner, 1990). Younger CEOs are expected to have higher abilities and skills, are more recently qualified, and are known to ensure that more risk-taking, flexibility, and innovation takes place (Hitt & Tyler, 1991; Kitchell, 1997; Wiersema & Bantel, 1992).

2.4.3.2 Gender

Based on the strategic choice perspective, strategic choices are more than likely initiated on the decision-maker's observations and beliefs.

Women are more probable compared to men to sanction the knowledge of affirmative action (Beaton & Tougas, 2001; Harrison et al., 2006). "A plausible reason for this discovery is that identifying with one's social group impacts the foundation of behaviors such as in-group preference and self-interest" (Kanter, 1977; Kravitz & Platania, 1993:63). The self-interest theory proposes that a person's behavior will be determined mostly by positive foreseeable results that gratifies an individual's self-interests (Bell, Harrison,

& McLaughlin, 1997). Female managers are more commonly exposed to some sort of discrimination themselves or to be more alert to the shortcomings women deal with in the working environment due to their gender (Mighty, 1996). "It is imaginable for women who have attained status in leadership positions to reject that there were universal disadvantages towards women, a trend known as the "queen bee syndrome," and are therefore unwilling to assist other women" (Rindfleish, 2000).

2.4.3.3 Race

Racial descriptions of a leader play a part in numerous leadership perceptions, incorporating leadership attitudes, behavior, and performance (Bartol, Evans, & Stith, 1978). "In the context of growing social awareness of truly multicultural origins of many immigrants, managers aware of their own non-White race are expected to be more accepting of diversity" (Mighty, 1996:64). The similarity-attraction model proposes that people are more fascinated to choose to socialize with people whom they see as comparable to themselves. Eddy, S.W.N.G. (2008). Opinions made previously stated that demographically comparable institutional members give the impression to appreciate essential advantages that less comparable people are less likely to appreciate (Pfeffer 1983). Reports suggest that the race (and gender) configuration in the top executive teams forecasts the race and gender configuration of the management staff in general. (Kalev *et al.*, 2006). "Top executive teams with comparable traits and understandings profit from enhanced communication, larger social groups, and admission to various networks, which can ultimately affect their professional development outcomes" (Ibarra, 1995:64).

2.4.3.4 Educational Background

Managers' educational history serves as an indicator of their individual traits and cognitive inclinations (Hambrick & Mason, 1984). "When taking cognitive theories into account suggestions were made that due to education and cognitive skills being interrelated, more highly sophisticated leaders are better equipped to produce inventive resolutions" (Bantel & Jackson, 1989:64). This may be the reason why more qualified people are more interested in invention (Kitchell, 1997). Miville *et al.*, (1999) found racially accepting behaviors relate to certain characteristics of intellectual ability, or those who are more racially accommodating were merely more cognitively sophisticated. Leaders with advanced stages of schooling have more than likely had better experience of diversity, attained more knowledge about various people, established greater analytical skills, and become more flexible, open-minded, and open to diversity (Mighty, 1996). CEOs' demographic features namely age, gender, race, and educational background are believed to play a role in their strategic attitude toward diversity (Hambrick & Mason, 1984). "An individual's educational history may assist as a discolored marker of socioeconomic history, motivation, cognitive style, risk propensity, and other fundamental characteristics" (Hambrick & Mason, 1984:65).

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2.4.4 Gender-Centered Perspective

The gender-centered and organization structure perspective is customarily used by academics to try to determine why women are disadvantaged in leading executive roles (Fagenson, 1990).

According to this perspective, which is also known as the person-centered view, women's performance and restricted representation in higher level positions are due to issues that are inherent to them, their inappropriate characteristics, perceptions, approaches, and manners (Fagenson, 1986; Harragan, 1977; Homer, 1972; Putnam &Heinen, 1976; Riger & Galligan 1980; Terborg, 1977).

The gender-centered perspective views women as being created by society to hold certain traits that will conflict with the requirements of a leadership position and is in conflict with them being promoted to the higher position in their institutions (Fagenson, 1986; Harragan, 1977; Homer, !972; O'Leary, 1974; Riger & Galligan, 1980; Schein, 1973, 1975).

This approach implies a hierarchical association among men and women with one gender (male) leading and in control, and the other gender (women) subsidiary and mediocre (Scott, 1988). "The gender-centered perspective produces basic, dual groupings that disguise the intricacy of the description of gender in institutions" (Bell & Nkomo, 1992).

This perspective alone is not suitable to describe why there are fewer women in leading executive ranks, specifically when studies have found women's development in institutions continues to be limited, even in circumstances where women are as capable and proficient as men (Cleveland *et al*., 2000).

A key challenge with the gender-centered perspective is its reliance on sex role features in describing suitable traits of leaders. Sex roles are abstracted as undisputable and not open to change (Akpinar-Sposito, 2013). "The research methodology generally used to test the gender-centered notion comprises sex as the independent variable and behavioral, cognitive, personality and attitudinal measures as the dependent variables" (Akpinar-Sposito, 2013). Part of this perspective is the belief that the symbolic existence of women in leadership roles has played a part in gender stereotyping. Consequently, the sex variances among men and women can be simplified by their diverse relational depiction and status in the institutional hierarchy (Akpinar-Sposito, 2013).

The focus of this theory is purely on the person and their inherent traits and characteristics that prevent them from achieving leadership roles. It is a person-centered approach, however the person it is focused on is a woman. This theory is built on the fact that a woman's place has been created in society and this place does not include or involve a woman attaining a leadership role. This theory describes women as being

created for purposes other than leadership in a working environment and rather related to the domestic abilities in a private home environment and women being followers rather than leaders.

2.4.5 Organization Structure Perspective

This perspective is established on the principle that organizational structures shape women's ability while performing their duties (Fagenson, 1990, 1993). "There are advantageous and disadvantageous job situations" (Kanter, 1977).

Beneficial positions that propose job occupants' control and prospects, are attained by people whose gender is the most popular, in this instance males. Disadvantageous positions therefore offer job incumbents little control and are fewer in number, and these are females. People in advantageous roles attain competencies and behavior that define and validate their current employment, which offers limited advancement (Fagenson, 1990).

This perspective argues that the variation among men and women in their performance and conduct are due to the variation in the prospects and control taking place in institutions other than gender (Kanter, 1977). "Champions of the organization structure perspective accept that the ethos and values of the organization define women's attitudes and therefore provide better prospects for men, and that the individual and the structure are autonomous considerations" (Fagenson, 1990).

The organization structure perspective's principal emphasis on organization structure does not take into account further crucial organizational aspects involving norms and culture, policies, training systems, promotion, and reward systems (Fagenson, 1990; Gregory, 1990).

"The answer to women's difficulty in organizations would merely be to substitute men with women in high-ranking posts. Next gender stereotyping and sexism would disintegrate. The main defect of the organization structure perspective is its acknowledgement of the status quo" (Akpinar-Sposito, 2013).

This last theory is more about the structure in the institution and the fact that women's progress in it is dependent on the principles and ideals enshrined in the institution itself, how the current leaders in the organization portray these principles in the daily working environment, and how it is filtered down to all employees.

When dissecting all the above theories, the one theory that resonates with the current research questions and research objectives deliberated in this document in my opinion would be the Gendered Organization System because this theory collates all the factors limiting women trying to progress into leadership positions. It involves aspects such as the environmental factors in the institution, the vision and values in the institution portrayed and practiced by the leadership of the institution as well as the general culture in

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the workplace. The greatest strength of this theory is its attention to the importance of a mindset change. because if that is not in place in any institution no change can take place and women will continue to be in a restricted working environment.

2.5. Leadership Behavior and Decision Making

Strategic leadership theory attempts to comprehend the impact of people or top leadership teams in institutions. The very first philosophers have documented that perceptual and evaluation methods of leaders play a part in strategic decisions. Their argument is that complicated conclusions are mostly based on results of social aspects, and that limited fairness, numerous and contradictory goals, and inaccurate decisions are the consequence of decision-makers' opinions and ideals. Due to this, managers do not subscribe to a completely coherent model of decision making, however they tend to depend on cognitive models to make strategic decisions (Hambrick & Mason, 1984). "This theory has stimulated much experiential research on the connection between managerial features and the institution's outcomes. An illustration of this is built on psychological theories to explore the connection between CEO character and his or her strategic-making performance" (Miller *et al*., 1982:62).

"In this country, women presently hold 10% of directorship positions at the Johannesburg Stock Exchange (JSE) companies" (Mabaso, 2020). These statistics are still low since women have taken it upon themselves to improve their schooling and qualifications over the past years. Women are found in lower-level managerial roles, compared to men who are appointed to senior executive roles (Auster & Prasad, 2016; Kiaye & Singh, 2013).

"Women currently occupy 32% of management posts in South Africa" (StatsSA, 2018). The statistics for women in leading management ranks are even weaker. Earlier studies confirm this inconsistency. Chiloane-Tsoka (2010) states that women constitute 14.7% of all executive managers and 7.1% of directorship posts in South Africa.

"South Africa is placed tenth in the world for attaining 40% women representation in parliament" (StatsSA, 2018). "In addition, 32% of Supreme Court of Appeal judges, 31% of advocates, 30% of ambassadors, and 24% of heads of state-run organizations in the public sector are women" (StatsSA, 2018). This is a significant accomplishment by the government. However, there is still more work needed for the private sector and other public institutions to emulate the government's efforts to attain 50% representation of women in executive positions. The account for the under representation of women in higher executive positions in South Africa is attached to it being a culture that is customarily male-dominated (Chilokane-Tsoka 2010).

2.6 Conclusion

The usage of concepts and theoretical frameworks in research does not inevitably lead to answers as to why certain problems exist. It does however provide a diverse approach to thinking of standard problems. Concepts and frameworks may be utilized to provide an understanding of certain challenges affecting female leaders. The continuous focus on economic growth seems to dominate over other important aspects of development. In South Africa the disparities in gender and gender biases are on the back burner of governments agenda. Furthermore, it is important to understand that simply developing numerous policies, legislation and gender bias interventions will not, automatically, progress female roles in this country.

There is no short cut to success to overcome the gender disparity between males and females. Each country should work toward benefitting and uplifting their people. South Africa is still seen as a developing country where females have limited, and in some rural areas, no employment with less opportunities available. Policies should therefore be drafted to assist with increasing female prospects towards improving their livelihoods. There is a necessity to create strategies that are intentionally focused on female advancement. This can be achieved by studying women's backgrounds and circumstances while allowing them to work with policymakers in the design and implementation of policies and approaches. Furthermore, the monitoring and evaluation of policies and procedures are important to determine its success and the need for said policies and procedures to be revised, readjusted or maintained as and when the need arises.
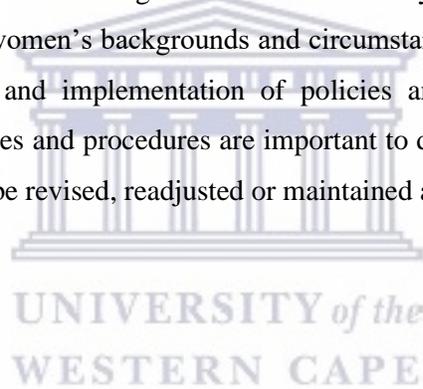
2.7 Conceptual Framework

2.7.1 The Concept of Leadership

When defining the term leadership or looking at instances of leadership in today's culture the general assumption by both males and females is to look toward male leadership roles and look back at what a man has done in a leadership capacity.

Leadership is often referred to as the most significant and current reaction to the obstacles and opportunities created across the globe. There are diverse descriptions of leadership. In order to ensure an overview is provided, a few definitions will be provided to explain some of the vital concepts in circulation. Rost (1991) defines leadership as "an influence relationship among leaders and collaborators who intend significant changes that reflect their mutual purposes". Kouzes and Posner (1991) trust it is "the art of mobilizing others to want to struggle for shared aspirations". Mutual themes of influence vary, and leader-follower association is created based these on and additional descriptions. Senge et al. (1999), for example, define leadership as "the capacity of a human community to share its future, and specifically to sustain the significant processes of change required to do so" (University of Cambridge Institute for Sustainability, 2017). The general understandings concerning gender and leadership habitually discount women, and higher executive is regarded as a masculine field (Hojgaard, 2002). In many African cultures, the belief is that men lead, and women follow (Ngcongo, 1993; Grant, 2005). In today's society, for women the path to leadership does not consist of a glass ceiling where there is no access; today it is a network women must navigate to find their direction (Eagly, 2007). "In the past it was understood that leaders were born with specific leadership qualities. Nevertheless, the existing knowledge on leadership is that it can be acquired through training and development, which explains why various leadership training courses are taking place" (De la Rey, 2005).

Leaders are described as individuals who offer ideas and values to an institution and symbolize the principles the institution stands for that need to be upheld (Growe & Montgomery, 2000).

"Traits generally connected with leadership are characteristics such as effective communication skills, task completion, responsibility, problem-solving, originality, decision-making, action-taking, vision, self-awareness, confidence, experience, and power" (De la Rey, 2005). "Women represent a more sharing approach, are more democratic, ensure there is room for control and information sharing, are more sensitive, more nurturing than men, pay attention to relationships and encourage others to participate through delegation" (De le Ray, 2005; Growe & Montgomery, 2000; Tedrow, 1999). Research on school management revealed that schools that had female managers are well run, the quality of the student and the proficient conduct of educators is better, and on average accomplish more compared to institutions managed

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by men (Growe & Montgomery, 2000). "A significant observation made is the differences in leadership approaches between men and women; men refer to leadership as leading whereas women view leadership as facilitating" (Growe & Montgomery, 2000).

"If female leaders consider gender a restraint, they may feel obligated to lead in the way that men do as this is deemed the custom. They may believe applying men's techniques of leadership is not only the safest means for a woman to be appointed to any place of leadership but is the highly effective way of inviting promotion and recognition" (Growe & Montgomery, 2000). Even though many efforts have been made to guarantee that female representation is accomplished at all levels of governance, women are still disadvantaged in many government and non-government institutions and are predominantly excluded from roles that require any form of control and leadership (De la Rey, 2005). "In politics, women have been marginalized because men monopolize the decision-making structures and are in the majority. One underlying problem for women has been the difficulty of dealing with the inherent patriarchal structures that pervade the lives of people, the processes of state and the party" (Nzomo, 2007). "Leadership is largely viewed as crucial to successful health care systems and is one of the World Health Organization (WHO) Health Systems Building Blocks" (Curry et al., 2012).

2.7.1.1 Leadership Styles

There are various studies on styles of leadership and what the best styles or forms a potential leader should embrace. One of the biggest challenges experienced in the past is the concept of "I lead, you follow". However, over time there have been many changes in the culture of leadership as well as big change in the gender of leaders in organizations today. It is, therefore, necessary to ask are these styles applicable or are they outdated and not applicable in a diverse organization in today's culture.

Kets de Vries and Miller (1986) argue that specific organizational configurations replicate the leadership methods of their top managerial teams. Numerous shared leadership characteristics, such as flexibility, need for achievement, and necessity of power for the managerial teams, are deemed to be essential in shaping the strategies and structure in many institutions (Miller & Toulouse, 1986); Burns (1978:68) "anticipated that leadership style is either transactional or transformational".

"Transactional leadership is founded on administrative control and authentic control in the institution. Transactional leaders highlight task assignments, work standards, and employee compliance. These types of leaders depend on compensation and penalties to encourage best practice employee conduct" (Eddy S.W.NG, 2008:68).

Transformational leaders are carefully attached to deontology, whereas transactional leadership is further connected to teleological ethics (Aronson, 2001; Kanungo, 2001). Transformational leaders have the ability

to influence their institutions regarding handling diversity as a business initiative and ethical commitment, and not merely a government directive (Gilbert, Stead, & Ivancevich, 1999). Transformational leaders have also been linked to greater openness and honesty (Parry & Proctor-Thomson, 2002), and are motivated to display more pro-environmental traits (Egri & Herman, 2000). Transformational (or charismatic) leadership is a method that encourages supporters with greater standards and ethical principles. Charismatic leaders can express and provide a clear vision for an institution and inspire supporters to follow it through. Charisma embodies one of the essential characteristics of transformational leadership. "Charisma is imperative as it suggests greater reactions from supporters" (Finkelstein & Hambrick, 1996:69).

James MacGregor Burns (1978) described transformational leadership as a course where leaders and supporters participate in a joint method of lifting each other to advanced levels of standards and encouragement and presented the notion of communal image that bonds leaders and supporters in a shared goal. Current concepts of leadership recommend acceptability in leaders in "knowing who they are, what they believe and value" (Avolio *et al.*, 2004). Avolio (2007) refers to the level of incorporation in leadership theory and research which reflects on the energetic collaboration among leaders and supporters, bearing in mind the previous, existing, and evolving setting in explaining advancements or developments leadership which he called authentic leadership development. (Chin, 2011).

