

Barriers to Female Leadership in Intensive Care Medicine



The field of intensive care medicine faces a significant gender imbalance in leadership positions, with women underrepresented due to various factors, including gender bias, societal messages, and a confidence gap that leads to self-censorship. Many qualified women face obstacles like outdated leadership models and systemic biases, which hinder their advancement.

To address this, the European Society of Intensive Care Medicine (ESICM) is taking action through a collaborative survey by ESICM NEXT and the Diversity and Inclusiveness Monitoring Group. This survey aims to identify and dismantle the barriers preventing women from attaining leadership roles, with the goal of creating a more inclusive and equitable leadership landscape in critical care medicine.

This multi-centre, international online survey was developed by ESICM NEXT in partnership with the ESICM Diversity and Inclusiveness Monitoring Group. Invitations were sent to both women and men via email and social networks. Data collection occurred from April 1, 2023, to October 1, 2023.

Out of 354 respondents, 90 were men (25.42%), and 264 were women (74.58%), with 251 completing the survey. The findings highlighted ongoing challenges for women in leadership roles, with 10%-50% holding such positions. Women's assertiveness is often perceived negatively, with 65% recognising barriers like harassment. Nearly half reported being interrupted in meetings; only 47.4% received conference invitations, with just over half accepting them. Only 12% spoke at ESICM conferences in the past three years, with limited support from directors and colleagues. Barriers such as mobbing, harassment, lack of financial support, childcare, and language issues were common, with only 14% having access to paid family leave and 32% benefiting from subsidised childcare.

Encouraging family participation, reducing fees, and providing childcare and economic support can enhance conference involvement. Participation in leadership and mentoring programmes and collaboration with Human Resources and leadership allies are essential for overcoming these barriers and advancing women's careers in critical care.

A compelling call to action aims to dismantle barriers for women in leadership within intensive care medicine by creating a dedicated Task Force on Women's Leadership. This initiative focuses on collaborating with marginalised women, fostering networks and mentorship, and actively encouraging women's participation in ESICM. The strategy includes gender-specific initiatives, technical and financial support, and advocacy for women's rights and representation. These measures aim to promote gender equity, with the potential to be applied across other medical fields facing similar challenges.

The survey highlights the urgent need to address barriers to female leadership in intensive care medicine. A comprehensive, multifaceted, and intersectional approach is necessary, focusing on sexism, structural barriers, and targeted strategies to promote gender equity in leadership roles.

Source: [Annals of Intensive Care](#)

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