



## Closing The Healthcare Diversity Leadership Gap



Continued commitment is needed to drive progress and close the leadership gap in the realisation of strategic goals and objectives for businesses, just as improving diversity remains a priority to many healthcare organisations, according to Witt/Kieffer's latest leadership diversity [study](#).

Witt/Kieffer distributed an online survey to a broad range of its executive clients in the summer of 2015 and conducted phone interviews with executives who participated in the survey. Of the 311 participants, 75 percent identified themselves as CEOs or other C-suite executives and vice presidents; 55 percent identified as Caucasian, while 45 percent identified as racially or ethnically diverse individuals; and 69 percent were identified as male.

Compared to Witt/Kieffer's 2011 survey results, nearly twice as many respondents feel that healthcare organisations have made headway in closing the diversity leadership gap. However, disparity persists; white respondents were more likely to say diversity has improved than racially/ethnically diverse respondents (57 percent and 26 percent, respectively). Male respondents were also more likely to think diversity has improved (48 percent) than female respondents (32 percent).

Here are five more findings from the report.

- 1. Diversity is an asset in the C-suite.** Two-thirds of respondents (66 percent) agreed that diversity recruiting enables an organisation to reach its strategic goals, while 71 percent of respondents said cultural differences among executives support successful decision-making. Another 72 percent of respondents agreed that a diverse workforce enhances the equity of care.
- 2. Leadership teams are still not sufficiently diverse.** Compared with 2011, both white respondents and racially/ethnically diverse respondents agreed healthcare organisations' executive teams today are more racially diverse. However, there is still a ways to go. Just 26 percent of white respondents and 10 percent of racially/ethnically diverse respondents agreed minority executives are well-represented today in healthcare management teams.
- 3. White and racially/ethnically diverse respondents don't think healthcare organisations' senior management teams reflect their patient demographics.** While slightly more respondents felt the diversity of management teams today reflect their patient demographics compared with respondents in 2011, the vast majority of respondents still disagreed. Asian respondents were most likely to disagree (90 percent), followed by Hispanic respondents (88 percent), black respondents (77 percent) and white respondents (69 percent).
- 4. Several barriers are slowing efforts to diversify healthcare management teams.** White respondents were

most likely to name lack of access to diverse candidates (indicated by 83 percent of white respondents), lack of diverse candidates to promote from within (81 percent) and lack of diverse candidates participating in the executive search process (77 percent) as the biggest barriers. Racially/ethnically diverse respondents were most likely to cite a lack of commitment by top management (indicated by 85 percent of respondents), lack of commitment by the board (72 percent) and individual resistance to placing diverse candidates (64 percent) as the primary barriers.

**5. There are five leading solutions to improving leadership diversity.** White and racially diverse survey respondents agreed promoting minorities from within (indicated by 83 percent of all respondents), hiring minority executives for senior management jobs (73 percent), communicating the value of cultural differences (70 percent), seeking out minority candidates from professional organizations (67 percent) and seeking regular input about the organisation's diversity initiatives (52 percent) could support efforts to diversify the senior management team.

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