While philosophies of leadership can accept that gender and ethnicity is insignificant in leadership, it is becoming gradually visible that cultural viewpoints, societal views of gender roles, and the differences in life experiences play a contributing factor in one's subsequent thinking and style of leadership. Legitimacy as a leader is more problematic when having to work with different and diverse personalities. Women from different cultural and indigenous groups may manage in ways that are more associated with their diverse global beliefs and cultural standpoints. They may be recognized not only as leaders, but as women, as racial/ethnic people, as mothers, etc., and all this interconnects with each other. These comprise the complications of ensuring a work-family balance, nurturing obligations, gender role expectations, connectedness and association with numerous societies while exercising their leadership (Chin, 2011).

2.7.1.2 Leadership and Identity

Leadership traits and individual identity play an important part in determining the role that individuals perform in the organization. Therefore, are these two concepts completely isolated from one another or does the one aspect affect the other? "Identity speaks to the numerous connotations involved with oneself by yourself and by others" (Gecas, 1982:2). Even though people have many, often transforming identities, some of these identities are more dominant in an individual's complete self-definition, and are more intensely rooted in their social life, while others may be pertinent only in precise settings and circumstances (Ashforth & Johnson, 2001; Ebaugh, 1988; Stryker & Serpe, 1982). Characteristics are maintained and

decided on in social interaction (Cooley, 1902; Goffman, 1959; DeRue & Ashford, 2010) and progress over a period with diverse considerations and expressive reactions that allow people to acquire understanding about their dominant and ongoing predilections, aptitudes, and ideals (Lord & Hall, 2005; Schein, 1978). "Identities also have enduring, trans-situational components, a qualified identity such as a leader can associate individual, interpersonal, and cooperative characteristics as the constant and durable list of characteristics, beliefs, standards, motives, and experiences in ways that people express themselves in a qualified role" (Schein, 1978:2). Therefore, a leader's identity is not merely the complement to a officially held leadership role, it is something that changes as a person adapts and modifies to a leader identity and is acknowledged by others as 'leader' (DeRue & Ashford, 2010). An understanding of leadership as developed and constant or lost through continuous social exchanges moves control away from the leader and transfers it to the affiliation among leader and supporter, and the latter's identification with the former. Although this may precisely echo the future of leaders in the smooth, unplanned, and fast-changing institutions of today's society, it also places these leaders in a situation of having to work with the insecurity, anxiety, and potential for loss that experiencing a valuable identity as unbalanced requires (Alvesson & Wilmott, 2002). "One would need to move past solitary proportions of identity in our theorizing and explore numerous and overlapping identities if we are to acquire an inclusive understanding of how diversity supports essential encounters such as leadership" (Chin & Sanchez-Hucles, 2007).

2.7.3 Women's Leader Identity

Theorizing leaders as automatically inhabiting social roles, fitting in to social groupings, and engaging in methods of inviting and allowing social identities provides insight on the leadership progress and encounters endured by members of underrepresented and consequently non-prototypical group members, particularly women in business leadership (Eddy S.W.NG, 2008). This is based on introductory theories by authors such as Ely, Ibarra, and Kolb (2011) who oppose that understated, longstanding forms of gender bias, coming from workplace structures, cultures, and ways of communication that unconsciously advance men, and many times limit the identity work of women leaders. "Women in positions of authority are thought too aggressive or not aggressive enough, and what appears assertive, self-confident, or entrepreneurial in a man often looks abrasive, arrogant, or self-promoting in a woman" (Heilman & Parks-Stamm, 2007). "If women executing normally male roles conform to feminine stereotypes, they are inclined to be liked but not respected" (Rudman & Glick, 2001). They are considered too lenient, sensitive, and indecisive to make hard choices and come across as suitably confident (Eagly & Carli, 2007). "If a fundamental progressive job for an ambitious leader is to mix the leader identity into the core self, then this job is concerning at the inception for a woman, as women must ascertain reliability in an environment that is severely contested about her authority" (Ely & Rhode, 2010).

2.8 Intersectionality

"The term intersectionality, devised by legal academic Kimberle´ Crenshaw, underlines the multidimensionality of marginalized subjects' lived experiences" (Crenshaw, 1989:139/2). Intersectionality developed in the late 1980s and early 1990s from serious race studies, an academic undertaking emanating in the legal academy dedicated to problematizing law's claimed color-blindness, objectivity, and impartiality. Since its initiation, intersectionality has had an age-old interest in a single explicit juncture, the connection of race and gender. Therefore, intersectionality discards the single-axis context often adopted by both feminist and anti-racist academics, and in its place examines "the various ways in which race and gender interact to shape the multiple dimensions of Black women's experiences" (Crenshaw, 1991:1244/2). Intersectionality undermines race/gender binaries in the service of conceiving individuality in a more intricate fashion. Intersectionality is accustomed to subjects who "exist within the overlapping restrictions of race and gender discourse and in the empty spaces between" and is an instrument predominantly skillful at catching and conceiving the simultaneousness of race and gender as social progressions (Crenshaw,1992). Intersectionality theorizes social groupings as interrelating with and co-comprising one another to produce exclusive social settings that differ based on time and place. These intersections and their impressions are what matters in an intersectional analysis (Hankivsky & Cormier, 2009). Intersectionality aims to determine the racial disparity in gender and the gendered disparity in race through considering subjects whose identities challenge race-or-gender classifications. "It requests academics to realize that with the heritage of omissions of multiple ostracized subjects from feminist and anti-racist work, and the effect of those absenteeism on both theory and practice" (Crenshaw, 1989, 1991; Williams, 1989:3).

Based on the various descriptions and understandings of intersectionality above, it is clear that gender as well as race prejudices and biases have been dissected by various scholars in a variety of ways over the years which shows the importance of ensuring improved diversity in organizations in the various public, private, and civil sectors in civilization today.

CHAPTER THREE: EMPIRICAL LITERATURE

3.1 Empirical Evidence

This section of the study will focus on previous research studies based on actual experience, statistics, and data available on women in leadership. Women in management and leadership are imperative in health system growth, yet broader understanding proposes that the intricate pressures of creating transformation in health systems involves leadership. Leadership is not an indulgence to be practiced when "the management is right", but an important facet of health system solidification in the public health sector (Gilson & Daire, 2011).

The status of health management has been made a priority in South Africa. "The 2010-2014 Negotiated Service Delivery Agreement acknowledged health management solidification as an essential component of health system solidification, and the 2010 health management competency assessment was a significant primary phase in this project" (Gilson & Daire, 2011).

"Leadership is a necessary element of strong health systems, and so it is vital that SA nurtures and sustains leaders who can work strategically in their complex environments to develop a rights-based health system that promotes health equity" (Gilson & Daire, 2011).

In South Africa, research on why more women is not taking up executive positions and the extent to which this is a phenomenon (April *et al.*, 2007) concluded that the glass ceiling is a result and not a cause and that an indiscriminate societal shift is essential to promote women's empowerment to achieve greater equality in the workplace. April *et al* also attributed the lack of movement of women to top management positions to lack of education, mentorship and networking opportunities and the queen bee syndrome (April *et al*., 2007).

Earlier research have raised numerous reasons which have led to the glass ceiling, encompassing the lack of suitable organizational support mechanisms, restricted networking and coaching prospects, inflexible working conditions for women who are raising a family, gender stereotyping, gender discrimination and occupational segregation (Sabharwal & Varma, 2017; Auster & Prasad, 2016; Kiaye & Singh, 2013; Dimovski *et al*., 2010; Purcell *et al*., 2010; April *et al*., 2007).

"Access to leadership roles should begin with mentorship, which is crucial for the professional development of women" (Koyuncu, Burke, Alayoglu & Wolpin, 2014).

A study conducted by Curry *et al*. (2012) on Experiences of Leadership in Health Care in Sub-Saharan Africa included participants from four countries: Ethiopia, Ghana, Liberia, and Rwanda. These four countries demonstrate significant geographic diversity but also reveal several key related aspects. These

aspects incorporate intricate political circumstances disrupted by sporadic conflict, trials of poverty such as famine and drought, under resourced health care systems categorized by a deep lack of human resources, insufficient supply chains and physical infrastructure, as well as insufficient funding structures. These countries also confront the barriers of a broad shortage of public trust in both the health care organizations and the government. Yet in spite of these circumstantial disputes in all of these countries they have exhibited extensive current enhancements in the health delivery structures in all health outcomes. For example, when this study was being conducted, "Ethiopia had accomplished an enormous scale-up of health extension workers and noteworthy decreases in malaria rates and infant mortality". Ghana had achieved major developments in maternal mortality. "Liberia had attained a widespread set of health services less than a decade after the civil war and Rwanda had revealed the fastest known decrease in infant mortality rates in global health". Applicants were distinct in gender, background, and the categories of duties or posts they filled in the countries' health department structures. Five key objectives appeared as mutual to applicants' practices in their leadership positions: having an ambitious, value-based visualization for upgrading the future health of the country; being self-aware and having the capability to recognize and use complementary skills of others; participating in and handling relations; using information in decision making; and supporting an assurance to learning. "Participants reflected on their own strengths and weaknesses and the importance of seeking and using the complementary skills of others. Self-awareness was paired with gathering and managing distinct groups with corresponding skills and investing human resources where required" (Curry *et al.*, 2012).

"In Ukraine, there is 75% representation of women in the positions of its public administration, but only 13% of women are represented in high-ranking management ranks. Likewise in Russia, where of 71% of women employed only 13% have achieved leadership roles in its public administration" (Ernest & Young, 2013). "In liberal democracies with societies of greater equality, such as the UK, Belgium, France, The Netherlands and Germany, there is an under representation of women in public administration, notwithstanding decades of equality legislation and European Union" (EU) policy directives (Johnston, 2019). "The absence of female representation in these countries can be partially defined by several factors. Many of these countries have substantial wage differences among public and private sectors. In Germany, women in the public sector can expect to earn 23% less than their male colleagues" (Ernest & Young, 2013; Eurostat, 2018). A study that classified Fortune 500 companies according to their number of women board directors found that the corporations in the highest quartile of women on boards had 42% larger return on sales and 53% larger return on equity compared to the remaining components.

The health care sector is exclusive in that most of the personnel are women, however the channel to leadership roles does not reflect this. The reasons for this include job-related discrimination, fundamental

prejudices, and power subtleties dominant in the health care sector, such as the power struggle and control of doctors versus nurses. Women are expected to be better identified in positions with restricted career progress and access to leadership, decision making and authority (International Finance Corporation [IFC], 2019). "In 29 of 189 economies studied, women are lawfully constrained from working equal night hours as men. These limitations are very popular in South Asia and Middle East/North Africa, where 63% and 55% of those economies independently have these regulations in place" (Women, Business, and the Law, 2018).

Mathur-Helm (2006) conducted a study of the career progression of 40 senior and prominent women managers, as well as women executive board members, in four South African banks. The outcomes of the research showed that women managers still experience a glass ceiling, which plays a role in the values, structures, and programs of organizations.

Lloyd and Mey (2007) completed a survey of 44 females in decision-making and managerial roles, as well as 12 male managers, in a leading South African car manufacturing plant. The female applicants stated that there was bias and stereotyping involving women's professional progression in their organization. The women also stated that men progressed quicker in their professions than women did. Booysen and Nkomo (2010) completed a survey on 592 black and white male and female executives in South African organizations, using Schein's 92-item descriptive index. The outcomes of the survey specified that black and white men did not attribute effective decision-making abilities to women and believed that only males have the traits that are needed for leadership roles. White women viewed both men and women as having the necessary executive potential.

"A research paper of a U.S. medical school faculty in 1985 that was repeated in 2006, revealed only a slight rise in the proportion of female faculty who were all-inclusive lecturers, increasing from 10% in 1985 to 12% in 2006" (Mayer *et al*., 2008). From a historic viewpoint, it is significant that 25 of the 42 women who have been appointed as presidents or prime ministers before the turn of the century accepted these positions in the 1990s (Carli & Eagly, 2001). "A 2001 study published by the United States Bureau of Labor Statistics specified that women consisted of 47% of all workers and had received 51% of all bachelor's degrees, 45% of all advanced degrees, 42% of all doctoral degrees, and 43% of all professional degrees" (Carli & Eagly, 2001). "The American Counseling Association (ACA) had five female presidents between 1952 and 1980" (Black & Magnuson, 2005) and 21 women in this leadership role in the last 30 years (1981–2010). Women have achieved management roles in ACA divisions, branches, and other entities in growing numbers in recent years (ACA, 2010). "This growth does not incorporate positional leadership where women serve in non-elected or unnamed leadership positions but make substantial changes to the corporation" (Black & Magnuson, 2005).

3.2 Women in the public sector

Women's representation has undeniably grown in the public sector in South Africa since the inception of democracy in 1994, but at what costs? It has not been an easy journey for any female in the employment sector, but more specifically a female of color.

"South Africa is amongst the countries that have accomplished approximately 45% women representation in political leadership" (Potter, 2009). Based on a statistical report conducted by the World Economic Forum (WEF) which utilizes the Global Gender Gap Index (GGGI) to establish the level and extent of gender disparities, "South Africa is rated 9th in the world in terms of political equality" (WEF, 2010). "The gender gap index evaluates gender-based inequalities in terms of vital outcome variables involving an opening to various sources such as economic opportunities, education, health, and political empowerment" (WEF, 2010). "Although South Africa's general GGGI status (12) have improved compared to rich countries like the U.S. (ranked 19) in economic participation and opportunity, it is lower than average and possibly worse than, for example, Uganda (overall ranking is 33), which is rated 42 in the gender gap index for economic participation and opportunity (WEF, 2010). The GGGI ranking of South Africa on economic participation and opportunity (at 55) reflects gender inequality in economic participation" (Ndinda & Okeke-Uzodike, 2012).

Historically South Africa's workplaces and the hierarchies that were in place in these working environments were bedded along racial lines. The apartheid methods involving job reservation were some of the tools directed at producing cleavages in the society of South Africa and discrepancy in economic outcomes. These color bar instruments were tougher on women, specifically black women who also endured other types of repression, and therefore a double negative impact of prejudice centered on being black and being a woman at the same time. There were also cultural forms of discrimination in customary laws that prevented women the right to join in economic endeavors such as owning land, and various other customary traditions that dominated women at home and refused their individualism and value. This was the triple oppression women endured due to their gender, race, and culture (Public Servants Association [PSA], 2019).

Since the advent of democracy, South African leaders have put a lot of effort in ensuring sufficient support towards women's rights in what has previously been a patriarchal, traditional society. A few pertinent regulations have been passed over the years (see chapter 2), comprising legislation prohibiting all gender discrimination and laws affording women of any skin color the equal degree of affirmative action in education, employment, and politics as black South Africans, people of mixed race and Indians (Ernest and Young, 2013). Regulation such as the Employment Equity Act (1997), the Broad-based Black Economic Empowerment Act (2003), the Basic Conditions of Employment Act (1997), and the Labour Relations Act

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(1995) have been applied. Affirmative action is provided for in law in South Africa, and it aims to rectify the historical inequalities created by imperialism and apartheid that mistreated black people (Africans, coloreds, and Indians) and had them in lesser income professions due to the color of their skin. Affirmative action in the place of employment is enlightened by the Employment Equity Act (EEA) (1998). "In addition to these laws, the Commission for Employment Equity (CEE) was formed during this time to monitor the application of affirmative action policies and transformation in the workplace in terms of race, gender, and disability" (Ndinda & Okeke-Uzodike, 2012).

The same notion of women's leadership, specifically in the African context, is intricate and susceptible to contention. "In and around African countries and settings, there are multiple racial, socio-cultural, ethnic, political, and historic standards which impact power relations and enlighten the ways in which women can and do lead in formal and informal ways" (Amadiume, 1987; 1998; Mama *et al*., 2003). While all women were discriminated against in relation to men of the same race in the workplace, white women had the preference to either work or not work. Black women did not have the right of preference as often if they did not work their families starved. With the termination of apartheid, white women were incorporated in the designated category for prioritization in terms of affirmative action due to their under representation in the professional work setting. Therefore the resolution of the Employment Equity Act (1998) is to confirm that equity in the workplace is accomplished through a series of actions, namely indorsing equal opportunity and fair treatment in employment through the eradication of unfair discrimination and employing affirmative action principles to address shortcomings in employment endured by selected groups in order to ensure their unbiased description in all professional groupings and rankings in the labor force (Ndinda & Okeke-Uzodike, 2012). "Criticisms of efforts made to acquire women's leadership in the African setting comprise of handling women or African women as a standardized group, decreasing varied contexts in Africa to one uniform African context, inclining concerning gender essentialism in characterizing how women lead their gender, placing undue prevalence on quotas which can amount to permitting the bare minimum, and overseeing the position that men play in indorsing women's rights and women's leadership, directly or indirectly" (Poltera, 2019). "Not all women leaders are women in ranks of political control or customary or specialized leadership positions" (Gassa, 2007).

The non-existence of female representation in public administrations exposes vertical and horizontal occupational gender exclusion. "Vertical occupational gender segregation is frequently described as glass ceilings, where women find difficulty reaching leadership and senior decision-making positions" (McTavish & Miller, 2006). "Horizontal occupational gender segregation occurs when women are focused in particular sectors or professions of public administrations, such as education and health sectors. This is described as glass walls where women are stereotypically connected with feminine occupations such as

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caring roles" (Guy & Newman, 2004; Keir, Miller & Reid, 2002). In various public administrations, women tend to be focused in lower-level and lower-paid roles in the public sector hierarchy career progress to the upper tiers being rare (McTavish & Miller, 2006). "Public administrations like any other organization are gendered, since the organizational domination of men's control of power is to the detriment of women" (Fergusson, 1995; Kelly & Newman, 2001; Savage & Witz, 1992). "There are observers who debate that public life is calculated as the field of men, with women omitted or deemed as other" (Duerst-Lahti & Kelly, 1995 and Mazur & Pollock, 2009).

Over the last 40 years, administrations throughout the world have employed methods to deal with gender inequity in the work setting and have presented equal rights regulation and established safeguards against prejudice. For their particular public sector work setting, many administrations have moved beyond, leading by example, and have established rules and procedures for commendable employment, quotas and targets, and frequently appealing maternity, paternity, and childcare provision. "This has developed in a superior ratio of women following careers in the public sector compared to the private sector. In half of the G20 countries, women comprise more than half of the public sector workforce, yet while the number of men is decreasing in the public sector, the people leading the public sector remain to be mostly men. Women are excessively represented at lower-level, lower-paying and often part-time employment" (Ernst & Young, 2013).

Advancement of women in attaining leading management roles, such as members of a board of directors and CEOs, in South African organizations is slow (Mathur-Helm, 2005). "Cultural and traditional aspects such as patriarchy, gender inequality, insufficient training opportunities, an absence of succession planning and white males being given overseas assignments have been some of the blockades to women's development, in spite of the application of employment equity legislation" (Lloyd & Mey, 2007). Women's managing techniques, as an example, being less ambitious, less assertive, and less forceful, were some of the explanations supplied by male managers for not developing women (Mathur Helm, 2005). "Women who do not embrace male management techniques are lacking in their professional development into executive roles in the South African work setting" (Booysen, 1999). Females increasingly occupy the political field (in government/parliament), and their existence is irrefutable. However, the differences relating to women's lived experiences persist to challenge them on a regular basis (Segalo, 2015).

3.3 Barriers to Women in Leadership

Despite all the legislation passed and advancements made thus far to improve the working conditions of women in South Africa, there is at present many obstacles in place affecting women's growth and progress into various senior and leadership roles.

To comprehend the status of women in leadership in South Africa it is crucial to evaluate gender and race simultaneously since racism and sexism interconnect in intricate ways to replicate either the subordination or the promotion of specific classes of women. "The Commission for Employment Equity (CEE) data indicates that from 2000-2006 the shortfall in terms of the competently skilled women in SA was -6.9%" (CEE, 2007). However, a disaggregation of the statistics in relation to race indicates that this shortfall is due to the lack of African women at the experienced executive ranks. Their total shortfall was -13.3% (2000-2006) (CEE, 2007). No shortfalls were depicted amongst other groupings of females and alternatively there were minimal increases of 1.2% among Coloureds, 1% in Indians and 3.8% in the white population (Ndinda, & Okeke-Uzodike, 2012).

Actual democracy, or women's liberation, cannot be entirely realized when women remain existing in a dishonest space where biases such as gender discrimination continue in paralyzing them and making them nonexistent. The space remains dishonest since the majority women dominate in lower ranks (Barnette, 2004; James *et al.*, 2006; Catalyst, 2013). Evan though women are now identified as insiders (being permitted to achieve education, enter the work setting, etc.) their lived experiences render many of them as simultaneously insiders and outsiders as the areas that many of them now regulate as full citizens remain to be unreceptive and non-accepting. "Countless women remain to carry the various obligations of having to take care of the home while working full time thus making it tough for them to completely incorporate into the public sphere" (Boonzaaier, 2005; Lambert & Webster, 2010; Geldenhuys, 2011). "Many women continue to experience what is referred to as the presence of absence, where previously shut doors (e.g., workplaces and education attainment) are now open, but for numerous women presently in the workforce this existence may remain somewhat of a façade as they remain facing challenges that are clearly linked to the fact that they are women" (Fine, 2002). A woman who is married, working, and the parent of young adolescents have a tendency of having the highest extent of stress in accomplishing stability among these three responsibilities (Blair-Loy, 2003). "Socially formed and gender-stereotyped beliefs about motherhood do not usually involve the added concern of skilled leadership or career consideration" (Medina & Magnuson, 2009; Steiner, 2006). Sadie (2005) advanced the argument that the source of the constraints that women deal with is the male-controlled structure where decision-making functions are in the hands of men. Regardless of women's schooling and admission into the job market, the woman's responsibility is naturally one of homemaker. "The man, on the other hand, is the breadwinner and head of household and he is accorded a right to public life" (Sadie, 2005).

In South Africa, the blockades to women's progression to executive management are based on various historic, operational, and social issues (Ndinda & Okeke-Uzodike, 2008; Msomi, 2006). Throughout apartheid, professional leadership was largely white male-controlled and there was no depiction of black

women in the entire apartheid structure. "Black women are believed to have integrated into the business world only in recent times" (Msomi, 2006). The impression of a leader is commonly a man and not a woman. Unfairness and deep-ingrained prejudice in society has indicated that boards do not enthusiastically pursue women to expand into board members. "There is also a shortage of engagement amongst the small number of women on boards in that they have not shown interest in urging fellow women to join boards" (Msomi, 2006). For many years, South African women were mistreated in the workplace. Racial prejudice due to apartheid meant that women were developed according to the education system devised for their race. African women learning through "Bantu education" could only wish to turn into either nurses or teachers in the public sector. "The rest ended up as domestic workers or informal sector traders" (Ndinda & Okeke-Uzodike, 2008).

Religion and cultural norms play a vital factor when looking at a women's career development. All conventional religions have cliched functions for men and women where women are recognized as less than men, often being kept distinct in the way responsibilities are specified (Emmet, 2001). Emmet evaluated the practices presented for and by men in a variety of religions (including Hinduism, Islam, and Christianity), and found men are largely respected and encouraged by religious conviction in several aspects.

In contrast to men, women obtain little or no support to pursue leadership roles. There are also few social networks, formal or informal, for women, namely, membership of clubs, stemming in an absence of appreciation that could lead to progression (Growe & Montgomery, 2000). "The 'old boys club' mindset may justify the progress of black men into better professional leadership" (Msomi, 2006). The circumstances of African women are more intricate as their social networks comprise of equal black men and women who are also battling to move forward. When positions of leadership occur, the white men who command control and power, are more likely, due to gender prejudice, to progress black men as worthy of leadership roles than black women. In this way, African women fade away or are slightly taken into consideration for leading executive roles (Ndinda & Okeke-Uzodike, 2008). Administrative/leadership ranks involve hard work, long hours and are demanding. "For women, this obligation is attached to their child-care, home, and family duties, a trend described to as the double shift" (Sader *et al.*, 2005).

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Table 1: Gender Inequality Table

In conclusion, this chapter attempts to debate matters that negatively affect the success of women in senior leadership positions. The debates were centered on the conceptual framework and empirical evidence available to outline the conditions and barriers which women, working in the public sector, are confronted with. It also gives a clear understanding and scrutinizes the circumstances which have influenced women in leadership. It provides clarification of the various concepts associated to the study as well as a description of the connection between them.

Female leadership has grown in South Africa over the years, specifically within the public sector and within the public healthcare environment, however, there remains room for improvement. The literature presented is evident of the changes made within the country, nevertheless, more can and should be done to encourage upcoming female employees to pursue their various ambitions when entering into the labour force.

In life nothing remains the same, therefore policies should be designed and presented in a manner that gives the opportunity and scope for various modifications and revisions that can be made when required as the only constant in life is change. This will ensure females in any working environment have the space for growth and development and the prospect to pursue any future opportunities made available to them.
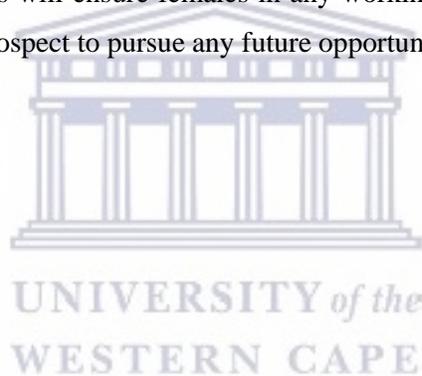
CHAPTER FOUR: METHODOLOGY

4.1 Introduction

This chapter will focus on the methodological approach to the study that has been implemented to attain the objectives stated above in chapter one. Research methodology is the technique used in collecting data and information with the aim of attaining a conclusion at the end of the study. It will focus on the study design, target population, sampling, data collection instruments, data analysis and presentation. The study will use qualitative methods by means of interviews and qualitative methodology focusing on the description of variables. The chapter will conclude by relating the challenges experienced and measures used to confirm the trustworthiness and legitimacy of the research completed and the findings attained.

4.2. Research Design

The study will make use of the qualitative approach using both primary and secondary data sources. Primary and secondary data collection is critical for the study to show an all-inclusive viewpoint on the research topic. In a case where primary data is inadequate, the secondary data provides the support required to ensure strong results.

"Research design allows researchers to test the hypothesis and reach valid conclusions about relationships between independent and dependent variables to identify the conditions underlying the occurrence of a given phenomenon" (Cohen, Manion & Morrison, 2013). "People sometimes confuse the dimensions of research design and methodology; research design focuses on the logic of research, while methodology consists of the research process" (Babbie & Mouton, 2001:74). "Research design refers to the all-inclusive strategy selected by the researcher to integrate the diverse mechanisms of the study in an articulate and rational way" (Henning, *et al*., 2007). "It creates the proposal of how one anticipates performing the research" (Mouton, 2001). According to Neuman (2000) and Rowley, (2002), "there are many research designs or strategy alternatives, including action research, ethnographical, experimental, cohort, cross-sectional, descriptive, historical, longitudinal, sequential, and the case study". The research design that will be followed in this case study will describe the methodology that was used, and it will include the processes and tools that were used for data collection and analysis.

4.3 Research Methodology

This is the framework which outlines the methods and actions that should be followed when collecting and analyzing information. "A research design is a master plan, which specifies the methods and procedures for collecting and analyzing information" (Zikmund, 2003). "The research methodology presents to the researcher a universal approach in conducting the research project" (Babbie & Mouton, 2008). "There are two major research methodologies used in social sciences, i.e., qualitative, and quantitative methods"

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(Gerson & Horowitz, 2002; Mouton, 2001; 2006; Neuman, 2000). "Neither quantitative or qualitative methods supersede the other; the suitability of the application of one over the other is determined by the context, purpose, and the nature of the research study in question" (Campbell, 1975). "Some researchers prefer to use a mixed-methods approach, thereby taking advantage of the differences between quantitative and qualitative methods and merging the methods into a single research project" (Creswell, 1994). Quantitative researchers are independent of the phenomena that are being investigated, and they study the object without affecting it or being affected by it, if they adhere to the scientific procedures. "These researchers place emphasis precisely on measuring variables and testing hypotheses that are linked to general cause-effect explanations" (Babbie & Mouton, 2001:49). "Qualitative researchers, on the other hand, focus on qualitative aspects such as meaning, understanding, and experience from the viewpoint of the research subjects and the context in which the action takes place. These researchers strive to understand human behavior and their actions, through interacting with people to try to understand the world" (Henning, *et al*., 2007; Mouton, 2001; Glesne, 2005).

In the context of this study, the qualitative method was used to collect data from various female employees on their views and perceptions on women moving into leadership positions in the department. This includes their ideas, priorities, and preferences, as well as the challenges faced in the process.

4.3.1 Description of a Case Study

The case study is research that explores a situation without prejudice, observes a visibly well-defined location and reports on it. "Case-study research is an empirical enquiry that investigates a contemporary phenomenon in its real-life context, especially when the boundaries between phenomenon and context are not clear; and it relies on multiple sources of evidence" (Yin, 2009:18). According to Glesne (2005)," a case study is a comprehensive study of a research problem compared to a far-reaching statistical survey". It is often applied when trying to narrow down a very broad field of research into one or a few easily researchable examples. The case study research design is also beneficial for determining whether a specific theory and model apply to phenomena in the real world. It is a valuable design when not much is known about a phenomenon. Yin (1984) stated that "the case study is a technique for learning a complex situation, based on an all-inclusive understanding obtained through an extensive description and analysis of that situation taken in its context and relevance". A case study allows a researcher to apply various approaches of data collection, such as: surveys, observation, interviews, and document reviews, to name a few. "Case studies do at times use quantitative data, however the variance with other research methods is that case studies do not attempt to control the context" (Yin, 1994). The foundation for the choice of the case study design lies in the researcher having confidence that this approach is guaranteed to provide an understanding of a complex issue pertaining to women striving towards leadership positions, and a detailed contextual

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analysis of their challenges and experiences, which are explored in relation to the prevailing conditions. In this regard, the case study provides a detailed description of specific cases of women in leadership positions, thereby allowing the researcher to gain a complete picture of what is happening and why in relation to that of men in leadership positions.

4.3.2 Purpose for Qualitative Approach

The rationale behind the use of the qualitative approach is as Neuman (2006: 93) stated: "it endeavors to describe and analyze participants' experiences, beliefs in a non-numerical way, enabling the researcher to explore and contextualize views and garner meaning from personal experience". The qualitative technique also, as expressed by Creswell (1994: 145) "helps to extract intricate details on issues often difficult to fathom through other conventional research methods". "Qualitative analysis is an enquiry process used to understand the social, cultural, or human aspects of the phenomenon by gathering information from the informants in their natural settings" (Creswell, 1994).

Therefore, the approach that will be undertaken for this case study will be the qualitative approach as it is appropriate for the study of social phenomenon and it will allow the participants to express personal experiences relating to the case study.

"Many academics contend that when humans are used as the subject of study, the qualitative approach is best suited for this kind of investigation" (Domegan & Fleming, 2007; Richardson, 1995). Guba (1981:76) proposed that, "it is proper to select that paradigm whose assumptions are best met by the phenomenon being investigated." The proposed study is investigating human understanding of the role of women in leadership positions in the public health service. In addition, qualitative research is more focused on the methods involved, instead of the basic end-result.

4.3.3 Research Setting and Context

The participants who took part in this research study were females working in the Western Cape Health Department and are currently employed in the Klipfontein Mitchells Plain Sub Structure directorate, the hospital, and the primary health facilities.

Mitchells Plain Hospital serves the community of Mitchells Plain and the Klipfontein Sub-District. This includes Mitchells Plain Hospital, Heideveld Emergency Centre and Freesia Ward (situated on Lentegeur premises). The Mitchells Plain Hospital also provides support to the surrounding primary health care facilities, namely: Mitchells Plain Community Health Centre (CHC), Dr Abdurahman Community Day Centre (CDC), Guguletu CHC, Hanover Park CHC, Heideveld CDC, Nyanga CDC, Browns Farm (Inzame Zabantu) CDC and Crossroads CDC.

Figure 1: Drainage Map for Mitchells Plain
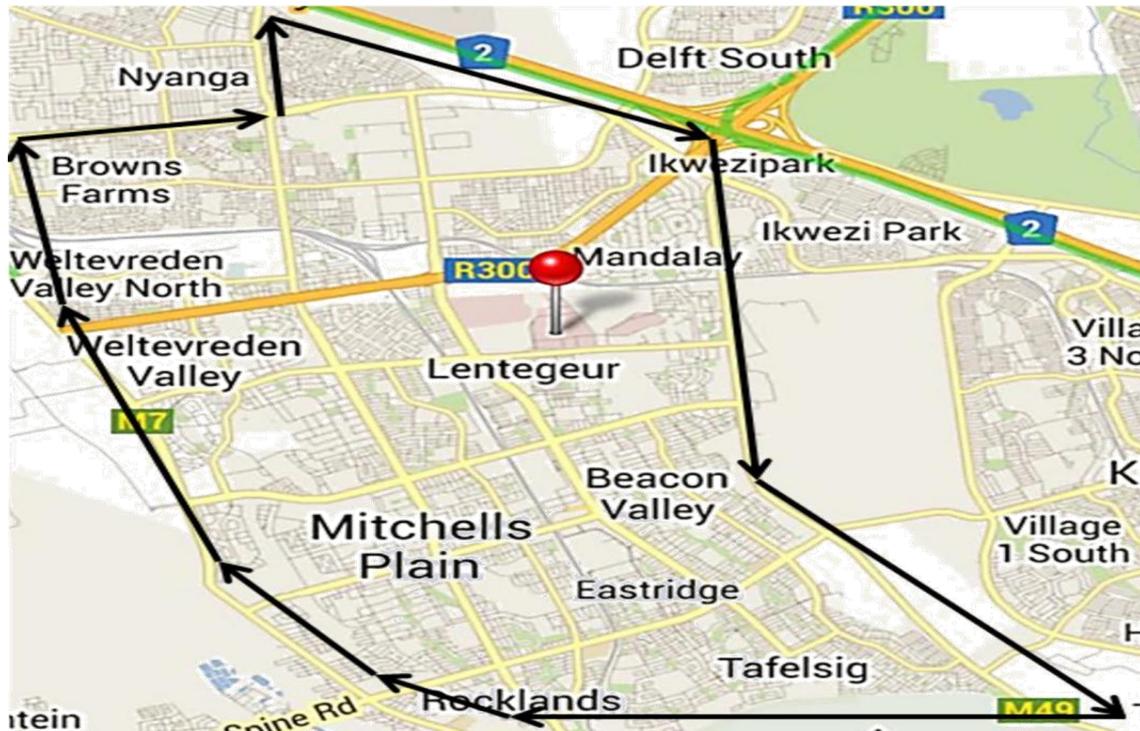
Source: Mitchells Plain Hospital service booklet

The following services are available at the hospital: Emergency Medicine: 24-hour service catering for adults and children, General Medicine, Pediatric, Obstetric, Gynecological and General Surgical service, Orthopedic Radiology: X- Rays (24-hour service).

Ultrasound and CT Scanning, strictly during weekdays, offering a booked service.

Clinical Forensics: Restricted to basic forensic services. Allied Health: Pharmacy, Social services, Physiotherapy, Dietetics and Psychologist service, Occupational Therapy, Speech Therapy, Audiology.

Outpatient services: Women's Health, Family Medicine, General Surgical, Gynecology, Antenatal Clinic and Pediatrics, Breast Clinic, Orthopedic Clinic, all only on an appointment basis.

The study participants were either working in one of the health facility settings mentioned above or had worked in a health facility during their years of employment. These females were in various supervisory positions in the department at the time the research was conducted, varying from the levels of Director, Deputy Director, Nursing Manager to Administrative Supervisors within the department. The interviews

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took place at the workplace giving the researcher an opportunity to observe the participants in their working environment.

4.4 Research Questions

With regard to the research problem identified in chapter one, the main purpose of the research was to provide answers to the follow general research questions:

- Is there a relationship between gender-role perceptions and women's career progress in the Klipfontein Mitchells Plain Sub Structure?

- Has there been an increase in women in management positions over the past 10 years in the Western Cape Health Department, specifically the Klipfontein Mitchells Plain Sub Structure?

- Are women managers faced with more challenges in the workplace than their male counterparts in this Sub Structure?

4.5 Target Population

"The target population is defined as the group of all components of analysis about which the investigator seeks to make precise conclusions regarding issues raised in the research objective, questions, and hypothesis" (Breyman and& Bell, 2007).

The target population for this case study was females in the supervisory, middle, and senior management positions at the health facilities in the Klipfontein Mitchells Plain Sub Structure and surrounding areas. The aim of the research was to determine barriers and challenges in the organization for women in the supervisory, middle, and senior management roles.

4.6 Sampling and Data Collection

"Sampling refers to the act, process, or method of selecting a representative section of the population for the purpose of determining characteristics of the population" (Gentles *et al.,* 2015). Before embarking on data collection for any research, Hussey & Hussey (1997:64) argue the most critical stage is the identification of the sample. "Sampling is the use of a subset or sample of the population in such a way that their description accurately portrays the parameters of the total population from which the elements were selected" (Babbie & Mouton, 2001:175). "There are two types of sampling methods: non-probability sampling and probability sampling". According to Babbie and Mouton (2001:169), "the non-probability method is often used when a researcher cannot select the kinds of probability samples used in a large-scale survey". Neuman (2006) posits the larger the sample, the more precisely it will reflect the target group, and the rate of improvement in the precision decreases as the sample size increases. "Probability sampling is a term used in the random selection of a sample from the overall population by applying various techniques"

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(Cole & Ormrod, 1995). "Probability sampling examples include simple random sampling, stratified random sampling, proportional stratified sampling, cluster sampling and systematic sampling" (Leedy & Ormrod, 2013).

In this study, purposive and snowballing sampling approaches were used. The researcher applied the purposive method to select the sample of women as an entry point based on her knowledge and the nature of the research aims. Then the sample was extended to referral by means of snowballing to reach more participants for the survey questionnaires. The purposive sampling was used as the researcher knew there were women currently in leadership positions.

This study focused on primary and secondary data, and paid attention to females working in the health facilities in the Klipfontein Mitchells Plain Sub Structure and surrounding areas, therefore purposive sampling was used for conducting the sampling process.

Ten women working in the Department of Health in various components in the Klipfontein Mitchells Plain Sub Structure were interviewed. The 10 participants had varied demographic profiles, with more than 20 years of working experience, qualifications raging from higher diploma to bachelor's degrees in the health environment and were between the ages of 50 and 65 years old.

4.7 Questionnaire

"Questionnaires are used in connection with many modes of observation in social research" (Babbie, 2014). Langdridge and Hagger-Johnson (2009) advise "that questionnaires are a valuable means by which to collect data from a very large number of respondents; they make it easy for statistical analysis". The basis behind the use of a questionnaire, as suggested by Welman and Kruger (1999) and De Vaus (2002), is to "allow the researcher to use a probe with a view to clear up confusing responses and to ask for elaboration on incomplete answers". The researcher arranged a time and meeting venue with participants, and the questionnaires were completed in the researcher's presence. In other cases, the questionnaires were self-administered after they were emailed or dropped at the participants' workplace and completed by the respondents, whereafter they were returned or collected by the researcher. The set of questions developed for the questionnaire was divided into six sections, (see Appendix A). The first section extracted information about the participant's profile, the second section focused on the crux of the study, the third section looked at the organizational policies and procedures, the fourth explored the workplace culture and ethos, the fifth examined the educational attainment of the participants and lastly the final section investigated employment in the Klipfontein Mitchells Plain Sub Structure. The kind of information obtained through the questionnaires helped to answer questions about workplace culture, experiences and challenges experienced over the years, the frequency thereof and why it takes place? The layout and terminology of

the questions were simplified by including open ended, closed ended, multiple choice and scaled questions to extract pertinent data from the study participant.

This study utilized a semi-structured questionnaire to ensure enough information was generated from the various participants with quantitative findings.

4.8 Interviews

Cooper and Schindler (1988) suggest that research data can be collected by means of personal interviews, telephone interviews and self-administered questionnaires. For the aim of this analysis, semi-structured survey questionnaires were utilized. "An interview is a qualitative research technique, which involves conducting thorough individual interviews with a selected small number of respondents. It is aimed at investigating their views on specific ideas, programs, or situations" (Leedy & Ormrod, 2013). Neuman (2012) maintains, "that face-to-face interviews generate the highest response rates, and this is one of the most common approaches used for conducting interviews in qualitative research".

This study included an interview process which allowed the researcher to obtain personal and valuable information. A semi-structured interview questionnaire was utilized. Interviews were chosen as it is a technique frequently applied in data collection in a qualitative research project. This was acknowledged by Bryman and Burgess (1999) who opined "that interviews are one of the most intensively utilized techniques for data collection in case study research". This gave the participant an opportunity to share the personal journey and experiences she had experienced, and it gave the researcher an in-depth understanding of that participant's career pathing in that organization. "Interviews are a widely utilized technique, as it is believed that they give much richer information than just administering a questionnaire" (Cameron & Price, 2009).

4.9 Observations

Neuman (2000) speculates that, "observation is very important in research as it helps to further the depth of understanding of the phenomenon under investigation. Scholars" (Mouton & Marais, 1998; De Vos & Fouche, 2001) describe observation as a "process by which the researcher establishes the link between reality and its theoretical assumptions". In the perspective of this research, observations strengthened other instruments, and provided the intent of examining non-verbalized information that is challenging to uncover via forms and focus group discussions.

The researcher looked at two health organizations, the Klipfontein Mitchells Plain Sub Structure office as well as the Mitchells Plain Hospital, which was chosen by means of purposive sampling. The researcher went as a participant observer at the first organization but was simultaneously a member of the group of females working at the organization. In a further example, the researcher was merely an outside spectator, who was keeping record of everything happening around her. Babbie and Mouton (2001:292) argued that

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"one cannot observe and record everything". To conquer these encounters, the researcher formulated a consistent recording document beforehand with essential factors to be examined and therefore extracted more data on the function of women in the two organizations.

The main categories of visible information incorporated: the setting in which these women work daily (interior and exterior), behavioral patterns of male co-workers, nonverbal communication and tones, and physical features of casual transactions between various co-workers at the various levels in the department. The data collected from observations were related to data that had been collected using other methods in order to confirm legitimacy and consistency, and to ensure uniformity in the data collected through different instruments.

4.10 Data Analysis

Data analysis is described as a process that intends to bring order, structure, and significance to the mass of data collected (Marshall, 1990). "Allowing what is of interest in a study to emerge from the data requires both consideration of all the data collected and triangulation of data or evidence from a variety of sources to achieve credible findings" (LeCompte & Schensul, 2013). "Data analysis is essential in research as it provides a platform to scrutinize, modify, and format the collected information to find convenient data, propose deductions, and reinforce solutions" (Judd & McCleland, 1989).

"Qualitative field research enables researchers to observe social life in its natural habitat, to go where the action is and watch. This type of research can produce a richer understanding of many social phenomena than can be achieved through other observational methods, provided that the researcher observes in a deliberate, well-planned, and active way" (Babbie, 2014).

Social data are converted into numerical form for statistical analyses. "Quantitative analysis may be descriptive or explanatory and it may involve one, two, or several variables" (Babbie, 2014).

The researcher tracked female leaders who met the specific criteria working in the public health sector. Due to the Covid-19 pandemic, the uptake from these female leaders was very few and far between. A preliminary e-mail message was sent to the females requesting their participation in the study. A second set of e-mails was sent to gather more participants as some of the initial group declined or did not respond. Participants who agreed to the interview were sent the scheduled interview along with the consent forms. Participants were informed that the interviews would remain anonymous. The duration of the interviews was 45 minutes; however, some interviews went on for up to 50-60 minutes. The last interview was conducted on the 9th of September 2021. Notes were taken during the interview process and the researcher continued with data analysis by transcribing the semi-structured interviews used for data collection for this study. Interview transcripts were then coded to summarize data into smaller sets of information from which

the researcher could distinguish similarities, comparisons, and relationships, and derive meaning from this data. An Excel spreadsheet was created to determine these similarities and detect themes from the respondents who participated in this study.

4.11 Limitations of the Study

The target group of the study were women in the Department of Health in Cape Town. Due to time and resource constraints the researcher restricted the data collection to a small sample of women working in the Klipfontein Mitchells Plain Sub Structure, therefore the findings may not be used to generalize about women in public health in the Western Cape. The researcher also encountered a problem with some respondents who were reluctant to divulge information about their work experiences in the department. Some respondents were hesitant to share personal experiences about their home life and certain responsibilities that fell to them as women of their households. Lastly, some respondents were concerned about the implications the study might have for them in their workplace, but the researcher confirmed the purpose of the study with all respondents and guaranteed all responses would remain confidential.

4.12 Ethical considerations

The researcher carried out the study only after being given approval from the Humanities and Social Science Research Committee, the Board of the Faculty of Economics and Management Sciences and the Management of the Institute for Social Development of the University of the Western Cape. Permission was sought from the participants and participation was voluntary. The researcher has ensured anonymity of the respondents and all the information gathered have been kept strictly confidential. The respondents' personal information, including their names, have not been revealed to anyone, and only aliases have been used in the final report and in all published reports to ensure privacy.

The research did not cause any harm to any party involved. Information on the recording devices were used for the research and thereafter destroyed. Also, the survey questionnaires were kept in a locked cabinet and could only be accessed by the researcher. The respondents were prepared, and it was explained to them that they could withdraw from the study at any time. Furthermore, both participants and the researcher signed a consent form binding them to adhere to what they agreed upon. To preserve academic trustworthiness, all the material used in this study was suitably recognized by a complete list of references.

4.13 Conclusion

This study was exploratory in nature. This chapter defines the study area, theoretical framework, and the research methodology of the study. The design was a case study and the methodology involved qualitative techniques. The chapter described the data collection methods as well as the various sources. Primary data from key informant interviews was collected as part of the qualitative methodology. Secondary data from

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various research and case studies was used as part of the qualitative methodology. A non-random purposive sampling technique was utilized to test participants and semi structured interviews were then applied to accumulate primary data. Numerous sources such as government sources, published books and journals were utilized to collate the secondary data. The chapter further defined the measures put in place which confirmed research verification and trustworthiness and lastly study limitations as well as ethical considerations.

CHAPTER FIVE: QUALITATIVE FINDINGS
5.1 Introduction

This chapter will describe and analyze the responses received from the various females who participated in this research study.

During the data gathering process, 10 females who were working in the Klipfontein Mitchells Plain Sub Structure at the time were interviewed. They worked in areas such as the hospital, the Primary Health Care (PHC) Platform and the Sub Structure office.

These 10 females differed in occupation, race, age, and level of management in the Department of Health in the Klipfontein Mitchells Plain Substructure.

The researcher identified these female managers from the various health-related fields in the Sub Structure, which included physiotherapy, radiography, deputy manager nursing, nursing education, operational manager at ward levels as well as administrative supervisors in areas such as finance and human resource management.
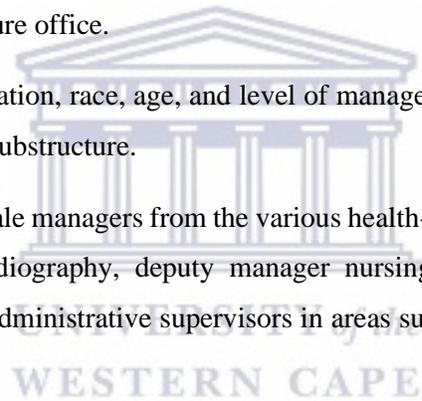
Figure 2: Demographic Information
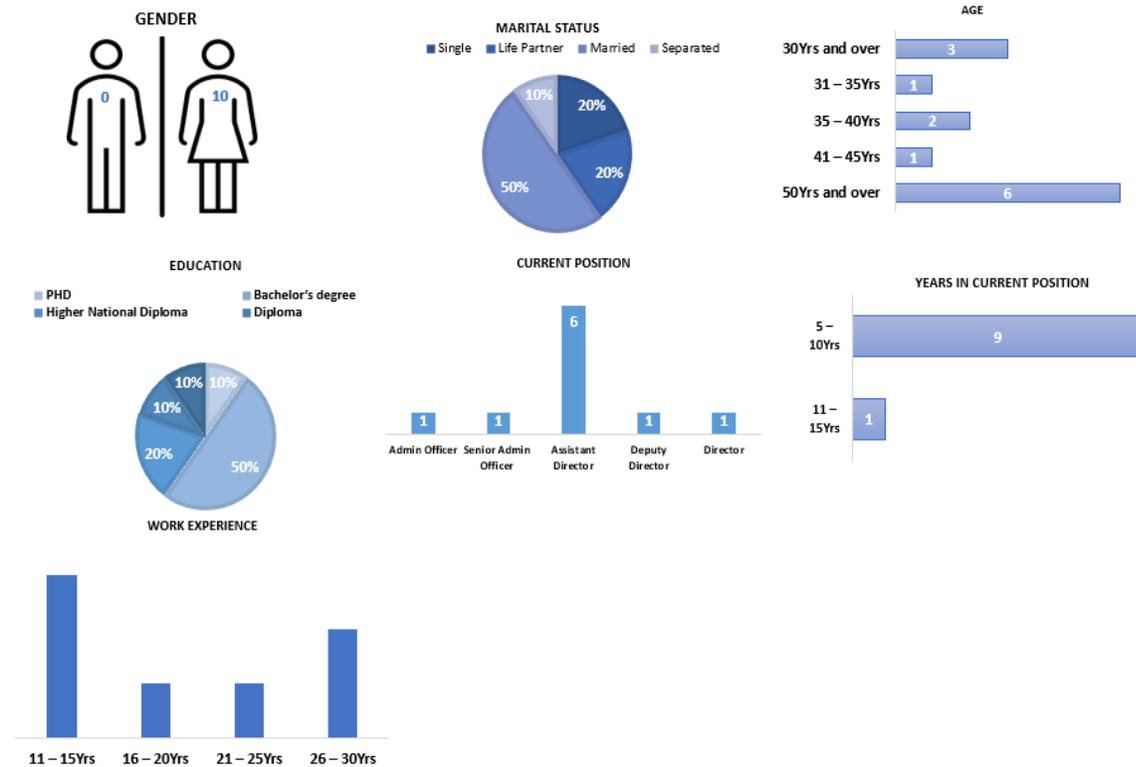
Figure 2 gives a clear depiction of the demographic profiles of the female employees who were interviewed for this research study.

The researcher focused on six distinct objectives when the questionnaire was drafted, which focused on education, cultural and political influence, equality, policies and regulations, equity and lastly performance at work and in achieving their goals as an individual. These objectives are linked to a woman's leadership capability in the working environment and play a role in how well they can adapt in an agile working environment.

A set of questions was then drawn up in terms of the objectives listed in Chapter 1. The responses were as follows:

5.2 Education

Section 29 of the Constitution of SA (1996) protects the right to basic and further education. The importance of quality education in discovering and unravelling the potential of people and to deliver economic opportunities cannot be over exaggerated. "Government has an obligation to provide access to quality education and this is exceptionally important" (South African Human Rights Commission, 2013).

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Further education and training form a major part in developing the quality of leadership today. "The fast-paced changes in today's global society are displayed in our higher education institutions as well as the current challenges as to how we prepare and educate students today in becoming the leaders of tomorrow". (Chin, 2011).

Alice Eagly (2007) "defines the path to leadership today for women as no longer a glass ceiling where there is no access. It is more of a maze through which they must navigate and find their way". This new metaphor advocates the need for multiple models of leadership and acknowledges that a woman leader might do it differently. Navigating the maze will be easier if women examine their strengths and the advantages they bring to organizations (Chin, 2011). "They are more likely to navigate this maze if they are equipped with the necessary skills and competencies, developed in part through further education and training" (Chin, 2011).

Respondents were asked if they thought that women were as skilled as men in leadership roles in the Klipfontein Mitchell's Plain Sub Structure.

Ninety percent of the women agreed and said women are as skilled as men, however the remaining 10% felt that women are not as skilled as men as women have been oppressed for a long time, and as such, they still stand back. The 90% were very confident with their 'yes' answer, that women are as skilled as men. One woman stated "*when a woman is placed in a work environment where males and females are equal, or a good mixture of both, they have the skills to lead at any time. For example, in the aviation sector, which is male dominated, women may not have the required skills or an opportunity to acquire those skills to work with males. This means her leadership skills are being overlooked*". Another respondent said "*skill is not something that is based on gender, race, etc. It is based on the individual. One person may possess certain skills, which may be lacking in another. Women are perceived to be emotional in decision-making/execution of duties, which is seen by many as a negative attribute, irrespective of their educational attainment*". Another manager mentioned that "*in the current times, when education is becoming more and more equally accessible to both genders, women have technical skills equal to men*".

Historically, trained professionals in the department of health were mostly males as the medical professionals were the most skilled in the department. However, there has been a significant change with females taking up professional positions in the department. This has not only been in the medical field, but it has also become evident in various other fields including those relating to administration.

There was also recognition from one of the respondents that "*on an evolutionary note, having historically played the roles of 'gatherers' and 'homemakers' has equipped us women with the skills of natural organizers, managers, and overall leaders.*"

The overall responses from the participants on the question of whether women were as skilled as men in leadership roles in the Klipfontein Mitchells Plain Sub Structure were based on the respondents' firsthand experience over the years of men and women who were equally skilled, competent, and qualified for leadership roles. The 10% who said that women are not as skilled as men felt that despite major improvements in South Africa in terms of equality for men and women, previously disadvantaged women still have to struggle because of their race and gender.

Respondents were asked, if access to higher education and skills development were restricted for women in the Sub Structure? This question was put to respondents to determine if there were any obstacles for women in the department or in the Sub Structure concerning upskilling and training and development of female staff members. All the females agreed that there were no restrictions in place when it came to the furthering of their education. Their responses were as follows:

"All women have equal access as men and skills development is encouraged for men and women."

"Higher education appears to be available to anyone interested. Women are afforded equal access to higher education."

"There are equal opportunities for all, and many women are currently studying and have received bursaries through the department. I believe the process is fair."

"They have access to higher education and skill development through the skills development program that is available in every institution and in the department."

All respondents agreed that there were no challenges facing females in the department who wanted to further their education and training to improve their opportunities for promotion. In their view, it was up to the individual to decide whether they were willing to go the extra mile by working and studying part time if that is what is required. They reported that every department offers all employees the opportunity to apply for bursaries for part time studies. These studies need to be relevant to their current appointments or a strong motivation would be required justifying any studies that deviate from their current line of work and advising how that will benefit not only the individual but the department as well.

However, there are many staff members who have been working in the Department of Health for many years who have not made any progress because they do not have the appropriate level of tertiary education. Respondents were asked if having low or minimum education levels affects the advancement of women into leadership positions in this Sub Structure or department? Some of the respondents indicated that skilled workers are the requirement for the jobs they are undertaking. This is reiterated by the following quotes.

"Certain positions require certain qualifications. One cannot expect to be advanced, without having acquired the necessary knowledge to adequately perform your job."

"Although upskilling does take place, it takes much longer for a woman of minimum education to be adequately trained for a leadership role, as opposed to a woman educated at a higher level."

"As the requirements for leadership positions cannot be met due to low education or minimum education and everyone should have matric if you want to study further and advance, so yes it does affect them, but they are encouraged to complete their matric."

"For any managerial or leadership positions you need to meet the educational requirements."

However, the participants who disagreed felt that it was a matter of preference, and that advancement, training and information is available.

Therefore, the role education plays depend on the individual and not necessarily their gender. The department presents equal opportunities for both males and females by offering possible bursaries and further education and training opportunities once a year. It is individual agency rather than gender that determines whether staff members decide to take up these opportunities. One challenge faced particularly by women is the fact that many of them are mothers and care givers, which impedes their ability to attend classes after hours. Therefore, their opportunities for upward mobility in the department requires not only support from the department but also from family members in their household. This is therefore a personal choice which many female employees need to make based on their circumstances at home and whether adjustments can be made to accommodate their roles as wives, mothers, and caregivers.

Respondents expressed concern about female employees who had not had the opportunity to complete their schooling. However, it was noted that the provincial health department in the Western Cape offers Adult Basic Education and Training (ABET) classes to all employees, giving them the opportunity to obtain a secondary certificate (Grade 12). They could then undertake further education and training, with support from the bursary programmes or the skills development fund.

Education and skills development are important strategies that both the national and provincial governments have developed to improve the lives of the previously disadvantaged, including the women currently working in various spheres of government.

"The approach to gender mainstreaming significantly relies on having skilled personnel in the GFPs (Gender Focal Points) who could execute the technical work that is required for the institution to fulfil its mandate and promote the mainstreaming of gender. Skills required are related to key programmes in the areas of legislation, policy, budget analysis and planning in relation to the line function of the Department

and to gender mainstreaming, advocacy, coordination, liaison, networking, and capacity building" (Department of Women, Strategic Plan 2015-2020). "The National Gender Policy, which was approved in 2000, requires that all Directors-General and Ministers implement gender mainstreaming in their various institutions, and they must report on progress and developments made and how they made use of the recommendations outlined in the policy to improve the socio-economic empowerment of women" (Department of Women, Strategic Plan 2015-2020).

5.3 Cultural and Political Influence

Nine out of the 10 respondents agreed that political factors play a role in the advancement of women in the public sector. Their statements were as follows:

"*The higher positions in the department are still male driven, there is no equal number of men and women on the electoral list.*"

"*Women are Carers, and the public sector prefers males leading positions compared to females.*"

"*BEE is key, and employment equity has often impacted the advancement of women, specifically in the public sector, resulting in excellent candidates being sidelined.*"

"*Women are underrepresented as voters, as well as in leading positions, because they say that women are more compassionate, whereas men are decisive.*"

These responses were based on the respondents' perceptions of the political environment around them, on historical experiences of the past and, to a certain degree, the present political environment.

Of the 10 participants only one felt that politics do not play a role. The youngest participant in the group said: "*The advancement of women is based on requirements and experience that one must advance in line with Recruitment and Selection Policy.*"

Ninety percent of the respondents agreed that political factors affect the advancement of women in the public sector. Many based this mainly on their past experiences although they said this was their own personal perspectives and they could not identify concrete incidents to back them up.

"Gender equality is about providing a voice to the poor and marginalized, who often are women. We need leaders who are responsive and accountable to the needs of women" (Morna, 2009).

"The economic participation of women in terms of women representation in places of employment across sectors is important, not only for reducing the disproportionate levels of poverty, unemployment and inequality among women, but also as an important step towards increasing household income and

encouraging economic development in the country as a whole" (Department of Women, Strategic Plan 2015-2020).

The above quotes illustrate the important position women play in improving the lives of the previously disadvantaged and in economic development in this country.

Respondents were asked if cultural factors play a role in the advancement of women in the Klipfontein Mitchells Plain Sub Structure. Eighty percent of the women felt that cultural factors do not play a role and 20% felt they do play a role in advancing females in the public sector. Their responses were as follows:

"*The culture of an institution greatly impacts advancement of women. This might not necessarily be the case in this Sub Structure, but it has been witnessed before. Women bring certain things to the table which might not be perceived to fit in with an organization.*"

"*Inadvertently and indirectly, yes, as is likely [to be] the case in any Sub Structure or work community. Persons who understand and/or share similar cultural factors (e.g., language, values) tend to be able to perform better and achieve better results with greater ease. Those with better performance and who are already familiar with the Sub Structure's work culture might advance easier and faster than others.*"

Eighty percent of the females all agreed that this Sub Structure and the department is multi-cultural, and everyone was permitted to advance themselves.

"*Information is readily available to all, and there is consideration of equitable workforce in leadership and lastly that as far as what can be seen any advancement is based on proper procedures and rules followed.*"

These comments largely refer to the work culture within the institutional environment and not actual cultural practices and beliefs as broadly understood. They relate to the different working conditions experienced by employees at different levels in the workplace.

Respondents were asked if women in South Africa are disadvantaged in any way by social, cultural, or political factors in advancing to leadership positions.

As detailed in a public health journal by Shung-King *et al.* (2018) "leadership essentially exists in people, social identities are among the numerous effects that impact on leadership behaviors and experiences in the health system". The gendered nature of health systems, with diverse health professions strongly dominated by either males or females, is one such impact on the shape and form of leadership. However, gender is mainly ignored in the general and health-specific management literature, regardless of global calls for

gender-parity in organizational leaders. There are minimal studies or research done to understand the effect of gender on health system leadership.

"African women have the following roles: woman, mother, and wife. Females are subordinated because of social, religious, and cultural practices and beliefs in the society" (Biri and Mutambwa, 2013).

In the past, in African society, female and male children were taught certain societal beliefs and practices that highlighted maleness above femaleness. These inhibited females' participation at all levels and in all spheres of the development process. "Therefore, performing leadership roles in a working environment is a challenging task due to the sociocultural practices and beliefs that have influenced the female gender negatively in the past" (Chigwata, 2014).

"Women are believed to be physically weaker than male members, so much so that women are encouraged to consult" (Tatira, 2000).

Careful consideration needs to be given to the conflict between culture, tradition, and universal human rights as stipulated in the South African Constitution. "In many cases customary law protects the positions of men in traditional communities to the disadvantage of women" (Gouws, 2008). In addition, women experience multilayered forms of oppression, and their realities are often not reflected in mainstream human rights discourses (Ndashe, 2005). "Many violations of women's human rights occur in the domestic sphere, but it is also argued that customary law cannot be rejected without careful consideration of the importance of custom and culture to many women. While women in parliament have supported reforming customary law and aligning it with a human rights discourse, some male political leaders' understanding of the role of traditional culture and the construction of their masculinity within that culture may be different from that of women parliamentarians and may undermine women leaders' attempts to reconcile culture and human rights." (Gouws, 2008).

In response to the above question, 80% of the females felt that culture does play a pivotal role when trying to advance into leadership positions. Their responses were as follows:

"Mentality has not changed, holding to the fact that a women's place is at home in the kitchen and raising children."

"In South Africa lots of women are disadvantaged, due to many factors. Men need to change their mentality that woman are just housewives, Carers, or incompetent. Socially, you still find that a woman can't initiate changes in relationships. Culturally it's the upbringing, that men should have the leadership role to protect the women. Politically, [a] woman is just disadvantaged due to [her] gender."

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"Since men have always been dominating in leadership roles, this makes it difficult for society to see women in leadership roles. This may be very subtle in the public sector, but interviews/recruitment have been manipulated to favor certain candidates due to social/cultural/political reasons. This is however a regular occurrence in the private sector."

"Women are disadvantaged due to operational roles in the home/working environment. Always having to work at home and at work."

"Support for gender equality is a recent thing. It has only recently been broadly supported in the last few decades. And the continuous fight for gender equality is evidence that not all are on board. Historical thinkers who believe women cannot lead and stakeholders with cultural beliefs which share the same sentiment might hold women back from leadership roles."

"Social factors, especially gender-based abuse, has repercussions for women in the workplace."

"Thankfully, the public sector is more accommodating in navigating these factors to ensure women advance into leadership roles."

The remaining 20% of their responses was no, based on the following:

"The department and the public service are governed by policies and prescripts that prevent such discrimination."

While many respondents said that policies have been put in place to enforce fair appointment processes, there remain challenges in changing prevailing mindsets regarding a female's place in the working environment.

Respondents were asked if in this Sub Structure ethos or culture negatively affected women's advancement in the organization or department.

Ninety percent said there are no negative cultural aspects in the Sub Structure or department that affects the advancement of women.

"In this Sub Structure everybody is the same and is treated the same."

"Many females are in higher posts; you just must take the opportunities if you want to. There is evidence of openness and transparency."

"All are given opportunities, whether its equal we can't comment, and everybody is treated the same."

The remaining 10%, however, who said there were negative cultural aspects that impacted on the advancement of women gave no further comment to support that answer.

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The tolerance evident in the Klipfontein Mitchells Plain Sub Structure suggests that there are no actual cultural barriers preventing female staff members from achieving senior positions in the Sub Structure and in the department.

Respondents were asked if politics within this organization/department affected the advancement of women into leadership positions.

"The 1994 conversion from apartheid to a liberal rights-based democracy created a political opportunity structure that allowed women to frame certain political issues in gendered terms. As such, the Women's National Coalition (WNC) mobilized women to draw up a women's charter that was handed to parliament in 1994. The opportunity structure created the space for women to articulate their needs through the creation of national gender machinery. Women could also articulate the need to change some aspects of customary law that lead to women's subordination, even in the face of the opposition from the Congress of Traditional Leaders of South Africa, hence, the enactment of, for example, the Recognition of Customary Marriages Act (Act 120 of 1998). This act changed the status of women under customary marriage from minors to majors. Until the enactment of this law women married under customary law could not enter legal contracts or make any important decisions without the permission of their husbands or other male relatives. These changes caused the traditional leaders to fear losing their power as sources of authority under customary law and to worry about the disintegration of traditional culture". (Gouws, 2008)

The evolution to democracy in South Africa has opened more opportunities for women in institutional politics. Since 1994 the South African government has taken up the massive task of creating one of the most integrated national gender machineries in the world to promote women's equality. This huge task involves the Office on the Status of Women, a Women's Empowerment Unit, a Women's Caucus in parliament, the Joint Monitoring Committee on the Quality of Life and the Status of Women, gender desks in every state department at the national level with identical desks at the provincial level, and an independent Commission on Gender Equality (Gouws, 2008).

Forty percent of the respondents answered yes, claiming that, "*women are scared, they don't know what to expect, it's only males*". "*Decision makers fight harder for opportunities for those they believe in, and often those with more clout and louder voices are victorious.*" "*Yes and no, recruitment can be transparent depending on where the vacant post/position is.*"

The remaining 60% claimed no, saying *"Politics could play an underlying role, but for the most part it appears not to, and although there have been rumors of nepotism, they have no actual knowledge of it"*. While these respondents said politics were not seen as a challenge, other respondents felt there was

underlying opposition to women trying to advance to higher positions. This is not the case in the current Sub Structure but that cannot be said for the entire Department of Health.

5.4 Equality:

Respondents were asked whether women were offered equal leadership roles in the Sub Structure as men?

The responses received for this question were mostly positive in the sense that the majority of the females felt that women are given equal opportunities to that of their male counterparts. The responses were as follows:

"In this Sub Structure, there appears to be equality in the leadership roles, looking at the status, and since joining this Sub Structure, I have witnessed many women move into leadership roles, both at the substructure office as well as at the various facilities."

They also agreed that everyone is afforded the same opportunity for advancement based on skill and merit as well as recruitment and selection criteria and it seems equal in terms of the number of females in leadership positions as the current leadership bears testimony. Lastly the main roles are filled by females. Hospitals are by nature female driven.

There was however the 30% that was a bit unsure and stated, "*In this Sub Structure there seems to be several men in leadership positions and many females in leadership roles",* but they were not quite sure of the woman to man ratio currently in the Sub Structure or department. Finally, "*Men and woman are given equal opportunities, but at the end of the day, some positions are just destined to be filled by a man. A reason for this is that when it comes to positions of leadership or power in an institution there is a perception that it would be better handled by a male, due to the historical background attached to leadership posts in the department."*

The Department of Health, and more specifically the Klipfontein Mitchells Plain Sub Structure, tries very hard to meet the equity targets of the department. When appointments do not comply with equity targets, motivations with sufficient reasons for that appointment must be submitted and the Director's approval is required.

Respondents were asked who were more qualified or skilled in the Klipfontein Mitchells Plain Sub Structure office.

Fifty percent of the respondents felt that women are more qualified in the Sub Structure and said most leadership roles are currently filled by women in this Sub Structure. "*Nursing has the most employees in the Sub Structure and nursing is a profession driven by females".* "*Women, my observation would be*

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women, not because I'm biased but because of what I have witnessed and experienced in the department over the years."

Another 20% felt men are more qualified, stating that "*men are more technically qualified. However, the women are more skilled in unquantifiable ways, and top structures are occupied by men. Once again this refers to the historical background of men always being in positions of power and authority in various organizations as well as in their personal environments".*

The remaining 30% were unsure, claiming that "*unfortunately I am unable to comment on this as I do not know what the factual evidence is. I am not sure whether I believe that qualification or skill can be measured because one would have to quantify the value of one skill or qualification over the other. Also being qualified in something, to me, is different to being skilled, even though the two words actually have the same meaning."*

Previously most specialists and medical officers were male. They were placed in managerial positions in health institutions because of their qualifications, and not necessarily their management experience. However, there has been huge improvement in the management and leadership of institutions, and it is now more important to have the necessary skills, qualifications, and experience for management positions; appointments are no longer dependent on the level of qualification or the gender of the individual.

Respondents were asked if this plays a role in the advancement of women in the organization.

Sixty percent of the respondents said yes and added "*this motivates other women in the department to strive to do the same as they now feel that they are equal to their male colleagues.*"

"*There are more women in leadership than men and the majority in the profession remain females in the health sector. Finally, for many leadership roles one needs technical qualifications, e.g., degrees, diplomas, etc.".*

The remaining 40% said no, based on the following factors: "*women still apply and receive promotional posts if they pass the interviews and if roles are assumed to be based on skill or qualification, advancement of anyone, male or female, should not be affected."*

It is now easier for women to advance to high-level posts in the Department of Health, but the decision to pursue these positions is up to the individual. Mentoring and coaching in the working environment is imperative so that females have the necessary support to take on extra responsibilities, roles and duties, which will itself facilitate their upskilling and development.

Respondents were asked if there was discrimination after a woman has been appointed in a leadership position in the organization. Forty percent of the respondents felt that it does, giving the following explanations:

"Women are perceived to have certain characteristics, likely inferior to males. We also tend to react differently to situations and execute tasks differently."

"Even though males and females have different methods of reaching the goal, both can be equally effective, this is however where discrimination arises."

"We should, however, not be deterred by this. Women before us have fought hard for us to assert our position in the workplace today. This should be a motivation to exert our opinions and skills etc. on those who practice discrimination."

"Gender discrimination is present; one always must decide which battles to fight and how."

"Their role as mother, wife and caregiver is often not acknowledged and there are always subtle undertones of sexism in the workplace."

Another 50% of the respondents said no, but gave minimal reasons, saying:

"Not that I have witnessed or experienced and mainly not that they are aware of."

The remaining 10% said they were unsure. This is an opinion and reflects the personal experiences of the respondents. It did not automatically mean that it has happened in the institution, but it is a clear indication that it has happened to the respondents in their careers over the years. It also played a huge role in how that respondent moved forward. Some used it as motivation to work towards leadership roles in the department and others might have used it as a reason to stay in their current positions and not seek further promotion due to bad experiences in their institutions.

Therefore, awareness training in institutions is important so that both males and females can provide the necessary support to their peers, colleagues, and subordinates and ensure the working environment provides encouragement and support for all who want to prosper and advance to higher positions.

Respondents were asked if discrimination of female leaders takes place in the Department of Health in the Western Cape.

Once again there was a difference of opinion with 60% of the females agreeing that it does take place in the department, claiming that remarks are made regarding appearance, disrespect in meetings, and about not being seen or heard or not being taken seriously. The responses were as follows:

"This is just rumors, but it tends to happen sometimes between doctors and woman leaders, especially nurses."

"A woman is mostly expected to stay at home and look after a sick child, it is not expected of a man."

"This may not be allowed according to policies, but however still takes place everywhere. It is up to us how discrimination will affect us as females."

"There would have been a balance, there is currently no balance in the department."

The remaining respondents disagreed as they had not seen or experienced anything like that firsthand, suggesting they have had negative experiences in various institutions.

The respondents did not confirm or deny that it has taken place in their current environment, however they have been exposed to such discrimination during their years of employment.

The respondent's acknowledged discrimination was not always about their inability to do their jobs but was instead about unrelated issues such as their appearance or how they conducted themselves in meetings or at corporate events; ultimately, they felt there was a stigma attached to simply being female.

Respondents were asked if the Klipfontein Mitchells Plain Sub Structure encourages and promotes the advancement of women. Ninety percent of the respondents said yes, and their reasons are as follows: "*all staff members are encouraged to study and to advance themselves. Most of my colleagues are female and all females are given equal opportunities.*"

"Also, regardless of the Sub Structure, if policies and procedures are followed meticulously, this should be the case. Looking at how many women are in leadership roles in this substructure, I would have to say that the Klipfontein Mitchells Plain Sub Structure does promote advancement of women."

This clearly indicates that the opinions, contributions, and hard work by women are valued and acknowledged, and women who show potential are strongly encouraged to guide and support others. Finally, it is worth noting that the director of the Sub Structure is a woman.

Table 2:Klipfontein Mitchells Plain Sub Structure Establishment, 2021

Table two illustrates the number of females working in management/leadership positions in this Sub Structure and it clearly confirms that females are in the majority in this Sub Structure

| Klipfontein Mitchells Plain Sub Structure Senior Postions | | | | Gender | |
Office / Division / CD / District / Region	Status	Salary Level	Job Title on Rank	Female	Male
Metro Sub-Structure 3: Klipfontein/M Plain	Filled	13	Director: District Health Service	1	
Metro Sub-Structure 3: Klipfontein/M Plain	Filled	13	CEO: Chief Executive Officer		1
Metro Sub-Structure 3: Klipfontein/M Plain	Filled	12	Deputy Manager Nursing	1	
Metro Sub-Structure 3: Klipfontein/M Plain	Filled	12	Pharmacist Grade 3	1	4
Metro Sub-Structure 3: Klipfontein/M Plain	Filled	12	Medical Specialist Grade 3	2	3
Metro Sub-Structure 3: Klipfontein/M Plain	Filled	12	Medical Officer Grade 3	12	8
Metro Sub-Structure 3: Klipfontein/M Plain	Filled	12	Manager Pharmacy Services		1
Metro Sub-Structure 3: Klipfontein/M Plain	Filled	12	Manager Medical Services Grade2		1
Metro Sub-Structure 3: Klipfontein/M Plain	Filled	12	Deputy Director: Proffesional Supprt Services	1	
Metro Sub-Structure 3: Klipfontein/M Plain	Filled	12	Deputy Director: Comprehensive Health	1	
Metro Sub-Structure 3: Klipfontein/M Plain	Filled	11	Deputy Director: Financial Manager		1
Metro Sub-Structure 3: Klipfontein/M Plain	Filled	11	Deputy Director: Human Resource & Facility Manager	1	
Metro Sub-Structure 3: Klipfontein/M Plain	Filled	11	Deputy Director: Human Resource Management		1
Metro Sub-Structure 3: Klipfontein/M Plain	Filled	11	Facility Manager: Primary Health Care	2	1
Metro Sub-Structure 3: Klipfontein/M Plain	Filled	11	Manager: HAST	1	
Metro Sub-Structure 3: Klipfontein/M Plain	Filled	11	Pharmacist Grade 3	4	2
Final Total				27	23

Source: Klipfontein Mitchell's Plain Sub Structure Establishment of 2021

The above table is the current management structure for the Klipfontein Mitchell's Plain Sub Structure, it depicts that from the 50 senior managers appointed 27 are female employees currently working in the sub structure, this serves as a good example for any sub structure as this ratio of female to male is 4% higher.

5.5 Policies and Regulations

Respondents were asked if the provincial department's policies and regulations promote the advancement of women into leadership positions in the department.

All the females answered yes to this question, maintaining that departmental policies are intended to be structured in a manner that should eradicate bias - although employment equity sometimes suggests otherwise - and that men and women are given equal opportunity to apply for posts regardless of their gender.

The provincial department's policies and regulations promote advancement of both genders. This is evident in the Western Cape Department of Health, where the previous and current head of department were female, as is the current Minister.

"No position in the Department of Health is specifically labelled only for men but are rather for those who meet the requirements and criteria. Also, the Employment Equity Act strongly addresses the promotion and appointing of women in the department."

"Men and women are given equal opportunity to apply for posts regardless of their gender and there are many females in leadership roles in the Sub Structure."

"The Constitution promotes fair discrimination which promotes equal opportunity for the development of women and any other previously disadvantaged groups" (Constitution of SA, 1996).

The Department derives its mandate from the Constitution of the Republic of South Africa. The Constitution champions the achievement of equality, including gender equality, in its provisions, particularly in Section 9 of the Constitution, which obliges the public sector, the private sector and civil society to eliminate and remedy gender, race and social inequalities.

Section 9(2) of the Constitution guarantees the full and equal enjoyment of all rights and freedoms by people of both genders. It furthermore provides for legislative and other measures that are designed to protect or advance persons or categories of persons disadvantaged by unfair discrimination and promote the achievement of equality. Section 9(3) states that "the state may not unfairly discriminate directly or indirectly against anyone on one or more grounds, including race, gender, sex, pregnancy, marital status, ethnic or social origin, color, sexual orientation, age, disability, religion, conscience, belief, culture, language and birth," and Section 10 states that "everyone has inherent dignity and the right to have their dignity respected and protected" (Department of Women, Strategic Plan 2015-2020).

The Employment Equity Act, 1998 was established to address the inequalities of the past and to ensure that women are appointed in managerial positions in the public service.

Over the years policy has been implemented to promote the previously disadvantaged, including women in government departments, and a uniform approach has been adopted when making appointments. Different departments now follow the same policies and practices to ensure the process is unbiased, and all candidates, male or female, are given the same opportunity.

Respondents were asked if the policies that are currently in place in this Sub Structure promote or hinder the advancement of women to leadership positions.

Ninety percent of the respondents felt that the current legislation and policies in place in the department do promote the advancement of women in the department. Their responses were as follows:

"It is evident in the number of women moving into leadership roles in the Sub Structure in the last decade and when posts are being advertised, all can apply, and for studies and upskilling oneself all can apply. That is male and female."

"The policies are intended to promote all levels of staff. As stated before, however, recruitment can sometimes be manipulated to suit the specific needs of the institution."

"The current women leadership in this Sub Structure bears testimony to the advancement of women in leadership."

And lastly, *"It is the same policies for everybody, and it does depend on the individual and if you are a go-getter, and it does promote women as there is no policy that hinders the advancement of women, all or most policies are general in the public service."*

Respondents were asked if there were specific policies in place that would promote the advancement of women into leadership positions in the Klipfontein Mitchells Plain Sub Structure.

"The act aims to ensure equitable representation in all occupational categories and levels in the workforce. It applies to all employees and employers, except the South African National Defense Force, the National Intelligence Agency, and the South African Secret Services" (www.gov.za).

Thirty percent of the participants said there is no specific policy in place, "*all policies are general*". Another 50% said, *"there are certain policies that promote women in the department, stating that in filling posts the human resources department must follow the criteria in the Employment Equity Act for the human resources appointments process to be completed, and that the Act is being implemented"*.

When women are out of equity (meaning when an appointment is made without meeting the equity targets within the institution) but prove to be the best person for the role during the interview process, candidates undergo psychometric testing. The final participant said that the Employment Equity Act and gender equality policies are being fully implemented. The remaining 20% said they were unsure about this process.

5.6 Equity
The respondents were asked currently in the Sub Structure who are in the majority in the following positions.

Based on the responses from the participants, table three shows what they have perceived in the department.

Table 3: Comparison of Male and Female Supervisors and Managers

Top Management	Middle Management
Males: 80%	Males: 40%
Females: 20%	Females: 60%

The table above shows that 80% of the respondents agreed that males are in top management positions in the department and 20% felt that there are females in top positions. Regarding middle management positions, 60% of the respondents agreed that females are in middle management positions and 40% agreed on males being in this position in the department.

It is important to note that this is the perceptions of the respondents, it does not reflect the actual statistical evidence of the department and it does not represent the department's equity status. This is what the respondents experience in the department and the fact remains that certain respondents felt that even though there is female representation in leadership positions, males are still predominantly the leadership in institutions. The department does have a historical background of institutions being managed and supervised predominantly by male leadership and this is one of the strongest reasons why the respondents perceive the department in this manner.

The set of grids below provide an overview of actual statistics from the department and more specifically the Klipfontein Mitchells Plain Sub Structure.

These grids give a clear indication of the status of each race and gender in the department and serve as a guideline to the various institutions as to what the needs are in the department when it comes to filling of posts.

As mentioned above, respondents were asked if the Employment Equity Act is being implemented in the department and more specifically in the Klipfontein Mitchells Plain Sub Structure.

The current employment equity statistics for the Klipfontein Mitchells Plain Sub-Structure are as follows:

Figure 3:Metro: Klipfontein Clinic

Table 1: Permanent Personnel: Race / Gender / Disability

	African	Coloured	Indian	White	PWD	Male	Female
TARGET	152	199	5	75		227	203
CURRENT EE	257	162	6	4	1	93	336
GAP	-105	37	-1	71		134	-133

Table 1: Permanent Personnel: Race and Gender

	AM	AF	CM	CF	IM	IF	WM	WF
TARGET	82	70	103	96	3	2	39	36
CURRENT EE	54	203	35	127	2	4	2	2
GAP	28	-133	68	-31	1	-2	37	34

Table 2: Non-Permanent Personnel: Race / Gender / Disability

	African	Coloured	Indian	White	PWD	Male	Female
TARGET	0	0	0	0		1	0
CURRENT EE	0	1	0	0	0	1	0
GAP	0	-1	0	0		0	0

Table 2: Non-Permanent Personnel: Race and Gender

	AM	AF	CM	CF	IM	IF	WM	WF
TARGET	0	0	0	0	0	0	0	0
CURRENT EE	0	0	1	0	0	0	0	0
GAP	0	0	-1	0	0	0	0	0

Table 3: All Personnel: Race / Gender / Disability

	African	Coloured	Indian	White	PWD	Male	Female
TARGET	128	168	4	63		192	172
CURRENT EE	204	143	8	8	2	79	284
GAP	-76	25	-4	55		113	-112

Table 3: All Personnel: Race / Gender / Disability

	AM	AF	CM	CF	IM	IF	WM	WF
TARGET	70	59	87	81	2	2	33	30
CURRENT EE	32	172	45	98	1	7	1	7
GAP	38	-113	42	-17	1	-5	32	23

Source: Klipfontein Mitchell's Plain Sub Structure Employment Equity Statistics September 2021.

The above graphs show that in most cases employment of women exceeds targets, particularly among African and coloured staff.

Figure 4:Metro: Klipfontein and Mitchells Plain Offices

Table 1: Permanent Personnel: Race / Gender / Disability

	African	Coloured	Indian	White	PWD	Male	Female
TARGET	43	57	1	21		65	58
CURRENT EE	43	73	5	2	2	33	90
GAP	0	-16	-4	19		32	-32

Table 1: Permanent Personnel: Race and Gender

	AM	AF	CM	CF	IM	IF	WM	WF
TARGET	23	20	29	27	1	1	11	10
CURRENT EE	11	32	21	52	1	4	0	2
GAP	12	-12	8	-25	0	-3	11	8

Table 2: Non-Permanent Personnel: Race / Gender / Disability

	African	Coloured	Indian	White	PWD	Male	Female
TARGET	85	111	3	42		127	114
CURRENT EE	161	70	3	6	0	46	194
GAP	-76	41	0	36		81	-80

Table 2: Non-Permanent Personnel: Race and Gender

	AM	AF	CM	CF	IM	IF	WM	WF
TARGET	46	39	58	54	1	1	22	20
CURRENT EE	21	140	24	46	0	3	1	5
GAP	25	-101	34	8	1	-2	21	15

Table 3: All Personnel: Race / Gender / Disability

	African	Coloured	Indian	White	PWD	Male	Female
TARGET	128	168	4	63		192	172
CURRENT EE	204	143	8	8	2	79	284
GAP	-76	25	-4	55		113	-112

Table 3: All Personnel: Race / Gender / Disability

	AM	AF	CM	CF	IM	IF	WM	WF
TARGET	70	59	87	81	2	2	33	30
CURRENT EE	32	172	45	98	1	7	1	7
GAP	38	-113	42	-17	1	-5	32	23

Source: Klipfontein Mitchell's Plain Sub Structure Employment Equity Statistics September 2021.

The above graphs depict staff in the offices of the Klipfontein Mitchells Plain Sub Structure. This refers to the managerial as well as the administrative staff and shows both genders as well as the racial profile per department. The graphs show employment equity is the current practice in these offices and females are in the majority compared to males.

Figure 5:Metro: Mitchells Plain Clinics

Table 1: Permanent Personnel: Race / Gender / Disability

	African	Coloured	Indian	White	PWD	Male	Female
TARGET	96	126	3	48		144	129
CURRENT EE	135	128	5	4	2	64	208
GAP	-39	-2	-2	44		80	-79

Table 1: Permanent Personnel: Race and Gender

	AM	AF	CM	CF	IM	IF	WM	WF
TARGET	52	44	65	61	2	1	25	23
CURRENT EE	33	102	28	100	2	3	1	3
GAP	19	-58	37	-39	0	-2	24	20

Table 2: Non-Permanent Personnel: Race / Gender / Disability

	African	Coloured	Indian	White	PWD	Male	Female
TARGET	0	0	0	0		0	0
CURRENT EE	0	0	0	0	0	0	0
GAP	0	0	0	0		0	0

Table 2: Non-Permanent Personnel: Race and Gender

	AM	AF	CM	CF	IM	IF	WM	WF
TARGET	0	0	0	0	0	0	0	0
CURRENT EE	0	0	0	0	0	0	0	0
GAP	0	0	0	0	0	0	0	0

Table 3: All Personnel: Race / Gender / Disability

	African	Coloured	Indian	White	PWD	Male	Female
TARGET	96	126	3	48		144	129
CURRENT EE	135	128	5	4	2	64	208
GAP	-39	-2	-2	44		80	-79

Table 3: All Personnel: Race / Gender / Disability

|	AM	AF	CM	CF	IM	IF	WM	WF
TARGET	52	44	65	61	2	1	25	23
CURRENT EE	33	102	28	100	2	3	1	3
GAP	19	-58	37	-39	0	-2	24	20

Source: Klipfontein Mitchell's Plain Sub Structure Employment Equity Statistics September 2021.

The above graphs clearly depict that the Sub Structure meets its employment equity targets, and often exceeds them, when it comes to the appointment of females in the department.

This however illustrates the employment equity statistics for all females working in this Sub Structure and not only the number of females in management positions.

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Once again, all the females who took part in this study agreed that the employment equity act is 100% effective in this Sub Structure. Their responses were as follows: "currently most of the leadership roles are filled by women who are competent and are highly skilled and well suited for the leadership position they are in."

The Employment Equity Act has been taken into consideration and applied in all recruitment and selection processes. This can on occasion be overturned for various reasons, at the discretion of the interview panel for that specific interview that I have been involved in in the Klipfontein Mitchells Plain Sub Structure. It has been witnessed when interviews are held, and when there's hiring of new staff the Employee Equity Act is always considered.

Data are being monitored monthly to ensure that the Sub Structure meets targets and addresses shortcomings.

The Employment Equity Act as well as the Public Service Act, 1994 (103 of 1994) speaks to preferential treatment of women and other disadvantaged groups and it is therefore vital that they are considered when employing qualified women in managerial positions in the public service.

The White Paper on Affirmative Action in the Public Service of 1998 was designed to specifically focus on employment in the public service and it is structured in a way to ensure affirmative action for the benefit of women and other disadvantaged groups.

The White Paper on the Transformation of the Public Service, (Act 44 1995), "states that within four years of implementing the affirmative action programme at least 30% of senior management in the public service should be women".

5.7 Performance

Respondents were asked if an employee's conduct or work performance affects their advancement in the organization. The respondents were mostly in agreement with 80% saying yes. Their reasons were as follows:

"The conduct or work performance of an employee can affect their advancement in the organization if the issue is not addressed and the necessary disciplinary steps are not taken and if an employee displays constant poor performance despite support, including behavior that [demonstrates] that the employee is not gainfully employed."

"If the conduct is not in line with the code of conduct or work performance it's not something that should be overlooked."

"Employees with good work ethics and exemplary work performance are entrusted with more responsibilities and leadership tasks in their dedicated roles. Advancement into more senior job titles is still only by means of recruitment and selection processes."

"Continuous poor conduct and performance will have a negative impact on your advancement in any organization and quality work is seen and rewarded."

Lastly, *"if it is observed your conduct and performance is exceptional, staff are encouraged to advance, and those who are under-performing are also encouraged to advance themselves."*

The remaining 20% felt that conduct or work performance should be one of the main deciding factors when considering advancement and that often these things are overlooked during the recruitment process due to the way the process is structured as well as the rules of recruitment and selection. They ended off by saying, "if you have a goal, you will perform and drive towards that goal."

The quality of performance provides a crucial measure of an individual's ability, work ethic and ethos. However, this can only be used to decide internal promotions. Interviews of prospective employees from outside the institution cannot provide as much insight as the experience of working with that individual. In the Department of Health, many employees remain in the department for many years and seek promotion within the department, where their specific skills and qualifications are needed and where they are familiar with the policies and practices. The researcher wanted to determine the impact of the promotion of females within the department and if there were any obvious changes in behavior or attitudes towards women who moved to more senior positions.

Respondents were asked if women are treated any differently in the organization/Sub Structure once they attained a leadership position in the department.

The respondents differed in opinion and experience in the department, however 40% felt that women are treated differently. Their reasons were as follows:

"*They get treated differently due to their new role, and they get treated according to their new role as leader. Prior to that new role there was not much acknowledgement of their previous position.*"

"*They must work harder.*"

The remaining 60% felt that they are not treated any differently in the department once they attain a promotion or a leadership position. Their responses were as follows:

"*Within our organization it seems that women in leadership roles are treated with the same respect as their male counterparts.*"

"*They are held responsible and accountable for their portfolios.*"

Lastly, "*women are shown the same respect as their male counterparts, as seen in our substructure where the director is a female.*"

Perceptions from respondents were once again based on the previous experiences and challenges they have encountered over the years in their various working environments and do not necessarily refer to their current working environment. Respondents felt that there is enough support for both women and men who are promoted to leadership positions in the department, but that ultimately it depends on whether the individual makes use of the support structures in place, such as the various orientation and induction programmes, which are offered at all levels and positions within the department, not only at certain management and leadership levels.

Respondents were asked if bias in this Sub Structure or department impacts in any way on advancing women into leadership positions. Many of the participants agreed that there is no bias in this Sub Structure or department, stating that judging from the number of women in leadership roles, bias is not found, and everybody is given an equal opportunity irrespective of gender.

"*Black Economic Empowerment (BEE) is queen, females are at the positions they wish to acquire, and lastly there are many females in leadership roles in the substructure.*"

However, another 30%, felt that bias does have an impact, saying more women would have been in leadership positions, but currently there are only two women in leadership positions in this hospital.

Respondents differed in opinion over this question, depending on whether it applied to the Sub Structure or the department. Some respondents felt that the department might display bias when high-level appointments are made but added that this was an opinion based on their observations.

Respondents were asked if they think there are any factors that have negatively affected the advancement of women in this Sub Structure or in this department. On this last question the respondents made the following comments:

"*Financial constraints maybe, but generally it seems that women can advance if they choose to, without having internal politics.*"

"*Level of education and qualification. Mostly women are not equipped to fill leadership positions.*"

"*[The] Department of Health is a female-dominated sector, which makes advancing into middle management positions difficult.*"

"*Availability of suitable candidates for leadership positions.*"

Lastly, one respondent mentioned "*if women see that when a woman apply for a senior level leadership post, [and] a man gets it, this does negatively affect a woman. Three institutions (public hospitals) had interviews for CEOs and all three institutions appointed men. Is it prejudice? The department speaks about advancement of women, but the statistics do not show this, not in this department or in this country.*"

There were various opinions on this question and even though many of the respondents said no, the above comments point to certain personal experiences they have had in the department over the years. Their experiences were not linked to a specific sub structure but indicated what the respondents have experienced during their careers.

5.8 Conclusion

The country's legislation and the role the new democratic government has played over the years has influenced the positive feedback received by these women and has encouraged women to strive for better education and training and equal work opportunities for all.

The Department of Women (DoW), currently situated in the Department of the Presidency, was created as an instrument to uplift women's socio-economic status and promote gender equality at the highest office in the country. This calculated and tactical location of the DoW in the Presidency is designed to fast-track the socio-economic transformation and empowerment of women and the advancement of gender equality. "The Department has a dynamic role to play in enhancing the implementation of Vision 2013 as set out in the National Development Plan (NDP), by ensuring that its implementation is gender mainstreamed and responsive to the needs of South African women" (Department of Women, Strategic Plan, 2015-2020).

"The economic participation of women in terms of women representation in places of employment across sectors is important, not only for reducing the disproportionate levels of poverty, unemployment and inequality among women, but also as an important step towards increasing household income and encouraging economic development in the country as a whole" (Department of Women, Strategic Plan 2015-2020).

These were the positive responses received and it showed that women in general are moving away from the historical belief that a woman's place is in the home and have become more confident and willing to challenge any person, male or female, in a working environment to ensure fair opportunities are presented to all. At the same time, one of the respondents answered that there has been a definite increase in women in management positions over the past 10 years in this Sub Structure

The responses received from the participants were positive, and it has been noteworthy to see the positive changes that have taken place in the department over the years. These changes include policies and practices as well as change management in the various departments.

The majority of the respondents agreed that there have been huge improvements in the department with women moving into senior leadership positions in the public service in general. As per the research questions asked, the answers are clear that there has been an increase in women in management positions over the past 10 years in the Western Cape Department of Health, specifically in the Klipfontein Mitchells Plains Sub Structure.

There is no relationship between gender role perception and women's progress in the Sub Structure and lastly, women are faced with challenges, however these are generic challenges that take place in any working environment and are not necessarily specific to the females in this Sub Structure.

In many cases women felt that it is an internal battle in themselves that needs to be addressed before looking at the external barriers and challenges that might present obstacles. These internal battles are the result of years of bad experiences and disadvantages they were unfortunately exposed to in the past. Cultural changes have created more opportunities and prospects for women in this country. However, in certain working environments in which males continue to believe a woman's place is in the household and not at work female workers continue to face real challenges.

This was made clear in the interviews with older female managers who have been working in the department for many years. They felt that more internal training interventions were needed in the public and private sectors aimed at changing the mindsets of males who continue to have negative attitudes towards women advancing into leadership positions.

Similarly, it was clear in the interviews that a change in mindset and culture is required on the part of female colleagues in the department who move into higher positions. Persistent backward-looking thinking does not only present an obstacle for the females, but it also obstructs progress in the department in general.

In conclusion, while much has been achieved in terms of female promotion into senior leadership positions in the department, and in the public and private sectors more broadly, if department heads, such as managers, do not provide regular, ongoing, and compulsory training interventions on gender equality some females may continue to lag behind in the workplace.

CHAPTER SIX: RECOMMENDATIONS AND CONCLUDING REMARKS

6.1 Introduction

This mini thesis investigated the possible barriers women face in the Department of Health, with a particular focus on the Klipfontein Mitchells Plain Sub Structure. The study made use of primary data from interviews with various respondents working in the department as well as secondary data from case studies and research previously conducted on the topic. The aim of this study has been to identify if there are any hindrances and challenges women still face in the working environment in the Klipfontein Mitchell's Plain Sub Structure.

The apartheid era played a huge role in the lack of the advancement of women in both the public and private sectors. It negatively affected women in a variety of areas, the most crucial being education and employment.

There are both internal and external career barriers for women trying to climb the corporate ladder to senior managerial positions. The external barriers refer to the environment and the internal barriers are psychological ones. Frequent loss of opportunities in the workplace ultimately affects a woman's confidence level as well as her self-esteem with respect to the self-perception of her own personal abilities. South African women continue to experience marginalization and discrimination in the workplace, and sometimes in their homes with their families and in their community.

Women often experience conflict between their career ambitions and their personal life and may have to prioritize their family responsibilities over their career progress. The working sector does tend to discriminate against working mothers and stereotype them as not being committed enough or responsible enough to take on senior management positions due to their dual responsibility of raising a family and having a career, hence assuming that women cannot be successful at their jobs while having other external priorities as well.

In today's democratic South Africa there are still many challenges and barriers in place which disadvantage women in their progress towards managerial positions in the public service. Many policies and laws have been put in place and implemented directly for the advancement and progress of women in the public service and this has created more opportunities for women in this country to progress towards higher positions in their career. However, there are still many women who feel left behind due to experiences they endured in the past.

Women continue to aim for leadership positions in all spheres of governance and leadership, both in the public and private sectors. Great strides have been made politically, and women's involvement in both the freedom struggles and in the democratic processes of many African countries have been noteworthy. Yet

this involvement has not always translated into equal representation in political leadership positions (Kiamba, 2008).

"South Africa has made much progress in a short space of time in the efforts toward a gender-neutral society. However, for others the pace has been much slower. Attaining positions of power and leadership is one thing, but could it be that women pay a higher price than men" (Kiamba, 2008)?

"The World Bank report of 2018 focused on the high cost of gender inequality on earnings; globally women account for only 38% of human capital wealth compared to 62% for men. The struggle for gender equality will not be gained in the workplace only. Mindsets and norms at the foundations of society need to change, or constitutional commitments, global pledges, and legislation will continue to stagnate" (Public Servants Association, 2019).

StatsSA estimates that in 2019 the mid-year population was at 58.78 million with approximately 51% (30 million) of the population being female. Despite women making up just over half of the population, they remain relatively underrepresented in positions of authority and power.

"The National Development Plan (NDP) 2030, a long-term effort to eliminate poverty and reduce inequality in South Africa by 2030, identifies women as the group most affected by inequality, poverty, and unemployment and strives to address this" (Get Smarter, 2019).

This study took an in-depth look at the public health sector in the Klipfontein Mitchells Plain Sub Structure to investigate the perceptions of female employees working in this Sub Structure.

An important factor to note is that currently the director of this Sub Structure is a colored female, and she is responsible for one district hospital, the Mitchells Plain District Hospital, and eight facilities spread across the Klipfontein Mitchells Plain drainage area. These facilities are the Mitchells Plain Day Hospital, Hanover Park Day Hospital, Dr Abduragmaan Day Hospital, Nyanga Day Hospital, Crossroads Day Hospital, Heideveld Day Hospital, Gugulethu Day Hospital, and Inzame Zabuntu Day Hospital. This is a big responsibility, although each facility including the hospital does have a facility manager and the hospital has a chief executive officer responsible for the institution.

The study could not involve more participants due to constraints on time and availability of resources. The researcher is extremely grateful to the respondents who took the time out of their busy schedules and participated in this study.

In the interviews that were done in this study, the majority of the female employees agreed that there is no bias or gender disparity in place. Concerns have been raised and a few isolated incidents mentioned, but

further than that it was noted that in this Sub Structure employment equity is always acknowledged and opportunities are presented to all employees.

This does not mean that everything is smooth sailing in the working environment, but it does show that management as well as top management does take gender parity into account. However, this does not eradicate the fact that at some point in a female's working career she has felt judged or undermined because she is a female. This might not have occurred while working at the Klipfontein Mitchells Plain Sub Structure but with many females it has occurred in previous working environments. This is something that needs to be acknowledged and addressed not only in the public sector but in the private sector as well; the fact is that there are still areas of concern in a working environment that need to be addressed to ensure a gender bias-free environment for all employees. A working environment should ensure there is gender equality across the board in all working environments in the public and private sectors.

This study has revealed certain aspects that need more attention to ensure equality for all employees and therefore certain recommendations can be made not only from the interviews but also from the literature that has been reviewed.

6.2 Recommendations

Many recommendations and sanctions have been put in place over the years, and some have resulted in great success while others have needed more enforcement. There have been a great number of studies surrounding gender issues in the workplace, and it was discovered that many organizations in both the private and public sectors have to a certain degree failed to employ, promote, or sustain female employees relative to their male counterparts.

Some of the recommendations below have been mentioned and actioned previously, however they can be revisited and endorsed with a higher level of commitment and encouragement to ensure greater compliance.

The first step to address some of these challenges would be to work on the stereotyping of women by men in the workplace. An example of this would be more focused training interventions, creating awareness by training interventions in the department as well as publishing the successes of women in the workplace through internal circulars and local media.

Secondly, job design needs to be sensitive and incorporate issues of gender, race and professional hierarchy in order to support candidates' readiness and preparedness for positions of leadership in health care organizations.

There needs to be an environment where employees can create the time and space for leaders and followers to discuss a shared vision and understandings of what processes needs to be followed to achieve mutually beneficial goals. This should be equally suitable for men and women, taking cultural factors into account.

Thirdly, there should be mentorship and counseling sessions for women in senior management positions, which also encourage other female employees in the department to work towards reaching that level, and higher, in the public service.

Also, the creation and implementation of target scholarships should be pursued for women to attend formal leadership training in schools of medicine, nursing, public health, and other health-related fields, with the emphasis on lower access to education. This should include mentorship programs that connect young woman leaders to prominent leaders to assist in expanding their network base.

Fourthly, the design and content of health care leadership development programs should be looked at to explicitly consider and address issues of gender and equality in the institution.

Support systems such as mentoring and coaching for all health care leaders, especially early on in their career in areas such as gender, race, and professional-based bias.

Resources are increasingly being dedicated to the cultivation of strong health care leadership globally, including in low-income countries. Core leadership competencies in health care have been identified and many models of competency-based education and training exist. Theories of leadership and models of leadership capacity building have been developed, primarily in the context of high-income settings. Less research has been done on leadership in low-income settings, including Sub–Saharan Africa. "Despite the argument that the consideration of historical, political, and sociocultural context is essential to the conceptualization of African leadership, little empirical research has been conducted on leadership, specifically in the area of health" (Curry *et al.*, 2012).

Health leaders should serve as role models and mentors for young female workers, by engaging in career-development projects in the workplace to develop young leadership potential.

There is a need for greater awareness to be created, especially from primary school level, of the value of gender equality for a prosperous society. Teaching tools should be geared towards empowering children at an early stage to debunk age-old myths about traditional roles of men and women in society, and to introduce gender-neutral concepts in the curriculum.

Processes and systems that are built into the latest up-to-date technologically driven systems, including educational games, should be configured to empower children to be more progressive in their outlook on gender relations.

A fifth point is maternity leave can mean the end of career progression for a woman who is temporarily out of a job to undertake an important activity that is not given economic value. While she is away, she could be missing out on opportunities for promotion and performance bonuses.

Flexible working arrangements for women, state-subsidized childcare, and paternity leave are some of the low-hanging fruits that could go some way in recognizing the importance of gender equality, as well as to broaden the choices of women.

The conflict between work and the responsibilities of family life are considered a greater challenge for female employees than for their male counterparts. Women are held responsible for household affairs and spend more hours per week on household chores than men. "At different stages in both their professional and personal lives, women may be faced with either sacrificing their career or family goals; the early and mid-career period is typically when the career fast track and the reproductive track are on a collision course" (International Finance Corporation, 2019).

And lastly, reformulate effective policies to encourage female employee's career growth at national, provincial, and local levels of government.

The key to successful leadership is to nurture a culture based on a strongly held and widely shared set of beliefs that are supported by strategy and structure. Culture is as much a product of business strategies as it is of those who created it. This means taking bolder steps to create a respectful and inclusive culture, so all employees feel safe and supported at work. Addressing everyday discrimination, or microaggression, that appears in subtle ways is vital. On a broader level, the empowerment narrative and support of women's equality in and outside the workplace has taken hold and is squeezing into mainstream culture. Inspirational female leaders are pioneering the way forward for women with opportunities to connect and grow their careers, and companies are navigating a more inclusive approach to hiring and internal assessment (Get Smarter, 2019).

As barriers to corporate success are challenged, the recurring themes of gender gaps and disparity are being confronted by high-level leadership. South Africa continues to be fortunate enough to bear witness to this, not to mention the impressive efforts and relentless passion of women leaders, entrepreneurs, and policy shifters. An exciting future is no doubt ahead for aspiring leaders in South Africa (Get Smarter, 2019).

One of the biggest limitations during this study has been the Covid 19 pandemic that took the world by storm in early 2020. It limited the ability to connect with more people working in the department for a variety of reasons, with the biggest constraint being the prohibition on face-to-face contact with people. As health workers, who were in the forefront of the fight to end the pandemic, it was essential for social

distancing and other such protocols to be strictly adhered to. Also, enormous demands were made on health workers during the trying times. The pressure on the sector created by the pandemic also limited the availability of respondents as many were required to devote much of their time and energy to their work in the health sector.

6.3 Conclusion

Based on the objectives identified earlier in the study, the following could be established: Firstly, there is gender equity in this Sub Structure. Employment equity statistics can attest to the fact that as far as possible employment equity is taken into consideration for all posts during the recruitment and selection processes in this Sub Structure.

There will always be areas of concern but as mentioned before these are generic concerns that may affect any newly appointed manager or leader in any position, and the recommendations mentioned above can serve to assist departments when acknowledging female leadership and how to ensure assistance and encouragement is a continuous process.

Women bring a collection of critical talents to the workplace. As empathic listeners who value collaboration and teamwork, they are more likely to build relationships, encourage others to achieve their maximum potential, and complement the skills men bring to the workplace. "A culture of equality, and a workplace environment that helps everyone advance to higher positions, is more likely to achieve, grow, and innovate" (Get Smarter, 2019).

Women are major drivers of the health care industry. They are the principal decision makers in the household for nearly all health-related concerns. They are the primary interface and care providers. However, they are not proportionately represented at the upper echelons of health care business management. Although women sustain the global health care industry and constitute most of the workforce, the challenges and barriers preventing them from promotion to leadership are like those of other industries. Increasing women's leadership in health care will require deliberate effort at the individual, organizational and societal levels. It requires shifts in behaviors and attitudes about the role of women as colleagues and leaders, and strategic moves by women to build their careers and address challenges as they arise. The shift requires that men participate in efforts to promote gender equality, and it requires new laws and policies to protect women from sexual harassment and accommodate their safety and abilities in their workplaces (International Finance Corporation, 2019).

Following changes implemented by President Cyril Ramaphosa, for the first time in South Africa's history women now make up half of the government's cabinet. More women, along with several younger politicians, have been appointed which reflects a good balance of youth, gender, geographical spread, and

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experience. South Africa joins a list of 10 other countries that have achieved gender parity, or a female majority in their cabinets.

Many senior executives in South Africa are men. For more than 30 years, women have been getting more bachelor's degrees than men. They are asserting themselves in the workplace, negotiating salaries, asking for promotions, and staying in the workforce at the same rate as men. However, men are more likely to be successful. It is the role of companies to take decisive action. This starts with treating gender diversity like the business priority it is, from setting targets to holding leaders accountable for results (Get Smarter, 2019).

The democratic government has tried to put many measures in place to address the inequalities and injustices of the past, especially regarding the advancement of women in the public service.

There has been a huge improvement in the public sector of South Africa since the inception of affirmative action policies. The public sector is responsible for more vigorous measuring tools that are tied to performance management at the top layer of government. An area of attainment that should attract a high score for a performance bonus for an executive leader should be the appointment of female leaders in senior management positions in the public sector.

Government should take seriously the existing legislative context and be consistent on the public/private sectors as well as civil society to conform. The public sector will, however, need to lead by example. South Africa has made some significant steps in having 40% of Members of Parliament as women, but numerous authorities, from mayors in local government to premiers in provincial government, ministerial positions and heads of department or directors-general, are still predominantly male.

When social and cultural norms are added there could be progress in the direction of gender equality. Advancement of women in the workplace will happen slowly if in the private spaces, such as households as well as in communities, women are deprived of their individuality and worth. "Decision makers who are male will continue to advocate for gender equality in rhetorical flourish in public, while in private spaces they will continue to suffocate women from excelling by invoking tradition and refusing to bear their fair share of responsibility of childcare and domestic work" (Public Servants Association, 2019).

The aim of this study was to examine and explore relevant aspects of the development and upliftment of women to senior leadership positions at health facilities in the Klipfontein Mitchells Plain Sub Structure.

Respondents were positive about the institution's current management being dedicated to gender equity, and in almost all occasions, women are being treated the same as their male counterpart.

The data gathered during this study clearly indicated the integrity of the Klipfontein Mitchells Plain Sub Structure in adhering to gender equality and equal opportunities for all employees in the Sub Structure. As

far as possible both the management of the Sub Structure as well as the various facilities in this Sub Structure advocate for their employees in all aspects of career development. This study clearly showed that the challenges created by gender inequality do not lie in this Sub Structure, and further research on the entire department in the Western Cape is needed to fully appreciate its impact on the Department of Health as a whole.

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Appendix A: Information Sheet for Interview

University of the Western Cape

Private Bag X17 Bellville 7535 South Africa
<u>Tel: 27</u> 83365015 Email:4053643@myuwc.ac.za

Information Sheet for Interview

Research Title: Women in Leadership in Public Healthcare: A case study of Women in Leadership in the Klipfontein Mitchells Plain Sub Structure.

What is this study about?

The research is being conducted by Fagmeeda Carelse-Johnson, a Social Development, Master's student at the University of The Western Cape. The interview I am conducting is meant to collect information on Women in leadership roles in the Department of Health in the Western Cape.

Women having been progressing well in the workforce over the last few decades across many countries. There has been an increase of women in many sectors of society in the various fields in private and public sector environments.

South Africa became a democratic country in 1994, giving rise to many new developments and opportunities that were previously not considered for a woman and more specifically a woman of colour within the Public Sector.

What about confidentiality?

Your name and organization will be kept confidential. The researcher will only state the general occupation of the respondent, e.g., Physiotherapist, Nursing Manager or Academic. This is purely for the reader to see that the insight of the experts may differ based on their occupation. The responses collected will only be used for academic purposes.

Why should I participate?

The researcher has identified you as someone who is particularly knowledgeable on the research topic and your unique insight will add to the body of literature on this topic. This is a particularly

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under-investigated topic in South Africa and your insights may be the initial building blocks spurring on further research that will challenge policymakers to develop a monitoring framework that encourages diversity, gender balances within all sectors and future female leadership in all spheres of government and non-governmental structures.

University of the Western Cape

Private Bag X17 Bellville 7535 South Africa
Tel: 27 83365015 Email:4053643@myuwc.ac.za

Consent form for Interview

Research Title: Women in Leadership in Public Healthcare: A case study of Women in Leadership in the Klipfontein Mitchells Plain Sub Structure.

o   I have read and understood the information as provided to me in the following information sheet relating to the above-named research.
o   I agree to participate in this research project, and I consent to publication of the findings of the research on the understanding that the confidentiality of subjects will be preserved completely.
o   I also understand that I can withdraw from the participation in this research project and that if I do so, any information I have provided will be withdrawn.
o   I voluntarily agree to participate in this scientific research.

Name: …………………………………….

Signed: …………………………………

Date: …………………………….............
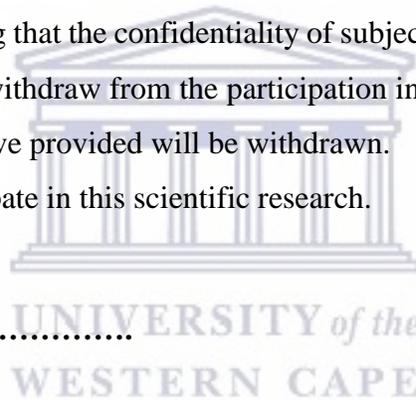
Appendix C: Interview Questionnaire
Research Instrument – Questionnaire:

Section One: Employee Background Information

Please tick the appropriate box below:

Gender:	Male	Female				
Marital Status:	Single	Married	Life Partner	Separated		
What is your current position?	Admin Officer	Senior Admin Officer	Assistant Director	Deputy Director	Director	Chief Director
How long have you been in your current position?	0 – 5 Yrs.	5 – 10Yrs.	11 – 15Yrs.	16 – 20Yrs.	21 – 25Yrs.	26 – 30Yrs.
Highest Qualification:	Secondary School	Certificate	Diploma	Higher National Diploma	Bachelor's degree	Master's Degree	PHD
Age:	Less than 26Yrs.	26 – 30Yrs.	31 – 35Yrs.	35 – 40Yrs.	41 – 45Yrs	45 – 50Yrs.	50Yrs and over
Work Experience:	0 – 5 Yrs.	5 – 10Yrs.	11 – 15Yrs.	16 – 20Yrs.	21 – 25Yrs.	26 – 30Yrs.	30Yrs and over

Section Two: Crux of the Study

1.

1.1. Do political factors play a role in the advancement of women in the public sector?

Yes	No

1.2. Explain your answer.

2.

2.1. In your opinion, do you think women are as skilled as men in leadership roles?

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Yes	No

2.2. Explain your answer.

3.

3.1. Do you think cultural factors play a role in the advancement of women within the Klipfontein Mitchell's Plain Sub Structure?

Yes	No

3.2. Explain your answer.

4.

4.1. Do you think women are offered equal leadership roles within this sub structure as to men?

Yes	No

4.2. Explain your answer.

5.

5.1. In your opinion, do you think women in South Africa are disadvantaged in any way by social, cultural or political factors when advancing to leadership positions?

Yes	No

5.2.   Explain your answer.

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Section Three: Organizational Policies and Procedures

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6.1 . Does the provincial department's policies and regulations promote the advancement of women into leadership positions within the department?

Yes	No

6.2 . Explain your answer.

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7.   Is the employment equity act implemented within the department and more specifically within the Klipfontein Mitchell's Plain Sub Structure?

Yes	No

7.1.   Explain your answer.

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8.   The policies that are currently in place within this sub structure, does it promote or hinder the advancement of women to leadership positions?

Promote	Hinder

8.1.   Explain your answer.

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9. Are there specific policies in place that promote the advancement of women into leadership positions within the Klipfontein Mitchell's Plain Substructure?

Yes	No

9.1 Explain your answer.

Section Four: Workplace Culture/Ethos

10. Does the Klipfontein Mitchell's Plain Sub Structure encourage and promote the advancement of women?

Yes	No

10.1 Explain your answer.
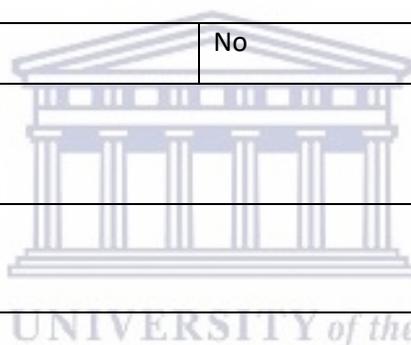
11. In your opinion, does an employee's conduct or work performance affect their advancement within the organization?

Yes	No

11.1 Explain your answer.

12. Do you think this sub structure ethos or culture negatively affects women's advancement within the organization or department?

Yes	No

12.1 Explain your answer.

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13. Does politics within this organization/department affect the advancement of women into leadership positions?

Yes	No

13.1 Explain your answer.

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Section Five: Educational Attainment

14. Is access to higher education and skills development restricted for women within the sub structure?

Yes	No

14.1 Explain your answer.

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15. Within the Klipfontein Mitchell's Plain Sub Structure office, who is more qualified or skilled?

Men	Women

15.1 Explain your answer.

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16. Does this play a role in the advancement of women within the organization?

Yes	No

16.1 Explain your answer.

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17. Does low education or a minimum education level affect the advancement of women into leadership positions within this sub structure or department?

Yes	No

17.1 Explain your answer.

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Section Six: Employment within the Klipfontein Mitchell's Plain Sub Structure

18. In your opinion, once a woman is appointed into a leadership position within the organization, does discrimination take place?

Yes	No

18.1 Explain your answer.

+---+
| |
| |
| |
+---+

19. Does it take place within the department of Health in the Western Cape?

Yes	No

19.1. Explain your answer.

+---+
| |
| |
| |
+---+

20. Currently within the sub structure who are in the majority in the following positions?

Top Management:

Male	Female

Middle Management:

Male	Female

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21. In your opinion, are women treated any differently within the organization/sub structure once they attained a leadership position in the department?

Yes	No

21.1 Explain your answer.

22. Is this sub structure or this department bias in any way towards advancing women into leadership positions?

Yes	No

22.1 Explain your answer.

23. Are there any factors in your opinion that have negatively affected the advancement of women within this sub structure or within this department?

23.1. Explain your answer.

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